## Practice Alert



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## Multidisciplinary Team Member Contact

The purpose of this Practice Alert is to provide guidance on the proper use of multidisciplinary team (MDT) contacts when making initial contact with the victim child(ren).

Children's Division workers must first evaluate if the MDT member is appropriate to ensure safety of the child(ren). The MDT member should be aware of the reported concerns and can assess whether the child will be safe until a worker can make contact. A worker should attempt to make contact as soon as possible but no later than 72 hours from the date and time of the report. An MDT contact may be used if the MDT member is either with the child or can ensure safety of the child until the worker can make contact. Workers must also evaluate the alleged perpetrator's access to the child and whether they create a plausible safety threat when determining if using an MDT contact is appropriate. If there is any indication the child may be unsafe, workers should see the children within the response priority timeframe.

Examples of MDT contacts that can be used for initial contact with the victim child(ren):

- Nurse calls in a report due to the child being born premature and testing positive for marijuana and methamphetamine. Child will not be released for several days. The nurse's current and continued contact with the child assures safety and can be used as an MDT contact for initial contact of the victim child. The worker is expected to make face-to-face contact with the child within 72 hours.
- A report was called in at 8 p.m. the prior evening and the worker confirmed that the child is at school the next day. Worker called the school counselor at 9 a.m. Counselor had seen the child in her office earlier that morning. She said the child seemed fine and she would check on him throughout the day until school is out at 3 p.m. The counselor's contact with the child can be used as a MDT contact, but the worker is expected to see the child face-to-face as soon as possible but no later than 72 hours from the date and time of the report.
- Report is received at 10 p.m. and worker calls the police department to request a well-child check on the two victim children listed on the report. At 11:30 p.m., the officer called back and stated he contacted the father and the two victim children. He noted no concerns with their appearance or safety. Mother was taken by ambulance for psychiatric treatment and will be at least on a 96-hour hold. The officer's contact with the children can be used as a MDT contact as the officer saw the children, assured safety, and noted that the alleged perpetrator would not have access for at least 96 hours. Workers are expected to see the children as soon as possible but no not later than 72 hours from the date and time of the reported concern.

An MDT contact cannot be used if the MDT member only saw the child(ren) prior to the report being made to the Child Abuse and Neglect Hotline Unit (CANHU) or cannot assure safety of the child(ren) until CD can make contact.

Examples of MDT contacts that cannot be used for initial contact with the victim child(ren):

- Law enforcement went to the home at 2 a.m. due to a call of domestic violence. Child was seen at the time of the call and law enforcement did not see any immediate safety threats to the child due to father being arrested. Officer ends his shift at 8 a.m. and makes a report to CANHU. The officer's prior contact with the child cannot be used as an MDT contact as safety of the child cannot be assured at the time of the call to CANHU. The worker is expected to see the child within response priority timeframes.
- Teacher calls in a report after school is out for the day. The child was in her classroom that day and disclosed CAN to her. She said he seemed fine all day and she didn't have concerns while he was at school. The teacher's prior contact with the child cannot be used as an MDT contact as safety of the child cannot be assured at the time of the call to CANHU. The worker is expected to see the child within response priority timeframes.
- Physician sees a child in the emergency department at midnight and the child is released. The physician's prior contact with the child cannot be used as initial contact as safety of the child cannot be assured at the time of the call to CANHU. The worker is expected to see the child within response priority timeframes.

An MDT Initial Face-to-Face Contact Guide has been posted to the CAN Intake internet page and can be used by workers for additional guidance

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