



DSS Technical Review: Transmittal Memorandum

Proposed EEHA and Travel Safety Plan Materials

PROPOSED DRAFT FOR DSS LEGAL CLINICAL AND OPERATIONAL REVIEW

Purpose: Request a formal technical review of two structured child safety tools intended for children under DSS supervision who have documented or suspected cognitive wandering risk.

To

Recipient	South Carolina Department of Social Services
Attention	Office or division to be designated
Submitted by	Mariah Wilkins, Doctor of Criminal Justice Executive Director and Chief Policy Strategist, IJJBP Project SENTRY
Clinical collaborator	Marcella Ridely, Board Certified Behavior Analyst Clinical Director and Principal Clinical Policy Advisor
Date	_____

Requested Action

- Designate representatives from DSS legal counsel, child welfare operations, policy, quality assurance, information systems, and clinical services to review the materials.
- Determine which components may be adopted under existing administrative authority and which require legislation or regulation.
- Select an implementation path: revision of an existing form, supplemental protocol, limited pilot, practice guidance, or another approved mechanism.
- Provide written technical comments and identify a DSS project owner and follow-up date.

Materials Submitted

- Elopement and Environmental Hazard Assessment form
- Approved Travel Safety Plan form
- Implementation Guidelines and Procedures for both tools



Design Basis

The materials combine public safety, systems accountability, behavioral risk, environmental prevention, supervision planning, and emergency response considerations. Mariah Wilkins developed the policy and accountability architecture in collaboration with a Board Certified Behavior Analyst who contributed autism and behavior-analytic subject matter expertise. The tools are designed as structured safety and decision-support protocols. They are not diagnostic instruments and are not represented as independently validated clinical measures.

Proposed Scope

The enhanced review would be triggered by defined indicators such as a history of elopement, limited functional communication, impaired danger awareness, strong attraction to water or another hazard, prior missing-child incidents, or professional identification of elevated wandering risk. The tools are not intended for universal use with every child or to impose a categorical restriction on travel.

Safeguards for Review

- Use person-centered and least-restrictive planning.
- Do not require a tracking device solely because a child has a diagnosis.
- Document caregiver input, child preferences when ascertainable, and clinical recommendations.
- Create an expedited process for emergency travel.
- Separate a risk flag from a finding of abuse, neglect, culpability, or placement unsuitability.
- Test inter-rater consistency, workload, accessibility, and unintended disparate effects before statewide adoption.

Requested Meeting Outcome

The requested outcome is a named recipient for the complete package, an identified DSS review owner, agreement on the review participants, a target date for initial feedback, and a documented path for continuity through any administrative transition.

DSS recipient	
Title and division	
Date received	
Assigned review owner	
Target response date	



EEHA and Travel Safety Plan Implementation Guidelines

Proposed DSS procedures for technical review pilot and adoption

PROPOSED DRAFT FOR DSS LEGAL CLINICAL AND OPERATIONAL REVIEW

Purpose: Provide a consistent workflow for screening, assessment, travel approval, supervisory review, emergency response, documentation, quality assurance, and phased implementation.

Policy Objectives

- Identify cognitive wandering risks early and reassess them after material changes.
- Match environmental and supervision safeguards to the individual child rather than the diagnosis alone.
- Require destination-specific review when planned travel materially changes the child's environment or hazard exposure.
- Create a reviewable record of information considered, decisions made, conditions imposed, and assigned responsibility.
- Support rapid, accurate emergency response while respecting disability rights, family integrity, privacy, and the least-restrictive appropriate approach.

Definitions for DSS Review

Term	Proposed working definition
Cognitive wandering risk	A pattern or credible likelihood of leaving a safe area or responsible supervision when developmental, communication, cognitive, behavioral, or neurological factors limit danger awareness or self-protection.
Elopement	Leaving or attempting to leave a designated safe area, caregiver, placement, vehicle, program, or activity without the supervision or authorization required by the individual plan.
Environmental hazard	A condition that materially increases the likelihood or severity of harm if the child wanders, including open water, traffic, railways, difficult terrain, heights, weather, machinery, animals, firearms, or unsecured exits.
High-consequence hazard	A condition in which brief access may result in death or serious injury, including open water, moving traffic, railways, extreme heat, and unsecured firearms.

