Initial Assessment – Secondary or Non Caregiver

- A secondary or non-caregiver assessment will be completed if the alleged maltreatment is by someone outside the family
- Note: To create an Initial Assessment Secondary or Non Caregiver, assignment to the case is needed. Security is needed to create an Assessment.

Related User Guides

Documenting ICWA Notification & Review Process for Substantiated Maltreaters

- 1. From hyper drop-o
- 2. On the Asses Click

Initial Face-to-Face Contacts Serious Incident (Act 78)

link down e Cre smer Crea	• Create case • next to the eate Case W • t drop-dow	to the Cases tab and click the work or select 'Create Case We e specific case to open the Cre Vork page, select 'Assessment vn, and select the family from	ork eate ? fi	c' from the Actions e Case Work page. rom the	Actions: Please select an action Case Note Criteria Search Create Assignment Create Case Note Create Case Work Create Meeting Print Case Record View Tasks						
e WiS	SACWIS				Prir						
Croate C	aco ltoma			Cases							
create c	ase Items			Cases							
	ninistration	~		American, Annie M. (9221587) Amp, Audrey (9222680) Amsterdam, arnie (9221941) Anderson, Amy (20243)							
📮 Agr	eements/Notices	~		Anderson, Anita (9221748) Andrews, Parent (9221217) Angel, Ali (9224596) Anteater, Allen (9224516)							
Ass	sessment	Assessment		Anteater, Mother (9223033) Apple, Arlene Q. (9225336) Apple, Bad (9225356) Apple, Child (9222765)							
📩 Cas	se/Perm Plan	~ ~		Apple, Eve (20279) Apple, Gala (9224096)							
🞓 Edu	ucation	~]	Apple, Josh D. (9221432) Apple, Mom (9221279) Apple, Mom (9225216) Apple, Bod (9223013)							
🔽 Elig	jibility	~									
🗙 ICP	PC .	~									
C ICN	VA	~									
🔥 Ima	aging	~		Case Participants							
🐴 Leg	jal	~		America, James, Grandparent (92244 American, Annie M., Reference Person American, Bay, Bisland (9220	n (9223760)						
🗐 Nar	rrative	~		American, Boy, Biological Child (9229) American, Jack, Present Spouse (922) Andrews, Annie M., Biological Child (92) Andrews, Fannie, Biological Child (92)	3669) 222721)						
💽 Pay	/ment	~		Minnesota, Aunt, Aunt (9229593) Person, New Q., Adoptive Child (9232							
🔅 Per	manency Consult	~									
🍋 Plac	cement/Services	~									
🛡 Plar	nning	~									
🔺 Safe	iety	~									
Safe	ety Services	~									

~

Strengths and Needs

Create Clo 3. If a pending assessment exists, the following message will display:



- Click Yes to open the Assessment Report Link page. Click No to close the message and return to the desktop.
- 4. If a pending assessment does not exist, the Assessment Report Link page opens and shows all screened-in CPS Reports available to be linked to the Assessment. Select the checkbox next to the CPS Report(s) to be linked and click Continue to open the Assessment page.

🧉 Asse	essment - Work - Microsoft Edge		
0			
e] ^{As}	sessment Report Link		Print 🚔 Help 🤋
	CPS Reports		
As	Report Name	Supervisor Screening Date	Date and Time Report was Received
Na	Fannie Andrews	06/10/2022 08:46:00	06/09/2022 08:00:00
As			
			Conținue <u>C</u> lose

Assessment - Participants Tab

5. The Assessment page opens to the Participants tab. Click the <u>Roles</u> hyperlink to add the role of Alleged Maltreater to the appropriate participant(s).

Rol	es		Print 🖻	i Help 🔋		
F	Participant					
	Name:	American, Jack				
F	Roles					
	Select		Roles Description		Code	
ſ	V		Alleged Maltreater		АМ	
			Alleged Victim		AV	
			Household Member		НМ	
			Non-Household Member		NM	
			Parent/Parental Role	PR		
			Report Name		RN	
			Reporter		RP	
						Conținue

- Additional active case participants can be added by clicking Insert.
- In the ICWA Record column, a <u>Create</u>, <u>Edit</u>, or <u>View</u> (when in view only mode) hyperlink will display for each participant. All participants under 18 should have an ICWA record documented. If a participant is under 18 and has a birth date documented the Create hyperlink will be highlighted. The Assessment cannot be approved until and ICWA record is documented. See the ICWA User Guide for more information.

