

Ohio SACWIS Project

Use Case IV09 - Maintain Specialized Assessment/Investigation Tool (UC85) Version 1.9

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Prepared For:



Prepared by:

Dynamics Research Corporation
4010 E. 5th Avenue
Columbus, Ohio 43219

Use Case IV09 - Maintain a Specialized Assessment/Investigation Tool (UC85)

Revision Log

Version	Date	A/D/C (Add, Delete, Change)	Author	Document Section #	Description
1.0	06/16/2004		M. Gagnon C. Roy		Initial version
1.1	8/2/04		T Bendert		Revisions prior to U session
1.2	9/16/04		T Bendert		Revisions w/ new tool information
1.3	9/20/04		T Bendert		Revisions during session
1.4	10/13/04		T Bendert		Final revisions prior to the R's
1.5	2/18/05	A/D/C	T Gillom	All	Tech Edit
1.6	4/26/05	A/D/C	T Bendert	All	Accepted Tech edits and starting Prep for JAD
1.7	4/27/05		T Bendert	All	Pre-JAD
1.8	4/28/05		T Bendert	All	Pre-JAD
1.9	5/1/05		T Bendert	All	Prep for Day 1

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Use Case IV09 - Maintain a Specialized Assessment/Investigation Tool (UC85)

1 Description

This is a CRUD (Create, Read, Update, Delete) use case regarding the primary business entity “Out of Home Care Assessment/Investigation” (Third Party).

The Specialized Assessment/Investigation tool (JFS01403) is designed to capture the Investigative requirements for Third Party (e.g. a report on a PCSA staff member who is named as an alleged perpetrator), out of home perpetrator (stranger), and out-of-home care settings.

1.1 Terminology Key:

Report: A report is an intake with the category of Child Abuse & Neglect (CA/N) or Dependency which is accepted by the PCSA for further investigation or assessment. Safety and family assessments shall be completed on all intra-familial child abuse/neglect and dependency cases.

Assessment/Investigation/Worker: The PCSA employee who responds to reports to ensure child safety, assess risk and determine whether or not a report warrants agency services/involvement. NOTE: For purposes of the assessment/investigation use cases, we will use worker as a generic term.

Assessment/Investigation Supervisor: PCSA employee who supervises an assessment/investigation worker, manages, assigns and approves their tasks. The supervisor can do all CRUD activities within this use case. NOTE: For purposes of the assessment/investigation use cases, we will use supervisor as a generic term.

Third Party Investigation - Investigations of abuse and/or neglect when the following parties are involved as principals:

- a) Any institution, facility, foster or pre-adoptive home which is licensed, or certified by ODJFS and operated or supervised by the PCSA.
- b) Any employee, or agent of ODJFS or the PCSA; or
- c) Any authorized person who is representing ODJFS or the PCSA and who is providing services for payment or as a volunteer.

Out of Home Perpetrator Investigation – is not a member of the ACV’s family, is not sanctioned.

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2 Characteristic Information



Name	IV09 - Maintain a Specialized Assessment/Investigation Tool
Scope	 Business – Assessment/Investigation
Level	 - Primary Task
Primary Actor(s)	Worker, Supervisor
Supporting Actor(s)	N/A
Stakeholders and Interests	<ol style="list-style-type: none"> 1. PCSA 2. Child 3. Parent/Caregiver 4. ODJFS 5. Out of Home Care Settings 6. Licensing Authorities 7. PCPA's
Pre-conditions	<p>A Case is open in SACWIS</p> <p>Create Preconditions: The report involves an out of home care provider, out of home perpetrator (stranger).</p> <p>Read/Update/Delete Preconditions: a Specialized Assessment/Investigation tool has been created in the system</p>
Post-conditions	<p>Create: Contents of Specialized Assessment/Investigation (A/I) tool are recorded in the system.</p> <p>Read: Specialized A/I is displayed</p> <p>Update: Specialized A/I is updated</p> <p>Delete: Not an option after approval</p>
Trigger(s)	An out-of-home care provider, out of home perpetrator (stranger) CA/N report has been received by the PCSA
RFP Requirements Addressed	64, 68, 85, 193

Figure 1 - Characteristic Information

3 Basic Flow

3.1 Usage Examples and Narratives

Scenario 1: Create a Specialized Assessment/Investigation Tool

E.g. A Worker is working on a report involving an alleged child victim in an out-of-home care setting.

