OVERVIEW

California’s Child Abuse and Neglect Reporting Act (CANRA) protects children by mandating the reporting of child abuse and neglect, and ensuring the investigation of every report (even when receiving agencies lack jurisdiction) through a system of cross-reporting and information-sharing among child protective agencies. (Penal Code section 11164 et seq.)

Child Welfare Services (CWS) is the designated agency in Humboldt County to receive reports of child abuse and neglect and to file petitions bringing abused children within the jurisdiction of the Juvenile Court pursuant to Welfare and Institutions Code section 300 et seq. The Welfare and institutions Code and its implementing regulations (Division 31) work in tandem with CANRA providing detailed requirements for social workers relating to the assessment and investigation of reports.

In 2015, American Indian (AI) and Alaska Native (AN) children comprised seven percent (7%) of the child population in Humboldt County, but these children represent approximately thirty-eight percent (38%) of the foster care population. To remedy this disparity, and in keeping with both the spirit and the letter of the Indian Child Welfare Act of 1978, Humboldt County is dedicated to greater engagement with tribal governments. The agency makes a fundamental commitment to (1) increase access for AI/AN families to tribal and Indian organization culturally based services; and (2) to ensure tribal participation in agency case planning and court proceedings. (See 25 U.S.C. Sec 1901 et seq.; California Welfare and Institutions Code section 224 et seq.)

CWS believes, commits to, and expects collaboration with the identified Tribe to begin at time of Intake and/or first contact. The agency’s key objective for Native American families is to maintain and foster the child’s connection with the Tribe.
CWS policy regarding case intake follows from CANRA, the California Welfare and Institutions Code, Division 31 regulations, as well as the Indian Child Welfare Act (25 U.S.C. Sec 1901 et seq.), and any applicable government-to-government protocols. It is as follows:

CWS accepts all reports of child abuse and neglect and maintains a record of all reports received. CWS social workers answer the phone and take reports at the time the call is received, 24 hours a day, seven days a week. The screening social worker uses real-time data entry, the electronic “Call Tracking” system and the electronic “Cross Reporting” system to ensure all data and information is immediately processed and available to ensure timely responses and cross reports to law enforcement.

When CWS receives a report that is outside of the geographic jurisdiction of Humboldt County, CWS immediately refers the report to the appropriate county or agency with jurisdiction.

When CWS receives a report that involves a child who is enrolled in, or eligible for enrollment in, a federally recognized tribe, CWS cross reports the referral to the identified Tribe(s) and collaborates with the tribe to investigate assigned referrals.

CWS protects the reporting party's confidentiality by law and does not disclose the source of any reported information to family members or any member of the public.

Proof of abuse is not required. Screening social workers contact reporting parties as needed. Social workers document all contacts and efforts to contact in the CWS/CMS system.

**PROCEDURE**

**General Screening:**

1. Screening social workers must remain logged into the Automatic Call Distribution (ACD) system at all times during their shift. If a screening social worker is working on an immediate-response referral they must discuss this with the On-Duty Supervisor prior to signing out of the system.

2. The screening social worker is responsible for obtaining as much information as possible regarding the alleged abuse or neglect, the identifying information on the child(ren) and family, including Tribal affiliation (see A and B below) whenever applicable, and information on the reporting party. This information must be included in the screener narrative.
A. Screening social workers ask all callers whether they have any information that would lead them to believe this may be a tribal child.

i. Screening social workers ask whether there is reason to know that the child is, or may be: (1) a member, or (2) the biological child of a member and eligible for membership, in a federally recognized tribe.

B. If the caller is uncertain whether the child is a tribal member, the screening social worker prompts for information that may indicate the child is a member of a tribe. For example, the screening social worker inquires if the caller knows whether the child’s residence is on a reservation or Rancheria, where the child receives health care.

3. The screening social worker completes all tabs of the Call Tracker including the “caller” and “child” details, the “screening” and “staff” details as well as any additional case notes. For reports that fall outside of Humboldt County’s geographical jurisdiction, screening social workers complete the Jurisdiction tab of the Call tracking system.

