# CWS/CMS Referral Screening



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Central CA Training Academy

## **Referral Screening – CWS/CMS Procedures**

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## Referral Screening – CWS/CMS

The referral screening process on CWS/CMS is designed to capture information regarding allegations of child abuse or neglect to meet the requirements of California's Emergency Response Protocol. The following process can be used for documentation of all incoming referrals to the child protection agency, regardless of response time or appropriateness of in person response. Details of the requirements can be found in section 31-105 of the Child Welfare Services program manual.

### Learning Objectives

At the completion of this section, trainee will be able to:

- Enter a referral on CWS/CMS according the Emergency Response Protocol.
- Search, retrieve and review child welfare history for a child and family.
- Cross report to all appropriate agencies.
- Produce a comprehensive document ready to be transferred to the investigating worker.
- Record information regarding a 'Safely Surrendered Baby' on CWS/CMS.
- Understand provision for referring cases unsuited for CWS intervention to the right agency and procedure in CWS/CMS.

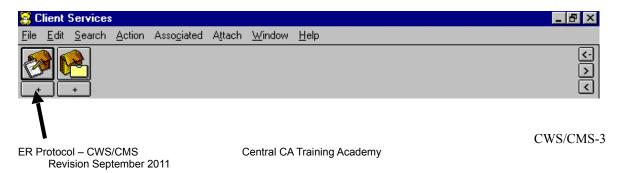
## STEP ONE

Entering A New Referral

Begin by selecting Client Services



#### Use the + sign to 'Create a New Referral'



The new referral opens to the ID Page and automatically assigns a 19 digit number to it.

🌋 Client Services - [Referral [0172-2193-5319-9000018]]	You are currently running Scenario Manager. 💶 🗗 🗵
🕐 Eile Edit Search Action Associated Attach/Detach Window Help Toolz	_ 8 ×
	ی در ۲
Summary ID Beporter Assignment Spec Proj	
Referral Identification	
Date Time Referral Name	
09/12/2011 🔽 09:36am	
Screener Report Method Primary Agency Responsible	
W, Chris	
Common Address	
Street Name Phone Phone Phone Phone Phone Ext City California County Location of Children  Address Comment Screener Alerts	
CACI Notice to Perpetrator	
Date Sent Delivery Method Perpetrator	
Date Sent C In Person By Mai	
D0J Grievance Request	
Request Date Resolution Date Outcome Filed By	
	<b>•</b>
Ready Referral [0172-2193-5319-9000018]	

This page is used for basic referral identifying information.

- Date & Time Fields enter the actual date and time the referral was reported. It automatically opens to current date/time, but can be modified.
- Referral Name identifies the referral according to the county's naming convention. Most often, counties use the Mother's Name in referral identification.
- Screener this field is read only, and is populated from the Assignment Page once the referral has been assigned to the screener.
- Report Method how the incident was reported. Only the selections under the drop down menu can be used.
- Common Address enter the primary address of the referral. Typically, this is where the "victim(s)' live. <u>http://zip4.usps.com/zip4/welcome.jsp</u> Use this link to verify address against the USPS site and for Zip + 4.
- Address Comment use this field to give additional information to assist the worker in locating the family.
- Location of Children this field is especially important for referrals requiring an immediate response to indicate current location of the victim(s).
- Screener Alerts this section can be used to identify areas of concern the investigator needs to know before conducting the investigation, such as, "family speaks only Spanish", or "beware of the dog in the family's yard", etc. Some counties use this section to record the details of the referral.
- CACI Notice to Perpetrator & DOJ Grievance Request sections enable only after allegations have been concluded.

Reporter Page – complete this page with information about the person reporting the alleged abuse or neglect.

🛣 Client Services - [Referral [0570-2087-0461-5001518]] You are current	y running Scenario Manager. <mark>- 🗗 🗙</mark>
😢 Eile Edit Search Action Associated Attach/Detach Window Help Toolz	
Summary ID Beporter Assignment Spec Proj	
Reporter	<b>_</b>
Information Confidentiality Confidentiality Reporter's Name Unknown Application for Petition Requested Family Informed Family Informed Kaived Self Reporter	
└── Identification ─────	
Prefix First MI Last Suffix Relationship to Referral	I
Address           Street No.         Street Name   Primary Phone Ext	
City State ZIP ZIP Ext () - Message Phone Ext () -	
Agency Name Agency Name Badge Number Feedback Details Feedback Required Feedback Method Feedback Sent Feedback Sent	
Ready Referral [0570-2087-0461-5001518]	

- Confidentiality is automatically requested and afforded to any person reporting suspected abuse or neglect, but can be waived by the individual reporting.
- Check Boxes for Reporter information any boxes that apply should be selected. If the Reporter's Name Unknown box is checked – the entire page is disabled. The Self Reporter box cannot be checked on this page – a self-reporter is a client that reports the alleged incident – this box will be checked if self-reporter is indicated in a client notebook.

Definition of who is determined to be a Mandated Reporter can be found in the Penal Code section 11165.7(a).

• Complete the rest of the page with as much information as possible about the reporting party, including agency, address and phone number and indicating whether the mandated reporter requires feedback. Mandated reporters may be told the results of the investigation and the action that the agency is taking with regard to the child or the family. (P.C. 11170 b (2)).

#### Form Populating Tip

This page will populate the form 'Response to the Mandated Reporter' if completely filled out!

Assignment Page – this page is used to record the staff person(s) assigned the referral. As the referral moves from one worker to another (i.e., Screener to ER worker to Case Manager), a history of assignments is maintained here.

🤶 Client Services - [Referral [0570-2	087-0461-5001518]]		You are curren	tly running Scenario Manager [8]
🖄 Eile Edit Search Action Association	ed A <u>t</u> tach/Detach <u>W</u> indow	<u>H</u> elp Tool <u>z</u>		
Summary ID Reporter Assignment	Spec Proj			
		itart	End	Role Type
1 EB1 Primary	09/05/2003 11:	12am		
Responsibility	Assignment Destina			
Primary O Secondary O Read Or     Details	nly 💿 CWS Staff	∪ In•b ⊐ ⊏CWS Staff =	ox Caseload	
Start Date Start Time Response 09/05/2003 International I	sibility Description	ZIP County (or Stat Sacramento CWS Office Downtown Sa Unit Emergency Ri Caseload ER1 Staff Person Dayton, Paul Phone Number (916) 567-215	cramento esponse Ext	
Ready	Referral [05	570-2087-0461-5001	518]	

The page is activated by clicking the + sign in the upper left corner.