Term	Proposed working definition
Material change	A change in placement, caregiver, destination, hazard exposure, wandering pattern, communication, medical or behavioral status, safety equipment, legal order, or supervision plan that may alter risk.
Approved travel plan	A written, destination-specific safety decision approved by the authorized DSS employee after required information, safeguards, and conditions are documented.

When the EEHA Is Required

- At initial intake or placement when a screening indicator is present.
- Before or promptly after a change in placement when risk is known or suspected.
- After an elopement, missing-child event, near miss, or material failure of a safeguard.
- When a caregiver, child, clinician, school, law enforcement officer, or other reliable source identifies new risk.
- Before high-risk travel when no current assessment adequately addresses the destination.
- At the scheduled review date and after any material change.

Roles and Responsibilities

Role	Primary responsibility
Caseworker	Collect information, complete or coordinate screening and assessment, verify safeguards, obtain participation, document evidence, and elevate concerns.
Supervisor	Review high-risk or disputed decisions, approve conditions, resolve missing information, authorize emergency travel, and ensure deadlines.
Caregiver	Provide accurate history and destination information, implement safeguards, accept assigned duties, report changes, and cooperate during emergencies.
Child	Participate in a developmentally appropriate manner and express preferences, concerns, likely destinations, and effective supports when possible.
BCBA or qualified clinician	Advise when behavioral complexity, recent escalation, restrictive measures, communication needs, or competing clinical considerations require consultation.



Role	Primary responsibility
DSS legal counsel	Review authority, consent, confidentiality, due process, records, liability, rulemaking, and statutory conflicts.
Quality assurance	Audit timeliness, completion, decision consistency, incidents, corrective actions, and disparate effects.
Information systems	Determine secure fields, alerts, reassessment triggers, access controls, and reporting capability.

EEHA Workflow

1. Screen immediately when a triggering report or material change is identified.
2. Gather information from multiple reliable sources and distinguish verified facts from allegations, caregiver reports, professional opinions, and unknowns.
3. Complete the child-specific profile and physically or reliably verify the environment when practicable.
4. Assign a risk level using professional judgment and document the rationale.
5. Create corrective actions with named owners, deadlines, and verification methods.
6. Obtain the required supervisory and clinical review.
7. Provide the relevant plan to responsible adults using accessible communication.
8. Reassess after an incident, material change, missed correction, or scheduled review.

Travel Plan Workflow

1. Receive the request at least 72 hours before planned nonemergency travel or within the deadline DSS adopts.
2. Confirm legal authority, court-order compliance, required consent, and current EEHA status.
3. Verify the exact destination and review location-specific hazards and safeguards.
4. Name the primary and backup supervising adults and document handoff procedures.
5. Verify tracking and identification measures when included in the child’s plan.
6. Document emergency roles, local response resources, and immediate search priorities.



7. Approve, approve with conditions, return for information, or deny the request through the authorized decision-maker.
8. Require a new review when a material fact changes.
9. Complete a post-travel or incident review when required.

Timeliness Standards for Review

Event	Proposed target	Required action
Initial trigger	Immediate screening	Determine whether a full EEHA is required and establish interim precautions.
Full EEHA	Within 48 hours when feasible	Complete assessment or document interim plan, missing information, responsible owner, and completion date.
Planned travel	At least 72 hours before departure	Submit complete destination and supervision information for meaningful review.
Emergency travel	Before departure when practicable	Supervisor documents the emergency, available information, temporary safeguards, and follow-up deadline.
Incident or near miss	Same day notification and prompt review	Protect the child, notify required parties, preserve accurate facts, and revise safeguards.
Material change	Before implementation when practicable	Reassess affected domains and obtain new approval when required.

Decision Standards

- Use the totality of the circumstances. Do not rely on diagnosis, a single score, or a tracking device as the sole basis for a decision.
- Give greater weight to recent events, repeated patterns, high-consequence hazards, unreliable supervision, failed controls, and unresolved unknowns.
- Use the least restrictive safeguards that adequately address the documented risk.
- Do not treat caregiver disagreement as noncooperation without documenting the underlying issue and offering review or clarification.
- When information is incomplete, use proportionate interim safeguards and assign responsibility for obtaining the missing information.
- A tracking device supplements supervision and environmental controls; it does not replace them.