4. When the call is outside of Humboldt CWS’s jurisdiction the screening social worker attempts to transfer the call immediately to the appropriate agency using the statewide directory online: https://www.hwcws.cahwnet.gov/countyinfo/county_contacts/hotline_numbers.asp

5. If the screening social worker is unable to transfer the call immediately, they will:

A. Take the full report gathering all relevant information to share with the County with jurisdiction;

B. Immediately call the County of jurisdiction to share the gathered information. Documentation of this must be put in the jurisdiction tab of the Call Tracking system;

C. Immediately call back the reporting party and provide information that the referral is outside of the department's jurisdiction and which agency the referral was transferred to;

D. When the referral identifies a Tribal child in the report, the screening social worker will provide this information to the County of Jurisdiction and the referral will be cross-reported to the Tribe. See specified government-to-government Tribal protocols if applicable.

6. The screening social worker creates a new referral in the CWS/CMS system.

7. In order to constitute a referral, a report must contain allegations of child abuse or neglect. These allegations may or may not meet the criteria for an in-person CWS
response, pursuant to Structured Decision Making® (SDM®) Hotline Tool definitions and SDM® policy and procedure, as well as local, state and federal regulations.

8. The SDM® abuse allegation types are At Risk, Sibling Abused, Emotional Abuse, Exploitation, General Neglect, Physical Abuse, Severe Neglect, and Sexual Abuse. The screening social worker chooses the allegation type(s) which most closely corresponds to the information provided in the referral. Note: the SDM® allegations have a broader focus than Welfare and Institutions Code 300 (a)-(j).

   A. If the child has tribal affiliation, the screening social worker follows the procedure set forth in the **Tribal Collaboration** section below.

9. The screening social worker:
   A. Asks the reporting party exploratory questions to create a screener narrative that is clear and behaviorally detailed.
   B. Documents all information provided by the reporting party about their concerns and any possible abuse and/or neglect of a child.
   C. Creates a screener narrative that must contain key information that assists with determining whether the allegations meet the criteria for an in-person response and associated response time.

   ➢ **See Screener Narrative section below for further instruction.**

**Tribal Collaboration:**

1. Tribal collaboration will occur in all decision-making pursuant to this policy and any applicable government-to-government Tribal protocols.

   A. Social workers refer to the applicable government-to-government Tribal protocol and the most current Humboldt County Tribal Contact Information document for detailed contact information.

2. The screening social worker inquires into any Native American ancestry and calls the respective Tribe(s). If a Tribal connection is identified, the screening social worker inquires into eligibility for enrollment, provides information from the referral, collects information from the Tribe and does the following:

   A. Inquires into eligibility for enrollment;
   B. Provides information from the referral;
   C. Inquires about additional information- family history, current circumstances, and any worries.
   D. Completes the SDM® hotline tool together with the Tribe over the phone.
i. If the Tribe/Tribal social worker is not available when the screening social worker calls, the screening social worker shall:

   a) Complete the tool and submit, and leave a detailed message with the Tribe regarding the referral and ask the Tribe/Tribal social worker to return the call by close of business day.

   b) Let the Tribe/Tribal social worker know that the referral will be processed and submitted for approval and the outcome of the hotline tool.

   c) If the Tribal social worker calls back after the close of business day but prior to the end of 10-day response time, the screening social worker gathers the information and completes the hotline tool with the Tribe/Tribal social worker. If the Tribe/Tribal social worker provides information that changes the criteria or response priority the screening social worker reopens the referral and assigns it for investigation.

3. The On-Duty Supervisor is responsible to ensure the screening social workers follow all of the steps outlined in paragraph 2 (D) above for every child that has Native American ancestry.

4. If the Tribal social worker and CWS social worker cannot agree with the criteria and/or to a response priority, the screening social worker will offer to connect the Tribe to the On-Duty Supervisor. When applicable, the referral can be calendared for a joint staffing with the Tribe. CWS and the Tribe/Tribal social worker will follow any dispute resolution process established pursuant to applicable government-to-government Tribal protocols.