The first entry is always the Primary Assignment. A case or referral can only have one Primary Assignment, but can have multiple secondary assignments.

The assignment must specify the County, Office, Unit and Caseload the referral is assigned to. The individual taking the report will be the first staff person with primary assignment.

The Staff Persons' name and phone number will automatically populate based on the Caseload entry. Staff person information is 'read only' and is populated from Resource Management, County Organization section, Staff Person notebook.

Use the plus+ sign to add additional assignments. If there are Secondary Assignments, the 'role type' of that person must be specified.

#### **STEP TWO - OPTIONAL**

Screener Narrative (some counties do not use this document – they use Screener Alerts section on ID page)

Use the + sign – Create New Document - Referral

Generate New Documents         County       State of California          State of California           Documents to Generate          1       Emergency Response Referral Document         2       Investigation Narrative         3       Screener Narrative	<u> </u>	r 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
State of California       Documents to Generate       Image: Image of the second	×	
Type       1     Emergency Response Referral Document       2     Investigation Narrative	OK Cancel	
2 Investigation Narrative	Lancei	
	<u>I</u> mport	
	<u>H</u> elp	
1		

Select the Screener Narrative from this dialog box, then Click OK. That will open the Screener Narrative in Microsoft Word.

## SCREENER NARRATIVE

ALLEGATIONS (Who, What, Where, When, How, Who Else Knows, Why Now?) COLLECT AND RECORD INFORMATION ABOUT THE FOLLOWING RISK FACTORS:
PRECIPITATING INCIDENT (Severity, frequency; location and description of injury; history of abuse)
CHILD CHARACTERISTICS (Age, vulnerability, special circumstances; perpetrator's access; behavior, interaction with caretakers, sibling and peers)

- 3. CARETAKER CHARACTERISTICS (Capacity for child care; interaction with children, other caretakers; skill, knowledge; substance obuge, criminal behavior, mental health)
  - substance abuse, criminal behavior, mental health)
- 4. FAMILY FACTORS (Relationships, support systems; history of abuse; presence of parent substitute; environmental conditions; family strengths)
- 5. DOMESTIC VIOLENCE/ABUSE FACTORS (Safety risks; pattern of assaults on, threats to, and/or stalking of household members; forced social isolation or economic deprivation; weapons present in the home and used as a threat; prior law enforcement or emergency medical response(s); history of domestic violence/abuse; medical neglect; violation of restraining orders; mental health issues; other risk factors)

The Screener Narrative is a Microsoft Word document that opens with the above text box reminding screener of what information should be obtained for the referral screening process. Complete a narrative of the incident here. All Word tools can be utilized, ie., Spell Check, Thesaurus, etc. SAVE, PRINT, CLOSE or MINIMIZE WORD.

### STEP THREE

Searching for Clients in the Statewide Database

This process serves two important functions in the referral process. First, searching the statewide database for clients is essential in determining whether there is a history of abuse or neglect for the family. Second, if the client's are known to the statewide database, they need not be created again, just attached to the referral in progress. That will attach all prior history as well.

In the top menu bar, use the Search, then Start Search command. The following box will open.

Search						×
Search Type						0K.
Client	<b></b>					Canad
						Cancel
						<u>H</u> elp
Last Name						
First Name			F		Phonetic N	ame Search
Middle Name					📕 Phonetic <u>S</u>	treet Name Search
Social Security Number					Partial Add	Iress Match
Gender		•			, ranar <u>a</u> aa	
Approximate Age						
Ethnicity		-				
Street Number						
Street Name						
City						
County of Residence		-				
	California	-				
ZIP Code						
Date of Birth						
Home Phone				•		

When searching for clients, it is best to use minimal criteria to begin with. A good way to start is to enter the client's first and last name, gender and approximate age. Additional pieces of information can be used to narrow the search. The reason more specific pieces of data on a client should not be used, i.e., social security number, ethnicity, is because the computer will search for someone that matches that criteria exactly. If the client had not been entered previously with that exact information, you may miss locating them. When searching, it is best not to select the county of residence, because you are interested in determining statewide history on the client. It is best to search for all clients individually. Using the 'phonetic name search' check box will allow the capability of finding 'sound alikes', which is helpful if you are unsure of the spelling.

#### Search Tips

- When using approximate age searching for a child 12 years or younger, the database will include plus/minus 2 years.
- When using approximate age searching for a child 13 years or older, the database will include plus/minus 5 years.
- Using phonetic searches will return different spellings, but similar pronunciations

• Entering less search criteria is best to start. Add additional pieces one by one to narrow the search.

The Search Result screen will include all potential client matches, with a percentage of how closely the client matched your search criteria.

	ch Infor	mation –								
tatus					Search Criteria					
			/8/2003 10:49:26 AM 9/8/2003 10:49:26 AM		Phonetic Searc		Yes			
			/8/2003 10:49:26 AM		Phonetic Street		No			
					Partial Address Last Name	Search	No Lozano			
					First Name		Pedro			
				-			reaio	Þ	-	
	Sensitiv	Archive	Name	~	Date of Birth	SSN	Gender	Ethnicity	County of Residence	Primary Language
1			Lazano, Pedro		02/09/1967	544-57-2165	Male	White	Sacramento	
2			Lazano, Pedro		02/09/1967	544-57-2165	Male	White	Sacramento	
3			Lazano, Pedro		02/09/1967	544-57-2165	Male	White	Sacramento	
4			Loxano, Pedro		01/02/1988	112-34-5569	Male	American Indian	Merced	Lao
5			Lozano, Pedro		06/07/1994	567-71-5912	Male	Hispanic	Sacramento	Spanish
			Lozano, Pedro		05/05/1990	555-55-5555	Male		Kern	Spanish
6			Lozano, Pedro		06/07/1994	567-71-5912	Male	Hispanic	Sacramento	Spanish
6 7			ereality, r care		06/07/1994	567-71-5912	Male	Hispanic	Sacramento	Spanish

#### Search Results

- If search results indicate 'Maximum Hits Exceeded', use the 'Search Again' selection under the Search command in the menu bar.
- Will locate AKA's if previously entered on the Names page in the Client notebook. AKA's are cross-referenced with any names used by the client.
- Clients marked as 'Sealed' do not display in the search results unless you have 'Sealed' privilege.
- Clients marked as 'Sensitive' will display in the search results, but will be unable to be opened if you don't have 'Sensitive' privilege. You will not be able to open the sensitive client's abstract if it belongs to another county.

