

Nancy Keeling  
Authorized Signature

**Number:** CW\_PT\_06\_012  
**Issue Date:** 03/07/06

**Topic:** Select topic that best applies

**Transmitting (check the box that best applies):**

- New Policy   
  Policy Change   
  Policy Clarification   
  Executive Letter  
 Administrative Rule   
  Manual Update   
  Other: \_\_\_\_\_

**Applies to (check all that apply):**

- All DHS employees                     
  County Mental Health Directors  
 Area Agencies on Aging               
  Health Services  
 Children, Adults and Families       
  Seniors and People with Disabilities  
 County DD Program Managers       
  Other (please specify):

Policy/Rule Title:	Child Safety Assessment and Safety Planning		
Policy/Rule Number(s):	I-AB.5/ 413-015-0511 through 0514	Release No:	
Effective Date:	3/1/06	Expiration:	
References:	ORS 419B.005		
Web Address:	<a href="http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-ab5.pdf">http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-ab5.pdf</a>		

**Discussion/Interpretation:** Finalizes rules previously released as temporary rule. Changes time frame for review when a child is in home to 5 days and when a child is in foster care to 30 day face to face contact.

**Implementation/Transition Instructions:**

**Training/Communication Plan:** Training was provided at child welfare supervisor meetings

**Local/Branch Action Required:** Provide information to case work staff about change in time frame for review of safety plans at critical junctures.

**Central Office Action Required: No specific action required.**

**Field/Stakeholder review:**     Yes     No

**If yes, reviewed by:** Citizen Review Board

**Filing Instructions:**

*If you have any questions about this policy, contact:*

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