5. The screening social worker continues to take feedback from the Tribal social worker and documents any conversation(s) in the screener narrative. Documentation shall include:

   A. Whether the contact was made.

   B. Confirmation that the social worker requested input from the Tribe.

   C. Complete description of the input provided by the Tribe.

   D. The date and time of such contact.

   ➢ See Tribal Collaboration Policy and Procedure for further instruction.
   ➢ See Cross-Reporting Policy and Procedure for further instruction on contacting Tribes and sharing information.
See ER Investigation and Court Policy and Procedure for further instruction regarding inquiry and noticing.
If the Tribal social worker is also the mandated reporter, see the ER Mandated Reporter Policy and Procedure.

SDM® Assessment:

1. The screening social worker assesses the information using the SDM® hotline screening tool, collateral contacts, the content of all previous referrals and other relevant information, including the Tribe’s input as outlined above if the report indicates Tribal affiliation. The screening social worker completes the screening section of the SDM® hotline tool to determine whether an in-person response is recommended, and if so, uses the SDM® response priority tool to determine how quickly to respond.

   A. A CWS social worker shall make an in-person response within 24 hours when the SDM® response priority tool identifies this as the appropriate response time and there are no overrides to decrease to a response within 10 days.

   B. A CWS social worker shall make an in-person response within 10 days when the SDM® response priority tool identifies this as the appropriate response time and there are no overrides to increase to a response within 24 hours selected.

      i. If the social worker has reason to believe the child could become unsafe prior to the 10-day response time, the social worker will recommend a quicker response time.

   C. If applicable, the social worker will collaborate with the Tribal social worker to determine the appropriate response time.

   D. The screening social worker can also override a timeframe.

   E. A CWS in-person response is not required when completion of the SDM® hotline tool results in a screening decision of evaluate out, and there are no response priority overrides selected. All SDM® tools and assessments shall be completed in accordance with “Structured Decision Making Policy and Procedures Manual” and with supervisor approval. Refer to the SDM® manual for override considerations.

2. Situations may be reported that, in and of themselves, do not constitute referrals appropriate for investigation. An in-person response may not be required if:

   A. The situation does not meet the SDM® definitions for child abuse or neglect.

   B. There is no person under the age of 18.
C. The referral is a duplicate referral that contains no new information. The screening social worker must review previous referrals to ensure the new referral contains no additional or new information.

➢ See SDM® Manual pages 10 and 36.

3. CWS will process and evaluate all reports as a referral unless the caller is clear they are providing “information only” and there are no indications of abuse or neglect per SDM® manual.

4. The Differential Response process of including a broader set of responses will be applied to ensure available services are offered to all families where service needs are identified. The Differential Response Paths are as follows:

   A. Path 1: Community Response – Choose this path when concerns do not meet the SDM® definitions of abuse or neglect, yet there are indications that a family is experiencing problems that could be addressed by community services.

   B. Path 2: Child Welfare Services Response – Choose this path if the SDM® Hotline Tools indicate an in-person response is needed. Community partners may or may not be involved at this level.

   C. Path 3: Humboldt County CWS does not use Differential response path 3 (high priority response) and makes response priority decisions using the SDM® response priority tool.

5. If a report is determined to be for information only, the screening social worker will use the paper intake form (A-14-30) and will check the “info only” box on the form. All reports processed as information only shall be approved by a supervisor to ensure there is no needed follow-up.

6. The screening social worker will immediately cross report all reports of abuse and severe neglect to the law enforcement agency with jurisdiction. Jurisdiction is determined by where the abuse or severe neglect took place. The screening social worker will use the electronic Cross-Reporting system to complete the cross reports. *See Cross-Reporting P&P for further instruction.

7. When the new report involves a family in an open investigation or case the screening social worker will follow the Reports on Open Cases or Referrals P&P.

Creating a Screener Narrative:

The screener narrative contains clear and behaviorally detailed information provided by the reporting party about their concerns regarding possible abuse and/or neglect of a child. It also contains other key information that assists with determining whether the allegations meet the criteria for an in-person response and associated response time. Each section below follows the template questions and is designed using
Humboldt Practice Model principles and skills to aid social workers in completing the screener narratives for child abuse and neglect reports from the community and mandated reporters.

1. The screening social worker must document when the reporting party does not know the answer to any guiding question they were asked, as this demonstrates the question was asked and a decision must be made without the information.

2. Date of report, name and date of birth of focus child: Always include the date and time the report was taken from the reporting party. Record the name and date of birth of the focus child at the top of the screener narrative.