Assessment - Work - Microsoft Edge								- (
🧔 🗅										
WiSACWIS					Res	ource 🗐	тм 🥹	Print 🖨	Help	
Assessment				Report						
Name: American, Annie M.	Jame: American, Annie M. Assessment ID: 9223623 Status: Open					Response Time: Within 24 - 48 Hours Date: 06/09/2022				
Participants Basic			Allega	ations	Contacts			Res <u>u</u> lts		
Assessment Participants					^		~			
Name	Gender	DOB	Race	1	CWA Record	Roles		Edit	Roles	
American, Annie M.	Female	08/08/1970	Asian	E	Edit	HM-PR-F	RP	Roles	ŝ	
Andrews, Fannie		01/01/2020	Asian	Q	Create	AV-HM-F	RN	Roles	ž	
Andrews, Annie M.	Female	01/01/2006	White	g	Create	AV-HM		Roles	ž	
American, Jack	Male	06/01/1973		ç	Create	AM-HM-F	PR	Roles	5	

Assessment - Basic Tab

- 6. Next, click on the Basic tab. Select the appropriate Living Arrangement of the Child(ren) drop-down option and up to three Family Characteristics/Conditions.
 - If there are no applicable characteristics or conditions, select 'None Observed.'

Assessment - Work - Microsoft Edge				- 0 X
eWiSACWIS			Resource 🗐 T	'M 🍳 Print 🚔 Help <table-cell></table-cell>
Assessment Name: American, Annie M.	Assessment ID: 9223623	8 Status: Open Response Tin	ne: Within 24 - 48 Hours	Date: 06/09/2022
Participants	<u>B</u> asic	Allegations	Contacts	Res <u>u</u> its
Case Name Information C/O: Street #: 123 City: Abbotsford Phone:	Street: Main State: WI Ext.:	Apt.: Zip: 54405 Alt. Phone:	Country: United St Alt. Ext.:	tates
Fax: Language Preference: English				
Living Arrangement of the Child		l, marital status unknown		~
Family Characteristics/Condition Family Characteristics/Conditions: Family Characteristics/Conditions: Family Characteristics/Conditions:	Blurred roles and bour	ndaries within family	✓✓✓	
Options:	✓ <u>G</u> o			Save Close

Assessment - Allegation Tab

7. The Allegations tab pre-fills with the allegations documented on the CPS Report. Complete the allegation(s) by clicking the <u>Edit</u> hyperlink to open the Allegation (Assessment) page. Select the appropriate maltreatment determination, date of maltreatment, and answer the remaining questions by selecting the appropriate radio buttons. Additional fields may be required depending on the answers selected.

Note: If a death has occurred, see the "Recording a Date of Death for a Child" section of this guide. If allegations rise to the level of a Serious Incident, Wisconsin Act 78 requires county agencies and the Division of Milwaukee Child Protective Services (DMCPS) to report these incidents to the Division of Safety & Permanence (DSP) within 2 working days of the agency learning about the incident. See the Serious Incident (Act 78) User Guide for more information.

8. Additional allegations can be added. Click Insert within the Allegations section to open the Allegation (Assessment) page.