Scenario 2: Read (view) an existing Specialized Assessment/Investigation Tool

E.g. A Worker reads or views an existing Specialized Assessment/Investigation Tool.

Scenario 3: Update an existing Specialized Assessment/Investigation Tool

E.g. A Worker needs to add additional information to a “pending” Specialized Assessment/Investigation Tool after it has already been saved to the system.

Scenario 4: Delete a Specialized Assessment/Investigation Tool

3.2 Main Success Scenarios

Scenario 1: Create a Specialized Assessment/Investigation Tool

1. The Worker selects the appropriate case in order to create a new Specialized Assessment Investigation tool and navigates to the list of Specialized Assessment Investigation tools associated to the case.
2. Worker selects the option to create a new Specialized Assessment Investigation tool.
3. Worker identifies Intake(s) to associate with the Specialized Assessment Investigation tool.
4. The Worker selects which persons to include in the Specialized Assessment Investigation tool.
5. The System displays a distinct list of all active case members.
6. System autofills investigative Interview information in Section 4 via CM30 Record Casework Activity Log on the printed form.
7. The System autofills Intake category and types from the associated intake(s).
8. The Worker records the Assessment of Safety details.
9. The Worker records the findings and summary of investigation details.
10. The System autofills the associated intake allegations and case disposition.
11. The Worker selects the rationale(s) for each identified report disposition.
12. Worker records “who” performed the interview with the alleged perpetrator.
13. Worker sends the Specialized Assessment/Investigation Tool to their supervisor for approval via CF10 Route and Apply Approvals (UC256).

4 Alternate Flows

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5 Important and Required Fields

MSS or AF Step	Fields
MSS 1 Step 3	<p>Assessment/Investigation Tool details are autofilled by the system and are displayed as non-editable.</p> <ul style="list-style-type: none"> • Case name • Case Number • Date of Report(s) • Type of Allegations • Case Worker Name <p>Information is pulled from the linked report.</p>
MSS1 Step 5	<ul style="list-style-type: none"> <input type="radio"/> Third Party Investigations <input type="radio"/> Out-of-Home Care Investigation <input type="radio"/> Out-of-Home Perpetrator (Stranger Report) Investigation <p>*worker selects only one so it should be a radio button, not a checkbox.</p>
MSS 1 Step 7	<p><u>Identifying Information:</u></p> <p>Children from the Case</p> <ul style="list-style-type: none"> • Name • DOB • Age • Roles
MSS 1 Step 8	<p>Date field</p> <p>Time field</p>
MSS 1 Step 9	<p>Adults from the Case</p> <ul style="list-style-type: none"> • Roles & Relationships to children • Caregiver <p>(Worker needs ability to add/remove person(s) easily from within the Assessment/Investigation Tool.)</p>
MSS 1 Step 10	<p>Date field</p> <p>Time field</p>
MSS1 Step 11	<p>Out-of-home Administrator Notification:</p> <ul style="list-style-type: none"> • Who notified • Date notified • Time notified • How notified (pick list) <p>Questions:</p> <ul style="list-style-type: none"> • Were the requirements of the Agency discussed at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No • Were the requirements a third party discussed at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No • Was the licensing agency/supervising authority notified by the next working day? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> ▪ Who Notified (text box) ▪ Date Notified ▪ Time Notified ▪ How Notified (pick list)