3. Inquire about the family/household information:
   
   A. Include information about all the households where the child(ren) resides with a legal parent and any other siblings the child(ren) has/have that live in the home or visit the home regularly.
   
   B. Include information about other family or other household members living in each household where the child resides. Identify legal parents and other adults who provide care for children in the household.
   
   C. Include information about any custody/visitation arrangements (who the child is with and what is known about the visitation schedule, whether a court has made orders related to custody or supervised visitation).
   
   D. Include information about what is known about how household members identify themselves culturally, related to their race, ethnicity, sexual orientation and gender identify and expression or any other cultural identity that may be important to them.
   
   E. Include information about the child’s school/special education needs, if known (including whether an Individualized Education Plan (IEP) or 504 plan has been developed). Include information about the child’s school schedule, including session start and end times, if known.
   
   F. Include information about child or other household member vulnerabilities including developmental issues or delays and/or health concerns.

4. Inquire whether the child is affiliated with a Native American Tribe:
   
   A. Document the specific Tribe or Tribes.
   
   B. List the people in the household who is/are an enrolled member and to what Tribe they are enrolled, eligible for enrollment, not enrolled or pending enrollment.
C. If the reporting party does not know this information, document the reporting party’s response specifically in this section in the narrative.

D. Contact the designated Tribal representative(s) for the child/ren alleged to be abused or neglected for the following information:

i. Enrollment status: Confirm if the child/ren is enrolled, eligible for enrollment but not enrolled or pending enrollment. Document the status in the narrative.

ii. Document the Indian heritage or federally recognized tribal information for all identified tribes in CMS/CWS using the ICWA tab in CMS/CWS.

iii. If the child is a member of a Humboldt County Tribe, document the Tribe in the special projects code in CMS/CWS.

iv. Ask for any additional information that the tribal representative may have regarding the worries, family system, etc., and add it to the screener narrative.

v. Discuss the specific allegations of abuse and neglect, complete the SDM® allegation definition(s) with the tribal representative and solicit the tribal representative’s opinion about assignment for investigation. Document their response in the narrative.

vi. Use the Tribal Collaboration policy most current Humboldt County Tribal Contact Information document for any additional follow-up requested by the Tribe (ex: follow-up emails).

vii. Use the Tribal Collaboration Checklist form to document your contacts and collaboration with any federally recognized Tribe.

➢ See Tribal Collaboration Policy and Procedure for further instruction.
➢ See ER Investigation and Court Policy and Procedure for further instruction regarding inquiry and noticing.
➢ If the Tribal social worker is also the mandated reporter, see the ER Mandated Reporter Policy and Procedure.
➢ At this stage there is no Court Involvement; see Court Policy and Procedure for instruction on how to handle cases where more than one Tribe is involved and where only one Tribe has intervened.
E. During after hours, the on-call social worker takes the following additional actions with immediate responses (24 hour response) when the child or family is associated with Humboldt County Tribe(s) from the Referral tab:

i. Sends screened-in intake information to the Tribe using most current Humboldt County Tribal Contact Information document.

ii. Selects Tribe (defaults to federally recognized) from the Agency Type list.

iii. Selects the appropriate Humboldt County tribe(s) from the Agency Name list.

iv. Selects the preferred method of delivery from the Referral Method list as identified by the tribe in the Humboldt County Tribal contact information.

iv. Notifies the On-Call Supervisor of the immediate response referral and the need for coordination with the Tribe(s) using the most current Humboldt County Tribal Contact Information document.

v. Contacts the Humboldt County tribe(s) for coordination of response on the immediate response, using the most current Humboldt County Tribal Contact Information document.

vii. Makes contact and coordinates with tribe(s) on referrals screened-in for response, using the most current Humboldt County Tribal Contact Information document.

5. Inquire into the child/ren's mental health:

A. Ask about any mental health diagnosis the child may have and/or whether the child is receiving mental health services.

B. Document the following:

i. The type of services (therapy, medication support, family therapy, etc,

ii. Name of service provider (specifically from DHHS Children’s Mental Health or other provider), including name of clinician/therapist and other contact information when available.

ii. Any medication the child may be prescribed.

iv. Whether the child is suicidal or has been suicidal in the past.
C. Ask whether the reporting party is collaborating with or is in communication with the child’s mental health provider(s).