WiSAC	CWIS				Resource	🗐 тм	Print	🖨 Help
					Resource			- <u>-</u>
ssessmen	t			Report				
lame: Ameri	ican, Annie M.	Assessment ID	: 9223623 Status: Open	Response Time: With	in 24 - 48 Hours		Date: 06/	09/2022
<u>P</u> artic	cipants	<u>B</u> asic	Allega	tions	C <u>o</u> ntacts		Re	s <u>u</u> lts
llegations	;							
Report ID	Alleged Victim	A/N Code	Determination	Dt or Approx Dt of Alleged Mal	Resided in OHC	Medical	Fatality	
	Annie M. Andrews	Physical Abus Describe	se Pending	06/01/2022	Ν		N	<u>Edit</u>
0	Fannie Andrews	Physical Abus Describe	se Pending	06/01/2022	N		Ν	Edit
9246955								Inser
laitreater(s			Relationshin to Victim		Determinati	0.0		Inser
laitreater(: Alleged Ma			Relationship to Victim		Determinatio	on		Inser
Taltreater(s Alleged Ma			Relationship to Victim Biological Parent(s)		Determination	on	~	Inser
Taltreater(s Alleged Ma	altreater					on	~	Inser
laitreater(s Alleged Ma	altreater					on	×	
Taltreater(s Alleged Ma	altreater					on	¥	
The basis for	altreater r this determination is a	s follows:	Biological Parent(s)	ed victim(s) in Agency leg	Pending		×	
Alleged Ma	altreater r this determination is a nt County o	s follows:	Biological Parent(s)	ed victim(s) in Agency leg	Pending			

9. When inserting a new allegation, select an Alleged Victim from the drop-down. Select the type of abuse or neglect from the Abuse/Neglect Code drop-down.

e A	ssessment - Work - Microsoft Edge		
Ø			
e	Allegation (Assessment)		Print 🚔 Help 😯
WA	Allegation		
As	Alleged Victim:		Fannie Andrews 🗸
N	Abuse/Neglect Code:		Physical Abuse 🗸 🗸
	Description		Bruising
N	Determination:		Pending 🗸
A	Date or Approximate Date of Alleged Maltreatment:		06/01/2022
l r	Alleged Victim received medical treatment as a result of this alleged maltreatment:		● Yes ○ No
	Was there an open out-of-home placement documented in eWiSACWIS at the time of the alleged maltreatment?	Details	🔾 Yes 🖲 No 🔿 Unknown
	Serious Incident Details		⊖Yes ●No
1	Serious injury, as determined by a physician <u>Details</u>		
	Death / Alleged maltreatment Details		
	Egregious incident Details		
M	Death / Alleged suicide in OHC		
Г	DCF memo 2010-01 Act 78		
			Save Close

10. Next, click the <u>Description</u> hyperlink to open the Description page. Select up to three values that apply and click Continue to add and return to the Allegation (Assessment) page. For definitions of the Descriptions, click the Resource button at the top of the page.

escription	Select	Description			
-	Select	Description			
pandonment		Description	Select	Dese	cription
		Internal Injury		Unbo	orn Child Abuse
ousive Head Trauma		Lack of Medical Care			
uising		Lack of Necessary Care			
ım/Scald		Lack of Supervision			
aregiver Alcohol Abuse		Malnutrition			
aregiver Drug Abuse		Medical Crisis-No Care b/c of Religion			
ut/Laceration/Bite		Mutual Sexual Activity			
slocation/Sprain/ Bone Fracture		No Indicators/Injuries Observed			
ug Affected Infant		Other Indicator/Injury			
posure to Controlled Substances		Permanent Impairment			
posure to Elements or Environmental Hazards		Severe Emotional/Behavioral Problems			
posure to genitals/pubic areas		Sex Trafficking			
ilure to Thrive		Sexual Contact/Intercourse			
atal Alcohol Spectrum Disorder		Sexual Exploitation			
orced Viewing of Sexual Activity		Sexually Transmitted Disease			
enital Area Bruising, Red/Swollen, Fissures/Tears		Threatened Abuse/Neglect			
		Unable to Locate Children			Continue Close
u ar ar ar ar ar ar ar ar ar ar ar ar	ising ising in/Scald egiver Alcohol Abuse egiver Drug Abuse egiver Drug Abuse caceration/Bite faceration/Bite ga Affected Infant essure to Controlled Substances essure to Controlled Substances essure to Elements or Environmental Hazards essure to Genitals/public areas essure to Elements or Environmental Hazards essure to Element	ising	Image: Control of Contro	IsingIIsingIsingIIsingIsingIIsingIsingIIsing	IsingIisingI

11. Select the appropriate Determination and enter the Date or Approximate Date of Alleged Maltreatment. Select the appropriate answer the remaining questions.