Open the client abstract for further review to determine more positively that it is the client you are looking for. Double click to open.

The 'Client Abstract' is a snapshot of the client with limited information.

Wether the television of the second second	
Client Services - [Client Abstract [Lozano, Pedro - Row #8 ]]	You are currently running Scenario Manager.
🛱 Eile Edit Search Action Associated Attach/Detach Window Help Toolz	
ID Other Names Other Addresses Family Members Referral History Case History	
_ Identification	×
Last Known Residence Address         SSN         Gender         Primary Ethnicity           821 21st St.         567-71-5912         M         Hispanic	
Sacramento, CA 95814     Date of Birth     Age       06/07/1994     9     Missing Child with outstanding warrand	
Birth Place/Hospital Name Birth City	
Client ID Indio	
0154-6709-9581-4001518 Alien Registration # Emigration Country	
Most Recent	
Date of Death Juvenile Court # Drivers License # Last State ID #	
34-42-7654567-2-02	
Parental Rights Termination	
Related Person Date Termination Reason Under Appeal	Vol. Relinquishment
	·
	-
Ready Client Abstract [Lozano, Pedro]	

Id Page – is populated with general identifying information of the client.

Other Names Page – other names the client uses will be displayed here only if they have been recorded on the Names page of the Client Notebook.

Other Addresses – any and all prior addresses of the client will appear here.

Family Members – this page displays family members of the identified client. Individuals listed here are populated from the Related Clients page of the Client Notebook.

Referral History – this page will briefly list the client's past involvement with child welfare services. Each referral will be listed with allegations, conclusions and dispositions of each.

Case History – this page will indicate whether a case is open or had been open at one time for a child. The type of program the client was involved in will be listed here, i.e., Family Reunification, Family Maintenance, Permanency Planning. The assigned worker's name and phone number will also display here.

#### **STEP FOUR**

Attaching Clients to your Referral

Once you have found the clients in the statewide database, you need to Attach them to your referral. This attaches all the child welfare history of the client and will make sure that all forms, reports and documents reflect that history.

The referral you are working on must be 'in focus' in order to use the Attach functionality.

🛣 Client Services - [Referral [1515-7934-5111-1001518]]	You are currently running Scenario Manager.
🕅 File Edit Search Action Associated Attach/Detach Window Help Toolz	_ B ×
Attach Existing Client Attach Existing Reminder Attach Existing Petition Attach Existing Court Report	
Summary ID Reporter Assignment SI Attach Existing Court Report	
- Identification and Common Address - Attach Existing Sub Care Provider	▲
Referral Identification Detach Client	
Date         Time         Referral rvame           09/08/2003         ▼         10:49am	
Screener Report Method	
Common Address	
Street No. Street Name	Ext
County Location of Children	
Address Comment	×
Screener Alerts	
	×
	-
Attaches other Clients to this Case or Referral Referral [1515-7934-5111-1001518]	

Use the Attach Existing Client command to begin the process.

You will now be able to highlight the clients you wish to attach. All persons associated with the client will automatically be highlighted.

m I ier	to Attach	-				0K
						Cancel
r tł	his Referral					
	Local ID	Name	Receiv	/ed Date	Time	<u>S</u> ort
	1515-7934-5111-1001518		09/0	8/2003	10:49 am	
						<u>H</u> elp
						<u> </u>
1						
	la della Officia				•	1
ac	ch this Client	1			•	1
	sh this Client Name	Age(Yrs)	Gender	Birth D	ate 🔺	]
;	1		Gender	Birth D	ate	]
	Name	29		Birth D	ate	
;	Name Lozano, Joseph	29	Male	Birth D.		
; ;	Name Lozano, Joseph Lozano, Pearl	29 28 9	Male Female			
; ; ;	Name Lozano, Joseph Lozano, Pearl Lozano, Pedro	29 28 9 41	Male Female Male		1994	
; ; ; ;	Name Lozano, Joseph Lozano, Pearl Lozano, Pedro Mobukuna, Ifanyani	29 28 9 41 8	Male Female Male Male	06/07/1	1994	
; ; ; ;	Name Lozano, Joseph Lozano, Pearl Lozano, Pedro Mobukuna, Ifanyani Mobukuna, Nicholas	29 28 9 41 8 4	Male Female Male Male Male	06/07/1	1994 1994 1999	
; ; ; ; ;	Name Lozano, Joseph Lozano, Pearl Lozano, Pedro Mobukuna, Ifanyani Mobukuna, Nicholas Mobukuna, Stephen	29 28 9 41 8 4 9	Male Female Male Male Male Male	06/07/1 11/03/1 07/30/1	1994 1994 1999 1999	

Once clients have been attached, review and update the following pages in the Client notebook.