6. Inquire about the worries that the reporting party is calling about:

   A. Obtain detailed information about “Who” (those involved and those who know about the problem)

   B. The following sample questions will help elicit behavioral descriptions:
      - What, in this situation worries you the most?
      - What convinced you to call today?
      - Is this behavior/incident a problem for other children in the home?
      - Are you aware of any other interventions or services?
      - What do you see as the cause of the problem?
      - What would the child say about the situation?
      - Is there anyone else that knows the family that may be able to provide additional information about your concerns? Do you know what they would say? Do you know whether they would agree with your perspective? (If the caller cannot think of anyone, the social worker can prompt using examples such as teachers, medical providers, etc.)
      - Do you know their contact information or how we can get ahold of them?

   C. During the interview, use SDM® hotline screening and response priority definitions to help assure that all relevant questions have been asked related to the screening assessments. If the reporting party doesn’t know the answer to a key question in the assessment, document their response and complete the assessment in the most protective way. Provide details in the screener narrative about the rationale for the response and response priority decision.
      - Refer to Screener Narrative Template in CWS/CMS.

7. Inquire about what the reporting party knows is working well in the family:

   A. Use solution-focused questions (exceptions questions can work well here) to gain an understanding of strengths, resources, caregiver actions of protection (current and past), details of network support to the
household and any other information that is known about how the household keeps the children safe.

B. Inquire as to what the caregivers are doing that is protective, providing safety.

C. Inquire as to what impact behaviors are having on the child. Be behaviorally descriptive.

D. Sample exceptions and strengths questions:

- It sounds like this has happened before. What have you seen the family do to sort this out?

- You mentioned that it is not always like this. Can you tell me what is happening when the situation is okay? What is different about those times?

- Are there times when the parent is attentive rather than neglectful? Can you tell me more about those times? What did the parent and child do instead? What do you think contributed to the parents responding differently?

- You said the child always seems miserable and withdrawn. Are there any times when you have seen them come out of their shell? What are they like?

E. During the interview, use SDM® hotline screening and response priority definitions to help assure that all relevant questions have been asked related to the screening assessments. If the reporting party doesn’t know the answer to a key question in the assessment, document their response and complete the assessment in the most protective way. Provide details in the screener narrative about the rationale for the response and response priority decision.

- Refer to Screener Narrative Template in CWS/CMS.

8. Inquire about what needs to happen next:

A. Use solution-focused questions to help get an understanding of what the reporting party thinks are needed next steps and any steps they are aware of that have already been taken by the family and network in response.

B. Sample questions to elicit a response:

- This situation sounds serious. Do you have suggestions or recommendations to address this problem?
 Calling this agency is a big step. Do you have ideas for making the child(ren) safer?

 Do you think any other agency might be able to help with this situation?

 What do you think this family should do? What are they capable of doing?

 How would you know if the problem was solved? What would that look like?

 Are the parents concerned about these problems? How do you think the parents will go about resolving this?

 What do the children say that they want or what do you think they want?

 On a scale of 1-10, where 1 means you are certain the child will be maltreated again and you believe we should act immediately and 10 means the problems are solved, where would you rate the seriousness of this case?

9. Review relevant CWS case and referral history:

A. Search for the involved clients in CWS/CMS. Complete client searches on each child alleged to be abused or neglected, each caregiver involved, and the alleged perpetrator (if different from the caregiver(s)). Document the family members because different names searched may bring up different history. Ask reporting party whether individuals named in the client notebook are current household members.

B. If the alleged perpetrator is not a caregiver to the child/ren, include any reports regarding any other children (evaluated out or assigned for investigation).

C. Summarize relevant case and referral history regarding the family in a brief paragraph and include dates of referrals and/or cases and include additional information in referrals that were received regarding the same or similar allegations. Include any themes or patterns in the family system as it relates to abuse or neglect that is observed in reviewing the screener narratives. If the referrals were assigned for investigation, include a summary of the evidence found that led to the allegation conclusion.

D. If there is a current assigned referral or open case, include the name of the assigned CWS social worker and Tribal social worker (if applicable)
and the worries and/or allegation(s) in the referral or reason for the open case.