Serious Incidents

- If 'Yes' is selected for Serious Incident, select the appropriate checkboxes related to the Serious Incident.
- If allegations rise to the level of a Serious Incident, Wisconsin Act 78 requires county agencies and the Division of Milwaukee Child Protective Services (DMCPS) to report these incidents to the Division of Safety & Permanence (DSP) within 2 working days of the agency learning about the incident. See the Serious Incident (Act 78) User Guide for more information.
- Click the <u>DCF memo 2010-01</u> and <u>Act 78</u> hyperlink to access the memo and act regarding Child Welfare Public Disclosure 2009 Wisconsin Act 78.

Note: If a death has occurred, see the "Recording a Date of Death for a Child" section of this guide.

- 12. Click the Save button when completed. Click the Close button to return to the Assessment page.
- 13. Next, complete the Maltreater(s) section on the Allegations tab. For substantiated allegations, complete the narrative for the 'The basis for this determination is as follows:'

Assessment -	· Work - Microsoft Edg	ge							_	o x
0										
eWiSAC	SWIS						Resource	ТМ	Print	🛔 Help 😡
Assessmen	t				Report					
Name: Ameri	can, Annie M.	Assessment ID	D: 9223623 Status: Open Response Time: Within 24 - 48 Hours Date: 06/0						9/2022	
Partic	Participants Basic			Allega	Allegations Contacts Results					
Allegations										
Report ID	Alleged Victim	A/N Code		Determination	Dt or Approx Alleged Mal	Dt of	Resided in OHC	Medical	Fatality	
9246955	Annie M. Andrews	Physical Abus Describe	se	Pending	06/01/2022		Ν		N	<u>Edit</u>
O 9246955	Fannie Andrews	Physical Abus Describe	se	Pending	06/01/2022		Ν		N	<u>Edit</u>
Maitreater(s	5)									Insert
Alleged Ma	ltreater		Relationship to Victim				Determinatio	on		
The basis for	this determination is a	as follows:	Biological I	Parent(s)			Pending Not able to lu Unsubstantia Substantiate	ated	• 💦	
	t County	of		□ 1 0 1 5 - 2 1						l <u>n</u> sert
Independer Investigation Options:	Originat	ion:	~	L is the alleg	ed victim(s) in Age	ency legal	and/or physica	ai CusiOdy		Save Close
opaolo.		✓ <u>G</u> o								

• Only individuals with the role of 'AM' (Alleged Maltreater) on the Participants tab will be available in the Alleged Maltreater drop-down.

Name	Gender	DOB	Race	ICWA Record	Roles	Edit Role
American, Annie M.	Female	08/08/1970	Asian	Edit	HM-PR-RP	Roles
Andrews, Fannie		01/01/2020	Asian	Create	AV-HM-RN	Roles
Andrews, Annie M.	Female	01/01/2006	White	Create	AV-HM	Roles
American, Jack	Male	06/01/1973		Create	AM-HM-PR	Roles

- Each allegation may have different maltreaters. Select the radio button next to the allegation to view the maltreater(s) for that allegation.
- Click Insert within the Matreater(s) section to add a maltreater for an allegation.

Note: At least one substantiated maltreater must be identified when the maltreatment has been substantiated. If maltreatment is unsubstantiated, all maltreaters will default to unsubstantiated.

Assessment - Contacts Tab

14. The Contacts tab is view only; displaying any linked Assessment Contacts. If no contacts have been entered yet, the page will be blank.