Escalation and Clinical Consultation

Supervisor and qualified clinical consultation should be considered or required when the assessment identifies Level 3 or Level 4 risk, a recent serious incident, significant communication limitations, repeated safeguard failure, proposed restrictive measures, disagreement among responsible professionals, removal or nonuse of a clinically recommended device, or travel involving immediate access to a high-consequence hazard.

Emergency Response Procedure

1. Call 911 immediately when the child's location is unknown or immediate danger is suspected.
2. Provide accurate last-known time and place, clothing, communication profile, device status, likely destinations, hazard affinities, and searches already completed.
3. Prioritize high-consequence hazards, particularly water, when supported by the child's profile and environment.
4. Assign one adult to communicate with incident command and preserve an accurate timeline.
5. Activate the tracking provider or Project Lifesaver process without delaying 911 notification or physical search.
6. Notify DSS personnel and other parties required by policy or law.
7. After recovery, obtain necessary medical evaluation, preserve relevant information, and complete a multidisciplinary review focused on prevention and accountability.

Records and Confidentiality

- Store forms in the authorized case record with role-based access.
- Record the source and date of material information and distinguish fact from inference.
- Limit distribution of photographs, location data, medical information, and access codes to persons with a legitimate safety role.
- Do not place lock codes, passwords, or tracking credentials in broadly accessible documents.
- Follow retention, disclosure, court access, and incident-reporting requirements established by law and DSS policy.

Due Process and Disability Safeguards

- Provide notice of material restrictions and available review processes.
- Use individualized findings and avoid categorical rules based solely on autism or another diagnosis.
- Include the child and family in planning to the extent appropriate and safe.
- Consider communication access, language, culture, sensory needs, and reasonable modifications.

- Document the reason, duration, and review date for any restrictive condition.
- Prohibit retaliation for raising a safety concern or requesting review.

Training Requirements

- Autism and other conditions associated with cognitive wandering
- Individualized communication and respectful interaction
- Water and environmental hazard recognition
- Completion of the EEHA and travel plan
- Tracking technology capabilities and limitations
- Emergency search information and incident command coordination
- Bias, disability rights, confidentiality, and documentation quality
- Scenario-based practice and supervisor calibration

Pilot Recommendation

Use a time-limited pilot in selected offices representing urban, rural, coastal, and inland environments. Include cases with varied ages, communication profiles, placement types, and travel circumstances. Pilot participation should include frontline workers, supervisors, caregivers, clinicians, legal counsel, quality assurance, and information systems personnel.

Pilot Measures

Measure	Example indicator
Feasibility	Average completion time, missing fields, workflow delays, training needs, and user feedback.
Reliability	Agreement between trained reviewers on triggers, risk level, and minimum safeguards.
Safety process	Percentage of identified corrections completed before placement or travel.
Incident response	Completeness and timeliness of emergency information after an event.
Equity and rights	Differences in restrictions, denials, or burdens by disability, race, age, placement type, geography, or communication method.
Outcome	Elopement events, near misses, recovery time, safeguard failures, and corrective actions, interpreted cautiously due to small numbers.

Quality Assurance Review

- Monthly pilot case audit and supervisory calibration.

- Immediate review of any fatality, near fatality, water event, prolonged absence, or material misinformation during a search.
- Quarterly review of missing data, overdue corrections, travel denials, emergency exceptions, and repeat incidents.
- Documented revision log showing changes to definitions, fields, training, and decision rules.
- Formal legal and clinical approval before statewide issuance.

Implementation Decisions Required from DSS

- ☐ Legal authority and Code or policy placement
- ☐ Covered population and trigger definitions
- ☐ Authorized assessors and approvers
- ☐ Required consultation thresholds
- ☐ Final timelines and emergency exceptions
- ☐ Electronic record integration and privacy controls
- ☐ Appeal or review process
- ☐ Training owner and competency standard
- ☐ Pilot sites duration and measures
- ☐ Statewide approval and revision schedule

Document Control

Draft version	1.0
Effective date	Not effective. Proposed for review
Policy owner	_____
Legal approval	_____
Clinical approval	_____
Operational approval	_____
Next review date	_____
Revision summary	_____



Elopement and Environmental Hazard Assessment

Proposed structured safety and decision support form for DSS review

PROPOSED DRAFT FOR DSS LEGAL CLINICAL AND OPERATIONAL REVIEW

Purpose: Identify cognitive wandering risk, evaluate the environments in which a child will live or stay, and document safeguards, responsibility, and required follow-up. Completion of this form does not by itself establish abuse, neglect, culpability, or placement unsuitability.