10. Develop a preliminary Harm and Danger Statement:

A. For each item marked on the screening criteria section of the SDM® hotline tool, use information gathered from your inquiry and write a preliminary harm and danger statement, if applicable.

B. If either the harm or danger statement is not applicable, state this on the screener narrative.

11. Social Worker name:

A. Always include social worker name at the end of the narrative.

Screening Minor Parents:

Pursuant to Welfare and Institutions (WIC) Code section 11254, any individual who is (1) under the age of 18 years and has never married; AND (2) who is pregnant or has a dependent child in his or her care may receive aid for themselves and their child if: they reside in a place maintained by a parent, guardian, and adult relative or in another adult-supervised supportive living arrangement.

1. The screening social worker shall:

A. Receive the eligibility worker's report (including the CW25 form) and create a referral in CWS/CMS, completing the SDM® hotline assessment, selecting the appropriate screening criteria and response priority, based upon the details of the report.

B. Assign the referral based upon the SDM® determined response priority.

C. Provide the CW25 to the assigned investigator to complete.

➢ Note: CWS may receive referrals from eligibility that do not meet standards.

Positive Toxicology Referrals:

1. When a report of child abuse or neglect is received from hospital staff regarding the birth of an infant or mother with a positive toxicology report, the screening social worker will ask the reporting party exploratory questions and use the structure and definitions in the SDM® hotline screening assessment to determine if the report meets the screening criteria threshold for an in-person response.

2. At minimum, the screening social worker should ask the reporting party the following questions and any appropriate follow up questions:
➢ Which drug was indicated in the positive toxicology test?

➢ Did both the mother and the child have positive toxicology tests?

➢ The parents’ readiness and willingness to provide care to their child, including supplies, safe housing and the ability to safety parent.

➢ What is the parents support system, who provides support and how?

➢ The parent’s current behaviors that may indicate current or continued substance abuse, including the parent’s ability to follow the recommendations of hospital staff around feeding, co-sleeping and supervision of the infant.

➢ Are there any other risk factors, including information obtained from the Newborn Infant Risk Summary?

➢ Are there any other children in the home that may be at risk due to the parents’ substance abuse and/or unsafe behavior?

➢ Did the mother test positive at any prenatal visits?

➢ Is there history of use during pregnancy?

➢ Does the Reporting Party have knowledge of addiction history?

3. The screening social worker will create a referral in CWS/CMS and document this information in the screener narrative and enter the appropriate allegations, based upon their screening interview and SDM® screening definitions.

4. If CWS receives information that the mother may be planning to leave the hospital against medical advice (AMA), consider (if response time is recommended as a 10-day response) using either the policy override “there is reason to believe that the family may flee” or discretionary override to a 24-hour response time AND the field response social worker will respond at the time of the call, or as soon as practicably possible.

**Safely Surrendered Babies:**

Parents and legal custodians, pursuant to state law and regulations they may voluntarily surrender newborns, 72 hours old or younger, who have not suffered abuse or neglect to an employee of a public or private hospital or other designated safe surrender site, without fear of being prosecuted for child abandonment. The parent/custodian may reclaim the child within 14 days of the date the child is voluntarily surrendered if the home is assessed and determined to be safe. The parent does not need to specifically request that the Safely Surrendered Baby Law be applied. It is sufficient that the parent, by word or deed, indicates to the safety surrender site that they do not want to keep the
baby. If the parent leaves the hospital without the baby it is considered that the baby is safely surrendered.

1. The screening social worker will explore with the reporting party to determine that the above apply and will complete the SDM® hotline assessment, selecting the appropriate screening criteria and response priority, based upon the details of the report with the following additional entries:

   A. If the name of a parent or the person surrendering the child is disclosed to CWS, it is not to be recorded in the CWS referral or any CWS documents. Any identifying information that pertains to the parent or individual surrendering the child shall be redacted from all CWS documentation and shall be exempt from disclosure by CWS.

   B. The new referral is not merged or associated with any other referrals, cases, or history that might be known to exist for the mother or any siblings of the child.

   C. In the referral under the special projects page, add a special projects code by pressing the (+) button in the grid. Under the special project name drop down menu select “S-Safely Surrendered Baby”. Enter the date of the referral opening in the special project’s code start date. Do not enter an end date, as the system will populate this field when appropriate.