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/2022
ilts
e/Time
Save Close
1

• Once entered, each contact will display:

Assessment -	Work - Microsoft Edge							-	o x
0									
eWiSAC	WIS					Resource	e 🗐 🛛 TM (🧿 🛛 Print 🖨	Help 🖯
Assessment	t				Report				
Name: American, Annie M. Assessment ID: 9223623 Status: Oper					Response	Time: Within 24 - 48 Hour	s	Date: 06/09/2	2022
Partic	Participants Basic Alle			Allega	ations C <u>o</u> ntacts Res <u>u</u> lts				ts
Contacts									
Note ID	Name		Affiliatio	n/Rltnship		Title	Date	Contact Date/	Time
<u>9226418</u>	<u>9226418</u> C.C.		Case Ma	nager		Social Worker	06/10/2022	06/10/2022 09:	:00 AM
Options:		✓ <u>G</u> o						5	<u>S</u> ave <u>C</u> lose

Assessment - Results Tab

- 15. The Results tab is mostly view only and pre-fills information from completed work on the Assessment and pre-fills information based on the type of Assessment being entered.
 - If the Assessment Result is "Not able to locate source" and the value in the Case Disposition section is anything other than "Case Closed Clients Unavailable or Cannot be Located" at the time of approval, a message displays to alert the worker that the values do not align and allow correction of the data prior to final approval.

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🧔 🗅									
eWiSACWIS				Resource	Пт	м 😧	Print 🖨	Help	p 0
Assessment			Report						
Name: American, Annie M.	Assessment ID: 9223623	3 Status: Open	Response Tir	me: Within 24 - 48 Hours		Da	ate: 06/09/2	2022	
Participants	Basic	Alleg	ations	Contacts			Res <u>u</u> lf	ts	
Assessment Results			Family RA F	uture A/N	Safet	ty Asse	essment		
Result: Pending			Abuse Score:		Safet	ty Decisi	.on:		
Disposition			Neglect Score:		Strengths and Needs				
			Risk Level:		Needs Level:				
Initial Face-to-Face Contac	ct Information								
Initial Face-to-Face Must Occur	By:				Create Ir	nitial Fac	e-to-Face C	ontact No	<u>ote</u>
Initial Face-to-Face Documente	d:								
Birth to Three Referral Info	ormation								
	substantiated assessment, an auto generate a referral at any time on th				to 3 years	s of age	with a subst	tantiated	
Alleged Victim			DOB		Referred	I			
Options:	✓ <u>G</u> o							<u>S</u> ave	<u>C</u> lose

• If the child is under three years old and has a substantiated allegation(s), an automated referral will be submitted by eWiSACWIS nightly. The referral requires there to be a Gender and Date of Birth document on Person Management of the alleged victim. These fields will need to be documented for a Birth to Three referral to be created. Once an approved substantiation is saved, the Birth to Three Referral Information section will show a pending referral. Once sent over night, it will display as sent in the Referred column. A manual referral can be submitted on the Education tab of Person Management. Only one referral type will be allowed by eWiSACWIS per day.

Confirmation	
The Gender of the child must be documented prior to creating a Birth to Three Referral.	
	Close

- **Note:** After the initial Save of the page, the Initial Face-to-Face Contact Information automatically calculates when the Initial Face-to-Face Must Occur By.
- 16. Next, select the Create Initial Face-to-Face Contact Note hyperlink to open the Case Notes page.
- 17. When created from the Results tab of the Assessment, the Case Note Category will pre-fill as 'Initial Assessment Contact' and Type as 'Initial Face-to-Face'. Enter the appropriate information and narrative. Once completed, click the Save button. Click Close to return to the Results tab of the Assessment page.

Note: For more information on this process see the Initial Face-to-Face Contacts User Guide.

