

Division of Children and Family Services Protection and Safety Procedure Update #7-2013	
Regarding:	Structured Decision Making
Rescinds:	#1-08, #13-2011
Date Effective:	January 17, 2013
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Philosophy:

The priorities of the Division of Children and Family Services are child safety, permanency and well-being. The Division of Children and Family Services will utilize Structured Decision Making (SDM) which is an evidence based model, as our tool to assess for child safety/risk and identify the resources and supports that families need.

Procedure:

CFS Specialists will begin using the SDM model after completion of training on the Nebraska SDM Initial and Ongoing Assessment Policy and Procedures. CFS Specialists shall follow the SDM Policy and Procedure manual located on the website in the training Desk Aid.

Initial Assessment

1. Upon receipt of an intake accepted for assessment, the assigned CFS Specialist will begin the initial assessment by completing Safety Assessment and the initial Risk Assessment.
2. The Safety Assessment and initial Risk Assessment should be completed and documented in N-FOCUS within 30 calendar days from the date the Intake was accepted for assessment. The Safety Plan must be documented on N-FOCUS within 24 clock hours of determining that a safety plan is needed.
3. Based on the results of the Safety Assessment and initial Risk Assessment, the CFS Specialist will determine the appropriate case status determination.
4. The CFS Specialist will determine if the family will be referred for on-going case management based on child safety and the initial risk assessment level. Families will be referred for on-going case management when the following determinations are made:
 - a. A child is determined to be unsafe;
 - b. A child is determined to be conditionally safe (is at home with a safety plan in place); or
 - c. A family's risk level for future maltreatment is "high" or "very high".
5. If a family is referred for ongoing case management, the CFS Specialist will:
 - a. Make efforts to engage the family and offer interventions to open a non-court case prior to requesting the County Attorney to file a petition in juvenile court.
 - b. The CFS Specialist will consult with his or her supervisor to determine if it is appropriate to request the County Attorney file a petition in juvenile court,

If a safety threat is identified or the family's risk for future maltreatment is "high" or "very high" and the information leading to those decisions is based on one of the five situations listed below,

a mandatory staffing with the supervisor and CFS Administrator is required to determine whether or not a "request to file" in juvenile court should be forwarded to the County Attorney. These situations include:

- Methamphetamine use by parent or caretaker;
- Domestic violence;
- Previous termination of parental rights of another child;
- Serious physical abuse including but not limited to head trauma, broken bones, multiple injuries; and
- Sexual abuse by a parent.

These consultations will be documented by the CFS Specialist in the consultation point narrative within three business days of the decision and will include the name of the supervisor and CFS administrator as well as the basis for the decision.

Tools used at initial assessment:

- Initial Safety Assessment (Abuse/Neglect/Dependency)
- Safety Plan (if applicable)
- Family Functioning Narratives
- Risk Assessment (Abuse/Neglect)
- Prevention Assessment (Dependency)
- Assessment of Placement Safety and Suitability (Foster Homes)
- Out of Home Assessment (Residential facilities, group homes, institutions)

Ongoing Assessment

When a family or child is referred for ongoing services, the case manager will use the Nebraska SDM Ongoing Policy and Procedure manual to assist in guiding their work with the child or family.

Safety is the responsibility of both Initial Assessment and Ongoing case management staff. If a safety threat is identified during a family's involvement with DHHS, it is the responsibility of the assigned case manager to implement a plan to manage the identified safety threat.

Identified concerns will be addressed by the ongoing case manager. If subsequent maltreatment is suspected, the Adult and Child Abuse and Neglect Hotline (1-800-652-1999) will be notified immediately to determine whether or not a new intake needs to be entered. Documentation as to how the concerns were addressed will be documented in the case narrative within three business days of the reported concern.

Tools used during ongoing service provision:

- Safety Assessment
- Safety Plan (if applicable)
- Family Strengths and Needs Assessment (all cases including OJS)
- Risk Re-Assessment (in home cases)
- Reunification Assessment (out of home cases)
- Prevention Assessment (3b and dependency)
- Assessment of Placement Safety and Suitability (Foster home concerns)
- Out of Home Assessment (Residential facilities, group homes, institutions)

Documentation

The CFS Specialist will utilize N-FOCUS to document all SDM Assessments and the Out-of-Home Assessment. Documentation of assessment information will be entered in N-FOCUS within 7 business days of completion of the assessment unless otherwise identified. Documentation of narrative must be provided that supports and explains the rationale/reason for each of the questions in each of the Assessments regardless of the risk level.

- **Initial Assessment**
 - Safety Assessment: The CFS Specialist will utilize the narrative sections within the SDM safety assessment to document all supporting information regarding the decisions on each of the items.
 - Risk and Prevention Assessments: The CFS Specialist will utilize the narrative sections within the SDM assessment and the Family Functioning Narratives to document supporting information regarding the decisions on each of the items.
 - Safety Plan: The CFS Specialist will utilize the narrative sections within the Safety Plan form to document all supporting information regarding all sections of the safety plan.
 - Assessment of Placement Safety and Suitability: The CFS Specialist will utilize the narrative section within the SDM assessment to document all supporting information regarding the decisions on each of the items.
 - Out of Home Assessment: The CFS Specialist will utilize the Organization Related Investigation to document decisions and recommendations.

- **Ongoing Assessments:**
 - Risk Reassessment, Prevention Assessment and Reunification Assessment: The CFS Specialist will utilize the narrative sections within the SDM assessment and the Family Functioning narratives to document all supporting information regarding decisions on each of the items.
 - Family Strengths and Needs Assessment (FSNA): The CFS Specialist will document information to support answers to the FSNA in the Family Functioning Narratives using item areas of Adult and Child Functioning.
 - CFS Specialist will document information related to SN9 and CSN12 in the comment area provided on the FSNA.
 - Safety Plan: The CFS Specialist will utilize the narrative sections within the Safety Plan form to document all supporting information regarding all sections of the safety plan.
 - Assessment of Placement Safety and Suitability: The CFS specialist will utilize the narrative section within the SDM assessment to document all supporting information regarding the decisions on each of the items.
 - Out of Home Assessment: The CFS Specialist will utilize the Organization Related Investigation to document decisions and recommendations.

References:

SDM Policy and Procedure manuals received in training and located on the website in the training Desk Aid at www.dhhs.nc.gov/CFStraining.