   D. Enter the child’s coded, confidential identification number into the client notebook under ID number page. Add the identification number by opening the client notebook and going to the “ID num” page. Press the (+) button in the grid and select “Medical Record” as the record type and type in the identification number.

   E. Complete the SDM® hotline assessment, select “safely surrendered baby” in the preliminary screening section of the SDM® hotline assessment and save the assessment in WebSDM®. No further SDM® assessments should be completed, including safety and risk assessments.

      i. The referral is assigned as an immediate response.

2. If a call is received by a screening social worker from a parent who wishes to reclaim their child, the screening social worker will immediately provide this information to the supervisor of the day for follow up.

3. The screening social worker will contact California Department of Social Services (CDSS) at (916) 651-6160 and California Missing Children Clearinghouse and National Crime Information Center. Both can be accomplished by calling (800) 222-FIND or (800) 222-3463 to report the safety surrendered child.
Children in Out of Home Placement

1. All reports of abuse and/or neglect of children in out of home care, or any child that lives in a home of a licensed foster parent, or Resource Family must be cross reported to the responsible licensing agency (for example: Community Care Licensing (CCL), CWS Resource Family Approval Unit (RFA) or Foster Family Agency (FFA). The screening social worker will promptly cross report all allegations concerning substitute care provider homes and facilities to the agency with responsibility for oversight of that care facility in order to assure the safety and care of children placed in out of home care.

2. The screening social worker will create a referral in CWS/CMS, document all information in the screener narrative and enter the appropriate allegations, based upon their screening interview and SDM® screening definitions. Referrals that meet criteria for investigation will be assigned to an investigating social worker.

3. The screening social worker will contact the licensing agency to provide information that a referral has been received by CWS regarding their licensed home and whether CWS will be responding based on the SDM® hotline tools.
   A. To cross report to a Humboldt County RFA home use the RFA cross reports email address. In the email include the referral document and screener narrative.
   B. Document all cross reports in CMS and in the screener narrative.
      ➢ See Reports on Children in Open Cases or Referrals Policy and Procedure.

WIC 329 Requests:

1. WIC 329 allows any person to apply to CWS to commence proceedings in the juvenile court by completing an affidavit using Court Form JV-210.

2. When CWS receives a JV-210, clerical staff delivers it immediately to a screening social worker to ensure processing the same business day.
   A. The screener creates a new CWS/CMS referral and imports the affidavit/JV-210 into the CWS/CMS referral.
   B. The screening social worker processes the information pursuant to SDM® Hotline Tools policy and procedure; completing the SDM® hotline assessment, selecting the appropriate screening criteria and response priority, based upon the details of the report.
   C. If the child is affiliated with a local Tribe, the screening social worker follows the CWS Intake procedure for Tribes, the CWS Tribal Collaboration Policy and Procedure, and any applicable Tribal Protocols.
D. If upon completion of the SDM® tools, there are no current allegations of abuse or neglect that meet criteria for in-person response, evaluate out the referral.

   i. On the JV-210, check the box indicating that a petition will not be filed and explain the decision not to proceed further and include, if applicable, any recommendations to the applicant regarding next steps.

      a) If the recommendation is to commence a probate guardianship explain the reasons for that recommendation.

      b) Keep the affidavit and social worker recommendations for a period of 30 days after notifying the applicant.

E. The JV-210 is not a mandated report. The social worker does not need to respond using the mandated reporter response letter.

F. If upon completion of the SDM® tools, the social worker determines that abuse criteria are met and it is determined an in person response is needed, the screening social worker calculates the WIC 329 due date (three weeks/21 calendar days from the date the JV-210 was received). The social worker documents the date in bold on the investigation narrative.

G. After assigning a WIC 329 for investigation, immediately notify the investigator and their supervisor of the investigation and due date for the response.

241.1 Requests:

1. If the Court orders a report to determine whether a child is best served by the Delinquency or Dependency Court, see the Humboldt County DHHS/Probation 241.1 Protocol.

   ➢ See also Court Policy and Procedure.

JV-180 Requests:

1. When any party requests a change of Court order establishing permanency for a child(ren) (WIC 388), that party completes and submits a JV-180 to the Court. The Court orders CWS to investigate and submit a recommendation to the Court.

