## Prevention Worker Role Card

<table>
<thead>
<tr>
<th>CPS</th>
<th>SHARED</th>
<th>FS</th>
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</table>
| **Investigative Planning**  
Contact Reporter | *Review Agency History (ACESS, FATS, SDM, TIPS, Cafe, OnBase, Case Record)*  
Identification and contact information on relatives (Family Connections and Circle of Support)  
Collateral Contacts  
Court (Court letters & testify)  
Assess Safety (ongoing) and create safety plans, as needed  
Assess Family Functioning | Monthly Collateral Contacts  
Form 5 every 90 days  
Ongoing  
SDM-Review Initial/Reassess every 90 days  
FATS |
| **SAFETY-Form 5 within 15 days** | | |
| **SDM-Initial within 30 days**  
ACESS | Assess Risk (SDM)  
Documentation of contacts and activities as well as engagement.  
* Home Visits with all Family members  
* Safe sleep discussions  
Assess need for prevention services (CAC, mental health, substance abuse, DV, Early Steps, parenting education, Home Builders/IHBS...)  
Case Staffings  
*Search for absent parents  
*Communicate with providers  
*Make purchases (Lacarte)- PAF | | After Care Plans at Closure |

Asterisks** Denotes tasks that the Team Specialist can do as well.
**PREVENTION TEAM SPECIALIST ROLE**

- Participate in staffings
- Pull/Review history
- Enter initial contacts in ACESS (to show compliance with timely contacts)
- Prepare paperwork and assist with needed signatures from clients (consents, client rights...)
- Prepare written correspondence to support concerted efforts
- Request records (medical, school, police...)
- Use Lacarte card to make purchases
- Fax/Scan/Mail
- Home visits with clients, as needed, to gather, documents, secure signatures, drop off information, teach skill building (budgeting, safe sleep)
- Joint visits with CPS or FS workers, as needed
- Safe Sleep education
- Client contact/home visits, as needed
- Assist in search for absent parents (UTL)
- Transportation
- Drug screens for clients (TIPS 212, provide information to parent location/date/time of screen, request results)
- Copy/Paste AFF information from ACESS to FATS
- Review accuracy of client information in systems (spelling of name, DOB, address, phone...)
- Referrals
- Request written progress reports
- FTM prep (calling team members, scheduling the room, taking notes during FTM, making copies of case plan packets, securing signatures)
- Document activities in ACESS and FATs
- Enter TBH in database and print report for record

**NO:**
- Conducting Interviews
- Typing Interview notes or Assessment of Family Functioning
- "Clinical" contacts such as verbal reports on a client’s therapy progress

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