😢 File Edit Search Action Associated Attach/Detach Window Help Toolz \_ 8 × S. 6 \$ K)>> 94 ))) **S** Ti i + || + + + ral [Pedro L] - [Client [Pedro L]] 🗞 Eile Edit Search Act ogiated Attach/Detach Wir \_ 8 × nes Related Clients ID Num Juv. Cit. # Search Log AFDC-FC Att I.C.W.A. Adoption Info AAP Eligib De ıg. Address <u>N</u>a ne<u>v</u>s Ser<u>v</u>ice F Suffix Name Type Legal 💌 Middle Last Marital Status SSN Alien Registration # Yellow - Mandatory Field Date of Birth or Age and Age Unit Driver's License te/Num Periwinkle - Outcome • Client Number 1065-4514-32 Self Reporter Client is a Minor Mothe Measure Field nding Warrant Exists Green - Federal Reporting -Other Client Information Languag Confidentia Primary Language incapacitated Confidentiality In Effect Field (\$\$) O Yes O Yes Spanisł • nary Ethnicity C No C No C Unknown C Not Applicabl ⊙ No Secondary Language English • Effective Date
09/15/2004 C Not Asked C Pending • Jnable to D - Literate Safely Surrendered Bah 🗆 Child has Indian Ancestry C Yes ⊙ No Other Ethnic This Client has been involved in the Safely Surrendered Baby Pro er Ethnicity Indian Ancestry Notification C Unknown C Not Applicable + County Date Date Informed O Yes O No C Declines to State C Unable to Determine Undetermined Unable to Determine - Reon \_\_\_\_

Open the 'Existing Client' and select one of the clients to open.

ID page – Review and update this page with information gathered from the reporting party.

🔀 Client Services - Referral [0010-6509-4129-2000018] - [Client [Pedro Lozano]]	You are currently running Scenario Manager. 💶 🗗 🗙
腔 Eile Edit Search Action Associated Attach/Detach Window Help Tools	X
Image: Support of the second	idere   ICWA/JV-135   Adoption Info   AAP Eliability
_odiminaly to	dets 10494737135 Addgeorning Add Eligibility
+ Type Number Street Name City State Zip County	Phone Messages Comm
1 Residence 100 First St. Fresno California 93705 Sacramento	
-	Þ
	/OL/Abducted
Address Tures Cheet Mars	AWOL
Residence	Abducted
	Not Applicable
Fresno Calfornia 93705	
County Additional Address Header Phone	
Sacramento Primary Ext	
Foreign Country Foreign ZIP (_) - Versage Ext	
Foreign Address Description (Province Name, etc.) Emergency Ext	
Start Date Comment	
08/07/2008 👻 💌 🖂	
Booking/Inmate Number	
×	
Beach Beferral (0010-6509-4129-2000018) -> Client (Perko Lozano)	

Address page – Be sure to complete this page for each client – use the Copy Common Address button to copy address from ID page of the referral if appropriate– be sure to adjust the Address Type to Residence. If address is not the same as common address – use the + plus sign to add the address.

💢 Client Services - Referral [Pedro L] - [Client [Pedro L]]	You are currently running Scenario Manager. 💶 🗙
Elle Edit Search Action Associated Attach/Detach Window Help Toolz	
Image: Sympley ID         Demograph         Demograph <thdemograph< th=""></thdemograph<>	
_ Related Clients	Negleen onders Tream A Adogrammic Twee Engling
+ Relative	Related As
1       Defects         2       L. Joedin         3       L. Pauline         4       L. Pedid         Relative's Name	Grandporez/Dismdton (Matemati) Faher/Son (Bith) Sister/Biother Mother/Son (Bith)
Status     Start Date     End Date     Litelong Connection Status     Start Date     T	
Ready Referral (Pedro L) -> Client (Pedro L)	

Related Clients Page – be sure this page accurately reflects each persons relationship to one another and whether or not they live together.

#### STEP FIVE

Use the 'Create New Client' function (plus + sign) to add any clients you did not find in the statewide database.

🦉 File Edit Search Action Associated Attac	h/Detach Window Help Toolz:		<u>_ 8 ×</u>
	<b>***</b> *********************************		ی ح ۲
🌋 Client Services - Referral [0008-5408-3390-300/018] - [Client [ ]]		surrently running Scenario Manager. <u>_   6   ×</u>	
Ele Edit Search Action Associated Attach/Detach Window Help Toolz		_ <u>= </u> = ×	
	Search Log AFDC-FC Attorneys Service Providers I,C.W.A. A	Adoption Info AAP Eligibility	
Name and Identification		<b>_</b>	
Prefix First Middle Last Suffix Name T	ype		
Gender Marital Status SSN Alien Registration	*		
Driver's License - State/Number Date of Birth or Age and Age		Yellow - Mandatory Field	
		5	
Self Reporter Client is a Minor Mother Client Number	<del></del> .	Periwinkle – Outcome	
	°] - <mark>Race/E thnicity</mark>	Measure Field	
Cother Client Information		Croon Enderel Departing	
C Yes C Yes	Specify Race" if known Primary Ethnicity In Effect	Green – Federal Reporting	
O No Secondary Language	Ineffective Date	Field (\$\$)	
C Not Asked © Unknown C Pending C Not Applicable	Unable to Determine - Reason		
Literate	Other Ethnicity		
Child has Indian Ancestry     C Yes     O Yes     O No	Other Ethnicity		
Indian Anecosty Houncadon			
County Date Ontribution			
	Hispanic or Latino Origin		
County Date Informed			
	C Yes C No		
	C Declines to State		
	C Unable to Determine		
	Unable to Determine - Reason		

#### ID Page

Create a new client and complete the ID page with as much information as possible. Be sure to indicate the gender of the client, if it is left at 'unknown', you will not be able to get approval of the referral. If the date of birth is unknown, be sure to include an approximate age. This is the only way that computer can distinguish between adults and children.

