

A review was requested by the CIRT Coordinator and CPS Program manager following results of extensive programmatic file reviews conducted in the G.J. CIRT.

A total of 101 cases were reviewed by the Child Safety Consultants with additional assistance from one Permanency Consultant and CPS assistant manager. A random sampling of approximately 21 of the 101 cases had a second review by the CPS Program Coordinator to assist with inter-rater reliability. The sample came from all counties currently implementing Differential Response including: Klamath, Clackamas, Lane, Washington, Lake, Jackson, Linn, Josephine, Coos/Curry and Lincoln.

A focused review tool was utilized in order to get an understanding of safety decisions. Each question on the review tool is listed below with the results.

A manual review of all cases was also conducted to determine how many new reports had come in on the 101 cases reviewed. A total of 44 new reports had been received on the sampling utilized for the review.

Question(Q) 1. If the child (ren) were identified as safe, do you agree with the conclusion?

In 47% (47 out of the 101 assessments), the consultant DID NOT AGREE with the case worker's conclusion that the children were SAFE.

In 39% (39 of the 101 assessments), the consultant AGREED with the case worker's conclusion that the children were SAFE.

This question was not applicable to 15 cases that were concluded by the caseworker to be UNSAFE or the family was Unable to be Located.

Q2. If the child (ren) were identified as unsafe, do you agree with the conclusion?

Only 10 of the 101 cases reviewed were concluded as UNSAFE by the caseworker. In all 10 cases, the consultants AGREED with the decision.

Q3. Were the correct safety threats considered?

In 36% of the assessments, the caseworker chose the CORRECT safety threat/s.

In 27% of the assessments, safety threats were NOT considered. (It's important to note that in most cases a safety threat/s should be considered in order to effectively analyze child safety.)

In 20% of the assessments, the caseworker identified the wrong safety threat/s and in another 18%, the safety threats considered were only partially correct.

Q4. The safety threshold application is correct and appropriately applied to each safety threats?

In 8% of the assessments where safety threats were considered, the safety threshold criteria was CORRECT.

In 26% of the assessments, NO safety threshold criteria was applied as no safety threats were considered.

In 21% of the assessments where safety threats were considered, the safety threshold criteria as documented was INCORRECT.

In 45% of the assessments where safety threats were considered, the safety threshold criteria was PARTIALLY correct.

COMPILATION OF REVIEWER COMMENTS: Common themes noted-
Lack of collateral contacts and required contacts ie. probation.

Extensive delays in some instances with timeliness to initial contact.

Inaccurate application of the safety threshold criteria; misapplication of safety threshold criteria to an incident as opposed to the family condition. Insufficient safety related information, incident based assessments (some domains consisted of one or two sentences in assessments). Safety threats not considered on all assessments and missing pertinent safety threats in some assessments. Interviews of all children and adults in the home did not always occur, legal fathers not always interviewed. Closed at screening reports that should have been assigned.

- Each threshold indicator was misapplied. The worker did not understand the concept of the family condition and was incident based focused on the mother's crimes. This led to specific examples of why the threshold did not apply. The worker was quite generic in explaining vulnerability. Moderate to high needs was not done at all.
- Insufficient information, a child living in the home was not assessed. The caller describes rats biting children that are gaining access to the home because of the flooring rotting due to a leak. There is also animal feces, garbage and other debris. One child is described as enuretic at night and throws their urine soaked clothing on the floor and does not launder them. One child may have medical issues that may not be receiving medical care. Their grandfather also lives in the home. A fourth child, unrelated to the family, is in the home and had been for several months is not assessed, and it is unclear if the child is seen or spoken to. No contact with the unrelated child's parents is ever documented. The father of the other children has medical issues which may be impacted by the condition of the home but not addressed. The worker documents the condition of the home as being unclean confirms some of the reporter's concerns (i.e. the floor rotting, smell of animal feces, bed wetting, mice in the house) No pictures of the house are in the electronic file. No information is gained from collaterals and there is no clarity around the underlying issue causing the conditions other than to state they are "remodeling." No one addresses the child's enuresis, or contacts any of the children's physicians who have information about reported medical issues. The case is open for four months, no safety threat considered.
- Adult & Child functioning sections are comprehensive and provide good insight into these people as individuals. The application of the threshold was completely missed for example, "severity is not met because the allegations are not severe," and under vulnerability, "child is not vulnerable because he is able to express himself clearly." The child is 7. The other concerning thing about this referral is that the worker discusses a FSNA referral with the family during his first face to face contact with them.
- A comprehensive assessment wasn't conducted. The RS clearly stated the father intended to lie about the incident to anyone else. No face to face contacts documented in assessment activities. No documented contact with child at all in assessment activities. Worker wrote biased statement "As this case worker arrived at the home it was immediately apparent that this