Assessment Information

Child name and identifier	_____
Date of birth and age	_____
Current legal status	_____
Current placement	_____
Location assessed	_____
Assessment type	☐ Initial ☐ Change in placement ☐ Travel destination ☐ Incident review ☐ Update
Assessor and title	_____
Date and time completed	_____
Participants	Child when appropriate, caregiver, caseworker, clinician, and others: _____

Immediate Screening

Mark Yes, No, or Unknown. Any Yes response or unresolved Unknown response requires the full assessment unless a supervisor documents why it is unnecessary.

Screening item	Response
Prior elopement, wandering, bolting, hiding, or unexplained absence	☐ Yes ☐ No ☐ Unknown
Limited ability to communicate identity, address, danger, or need for help	☐ Yes ☐ No ☐ Unknown

Screening item	Response
Impaired danger awareness or unreliable response to stop, name, or safety directions	☐ Yes ☐ No ☐ Unknown
Known attraction to water, traffic, trains, woods, animals, heights, vehicles, or another hazard	☐ Yes ☐ No ☐ Unknown
Recent transition, new caregiver, unfamiliar environment, sleep disruption, or increased behavioral instability	☐ Yes ☐ No ☐ Unknown
Existing safety plan, tracking device, door alarm, water safety plan, or enhanced supervision order	☐ Yes ☐ No ☐ Unknown
Environmental hazard within immediate access of the residence or destination	☐ Yes ☐ No ☐ Unknown

Child Specific Wandering Profile

Forms of wandering	Describe bolting, walking away, hiding, climbing, exiting at night, leaving vehicles, or other patterns.
Frequency and recency	Most recent event, typical frequency, duration, and change from baseline.
Known antecedents	Transitions, denied access, sensory seeking, distress, sleep disruption, curiosity, pursuit of a preferred place or object, or unknown.
Likely destinations	Water, playground, road, store, school, prior home, vehicle, woods, or other.
Communication profile	Expressive and receptive communication, AAC use, response to name, ability to identify self or request help.
Danger awareness	Water, traffic, strangers, animals, weather, heights, machinery, and emergency responders.
Search and approach guidance	How the child may respond to lights, sirens, shouting, touch, uniforms, dogs, crowds, or unfamiliar adults.
Calming and reinforcement	Preferred items, interests, phrases, sensory supports, and safe approach methods.



Prior incidents and outcomes	Dates, locations, duration, hazards encountered, search method, and lessons learned.
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Environmental Hazard Review

Hazard	Status	Finding and safeguard
Open water including ponds rivers tidal water canals retention basins and drainage systems	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Swimming pool hot tub or unfenced water feature	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
High traffic road parking area railway or public transit access	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Woods fields construction sites abandoned structures or difficult terrain	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Exterior doors windows balconies or gates the child can open or climb	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Insufficient fencing barriers locks alarms lighting or camera coverage	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Animals firearms medications chemicals tools machinery or other attractive hazards	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____

Hazard	Status	Finding and safeguard
Extreme heat cold flooding storm surge or other location specific weather risk	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____
Unfamiliar occupants visitors rental property features or shared access areas	☐ Present ☐ Absent ☐ Unknown	Distance or access route: _____ Control or correction: _____

Existing Safeguards

Safeguard	Status	Responsibility and verification
Continuous or enhanced supervision	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Door and window locks placed out of reach	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Audible door window or gate alarms	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Perimeter fencing and self-closing gates	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Pool or water barriers	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Wearable or carried tracking device	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Identification bracelet card or clothing label	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Current photograph and emergency profile	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____

Safeguard	Status	Responsibility and verification
Neighbor school and first responder notification	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Swimming water survival or safety instruction	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Behavior support or functional assessment	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____
Transportation and vehicle transition procedure	☐ In place ☐ Needed ☐ Not applicable	Responsible person and verification: _____

Tracking Device Review

Device prescribed or approved	☐ Yes ☐ No ☐ Not applicable
Device and provider	_____
Authorization or consent	_____
Charging and testing schedule	_____
Attachment or carrying method	_____
Primary responsible adult	_____
Backup responsible adult	_____
Coverage limitations	Cellular, GPS, radio frequency, water resistance, battery, removal risk, or other.
Clinical or medical contraindication	_____
Plan if device is unavailable or fails	_____



Risk Determination

The assessor uses professional judgment and the totality of the information. A numeric total does not replace individualized analysis.

