

**Select originating cluster**

**Policy Transmittal**

Lois Ann Day  


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**Authorized Signature**

**Number:** CW-PT-09-006  
**Issue Date:** 09/15/2009

**Topic:** Protective Services

**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:	CPS Assessment Dispositions		
Policy/Rule Number(s):	I-AB.4 (413-015-0409)	Release No:	
Effective Date:	10/01/09	Expiration:	
References:			
Web Address:	<a href="http://www.dhs.state.or.us/policy/childwelfare/drafts/2009/i-ab4_9-23.pdf">http://www.dhs.state.or.us/policy/childwelfare/drafts/2009/i-ab4_9-23.pdf</a>		

**Discussion/Interpretation:**

This rule change is necessary to clarify and assist with statewide consistency.  
 This rule change clarifies the original intent of this rule.  
 This is a draft rule that is available for comment until 09/30/2009

**Training/Communication Plan:** Email to District managers and Child Welfare Program managers informing them of the change. Presenting changes to CPS supervisors and workers through quarterlies. Ongoing technical assistance by CPS consultants.

**Local/Branch Action Required:** Review draft rules and provide feedback

**Central Office Action Required:** Receive and review feedback

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**Field/Stakeholder review:**     Yes     No

**If yes, reviewed by:** Child Welfare Policy Council, Rule Advisory Committee

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

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