   A. The Court serves CWS with the order by placing court minutes in CWS’s court box.

   B. Clerical staff check the CWS court box daily and promptly deliver minutes to the court supervisor.
2. When the Court supervisor receives the court minutes ordering a CWS JV-180 investigation, the court supervisor notifies the ER supervisor of the day.

3. The ER supervisor provides the minutes to a screening social worker.

4. The screening social worker creates a referral and documents in the narrative the Court’s request, including the Court order proposed to change.

5. The screening social worker completes the referral and overrides SDM® to investigate.
   
   ➢ See also Court Policy and Procedure
   ➢ See Tribal Collaboration Policy and Procedure
   ➢ See Cross Reporting Policy and Procedure
   ➢ See Reports on Children in Open Cases and Referrals Policy and Procedure.

**Additional Screening Responsibilities:**

1. The screening social worker is responsible for obtaining as much information as possible regarding the alleged abuse or neglect, the identifying information on the child(ren) and family and the information on the reporter using strong interviewing and assessment skills.

2. Screening social workers are also responsible for using critical thinking skills and judgement, along with the structure and definitions of the SDM® hotline tools, to make a response and response priority decision. Screening social workers also hold the responsibility of speaking to community members regarding anything that contains a concern of children from the community.

3. Screening social workers must be flexible to meet community needs regarding child abuse and neglect.

   A. A screening social worker may be asked to:

   i. Meet in person with a reporting party and take a report.

   ii. Answer questions from callers on various topics, including whether a report is appropriate to be made and how to access community resources.

   iii. Call Law Enforcement when a caller believes a child or family is in immediate danger.

   iv. Take responsibility for the call tracking system, including addressing desk duty messages that callers have left.
v. Receive calls from other Child Welfare agencies with questions about family situations or requesting response to families in Humboldt County.

vi. Receive Suspected Child Abuse Reports (SCARs) via fax, email or post for additional follow up.

vii. Make reports of any suspected welfare fraud or suspected child abuse or neglect to licensing agencies during their screening duties.

viii. Complete incident reports regarding child fatalities or near fatalities.

4. If evaluating out for a differential response; complete referrals to Family Resource Centers and/or Public Health as appropriate.

5. Follow up with conversations with community partners (hospitals, schools etc.) regarding previously reported information.

6. Screening social workers receiving calls from community and family members with questions about family situations or requesting guidance around custody, guardianship, when to make a report, receiving aid etc. should not provide advice regarding child custody or guardianship. However, information as to where to find the answers (i.e. Going to the Court house, referring the caller to family or probate court for additional information on family law or guardianship, calling law enforcement anytime they believe a child is in immediate danger, a summary of mandated reporters guidelines) may be provided.

**Call Tracking system:**

1. Each screening social worker documents calls in the “Call Tracker” system.

   A. Date/Time (Received by CWS) - This is the date and time the initial call, SCAR or written report was received by the CWS office.

   B. Reporting Party’s Name – Complete for both mandated and non-mandated reporters, unless a non-mandated reporter requests anonymity. Put an “M” next to the caller’s name if they are a mandated reporter.

   C. Info Only Y/N/I- When taking a report of child abuse/neglect, put an “N” in this box. If the caller is not requesting to make a report, but is seeking information or providing non-reportable information, put a “Y” in this box. If the caller is requesting information, put an “I” in this box.
D. Focus Child- Enter the name of the focus child only, do not write the name of every child involved.

E. Name of Tribes- put the name of all Tribes in which the child is eligible or may be eligible for membership.

F. Name of Tribal Designee- document the Tribal Designees contacted or attempted to contact for each referral.
   i. Tribal contact- Document the means of contact with the tribal designee (Ex: Phone? Email?) as well as the date and time of each contact.
   ii. Y/N- In the YN column put Y if contact was made with a Tribal Designee. Put an N if contact with a Tribal Designee was not successful.

G. Response Priority of the Referral (Evaluate Out, Immediate, 3 day, 5 day 10 day etc.).

2. Reminder: Even if not taking a report, the screener enters the call into the call tracker (include callers with questions, and calls transferred to another jurisdiction/county).