Level	General description	Minimum response
Level 1 Standard	No current indicators beyond ordinary age and developmental supervision needs.	Document findings and review after a material change.
Level 2 Elevated	One or more risk indicators are present, but existing controls are reliable and the environment does not create immediate access to a high-consequence hazard.	Written safeguards, named responsible adults, supervisor review, and reassessment after change or incident.
Level 3 High	Recent or repeated elopement, limited self-protection, access to water or another high-consequence hazard, unreliable controls, or major transition.	Immediate safety plan, correction before placement or travel when feasible, supervisory approval, and clinical consultation.
Level 4 Imminent	Current conditions create a substantial and immediate risk that cannot be controlled through the available plan.	Do not approve the setting or activity until immediate protections are established; follow emergency and protective procedures required by law and DSS policy.
Assigned level	☐ Level 1 ☐ Level 2 ☐ Level 3 ☐ Level 4	
Rationale and evidence		
Unresolved unknowns		
Required corrections		
Deadline for corrections		
Reassessment date or trigger		



Individual Safety Actions

Action	Owner	Due date	Verification method	Status
				☐ Open ☐ Complete
				☐ Open ☐ Complete
				☐ Open ☐ Complete
				☐ Open ☐ Complete

Emergency Response Information

Call description	Height, weight, hair, eyes, clothing, mobility, and distinguishing features.
Current photograph attached	☐ Yes ☐ No
Likely destinations and hazards	
Approach and communication	
Medical or sensory considerations	
Tracking device and monitoring contact	



Primary caregiver contact	_____
Caseworker and supervisor contacts	_____
Law enforcement or Project Lifesaver enrollment	_____
Immediate search priorities	_____

Acknowledgment and Approval

Signatures document participation and review. They do not waive legal rights or establish agreement with every finding. Required approvals remain governed by DSS policy and applicable law.

Assessor signature and date	_____
Caregiver acknowledgment and date	_____
Child acknowledgment when appropriate	_____
Clinical consultant and date	_____
Supervisor decision and date	_____
Final decision Approved Approved with conditions Not approved	_____ _____ _____
Conditions and review date	_____

Approved Travel Safety Plan

Proposed destination specific travel review for children with cognitive wandering risk

PROPOSED DRAFT FOR DSS LEGAL CLINICAL AND OPERATIONAL REVIEW

Purpose: Determine whether planned travel can occur safely by reviewing the destination, supervision, transportation, tracking resources, emergency response, and any conditions required for approval. Submit at least 72 hours before planned nonemergency travel unless DSS adopts a different deadline.

Child and Trip Information

Child name and identifier	
Travel dates and times	
Purpose of travel	
Destination name and address	
County and state	
Property type	☐ Private home ☐ Hotel ☐ Vacation rental ☐ Camp ☐ Other
Transportation and route	
Adults traveling and relationship	
Other children or occupants	
Sleeping arrangements	
Request submitted by and date	

Eligibility and Trigger Review

- ☐ Current EEHA is attached or accessible in the case record.
- ☐ The child has documented or suspected wandering risk requiring destination-specific review.
- ☐ The travel does not conflict with a court order, placement restriction, treatment obligation, or other legal requirement.
- ☐ Consent and notice requirements have been identified.

Destination Hazard Assessment

Destination condition	Present	Distance access and safeguard
Ocean river lake pond tidal creek canal pool hot tub retention basin or drainage system	☐ Yes ☐ No ☐ Unknown	_____
High traffic road parking lot railway transit platform or vehicle access	☐ Yes ☐ No ☐ Unknown	_____
Woods fields cliffs balconies construction areas or other difficult terrain	☐ Yes ☐ No ☐ Unknown	_____
Exterior doors windows gates fencing or shared corridors that may permit unnoticed exit	☐ Yes ☐ No ☐ Unknown	_____
Firearms medications chemicals tools animals machinery or other attractive hazards	☐ Yes ☐ No ☐ Unknown	_____
Severe weather flooding heat cold or limited cellular coverage	☐ Yes ☐ No ☐ Unknown	_____
Crowds unfamiliar adults events transitions or schedule changes likely to increase risk	☐ Yes ☐ No ☐ Unknown	_____