was not a typical client home. The home very nice, gated, and situated on a well maintained property". The worker did describe making contact in person in the extent. The assessment was not comprehensive and the issues were glossed over.

- One safety threat correct but missing one. The worker had FTF contact with the alleged victim child - but there are 6 other children in the home that it doesn't appear that we had contact with. Mother is clearly using substances and unavailable as a parent - but that was not addressed fully as she is not in a parenting role with the child. But we could have applied safety threshold criteria to #3 around impulsivity as well. It appears that the child is likely safe with dad - but need more documentation to support that decision.
- The worker chose the correct safety threat, however the threshold criteria were minimally explained. The worker does not address vulnerability and addresses other criteria by simply stating they do not apply. In addition, this was a very incident-based assessment. There was limited exploration of the family condition and how the boyfriend operated as a member of the household. He moved out during the assessment and it appears the assessment concluded at that point. There is no clear understanding of whether or not he was physically abusive to any of the children and how the mother perceived his behavior toward her children and acted to protect them.
- The progressive history in this case is rather concerning. It is apparent that the identified father on the case has a confirmed, long history of being violent against his children (multiple children) and his partners. The child's fear and the father's history does not reconcile well in the safety analysis that the child is manipulating to be able to play sports despite his bad grades. No safety threats were considered at all and no analysis was done as the case worker clearly felt the child was lying. The worker did not explore other collaterals outside the realm of the father's power and control over the mother of the alleged victim as well as his current partner, with whom he has past DV, and her children.
- Assigned AR 5 day. Worker was 2 days late making initial contact on 9/9/15. Next documented contact with the family was 1/1/16, nearly 3 months later. The threshold criteria was not complete in that the worker only documented observable and how it wasn't severe.
- There was not adequate information documented to make a decision. Worker simply stated that "these concerns were not validated during this assessment and the children denied". This assessment took 4 months to complete, however all activities and the safety decision were made in one day. There were no collaterals made. There is no information that child's alleged drug use with the mother was ever discussed.
- Worker chose the correct safety threat, but didn't quite hit the mark on the application of the threshold. Some were incident based instead of applied as the family condition. There were missing interviews as well. There were two children, the only one interviewed was the one living with mom. The other sibling who lived with the father was not interviewed. The alleged perpetrator was not interviewed and was not pulled into the domains either.
- This assessment focused on the newborn, but mom also has 3 other children. One child has already been removed from her care, and it is believed the other two are living with relatives but there is no information about if mom has custody or not and what her access/contact is with those children.
- There was insufficient information to fully understand the conditions in the home. The referral is incomplete in the October case and asks the reader to refer to the case from August. This 307

was an AR referral concerning the condition of the home. The house appears clean, but significant information is gained regarding the oldest child and ongoing behavior/substance abuse problems. The child reportedly runs away frequently and it is unclear what services if any are being offered. There is also a case note entered about a week before the case is closed stating the school has concerns about the other two children having serious behaviors that the children report are a result of having to spend time with their father. Father reportedly would not engage in the assessment however attempted to reach the caseworker two days before another report was made to the hotline.