Case Notes				Print 🖨 Help 🕄	
Case: Amer	ican, Annie M (9221587)	Worker Creating Note:	Cake, Caltlin C.	Worker Making Contact:	Cake, Caitlin C. Search
Case Note ID:		Date Entered:	06/10/2022 10:30 AM	Note Finalized	Contact By Designee
Note Information					
Date:		Category:	InitI Assess Contact	View Inactive Participants	
Begin Time:	« June 2022 »	Type:	Initial Face-to-Face	Participants:	
End Time:	Su Mo Tu We Th Fr Sa 29 30 31 1 2 3 4	Type Detail:	~	America, James (Grandparent) American, Annie M. (Refernce Person) American, Boy (Bio Child) American, Jack (Present Spouse)	^
Duration:	5 6 7 8 9 <mark>10</mark> 11	Face-to-Face Location: Details	~	Andrews, Annie M. (Bio Child) Andrews, Fannie (Bio Child)	~
Billable	12 13 14 15 16 17 18 19 20 21 22 23 24 25	Face-to-Face Result:	~	Hold down the 'Ctrl' key for multi-selection	
	26 27 28 29 30 1 2			Add Contacts	
Narrative	3 4 5 6 7 8 9				
Case Note 1/1 Details	Today				Create Structured Case Note
Assessment Contact Inform	ation				
Assessment Contact Info	mation				
Begin Date: 06/09/2022 08:0	✓ MA C				
Name	Affiliation	Title	Contact Date		
					Insert
				Inset	Correction Note Clear Fields Create Save Close

18. On the Assessment page, the date the Initial Face-to-Face Documented date and time pre-fill. The Case Note ID number pre-fills and is a hyperlink to the case note.

Assessment			Report		
Name: American, Annie M.	Assessment ID: 9223623	Status: Open	Response Time	: Within 24 - 48 Hours	Date: 06/09/2022
Participants	Basic	Allega	ations	Contacts	Res <u>u</u> lts
Assessment Results	^		Family RA Fu	ture A/N	Safety Assessment
Result: Substantiated			Abuse Score:		Safety Decision:
Disposition			Neglect Score:		Strengths and Needs
			Risk Level:		Needs Level:
Initial Face-to-Face Contact Information					
Initial Face-to-Face Must Occur By:			CPS Report 92469		Create Initial Face-to-Face Contact Note
Initial Face-to-Face Documented:	06/10/2022 09:00 AM		Case Note ID 922	<u>6418</u>	

IA Secondary or Non Caregivers

19. Click on the Basic tab to access the IA Secondary or Non Caregivers page. Select 'IA Secondary or Non Caregivers' on the Options drop-down and click Go.

	<u>P</u> articipants	<u>B</u> asic	Allegations	Contacts	Res <u>u</u> lts
Case	Name Information			~	
C/0:					
Street	#: 123	Street: Main			
			Apt.:		
City:	Abbotsford	State: WI	Zip: 54405	Country: United Sta	les
Phone	c	Ext.:	Alt. Phone:	Alt. Ext.:	
Fax:					
Langu	age Preference: English				
Living	Arrangement of the Child	(ren)			
Living	Arrangement of the Child(ren):	Two parent household, ma	arital status unknown	~	
Family	/ Characteristics/Conditior	ns			
Fami		Blurred roles and boundar	ies within family	1	
Fami	Actions Approval Extension		~		
Fami	Link Report to Assessment Serious Incident Notification Assessment		~		
	Actuarial Family RA Future A/N IA Narrative				
	Strengths and Needs Clinical IA Primary				
Options:	IA Secondary or Non Caregiv Checklist IA Checklist	<u>G</u> o			Save Close
	SS Checklist Ongoing Checklist Text				
	Mandated/Relative Reporter N Safety Services Cover Sheet	lotice			€ 100% ▼ .:

20. The following message will appear. Click Yes to continue, or No to not save the Assessment and return to the page.

Confirmation	
This will save the Assessment Information. Do you want to continue?	
	Yes No

IA Secondary or Non Caregivers - Participants tab

21. On the Initial Assessment – Secondary or Non Caregivers page, start by identifying the participants by clicking Add/Edit within the appropriate Child or Parent Information section. When clicked, the Case Participant/Collaterals page opens.