🔀 Client Services - Referral [0010-6509-4129-2000	018] - [Client [Pedro Lozano]]	You are cur	ently running Scenario Manager. 💶 🛃 🗙
E Elle Edit Search Action Associated Attach/Deta	ch <u>Wi</u> ndow <u>H</u> elp Tool <u>z</u>		X
			ی ۵ ۲
	lients ID Num   Juv. Crt. ♯   Search Log   AFDC-FC   A	ttomegs Sergice Providers DWA/JV-135	Adoption Info AAP Eligibility
Address			
+ Type Number Stre 1 Residence 100 First St.	et Name City State Zi Fresno Celfornia 98705	County Phone	Messages Comm
T Residence Tuo Pisc St.	Fresho California 95705	Sacianienko	
•			
			· · · · · ·
Common Address Referral Histo	V Information Displayed Active Copy Comm	AWOL/Abducted	
	- Intelination Displayed, Netwo	C AWOL	
Address Type Street No. Street N Frestence 100 First St.	ame	C Abducted	
City State	ZIP ZIP Ext	Not Applicable	
Fresno California	93705		
County Additional Address Header	Phone		
Sacramento	Primary Ext	_	
Foreign Country Foreign	ZIP Message Ext		
<b>V</b>			
Foreign Address Description (Province Name, etc.)	Emergency Ext	_	
Start Date End Date Comment			
08/07/2008 •		*	
Booking/Inmate Number			
		<b>*</b>	
	,		
Ready	Referral [0010-6509-4129-2000018] -> Client [Pedro Loz	ano]	

Address page – Be sure to complete this page for each client – use the Copy Common Address button to copy address from ID page of the referral if appropriate– be sure to adjust the Address Type to Residence. If address is not the same as common address – use the + plus sign to add the address.

🥈 Client Services - Referral [1226-3324-7344-7001518] - [Client [ ]]	You are currently running Scenario Manager. 🗐 🗙
🖄 Eile Edit Search Action Associated Attach/Detach Window Help Toolz	_ 8 ×
Summary ID Demog. Address Names Related Clients ID Num Juv. Crt. # Search Lo	g   AF <u>D</u> C-FC   Attorneys   Ser <u>v</u> ice Providers   SOC <u>3</u> 18   / • •
Related Clients	
+ Relative	Related As
Relative's Name [[Cien]/[Relative] [Start Date End Date	
Live at the same location 🔲 Parent's Whereabouts Unknown	
Ready Referral [1226-3324-7344-7001518] -> 1	Client [ ]

Related Clients Page – use the plus + sign to activate the page, select the clients to relate. Complete the relationship field to reflect how each person is related to one another. It is critical that this page be completely accurately because it populates many of the forms, reports and documents in CWS/CMS.

#### **STEP SIX** Record the Allegations

Use the 'Create New Allegation' notebook to record the allegations of abuse or neglect alleged by the reporting party.

🌋 Client Services - Referral [0172-2193-5319-9000018] - [Allegation []]	You are currently running Scenario Manager. 💶 🗗 🗙
Je Elle Edit Search Action Associated Attach/Detach Window Help Toolz	_ <u>8</u> ×
ID Conclusion	
r Identification	
People Involved Cccurrence Information	
Alleged Victim  Alleged Perpetrator  Alleged Perpetrator  Alleged Perpetrator  Alleged Perpetrator  Alleged Perpetrator  Alleged Perpetrator  Perpetrator  C Perpetrator Not Identified  For Perpetrator  Information Source  C Added By Investigator  Perpetrator Histoy  Alleged Name	
4 I	× ×
Ready Referral [0172-2193-5319-9000018] -> Allegation []	

Each allegation must be recorded separately for each child. Use the plus + sign to begin each allegation.

Alleged Victim - All children's names will be available under this drop down menu. If a child's name is missing, check that child's client notebook. If gender has not been completed, or the age of the child, their name will not appear here.

Alleged Perpetrator - All other clients will appear under this menu. If perpetrator's name is unknown, leave this field blank. If perpetrator's name is known, select under the menu and use the appropriate identifier: Perpetrator, Non Protecting Parent, or SCP/Res. Facility Staff. *Note: if the perpetrator is a substitute care provider (foster parent) for the victim or staff at a residential facility, it is critical that it be documented as such here in order to meet the CFSR – Safety Outcome Measure S2.1.* 

Abuse Category -Select the category of abuse indicated. For definitions of each, refer to the Child Abuse and Neglect Reporting Act – PC 11165 et seq. If multiple children live in the home, but have not been named a victim, use the 'At Risk, Sibling Abused' allegation for each. 'Substantial Risk' was designed to allow the provision of voluntary and/or preventative services and should only be used after the completion of an investigation and not at Intake (hotline). For more information for the use of this allegation, see ACL 07-52, dated 12/21/07.

Occurrence Information – enter if known. This refers to when the alleged abuse began, and how often it occurs.

## STEP SEVEN

**Cross Reporting Requirements** 

A cross report must be made within 36 hours of receiving the information to the law enforcement agency having jurisdiction over the case, to the agency responsible for investigation of cases under section 300 of the W & I code, and to the District Attorney's office for every known or suspected instance of child abuse or neglect as defined in Section 11166(a) of the Penal Code. All allegations except General Neglect or Substantial Risk require cross reporting to take place.

🜋 Client Services - Referral [0882-1312-4106-3001518] - [Cross Report [09/08/2003]] You are currently runr	ning Scenario Manager. <mark>- 🗗 🗙</mark>
😹 Eile Edit Search Action Associated Attach/Detach Window Help Toolz	
	ی ج ا
Date         Time         Staff Person         Cross Report Type           09/08/2003         04:45pm         Wallace, Chris         Suspected Child Abuse Report	
Title Law Enforcement Official Contacted Phone Number Ext	
Badge Number Reference #	
Department of Justice     Probation     Community Care Licensing	
County Licensing	
Sacramento	
Sacramento County District Atto	
Narrative Description	
Ready Referral [0882-1312-4106-3001518] -> Cross Report [09/08/2003]	

Use the plus + sign to 'Create New Cross Report':

Record the date and time the cross report was completed.

Select the 'Suspected Child Abuse Report' as the type of report.

If the cross report was completed by phone, record the name, title, badge and phone numbers of the individual spoken to and check the box 'cross report not sent'.

If Cross Report is to be sent, check the box for each agency sent to, and select that agency under the drop down menu.

Additional narrative can be recorded in the description box at the bottom of the screen.

Producing the Cross Report Document

## FILE PRINT REPORT

Select the Suspected Child Abuse Report

Print Preview (this will allow you to review the report for accuracy before printing).