- Safety Threat #3 was considered, around impulsivity. This assessment does not really have anything to do with parent impulsivity, but more around the child's behavior and how the parent responds to it and does or does not demonstrate the capacity to meet his needs. Agreed that Safety Threat #13 would have been more accurate to apply. Safety Threat #5 also applied, around the family not having or using resources to meet the child's needs. This referral came in on 2/9/16 and was completed on 6/30/16. There is a previous AR assessment that came in on 8/10/15 and was not completed until 6/15/16. That assessment was open for 10 months and speaks to concerns about the family not having basic necessities to meet the child's needs and mother not taking an active role in parenting. That assessment did not consider a safety threat, while it should have.
- The chaos and instability in the family condition was not apparent in the threshold. How the lack of stability affects the development of a two year old child was missed entirely. While this child was most likely safe and moderate to high needs were determined in the written assessment (although not an explanation as to how) the worker did not appear to understand the concept of moderate to high needs and the required service referrals needed to fulfill this part of the assessment.
- The written report focused mainly on one incident of lack of supervision. The interviewer reported little about overall supervision and the mother's ability to meet the safety needs of the young children. The safety threat was not correct and others should have been considered. The interviewer did not explore the mother's substance use and how it affects her ability to supervise her children. Moderate to high needs was not done on this case at all.
- Mother has ongoing substantial history of substance abuse. She has recently entered tx and while she verbalizes an intent to stay and complete there is no one with legal custody of the child other than her to manage that. Her live-in boyfriend denies issues with alcohol but recently got his 4th DUI with the child in the car. The safety decision indicates that the child is happy with mom's significant other and that when she gets done with treatment she will resume parenting him.
- There was not enough information documented to make a safety decision. There were no collaterals made in this assessment, the worker took the parents' denials at face value and did not explore further. This assessment took 11 months to complete and incident based. There is no understanding about whether or not the parents use drugs and how that may affect their parenting; nor is there an understanding of father's mental health status after his attempted suicide.
- There are a lot of problems with this assessment. It appears that whomever actually assessed it left the Agency and another worker typed up the prior workers notes. The concern was neglect due to mom overdosing. Mom denies this and said she had a medical issues, appears that

worker obtained a release for medical records but no confirmation about what those records said. Also no interview with maternal grandparents who cared for the child while mother was in the hospital. One line in many of the sections that is where information about family functioning is intended to be captured. The safety threat identification section is blank. In the basis for the safety decision the worker selected the incorrect safety threat. The explanation for how it didn't meet threshold was also inaccurate.

- It is unclear at the end of the assessment if the children are safe, there is no information around the details of the father's criminal history and what the current warrant is for. It appears at the end of the assessment that the children may be going back to live with the father and the girlfriend but the worker never assessed the father or the father's residence to make a safety determination.
- Contact made along with tribal ICW worker. No contact with the child's father and no inclusion of him in 6 domains. Collateral contact should have been made with the child's medical provider, to follow up on medical concerns. Within the extent, worker did not reconcile the variant information provided by the relative and the mother. Needed to have this safety related information reconciled and clarified. Documentation within the observable safety threshold criteria is unclear if the criteria has been met or not.
- The incorrect safety threat was chosen (#1) with an evident lack of understanding what that safety threat means. Safety threat #8 would be an accurate consideration in this case of neglect. Although some skill in using the threshold was evident, it focused on one aspect of the family (using a particular child care provider) and did not address the overall family condition that could have included single parenting, resources available, tribal support and cultural norms. Moderate to high needs was not completed at all.
- This assessment has 2 lines for extent and no documentation at all under circumstances. No safety threats were considered. Assessment was 2 months overdue. There was information provided during interviews that suggested follow up, ie: child 2 years behind in school, mother on probation, significant history with agency. Worker asked no follow up questions in regards to safety related information.
- While this assessment was very, very long, it was also quite comprehensive and left the reader with an understanding of how the safety threat was operating.
- Case may have needed a Protective Action or Initial Safety Plan in the beginning. Case kept open for two months, but contact with the child only occurred on one occasion, at the time of initial contact. While adult functioning sections address concerns about substance abuse, they do not cover a full understanding of how that parent functions as an individual within that family. No information in disciplinary practices section to suggest how the child experiences and views discipline. Correct safety threat applied, but threshold application not correctly applied. While the family condition may not be out of control or imminent, it is observable.
- There is not enough information to understand how the safety decision was made. Father arrested for DUII with his 3 y/o in the car. Report assigned on 10/27/15 as AR 5 day with screening decision indicating "due to lack of severity regarding the concern". The police report indicates the father was driving over the speed limit, swerving violently and making illegal turns. His BAC was .11 At the time of the screening report the father was not listed as in custody. There are previous CAS reports regarding substance abuse by both parents and one assessment that was closed as unable to locate. The worker narrated generic threshold criteria without

referencing a specific safety threat considered. The worker did not consider previous reports or the unable to locate or CAS reports. Child functioning brief, not comprehensive. Adult functioning based primarily on self-report. Parenting practices brief, not comprehensive. Extent and circumstances both lack comprehensiveness. Nothing documented in the Safety Threat Identification section. In the Safety Decision section, the worker walks through the threshold criteria, but is not applying it to a specific safety threat. Worker identifies that the perp's behavior was observable during the traffic stop, but doesn't speak to how the family condition is or is not making the child unsafe. In Out of Control, they identify that there are no concerns with the mother - but don't speak to how the mother controls from the danger posed by the father.