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MSS or AF Step	Fields
MSS 1 Step 12	<p>Assessment of Safety</p> <ul style="list-style-type: none"> • Describe any signs of present danger (safety factors) identified during the investigation. (text box) • Describe any conditions that negatively impact the well-being of the child. (text box) • Describe any historical information that contributes to present danger for this/these child(ren) (text box) • Describe any child vulnerability that contributes to or decreases the well-being of the child. (text box) • What strengths and resources does the substitute care setting have that can reduce, control and/or prevent threats of serious harm? (text box) • Was the removal of the child(ren) from the substitute care setting necessary to control any identified safety threats? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> – If Yes, has the child been placed in another substitute care setting? <input type="checkbox"/> Yes <input type="checkbox"/> No • Was the child's vulnerability considered in relation to the new placement? <input type="checkbox"/> Yes <input type="checkbox"/> No
MSS 1 Step 13	<p>Interview Information</p> <ul style="list-style-type: none"> • Alleged Child Victim(s) (text box) • Caretaker/staff (text box) • Alleged perpetrator(s) • Witnesses (text box)
New step 10	<p>Question: Was the interview with the alleged perpetrator performed by:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Law enforcement <input type="checkbox"/> Prosecuting Attorney <input type="checkbox"/> Other <input type="checkbox"/> PSCA <p>Question: Was the alleged perpetrator(s) notified during the initial contact that they were named as the alleged perpetrator? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
MSS 1 Step 14	<p>Findings and Brief Summary of Investigation</p> <ul style="list-style-type: none"> • Final Disposition of allegations in report <ul style="list-style-type: none"> <input type="radio"/> Substantiated <input type="radio"/> Indicated <input type="radio"/> Unsubstantiated • Date • Secondary Findings (text box) • Statements to support the above disposition/finding (text box) <p>Questions:</p> <ul style="list-style-type: none"> • Was case disposition completed within 30 days? <input type="checkbox"/> Yes <input type="checkbox"/> No • Was case disposition completed within 45 days? <input type="checkbox"/> Yes <input type="checkbox"/> No • Were the parents notified of the case disposition within two days? <input type="checkbox"/> Yes <input type="checkbox"/> No • Was the alleged perpetrator notified of the disposition

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MSS or AF Step	Fields
	<p>within two days of the disposition date? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> • Was the out-of-home administrator notified of the disposition within three working days of completion? <input type="checkbox"/> Yes <input type="checkbox"/> No • Is there a copy of the third party report in the case record? <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>This information was in the original version of IV09 I wanted to make sure we did not lose.</p>	<p>Out of Home setting information:</p> <ul style="list-style-type: none"> • Number of children in setting • Number of children under alleged child victim's caretaker • Out of Home Care setting • Address • Telephone • Licensing Authority • Facility Director/Person Responsible Information: <ul style="list-style-type: none"> ⋮ Name ⋮ Phone Number • Directions to Out of Home Caretaker setting

Figure 2 - Important Fields

6 Special Requirements

6.1 *Alerts and Notifications*

7 Notes, Background Information, User Interface Ideas

Out of Home setting information is the same as is available for intake workers and used in IN01 Record Referral Information (UC64).

7.1 Business Rules

Separate cases for each child that is involved in an institutional referral. (Unless the kids are siblings)

- 0: Report Involves a developmental center managed by Ohio Department of Mental Retardation and Developmental Disabilities (ODMR/DD) or a foster or group home licensed by ODMR/DD*
- 2: Report Involves any program managed by the County Board of ODMR/DD*
- 3: Report Involves a Residential Care Facility Licensed by the Ohio Department of Mental Health (ODMH)*
- 4: Report Involves an Institution or Facility for Delinquent Children managed by the Ohio Department of Youth Services (ODYS)*
- 5: Report Involves a Detention or Rehabilitation Facility managed by a Juvenile Court And Approved by ODYS*
- 6: Report Involves a Primary or Secondary School Setting*
- 7: Report Involves the School for the Deaf or Blind Managed by ODE and Early Education Program such as Head Star*
- 8: Report Involves a Foster Home, Group Home or Children's Residential Facility licensed by ODJFS*
- 9: Report Involves a Day Care Center (More Than Twelve Children) or a Type A Family Day Care Home which is or should be licensed by ODJFS*
- 10: Report Involves an in-home aide who is certified by the County Department of Job and Family Services (CDJFS) or a Type B Family Day Care Home which is certified by the CDJFS*