Print Report	×
Area of Interest	Print
Referral Reports	
Report Name	Print Preview
Child Abuse Investigatn Report (SS 8583)	
Referral Profile	Print with
Suspected Child Abuse Report	Multi Selection
	0000000
	Cancel
	<u>H</u> elp

Select the referral you are printing the report for.

	ral Nois P	eferral	<b>V</b>			OK Cancel
	Local		Name	Received Date	Time	<u>S</u> ort
T	V	0109-8928-7255-0001519	Anna Lazano	12/04/1999	12:38 pm	<u></u> ort
	1	0570-1885-5613-4001518	Mary and David Scotch	08/14/2002	05:07 pm	<u>H</u> elp
	1	0276-2220-8547-8001543	Nicholas Mobukuna	08/30/2002	09:10 am	<u> </u>
	Ľ	0018-5945-6829-5001518	Pearl Lozano	09/09/2003	09:17 am	
	<b>V</b>	0196-2534-6493-4001518	Pedro Lozano	10/03/2002	03:06 pm	

Complete the dialog box with additional information related to the incident and the history of similar incidents.

Highlight each child's name, then complete the dialogue box with information specific to child. If the information is the same for each child, you can use the 'Copy to Others' command to copy the same details for all children.

Referral Incident Information	(558572)	×
Victims Lozano, Pauline (5) Lozano, Pedro (11)	Present Location At home. School Class Grade Bradley Elementary School If victim was in Out-of-Home Care at time of incident, select type of care:  Not Applicable Day Care Child Care Center Foster Family Home Group Home/Institution	OK Cancel <u>H</u> elp <u>C</u> opy to Others
Physically Disabled? Yes No Other Disability (Specify) Suspects Lozano, Joseph (33)	C Family Friend       C Relative Home         Developmentally Disabled?       Photos Taken?         C Yes       No         O Yes       No         Did the Incident Result in This Victim's Death?         O Yes       No         O ther Relevant Information	
Summarize What Victim(s) or Acco	mpanying Person Said/Similar or Past Incidents Involving Victim(s) or Suspect:	<u> </u>
Check To Print Instructions.	Time of Incident Did Mandated Reporter Witne	ss Incident?

After completing the box, select OK, and the Cross Report will be generated. It will be fully populated, and a copy will be produced for each agency that was checked on the Cross Report notebook page.

After verifying the report for accuracy, Print and Close. This document will not be saved, but can be reproduced at any time with the same steps.

## STEP EIGHT

Determine the Response Time of the Referral

#### Under the **ACTION** menu, Select **Determine Response**

😹 Client Services - [R	Referral [Pearl Lozano]]				_ 8 ×
🕅 File Edit Search	Action Associated Attach/Deta	ch Window	Help Toolz		_ <u>8</u> ×
	Merge Service Providen Merge Cleni Add Associated Referral Determine Response	<b>1</b>			ی د ۲
Summary ID Bepr	Information And Referral				
Assignment					_
+ Casek		у	Start	End	Role Type
1 Academy 1		0	9/09/2003 09:18am		
Responsibility —		Destinati			
Primary C Second		i Desunau	C In-box Caseload		
Details		-			
Start Date St.			ZIP		
09/09/2003 - 0	Insert Placement				
End Date Er			County (or State of California)		
¥ :			Fresno		
Assignment	Limit Access	-	CwS Office		
Weighting Rol	Approvel		Training Academy		
		<b>T</b>	Unit		
			Training Unit 1		
Staff Person	Phone Number Start Date (559) 278-5757 05/18/2001	End Date	Caseload		
T [Luna, Terry	(553) 278-5757   05708/2001		Academy 1		
			Staff Person		
•		Þ	Luna, Teny		
			Phone Number Ext		
			(559) 278-5757		
Determines a response to	this referral	Referral (Pea	l cranol		

The decision whether or not an in-person investigation is necessary shall include consideration of the following factors:

Policy & Procedural Manual 31-105.115

Complete the dialog box as appropriate.

Decision: Selections include 'Immediate', 3 Day, 5 Day, 10 Day and 'Evaluate Out'. (3 & 5 Day Response times are rarely used).

If 'Evaluate Out' is selected, you must enter a rationale discussing why no in person response is appropriate.

'NA Secondary' can be used to identify a 'duplicate report'.

Determine Response			×
Decision Immediate	Rationale	Approval Approval Status Request Not Submitted Date	OK Cancel <u>A</u> pproval
Yes No     Is this an oper adequately ac Yes No     Is the server Yes No     Is the perpetra Yes No     Is the perpetra caretaker was perpetrator ha Are specific a Yes No     Does addition invalidate the Yes No     Does this repo unsubstantiat	ient information to locate the fam n service case with DSS AND is diressing the problem described gation meet one or more of the le ator a caretaker of the child or is s negligent in allowing or unable aving access to the child? tots and/or behavioral indicators cluded in the allegation? report? of represent one in a series of pr ed or unfounded reports from the risk factors are revealed?	<ul> <li>the current intervention in the allegation?</li> <li>igal definitions of abuse?</li> <li>there reason to believe that the or unwilling to prevent the</li> <li>of abuse, neglect, or</li> <li>ateral contacts or record material</li> <li>eviously investigated,</li> </ul>	<u>H</u> elp

Use the Approval button to bring up the dialog box to request approval for the response time you have selected. Select Pending Approval in the Approval Status box, then Click OK.

Approval Detail - <refer< th=""><th>al Response&gt;</th><th>×</th></refer<>	al Response>	×
Approval History		οκ
Approval Status	Date	
1 Pending Approval	09/09/2003	Cancel
		<u>H</u> elp
Approval Status		
Pending Approval		
HI Further Approval Needed B	ly .	
Action Date Action Time	Submitted By	
09/09/2003 🔽 09:50am	Luna, Terry	
Rationale		
		<u> </u>
		~

Once you ask for Pending Approval, you will be prompted to generate the Emergency Response Referral Document. This is the document that is a compilation of the entire referral, including referral history, which is then handed over to the investigating worker. Choose Yes to generate the document.