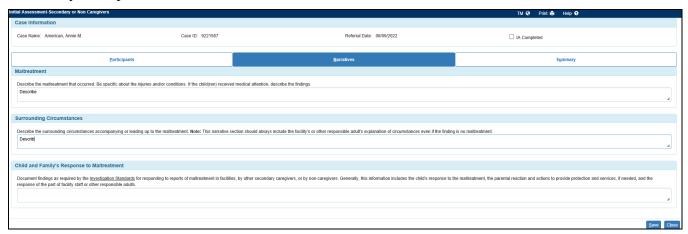
Assessment - Work - Microsoft Edge			
1 🗅			
Initial Assessment-Secondary or Non Caregivers			TM 🥝 Print 🚔 Help 😡
Case Information			
Case Name: American, Annie M.	Case ID: 9221587	Referral Date: 06/09/2022	IA Completed
			· · · · · · · · · · · · · · · · · · ·
Participant	IS	<u>N</u> arratives	S <u>u</u> mmary
Child Information			
Child Name		DOB	
American, Annie M.		08/08/1970	
Andrews, Fannie		01/01/2020	
			Add
Parent Information			
Parental Role Name		DOB	
American, Jack		06/01/1973	
Andrews, Annie M.		01/01/2006	
			Add
			Save

22. Select the checkbox next to the participant(s) to be added and click Continue to add the participant and return to the Part. Info tab.

Select	Person Name	DOB
	America, James	01/18/1966
	American, Annie M.	08/08/1970
	American, Boy	01/01/2004
	American, Jack	06/01/1973
	Andrews, Annie M.	01/01/2006
	Andrews, Fannie	01/01/2020
	Minnesota, Aunt	
	Person, New Q., Sr.	03/04/2010

IA Secondary or Non Caregivers - Narratives tab

23. On the Narratives tab, complete the Maltreatment, Surrounding Circumstances, and Child and Family's Response to Maltreatment narrative sections.



IA Secondary or Non Caregivers - Summary tab

- 24. On the Summary tab, complete the Case Disposition and Correspondence sections. The Summary section identifies the closing summary and supervisory comments.
- 25. The Summary tab also contains a Correspondence documentation section for a Mandated Reporter or Relative Reporter. Enter the appropriate information.

Note: These templates are available under the Options drop-down of the Assessment page.

0,	Assessment - Work - Microsoft Edge		- 0 ×
6	1 🗅		
e	Initial Assessment-Secondary or Non Caregivers		TM 🥹 Print 🚔 Help 9
WA	Case Information		
As	Case Name: American, Annie M. Case ID: 9221587	Referral Date: 06/09/2022	
N	Participants	Narratives	Symmary
	Case Disposition		
A	Case Closed Reason Case Closed: Case Opened Reason Case Opened.	×	
	Mandated Reporter		
	Not applicable Date mandated reporter given feedback: 000000000		
_	Relative Reporter		
	Not applicable		
	Documented request for information received from relative reporter: 00/00/0000		
	Date Letter Sent: 00/00/0000 OR Date of Court Order Barring Disclosure: 00/00/0000		
	Licensing Notification		
	Not applicable		
	Date Licensing/Regulatory Agency Notified: 00/00/0000		
	Summary		
	Closing Summary/Supervisor Comments (Include any referrats to community resources that were made):		
Optic	Options: Go		
			Save Ciose
		N	R 100% 👻

- 26. Select 'IA Secondary or Non Caregivers' from the Options drop-down and click Go to open the text template.
- 27. When the IA Primary is complete, check the 'IA Completed' checkbox. This checkbox must be checked prior to approval. Click Save, and then Close to return to the Assessment page.
- 28. On the Assessment page, verify information on all the tabs is complete. If applicable, link any new CPS Reports to the Assessment, otherwise, proceed to the Participants tab to send for Approval.

Linking a CPS Report to Assessment

- 29. If a CPS Report is screened in while working on an Assessment, it can be linked to that assessment. From the Participants tab, select 'Link Report to Assessment' from the Options drop-down and click Go.
 - On the Assessment Report Link page, select the appropriate CPS Report(s). Click Continue to associate the CPS Report to the Assessment and return to the Assessment page.