- Timeliness to initial contact was not met as the case came in on 1/22/16 and first attempted contact wasn't until the 1/27/16. Through multiple phone calls and rescheduled appointments the children were not seen until 2/8/16 on an AR/IR. New Closed at screening came in on 2/3/16, regarding the mother's drug use that should have been assigned. Included with the closed at screening the worker received more safety concerns regarding the children on 2/4/16 and still did not see the children until 2/8/16. The initial contact did not occur until two weeks after the call came into the hotline. There is not a comprehensive assessment of the allegations. The mother was exhibiting impulsive behaviors throughout the assessment. There is no clear picture of whether or not the mother's behaviors are the result of drug use. The worker did not get a sense of what if any impact this behavior is having on the children. Once the mother put up barriers, the worker ended the assessment.
- The assessment is well written and there are clear concerns the father may have a drinking problem as well as a violent temper from reports by the child's mother and a previous step-child to this dad. There is also a reported history of domestic violence between the child's parents by the older child and mom. The safety threshold focused on the incident based and not overall safety. The worker also stated the situation was not out of control because the step-mother intervened but again, this is incident based and doesn't talk about the dynamics in the home and whether or not she is able to anticipate what escalates the father or provide examples of how she has prevented the escalation historically. Severity was not met per the worker but it was identified as moderate to high needs
- These children were identified as unsafe. Worker considered and met threshold on the correct safety threat: condition of home posing serious danger to children. Should have also considered two other safety threats related to extensive history with this family, children in FC previously. Chronic Neglect case, safety issues are not as simple as the condition of the home.
- This was a TR case though it references the case being an AR case in the screening report. The case was originally called in as a result of a different family investigation on the same property. During their investigation they saw two small children who were left unsupervised for an extended period of time. Those children were being cared for by a man who was not their legal or biological father. The caregiver met the children's mother when she was prostituting abroad. She already had the oldest child and was pregnant with the youngest when they met. The mother continued to prostitute and use drugs. The man remained responsible for these children despite having no legal or biological relationship to them after the mother essentially leaves them with Jim full time, visits occasionally, but abdicates all care to him. Throughout the course of this assessment, he leaves the children on three occasions with unsafe care providers

(people using drugs) and there is information one of the adult employees of his business may have sexually abused the daughter. At one point he allows the children to go with their mother despite knowing she just lost custody of another child. The worker focuses on the fact the mother is in a new relationship with a man who has his own child. A different worker assesses mom and new boyfriend by interviewing the child and deem the environment to be safe but don't consider mom's substance abuse. Services are implemented to help the man get an appropriate daycare plan in place. DHS is notified by LEA that the man frequently has meth users around his property as he sells cars to them and repossesses them. There is also significant suggestion he uses prostitutes and moves them in with him. Safety threat #1 should have been considered as the only legal parent to these children essentially abandoned them with a man who did not provide adequate supervision. They were subsequently removed about a year later after the man was pulled over with a prostitute in his car. She is holding one of the children and has methamphetamines on her. When the police/dhs do a welfare check to the man's house, the children's mother and several other methamphetamine users are found in his home along with methamphetamine.