Determin	e Response 🛛 🕅
?	The Emergency Response Referral Document can be generated now. If it is not generated now, it will be created at the time of Referral closure if it is not generated before that. Do you want to generate this document now?
	<u>Yes</u> <u>N</u> o

Review the document for accuracy. This is a protected document and cannot be changed. The document is populated from the screens previously completed. If changes need to be made, the document must be deleted, the screens where the originating information was entered must be corrected, then the document can be re-generated.

## SAVE TO THE DATABASE

# **QUICK GUIDE TO CREATING COLLATERALS**

A collateral is a person who has specific knowledge of an incident of alleged abuse, or has relevant information about a client. It is important to record them in the Collateral Notebook, so that they will be able to be selected in other notebooks throughout CWS/ CMS.

Create New Collateral:	A collateral is a person who has specific knowledge of an incident of alleged abuse, or relevant information about a client.
Y Address Y (Related Clients)	Complete these three pages with as much information as you have.
	Once you have created a collateral for your referral/case, you will be able to select that collateral as a 'participant' in a contact.
	SAVE TO DATABASE

## RECORDING CONTACTS WITH COLLATERALS

Create New Contact:	Contact	Use the Contact Notebook to record every contact (narrative) that is made on behalf of a child. <i>If more than one</i> <i>child is selected – then that narrative</i> <i>will go to all selected children's</i> <i>cases.</i>
		Under Participants – select <b>COLLATERALS as the Participant</b> <b>Type.</b> Collaterals will appear here to select, if they have been created as in above step.
		Be sure to complete all <b>YELLOW</b> fields.
		Use the 'Spell Check' command under the Edit menu once narrative has been entered.
		SAVE to DATABASE

Recording Education Information and Progress for Children - in CWS/CMS

There should only be one Education Notebook per each school the child has attended. All grades and education records for one particular school can be recorded in that school's notebook.

To begin an Education Notebook for a child – you must search for the school first:

Search	×
Search Type	OK
Education Provider	
	Cancel
	<u>H</u> elp
School Category Public 🗾 💌	
County Fresno 🔽 🗹	
District 📃 📃	
School 🔽 🗹	
School Name	
Street Name	
City	
ZIP Code	
Ownership	

All public schools are loaded into CWS/CMS and updated at least once per year. Most private, independent and home schools are added into the application by each county's designated person. Use the School Category and the County – then you can look under the 'school' drop down menu and look through the list of schools. Usually you will be able to find the school easily that way.

Other helpful ways to search – by city and zip code. Try many different ways before determining the school is not in the system. If unable to locate the school you are looking for, contact your local help desk.

Once you have located the correct school, you can record the child's attendance and records in the child's case.

## **Create New Education**



🛣 Client Services - Case [B, Bobby] - [Education [Ryder High School]]	You are currently running Scenario Manager 8 ×
lie Edit Search Action Associated Attach/Detach Window Help Toolz	
	ی در هؤ ک
Enrollment Information Grade Level Information	
Enrollment Information	<b>_</b>
Education Decision Information	If a superstation of the large the superstand have
Parental Rights to Make Education Decisions for this Child Limited by Court Court Order Date Court Appointed Education Representative Phone Ext	If parental rights have been limited by the court – record here (this will also populate to the demographic page of the
Home Schooled     Education Provider Name     Ryder High School	child's client notebook.)
Start Date End Date Reason Child Left School Likely Graduation Date  Education Provider Contact  Name Title Phone Fax  G. William Principal  Education Provider Address No. Street 318 Pretend St	Record the date the child began attending school here. The end date should be filled in only if the child no longer attends this school and the reason why.
City State ZIP ZIP Ext Sacramento California 95819	
Client Special Education     F Instruction Received Start Date End Date	
Instruction Received Start Date End Date C Yes C No Special Education Needs of This Child	These 'green' fields are data fields required by the NYTD (National Youth in Transition Database).

-

ary Ed/Voc Trai

 $\label{eq:Case B} \mbox{Case [B, Bobby]} \rightarrow \mbox{Client (Case Focus Child) [Bobby B]} \rightarrow \mbox{Education (Ryder High School ]}$ 

ed at Least One Sen

ster of Col

Client Atte C Yes C No

Client Com

O Yes O No d\_I Ready

Complete if indicated.

Use this page to record the child's grade level and the child's education records for each grade level.

🟅 Client Services - Case [B, Bobby] - [I			You are currently running Scenario Manager.
🚁 Eile Edit Search Action Associated	d A <u>t</u> tach/Detach <u>W</u> indo	w <u>H</u> elp Tool <u>z</u>	_ <b>d</b> ×
	) 🚵 🍋 🧽 (		
Enrollment Information Grade Level Informa	ation		
Grade Level Information			· · · · · · · · · · · · · · · · · · ·
+ Grade Start Date	e End Date	Teacher/Counselor	
1 10 11/29/2010			
Grade Start Date Env	d Date Grade Le	vel Performance	
Teacher/Counselor Name	Hours at School	Education Provider Name	
		Ryder High School	J
Educational Needs/School Performance/S	Strengths/Interests		
		<u></u>	
		<b>*</b>	
Education Record			
+ Start Date	End Date	Information Type	
1 11/29/2010	11/29/2010	Attendance Record	
2 11/29/2010	11/29/2010	IEP	
	nformation Type		
	Attendance Record		
Education Record Comments			
Perfect attendance during this quarter.			
		<b>T</b>	
Beady	0 10 1	Bobbyl -> Client (Case Focus Child) (Bobby B) -> Educatio	- ID - 1 - 11 - 1 - 0 - 1 11

Use bottom half of page to record the records that correspond with each grade level.

Education Records:

Attendance Records Child Evaluation IEP IFSP (age 0-3) Progress Record (formal and informal) Year End Report Cards Senate Bill 1368 Safe Haven Law – Commonly known as California Safely Surrendered Baby Law

On January 1, 2001, California became one of a dozen states to enact a new law that is intended to provide for the health and safety of unwanted newborn children. The law states "that no parent or other person who has lawful custody of a minor child 72 hours old or younger may be prosecuted for child abandonment if he or she voluntarily surrenders physical custody of the child to a designated employee at a public or private hospital emergency room or other location designated by the county board of supervisors." No later than 48 hours after taking custody of an abandoned child, the person taking custody is required to notify the county agency responsible for giving child welfare services under W & I Code Section 16501.

