

## SDM™ Minimum Contact Requirements (Version 3.0)

| MINIMUM CONTACT REQUIREMENTS FOR IN-HOME CASES |   |  |
|--|---|--|
| Risk Level                                     | Parent and Child Contacts   | Location                                 |
| Low  | <p><b>One</b> face-to-face per month with parent/s and child</p> <p><b>One</b> support contact</p>    | <b>Must</b> be in parent/s residence     |
| Moderate                                       | <p><b>Two</b> face-to-face per month with parent/s and child</p> <p><b>Two</b> support contacts</p>   | <b>One</b> must be in parent/s residence |
| High   | <p><b>Four</b> face-to-face per month with parent/s and child</p> <p><b>Four</b> support contacts</p> | <b>Two</b> must be in parent/s residence |

| Additional Considerations          |  |
|------------------------------------|--|
| CSO Contacts                       | For low and moderate risk cases, the CSO must make at least one of the required face-to-face contacts with each child and parent. For high risk cases, the CSO must make at least two of the four face-to-face contacts during the course of a month with each child and parent.   |
| CSSO Contacts                      | Contacts by CSSOs may supplement the required contacts, provided that the nature of the contact meets the definition for face-to-face contact.   |
| Service Provider Contacts          | The CSO must always maintain at least one face-to-face contact per month with the parent(s). Contacts by a service provider may supplement the required contacts, in circumstances where that service provider is involved in the implementation of the case plan. Examples may include, but are not limited to, counselling services, health services etc.  |
| Definition of Face-to-Face Contact | Face-to-face contacts are intended to be meaningful, purposeful, and goal directed. Contacts with parents should focus on assessment of strengths, needs, and case plan progress. Contacts with children should be child focused, assessing each child's strengths and needs, views, and wellbeing. Always consider changes in family circumstances that may impact upon the child's safety. During face-to-face contact with a child, it is recommended that the CSO speak with the child alone, to provide them with an opportunity to express any concerns. |
| Definition of Support Contact      | Personal or telephone contact with a person who has information about the child and/or the parents in circumstances where that person is involved in the implementation of the case plan. Examples may include, but are not limited to, educational personnel, health services, counselling services, Youth Justice Services, etc.   |
| Overrides                          | A discretionary override to these face-to-face and support contact guidelines is permitted based on unique case circumstances. Any override must be documented by the CSO and approved by the Team Leader.   |

### MINIMUM CONTACT REQUIREMENTS FOR FAMILY REUNIFICATION CASES

| Risk Level | Parent and Child Contacts  |
|------------|--|
| Low        | One face-to-face per month with parent/s<br>At least one face-to-face per month with each child<br>One support contact     |
| Moderate   | Two face-to-face per month with parent/s<br>At least one face-to-face per month with each child<br>Two support contacts    |
| High       | Three face-to-face per month with parent/s<br>At least one face-to-face per month with each child<br>Four support contacts |

### Additional Considerations

|                                    |   |
|------------------------------------|---|
| CSO Contacts                       | During the course of a month, the CSO must have face-to-face contact at least once with each child in the child's current living environment, and at least once with each parent in the parent's current living environment.  |
| CSSO Contacts                      | Contacts by CSSOs may supplement the required number of CSO contacts, provided that the nature of the contact meets the definition for face-to-face contact.  |
| Service Provider Contacts          | The CSO must always maintain at least one face-to-face contact per month with the parent(s). Contacts by a service provider may supplement the required contacts in circumstances where that service provider is involved in the implementation of the case plan. Examples include, but are not limited to, family reunification services, counselling services, etc.   |
| Definition of Face-to-Face Contact | Face-to-face contacts are intended to be meaningful, purposeful, and goal directed. Contacts with parents should focus on assessment of strengths, needs, and case plan progress. Contacts with children should be child focused, assessing each child's strengths and needs, views, and wellbeing. Always consider changes in family circumstances that may impact upon the child's safety. During face-to-face contact with a child, it is recommended the CSO arrange to talk with the child alone, to provide them with an opportunity to express any concerns. |
| Definition of Support Contact      | Personal or telephone contact with a person who has information about the child and/or the parents in circumstances where that person is involved in the implementation of the case plan. Examples may include, but are not limited to, educational personnel, health services, counselling services, Youth Justice Services, etc.  |
| Overrides                          | A discretionary override to these face-to-face and support contact guidelines is permitted based on unique case circumstances. Any override must be documented by the CSO and approved by the Team Leader.  |