- The worker failed to consider the entire family condition and how it impacts child safety. CAS from a week or so before this referral was indicating step dad was in anger management and MH, but has to constantly be re-directed for being inappropriate and making violent comments about stabbing people and finding dead bodies. AR case from 03/29/16 was regarding the 3 yo being aggressive with her younger cousin, attempting to kill family pets, and trying to stab her father. Unable from 05/05/2016 when the 3 YR old ingested a Tramadol and ended up in the hospital. Family put a lock outside 3 YR olds door to keep her out of the knives at night. They were told to remove the locks. Other history includes concerns for substance abuse, bruises on the child that were CAS instead of being assigned, parents yelling and cussing at the child, not properly dressing her, etc. Family has repeatedly been found to have Moderate to High Needs, but keeps declining services. The reviewer has significant concerns for the safety and well-being of the child with her parents based on their mental health, recent diagnoses, continued problematic behaviors, continued yelling and cussing at her and her behavioral needs. Step dad is the primary care provider for the child and he has a low tolerance for crying or bad behavior as it triggers his own aggression/reactivity. All in all, the worker treated this as an incident based assessment rather than looking at what the family picture as a whole. The issues were not connected and the family condition was left unaddressed again. Some of the safety threshold criteria were applied correctly, but the overall issue was that the worker just focused on whether the child was going to get out again, not at all of the concerning information about this child's experience.
- Safety threat #3 should have been considered. Child and adult functioning sections are brief and do not paint a comprehensive picture of these individuals. Concern is about mother's substance abuse issues, but assessment does not paint a clear picture of how that is affecting her functioning or her parenting. Mother did not cooperate with the assessment process and became unresponsive. At the end of the assessment, there is not enough information to determine if the mother's substance abuse makes the children unsafe. No safety threats were documented as considered during the assessment - although in the Child Safety Decision section it reads that "no family conditions or behavior concerning for child safety appears to be out of control or likely to occur in the near future". Safety threat #3 around impulsivity could indeed

be out of control and imminent - if there is not another adult present to control the situation and if we believe that her use is ongoing and continues.

- The worker did not consider a safety threat or the threshold criteria. The narration indicates the children are safe, however the documentation describes domestic violence, severe mental health issues for the mother resulting in two involuntary hospitalizations, and threats by the mother to harm the children. There was no safety threat identified and the threshold criteria was not applied anywhere in the assessment. The mother had severe mental health issues that resulted in multiple previous CPS reports, this report, and subsequent reports. The worker documents a new report assigned due to the mother's psychiatric issues and threatening to kill herself and fearful of harming her children. The worker indicates that the new report was being assessed and that the agency would be intervening. The domestic violence issues are not addressed sufficiently. The screening report indicated that one of the caregivers the mother leaves the children with has a son who is a sex offender. This is not addressed in the assessment. The new report dated 11/23/15 was assigned as TR and Founded against the mother. The children were placed on an in-home plan with the father.
- There are a couple of problems with this assessment. Referral generated on 12/28/15, no face to face contact with the family until 2/3/16 which occurred at a DHS office. Family home wasn't seen until 3/18/16. Worker did not consider a safety threat at all, that section is blank. In the basis for the child safety decision the worker attempted to articulate why the children were safe however mostly talked about how the children didn't report feeling unsafe and the DV incident being an isolated incident.
- Concern that Safety Threat #3 is indeed present and active, potentially resulting in unsafe children. Concern is about the mother's unaddressed mental health issues and methamphetamine use, as evidenced by the new baby born during the assessment, testing positive for methamphetamine. Assessment write up does not fully address these concerns, but is more of a running narrative of the steps taken on this case, from a case management perspective. Child functioning sections are brief, do not offer a comprehensive picture of each individual child. The disciplinary practices sections do not offer a perspective from the children on the use or purpose of discipline. The father appears to have a sexual offense history, but that was not addressed or documented within the assessment. The extent and circumstances sections do not fully address the reported safety concerns, but are more of a running narrative of the work done on the case. Worker applied Safety Threat #3 around impulsivity - severity does not address potential severe impacts on the children, observable does not address what we know to be occurring, what the mother is admitting to, out of control is identified as "not present", but would be met in that there is no other adult in the home controlling the potential threat posed, the children are certainly vulnerable, unable to protect themselves, and imminence the worker has identified as not met, but with mother's ongoing mental health issues and methamphetamine use, it is likely that this threat will occur within the immediate to near future. The Child Safety Decision section reads that the family could "use some help" and has accepted in home services, with no safety threat identified. But it does not speak to how the children are safe, how the safety threat is not occurring, how the children's' safety needs are being addressed.
- Two children were identified as safe, given the assessment it is unclear why the safety threat did not apply to the other two children. Worker should have assessed Threat of Harm as to the

other two children. Needed a Threat of Harm allegation around siblings. Did not apply the safety threshold to the other children.