Once the child welfare services agency receives notification of a surrendered newborn, a referral must be entered into the CWS/CMS system. The referral should be entered in the system in the usual way with as much information as provided through **STEP SIX**. On Step 6, which is the Allegation page, record the Allegation as 'Caretaker Absence'.

#### Insert STEP SIX-A:

Make sure the referral is in focus, by clicking on the 'Existing Referral' notebook:



🛣 Client Services - [Referral [Monica Raminski]]				_ 8 ×
Eile Edit Search Action Associated Attach/Detach Window E	<u>l</u> elp Tool <u>z</u>			_ 8 ×
				ی ج ا
Summary ID Beporter Assignment Spec Proj				
Special Project	1			
Special Project Name     S-Safely Surrendered Baby	Start Date 06/10/2008	End Date	County Fresno	
Special Project Name Start Date End Date Safely Surrendered Baby Information Surender Information Child Clerk Date Time Burndred Baby Information Child Clerk Date Time Burndred By Relationship to Clerk Morica Raminski Moher (Birkt or Adoptiv Notification Information Parent/Zustodian given ankle bracelet ID information? Parent/Zustodian grovided medical questionnaise? Completed and Returned Immediately Date Questionnaise	Fresno      Fresno      Bracelet ID     Comments      Enter No.		even	
C Completed and Mailed Back Returned C Provided/Never Returned	Attempted Reclaim By	Relationship to Client	Y	
C Declined C Unknown	Date Time	Comments		
Notified Child Protective Services Date Time 06/10/2003 V 09:58am	Successful Reclaim		<u>×</u>	
Referral [Monic	a Raminski]		1	

On the Special Projects page, use the plus + sign in the left corner to begin.

Select S-Safely Surrendered Baby under the Special Project name field.

Then the screen will change to include the required information on a surrendered newborn.

Complete the screen with the information required regarding the person who surrendered the child if known, along with the notification information.

Use the **ENTER** button to record the Bracelet ID number that the child was given at the surrender site.

Enter Bracelet ID	Number	×
Enter the surrendered b	aby's ankle bracelet ID number.	OK
ID Number Type Medical Record	Ankle Bracelet ID 123456	Cancel
Medical Record number	umber is being recorded as a for the surrendered child. mber is displayed on the ID nt notebook.	<u>H</u> elp

That ID number will be populated on to the child's Client Notebook, on the ID Num Page.

Note: The law allows for at least 14 days during which the mother can change her mind and reclaim her baby. That information must be recorded on the Special Projects page of the Referral.

## SAVE TO DATABASE

Information and Referral

When a report is made that does not fall within the purview of CWS and is not recorded as a referral (an incident of alleged abuse or neglect), but is screened and referred to other agencies for potential services, it is reported as an 'Information & Referral'.

To record an I & R in CWS/CMS:

Begin a New Referral – using the plus + sign under the referral folder. Then,

#### ACTION Select Information & Referral

😹 Client	Serv	ices - [R	teferral	[0929-346	5-2938-30015	18]]			You are currer	ntly running Scenario Mana	ager. 🗗 🗙
🧭 File	Edit	Search	Action	Associated	Attach/Detach	Window	Help	Toolz			_ 8 ×
Summary	+	Rep	Merg Add Dete	je Service Pro je Client Associated Ri <b>rmine Respor</b>	eferral I <b>se</b>	<b>∛</b> ∙					
Identifi	-		10100	mation And F							
Befer Date 09/10 Screer	rral Id 1/2003 ner non A	entifica T	Clien Crea Crea Crea End Reop Char Upda	Allegation Co ate Allegation t Disposition, te Continued te Next Hear te Amended I Case ven Closed Ca nge Placemen ate Placement	Perpetrator  Hearing ng ?etition ise t Home	rod ZIP	ZIP 6	Phone Phone Ext () -	Ext	]	1
County	,			rt Placement Counts		bcation of	Children				
Addres	ss Corr		Limit	Access oval	<b>X</b>				×		
Screene	er Alert	8								-	<b>•</b>
Forwards	referra	l to anoth	er ageno	3y	F	eferral [09	29-3465	-2938-3001518]			

This dialog box will appear to allow you to select the agency you referred the client to. You can also select 'Entered in Error' if a mistake has been made.

Information & Referral	×
Type of Agency Referred To	OK
	Cancel
	<u>H</u> elp

A monthly report can be produced each month that reflects the activity of screeners in relation to screening calls that are unrelated to direct child welfare services issues.

## ZIPPY vs. TRADITIONAL Referral

To set computer to Zippy: Under WINDOW in the menu bar, select ZIPPY REFERRAL DISPLAY DEFAULT.

#### Advantages

- ✓ Easy to Navigate
- ✓ All Notebook Tabs available.
- $\checkmark$  Screens are self explanatory and easy to complete.
- ✓ Quick.
- ✓ Relating Clients easier.
- ✓ Adding multiple allegations easier.

#### Disadvantages

- ✓ Ability to put response time not available in Zippy.
- $\checkmark$  No cross reporting ability available in Zippy.
- ✓ Must Save to Database and Retrieve referral to do the above steps.

# Common Problems when Creating Referrals

Child's name doesn't appear in allegation drop down in order to select as a victim:

• Check the Id page of the child's client notebook, the age has probably not been entered.

Items that will cause the Determine Response Approval button not to be enabled:

- If a Common Address is specified, but no client's have been designated as living at the common address. Be sure at least one client lives at the 'common address' on address page of client notebook.
- Gender not specified.
- Yellow field not filled in.
- Reporter has not been specified on Reporter page.

## Deleting an Allegation that has been entered by mistake:

## Prior to Saving to Database

- ➤ Open the Allegation Notebook.
- > Select the allegation you want to delete, then click Remove.

## After Saving to Database

An Allegation can be 'logically' deleted by selecting the conclusion type 'Entered in Error'.

OR

Detach the client that you want to delete the allegation for. Re-attach the client to the referral and the prior allegations are gone.