Property Safeguards

Safeguard	Verified	Method and responsible adult
Door and window locks	☐ Yes ☐ No ☐ N A	_____
Audible alarms	☐ Yes ☐ No ☐ N A	_____
Fencing and self-closing gates	☐ Yes ☐ No ☐ N A	_____
Pool or water barrier	☐ Yes ☐ No ☐ N A	_____
Exterior lighting	☐ Yes ☐ No ☐ N A	_____
Camera or monitoring coverage	☐ Yes ☐ No ☐ N A	_____
Safe sleeping area	☐ Yes ☐ No ☐ N A	_____
Secure medication firearm and chemical storage	☐ Yes ☐ No ☐ N A	_____
Safe vehicle loading and unloading point	☐ Yes ☐ No ☐ N A	_____



Supervision Plan

Required supervision level	☐ Ordinary developmental ☐ Line of sight ☐ Within arm reach near hazard ☐ Other
Primary supervising adult	_____
Backup supervising adult	_____
Handoff method	State how responsibility is verbally and visually transferred and acknowledged.
Arrival and departure	Adult positioning during loading, unloading, luggage handling, check-in, and door opening.
Sleeping and nighttime	Sleeping location, alarms, adult proximity, bathroom access, and overnight checks.
Meals and household tasks	Plan for distraction periods, cooking, bathing, phone use, and group activities.
Water activities	Adult ratio, life jacket, physical proximity, barriers, swim ability, and prohibition conditions.
Community outings	Crowds, transitions, identification, meeting point, transportation, and head counts.
Change in routine or distress	Known triggers, calming supports, safe retreat, and criteria to end an activity.

Tracking and Identification Plan

Device required by existing plan	☐ Yes ☐ No ☐ Not applicable
Device present and tested	☐ Yes ☐ No Test date and time: _____
Primary device monitor	_____
Backup device monitor	_____
Charging and attachment plan	_____
Coverage at destination verified	☐ Yes ☐ No ☐ Limited Explain: _____



Identification method	☐ Bracelet ☐ Card ☐ Clothing label ☐ Other
Failure or removal contingency	_____
Medical or clinical exception	_____

Emergency Response Plan

Current photograph distributed	☐ Yes ☐ No
Emergency profile distributed	☐ Yes ☐ No
Local emergency number	_____
Nearest law enforcement agency	_____
Nearest water rescue resource if applicable	_____
Immediate search zones	Water first when clinically and environmentally indicated, roadway, vehicles, structures, woods, preferred destinations, or other.
Adult who calls 911	_____
Adult who searches immediate hazard	_____
Adult who remains with other children	_____
Tracking provider contact and credentials location	_____
DSS notification sequence	_____
Information that must be reported	Accurate last-known time and place, clothing, device status, direction of travel, known attractions, hazards, and search already completed.



Required Corrections Before Departure

Correction or condition	Owner	Deadline	Verification	Complete
_____	_____	_____	_____	☐
_____	_____	_____	_____	☐
_____	_____	_____	_____	☐
_____	_____	_____	_____	☐
_____	_____	_____	_____	☐
_____	_____	_____	_____	☐

Approval Decision

Decision	☐ Approved ☐ Approved with conditions ☐ Not approved ☐ Returned for information
Risk level for this trip	☐ Standard ☐ Elevated ☐ High ☐ Imminent
Decision rationale	_____ _____
Conditions	_____ _____
Approval valid for	Dates, location, named caregivers, and stated activities only.
Change requiring new review	Destination, caregiver, dates, property, hazard exposure, supervision, health or behavior status, court order, or other material change.

Emergency Travel Exception

Complete when advance submission is not practicable. Emergency status does not eliminate individualized safety planning. The approving supervisor must document the reason, information reviewed, temporary safeguards, and date for complete follow-up.



Nature of emergency	
Reason advance review was impracticable	
Information reviewed	
Temporary safeguards	
Supervisor authorizing and time	
Full review due	

Acknowledgment and Signatures

Each responsible adult confirms receipt of the plan, understands assigned responsibilities, and agrees to report any material change before departure or during travel.

Requesting caregiver and date	
Primary supervising adult and date	
Backup supervising adult and date	
Caseworker recommendation and date	
Clinical consultation when required	
Supervisor decision and date	
Post travel review required Yes No	
Post travel review date	