



Division of Children and Family Services Protection and Safety Procedure Update #1-2013	
Regarding:	Supervision of Initial Assessment Process
Rescinds:	#1-08, #13-2011 Sections on Supervision
Date Effective:	January 7, 2013
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Philosophy:

The Division of Children and Family Services believes that supervisors are the key to successful case practice, and staff support, utilizing their knowledge and experience serving children and families.

Procedure:

Consultation is important to assure the consistent application of Department policy and to assure that as many factors and ramifications as possible are considered when critical decisions are made. The CFS Supervisor has the responsibility to call to the attention of and redirect the worker regarding any decision made on any case which is not consistent with the following criteria:

1. The safety AND best interest of the child;
2. State or Federal statutes;
3. DHHS policy and practice;
4. Current court orders or established protocol;
5. The case plan; and
6. For DHHS OJS wards, the safety of the community.

During Safety and Risk Assessment:

CFS Supervisors must provide consultation and support related to the initial contact with the family to begin the assessment:

1. Assure adequate CFS Specialist preparation so that the CFS Specialist understands the nature and family circumstances that represent a threat to child safety; that the CFS Specialist has a strategy for making the initial contact, for collecting information, and for evaluating safety threats. The CFS Supervisor will assist the CFS Specialist in considering possible action if the child is determined to be conditionally safe or unsafe.
2. Consider additional preparation for the safety assessment involving issues around law enforcement participation for purposes of joint investigation/assessment, CFS Specialist safety, legal response to criminal acts, and to assist with child protection. The CFS Supervisor will also discuss other resources the worker may need for the intervention to be successful.
3. Discuss agency response if there is a need for immediate action to protect the child(ren), determine if the CFS Supervisor agrees with the worker's assessment of safety threats, and discuss the worker's planned course of action, verifying that the planned response is the least intrusive necessary to provide adequate protection.

The most essential product of the assessment is information. The CFS Supervisor must assure that the worker has gathered pertinent, relevant and adequate information to arrive at the necessary decisions. Decisions include determining if maltreatment occurred, if there are safety threats present, if the family has any unmet emergency needs, risk or prevention level determinations and if the family is in need of continuing services. The quality of these decisions is directly related to the quality and sufficiency of information gathered. CFS Supervisor consultation early in the assessment process may consider:

1. What the focus of the information gathering should be. The CFS Supervisor should understand all that he/she can about the family functioning which includes the extent of maltreatment, the nature or circumstances surrounding any maltreatment, child functioning, parenting practices and adult/caregiver functioning.
2. How to overcome barriers in information gathering such as caregiver resistance, communication difficulties, access to family members, location and circumstances that must be managed, avoiding premature judgment and conclusions, worker bias, and reasoning vs. rationalization issues.
3. Determining from whom to get information. Who would be the best source of information, discuss the order in which people should be interviewed, and how to use the information to confirm and corroborate.
4. Determining recommendations during the process and completion of an Assessment of Placement Safety and Suitability regarding continued child placement or removal of a child in a foster home and/or care concerns and next steps.

Criteria for reviewing the CFS Specialists documentation

When reading assessments or discussing family situations with the CFS Specialist, the CFS Supervisor must consider the following characteristics about the information provided:

1. Breadth: Is the CFS Specialist's understanding and analysis of the family based on information that covers the critical points (maltreatment, surrounding circumstances, child functioning, parenting, and adult functioning.) The information gathered about the family is comprehensive;
2. Depth: Is the CFS Specialist's understanding of the situation based on more than superficial information? Is the information pertinent and detailed?
3. Reliable: Is the information trustworthy and dependable, reasonable, believable, and can be justified?
4. Pertinent: Is the information relevant, significant and useful in determining the presence of safety threats?
5. Objective: Is the information factual, actual, and unbiased? Information exists without interpretation or value judgment;
6. Clear: Is the information easily understood and unambiguous?
7. Association: Does the CFS Specialist understand how the information is connected and inter-related? How the information is linked?
8. Reconcile: Has the CFS Specialist resolved differing perspectives so that discrepancies are reconciled?
9. Supported: Is the information confirmed or corroborated by reliable sources outside the immediate family?

CFS Supervisory Assistance During Legal Action

CFS Supervisor activity related to helping with legal intervention can include:

1. Processing the decision to invoke court authority, including helping the CFS Specialist explore less intrusive options;
2. Approving the decision to remove a child or seek court oversight;

3. Providing step by step guidance to the CFS Specialist regarding necessary documentation and processes required to involve the court, and assisting with preparation of the CFS Specialist to provide testimony;
4. Assistance to the CFS Specialist to produce documentation and take responsibility to expedite the process;
5. Consultation with attorneys representing DHHS' interest;
6. Advocacy for the child and DHHS's interests; and
7. Attendance with the CFS Specialist in various proceedings.

Although the CFS Specialist is responsible for doing the analysis of child safety, the CFS Supervisor may assist the CFS Specialist in clarifying what information is known about the family and deciding what it means. CFS Supervisor questions may clarify what actions are necessary to protect the child and help determine an appropriate safety plan, by identifying family strengths and resources that may be mobilized.

Review and Approval of Initial Assessment

CFS Supervisory sign off of the safety, risk assessment and safety plan means the CFS Supervisor is taking responsibility for the outcomes that may result from the actions and decisions made. CFS Supervisory approval is a statement that everything that reasonably could be considered has been brought to bear in arriving at the conclusion that the child is safe, conditionally safe, or unsafe; that any necessary safety plan will work as intended; and that the risk level determination had sufficient supportive information.

The CFS Supervisor will complete the Supervisory review of each assessment to assure that:

1. The Initial Assessment was completed correctly and completely;
2. The safety of the child was assured during the assessment process;
3. The safety plan was appropriately completed and implemented to assure child safety, and documented in accordance with required practice (if applicable);
4. The family network and others were appropriately involved in developing safety plans if such plans were necessary;
5. The safety plan is sufficient to protect the child from threats of severe harm (if applicable);
6. The family network and others were appropriately involved in the gathering of information;
7. Information was obtained about non-custodial parent, relatives, and other family supports;
8. Sufficient information was gathered and documented in the Family Functioning narratives in N-FOCUS that supports the safety and risk/prevention assessment decisions;
9. Available written documentation was obtained from law enforcement, medical providers, school personnel, and others as appropriate;
10. ICWA information was documented and active efforts were made to prevent removal from the home;
11. The SDM Assessments were completed and documented in accordance with required practice;
12. The documentation for safety plans, assessments, worker contact and other required narratives are on N-FOCUS, including all mandatory consultation points; and
13. Required SDM and Court time frames were met.

For cases involving allegations of maltreatment:

1. Efforts to coordinate with law enforcement were documented;

2. Interview protocols were followed or reasons for deviation were documented;
3. The appropriate definition was used in making the case status determination;
4. The finding was correctly documented on N-FOCUS system;
5. Factual information supports the selected finding; and
6. Proof of certified notice to the alleged perpetrator is located in the file.

If information is not sufficient or there are other areas of the assessment needing improvement, it may be necessary for the assessment to be returned to the CFS Specialist for additional work.

References:

None