- This assessment was not completed comprehensively, and on top of that, the agency lost track of the family towards the end, but then found them again, via yet another report of abuse. That concern (living environment of the new home that the family absconded to after taking the child from the home of a relative who had the child in a Protective Action) was not assessed, and it is highly likely that the meth use of mother, and possibly father, is placing this 1 year old at significant risk. Mother is a minor herself and had already been found at a different CW involved homes earlier in this assessment.
- There is no information in the Child Safety Decision section - no description of how the child is safe at the conclusion of the assessment. Assessment is incident based, no comprehensive information gathering to determine how this family functions. Worker did not see all of the children in the home. No documentation of home visit or observation of home environment. No collateral contacts made. Only information in adult functioning is from self-report by the parent. More information is needed to know which safety threat is most applicable. Needed more information about the nature/circumstances around this child being in the home of a friend - if it was due to the parent being unavailable or the parent being impulsive and leaving child with inappropriate caregivers. This seems to be more of an incident based assessment and worker did not gather comprehensive information of family functioning.
- Overall solid assessment. Multiple collateral contacts and extensive domain information. Timelines met. Well written assessment, in compliance with policy requirements around contacts. Comprehensive child and adult functioning sections. Would have been prudent to have the child been seen medically for follow up. Safety Decision section does not document how the children are safe at the conclusion of the assessment, just that the safety threshold criteria has not been met.
- Report assigned as AR 5 day on 6/23. First contact documented at 7/1/15, outside of contact timeframes. Report involved father being arrested for DUII with 4 y/o child in the car, going to jail, getting bailed out by his mother several hours later and the being arrested a second time in the same night for assault of his mother and brother with his children present. On 10/22/15 a new report was received in screening and CAS. There are no indications in the assessment how the worker addressed the newly reported information. The screening report indicates the father attended a school meeting for his child and was described as being "extremely high." During the course of the assessment (6/23/15 to 2/18/16) the father had two positive UA's. The father was found to illegally be obtaining prescription medications and taking those medications when driving and parenting his children. The mother was aware of the father's substance abuse issues but was not honest with the agency and minimized the father's behavior and substance use. The children were found to be "Unsafe" which this reviewer agrees with. However, the worker indicated in their narrative that the imminence criteria was not met and it does not appear that a safety plan was developed at any time. The worker also indicated that the case was not high to moderate needs. The worker indicates in the safety decision that services were provided.
- Contact was attempted, but worker did not see vulnerable 1 year old for almost the first month. The child and adult functioning sections are adequate, explain each individual well. The child's father was not brought into the domains to address him or his functioning/parenting. The concern about this assessment is that the mother admits to using methamphetamine regularly,

but reports that it doesn't impact her parenting and she doesn't use around her child. The question is, how do we know this, is this just based on self-report. The child is one year old and vulnerable. While the correct safety threats were applied, the threshold criteria was not correctly applied. The worker considered two safety threats, around mother's impulsivity and around dangerous living arrangements. Around impulsivity, mother's methamphetamine use, the worker identifies that imminence is not met, as the mother doesn't use around the child. The worker identified that the out of control criterion is not met, as the mother does not use around the daughter. This doesn't speak to the concern that the threat really is out of control, as mother is using regularly and there is nothing present to control its effect on the child. In regards to observable, the worker indicated no, that they did not observe substances. But the mother is admitted to using and the referral is that there was drug paraphernalia photographed in the home, this is not reconciled. Severity is indicated as not met, but doesn't address the potential negative impact on the child with the primary parent using meth. In regards to dangerous living arrangements, the worker identifies that the threshold criteria is not met with the exception of vulnerability. The living arrangements are documented as minimally adequate, with the worker not observing drug paraphernalia or substances in the home. But with mother admitting and if indeed drugs or drug paraphernalia was photographed in her home, we can get to more criteria met about dangerous home environment. The worker did not assess all the concerns. The branch did not correctly address new allegations. The worker's understanding of addiction and the threats meth use has for children was inadequate and incorrect. CAS received on 09/29/2015 while this case was open met criteria for assignment, but was not assigned. CAS received on 10/19/2015 could have also met criteria for assignment as it was discussing ongoing concerns that had not been ameliorated. Mother admitted to using meth to cope with stress, has had substance abuse problems and significant consequences in the past. Mother said she wouldn't use meth if she saw it having negative consequences to the child... and the worker seemed to use this as a strength completely misunderstanding methamphetamine addiction. The correct safety threat was selected, and the criteria were applied correctly to one of them, however the worker's understanding of addiction and the threats to the child were incorrect and minimized. The worker wrote, essentially, that the mom is using meth, but doesn't use around her daughter, so it's ok. There was no discussion about mom's behavior in her cycle of use.