🦲 Asses	sment - Work - Microsoft Edge		
0	ĉ		
e] ^{Ast}	essment Report Link		Print 🚔 Help 😌
WA:	CPS Reports		
As	Report Name	Supervisor Screening Date	Date and Time Report was Received
Na	Fannie Andrews	06/10/2022 08:46:00	06/10/2022 08:00:00
As			
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Sending the Completed Assessment for Approval

30. From the Participants tab, select 'Approval' from the Options drop-down and click Go.

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Assessment - Work - Microsoft Edge Ø D .						
e WiSACWIS						
Assessment				Report		
Name: American, Annie M.	Assessment ID: 9223623		Status: Open	Response Time: Within 24 - 4	8 Hours	
Participants	Basic		Ajlega	tions	Contacts	
Assessment Participants						
Name	Gender	DOB	Race	ICV	VA Record	
American, Annie M.	Female	08/08/1970	Asian	Cre	ate	
Andrews, Fannie		01/01/2020	Asian		Create	
Andrews, Annie M.	Female	01/01/2006	White		Create	
American, Jack	Male	06/01/1973			Create	
Actions Approval Extension Link Report to Assessment Serious Incident Notification Assessment Actuarial Family RA Future A/N IA Narrative Otherughts and Needs Otherughts and Needs Checklist IA Checklist Schecklist Schecklist Orgoing Checklist Orgoing Checklist Text Mandated/Relative Reporter Notice Safety Services Cover Sheet						

1. The following message will display as a reminder to complete the Screening tab of the ICWA Record. Any other required fields will also display and error message and where to correct it.

Errors (5)

- · Please update the Maltreater(s) Determination field for the pending alleged maltreater. Correct allegation row 2.
- Please update the Maltreater(s) Determination field for the pending alleged maltreater. Correct allegation row 3.
- The Alleged Maltreater(s)'s (Jack American) race must be documented before approving the Initial Assessment. Please enter this information via Person Management.
 The Alleged Maltreater(s)'s (Jack American) ethnicity must be documented before approving the Initial Assessment. Please enter this information via Person Management.
- The Allegeo Matricater(s)'s (Jack American') ethnicity must be documented before approving the initial Assessment. Please enter this information via Person Management.
 To approve the Initial Assessment, please create an ICWA Record via the Create hyperlink in the ICWA Record column on the Participants tab for the following participants: Andrews, Annie M, Andrews, Fannie
- 2. On the Approval History page, select the 'Approve' radio button and click Continue to return to the Assessment page. Click Save to send the assessment for supervisory approval.

Recording a Date of Death for a Child

A date of death for a child can be recorded on the following pages: Person Management, Allegation (Access Report), Allegation (Assessment), Serious Incident Notification, and Placement & Service Ending.

In Assessment, the field will dynamically display if a death is indicated on the page and is required when a determination other than pending is selected. If a Death Date is already entered on Person Management, the date pre-fills to the page. If a Death Date is changed on the Allegation page, Death Date on Person Management will be updated after the Assessment is approved. The Death Date field will always remain editable on Person Management but will freeze on the Assessment and will not be able to be changed after it has been approved.

Allegation (Assessment)	
Allegation	
Alleged Victim:	Annie M. Andrews 🗸
Abuse/Neglect Code:	Physical Abuse 🗸 🗸
Description:	Bruising
Determination:	Substantiated V
Date or Approximate Date of Alleged Maltreatment:	06/01/2022
Alleged Victim received medical treatment as a result of this alleged maltreatment:	● Yes ○ No
Was there an open out-of-home placement documented in eWiSACWIS at the time of the alleged maltreatment? Details	◯Yes ●No ◯Unknown
Serious Incident: Details	● Yes ○ No
Serious injury, as determined by a physician <u>Details</u>	
Death / Alleged maltreatment Details	Death Date: 00/00/0000
Egregious incident Details	
Death / Alleged suicide in OHC	
DCF memo 2010-01 Act 78	

Note: The Death Date on an approved Access Report or Assessment, or the most recently entered date of death in Person Management will pre-fill to the Serious Incident Notification. The Death Date field displays when the 'Death/Alleged Maltreatment' or 'Death/Alleged Suicide' checkbox is selected on the page. If allegations rise to the level of a Serious Incident, Wisconsin Act 78 requires county agencies and the Division of Milwaukee Child Protective Services (DMCPS) to report these incidents to the Division of Safety & Permanence (DSP) within 2 working days of the agency learning about the incident. See the Serious Incident (Act 78) User Guide for more information.