- This assessment contains two screening reports, one from 11/17/15 and a second from 2/25/16, that were linked beyond the 60 day deadline. There is little to no information in this assessment that explores the abuse reported, or the potential safety threats that may be present in this family condition. Extent write-up is over half comprised of a copy/paste or the screening narrative. Two CAS's are also noted that there is absolutely no information in the 307 considering their impact. Workers narrative reads as highly biased, and lacks objectivity. Referenced photos of alleged physical abuse are not available in Orkids. No safety threat consideration was documented, nor threshold criteria. Unclear if/how these children are safe/unsafe at conclusion of assessment.
- The worker did a nice job of articulating the safety threat and the application of the threshold criteria. Overall this was a pretty good assessment.
- This assessment was open for nearly 6 months and was written up by someone other than the person who worked the case. There was very little information gathered. All four children in

the home have the identical two sentences about how they "function at an age appropriate level". None of the domains give a sense of who anyone in the family is or how they function. There were no collaterals made. There is only 1 assessment activity note that states face-to-face was made, and the required notifications given.

- Well written, comprehensive assessment. Worker identified the correct safety threats and applied safety threshold criteria accurately. The Child Safety Decision does not speak to how the children are unsafe, how the safety threats are occurring - but rather speaks to what the agency did about it and how the in-home criteria were not met. This section needs to include information on how the children are unsafe, how the safety threat is occurring - not what the agency is doing to manage the threats.
- Assigned AR 5day on 2/10/16. Documented first contact 4/6/16, then on 7/25 assigned to another worker. Report was mental health issues with mother. Mother hallucinating and buying a gun. We took it at face value that children said they felt safe with their mother.
- The child functioning section is 2 sentences, does not provide comprehensive information about who the child is. The adult functioning sections are also not comprehensive. The extent is also only a few sentences and does not speak to what we learned during the assessment. While the correct safety threat was applied, the threshold criteria was not applied. The Child Safety Decision section does not speak to how the child is safe. There is no information about how we assessed the allegation except that the mother denied it. There is not an in-depth interview of the child documented, simply that the worker asked him if everything was okay and he said he was "getting by".
- 3 adolescent siblings engaged in highly concerning deviant sexualized behavior. One of the boys has also engaged in highly sexualized behavior with other same age boys. Lack of supervision by the father. He locks them in the basement together for days only allowing them to leave to use the restroom. The worker narrates that the children are safe because the parents are willing to get the kids into counseling and both are "protective" however the documentation is not clear on how this decision was reached. The worker did use the threshold criteria to document their consideration of safety threat number 3, however this was not the correct safety threat. There were no indications that there was behavior or circumstances that were impulsive in nature. The content of the assessment supported consideration of a safety threat that would address the parents' lack of understanding about the degree of supervision, level of services needed, and need for communication despite custody issues. The worker minimized the sexualized behavior.
- The family admits to telling their 7yr old that they were going to drop him off at DHS if his behaviors didn't change. This family has extensive history with the agency and the child was returned to their care in July 2014 and their case with The application of the threshold was completely missed for example, "severity is not met because the allegations are not severe," and under vulnerability, "child is not vulnerable because he is able to express himself clearly." The child is 7. The other concerning thing about this referral is that the worker discusses a FSNA referral with the family during his first face to face contact with them. In addition, the parents are threatening their young child with foster care especially since he has already been in foster care.
- Throughout the assessment the mother was in crisis and fleeing a domestic violence situation, the assessment was closed without insuring what the mother's safety plan was and whether it was sufficient to manage the safety of the children. The worker did not see the relatives home,

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where the mother was staying or engage the relative in setting up a sufficient safety plan for the children.

The worker made limited attempts to contact the alleged perpetrator. The worker didn't find that out of control was met but the assessment indicates that it was met as there was no adult in the home can stop, prevent, or otherwise control the family condition/threat.