Cuyahoga County Division of Children and Family Services (CCDCFS) Policy Statement

Policy Chapter: Case Requirements

Policy Number: 5.01.08

Policy Name: Caseworker Contact Requirements for Children and Families

Involved with the CCDCFS

Original Effective Date: 03/01/2015
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<u>PURPOSE</u>: This policy establishes the requirement for Child Protection Specialists (CPS) to have face-to-face contact at least once each and every full calendar month with children, youth and families involved with the Cuyahoga County Division of Children and Family Services (DCFS). Additionally, this policy directs DCFS CPS on where, when and how to document information about the face-to-face contacts in the Statewide Automated Child Welfare Information System (SACWIS).

SCOPE: This policy applies to all DCFS CPS who complete face-to-face contacts with children, youth and families.

POLICY

Regular and consistent face-to-face contacts with DCFS involved families are focused on the goals established in the case plan; this directly impacts positive outcomes for children, youth and their families, including the management of safety, timely achievement of permanence, and improved well-being. It also provides the CPS the opportunity to engage the family with effective communication and partnership that highlights the child, youth and family's strengths and needs, assesses the home environment and allows for the observation of the interaction of family members.

PROCEDURES

I. REQUIREMENTS

A. The assigned CPS is responsible for face-to-face contact with each child, parent and each case plan participant no less than every calendar month, to assess safety, monitor progress and address any concerns and behavioral changes. Ongoing Alternative Response cases require a minimum of face-to-face contact twice per month. At least one contact, every two months, must be made in the individual's home.

- In the event that the first monthly attempt to complete a face-to-face contact with the child is unsuccessful, CPS makes a minimum of two additional attempts to complete the face-to-face contact within the calendar month.
- 2. Assigned CPS completes the majority of the required monthly visits. If the assigned CPS is unable to complete the visit, the CPS completing the visit will document in the family case activity logs the reason someone other than the assigned CPS visited the child.
- B. When a safety plan has been implemented, CPS monitors the effectiveness of the safety plan, continued control of the safety threat, through visits and phone calls to the family.
 - An in-home safety plan requires at least one weekly home visit, that includes face-to-face contact with the child, no more than seven days apart, to assess protective capacities of both the child and the adults involved.
 - An out-of-home safety plan requires face-to-face contact with each child involved every other week. Weekly contact with the child or adults responsible for an action step occurs either by telephone or face-to-face.
 - 3. Senior Manager reviews the safety plan weekly.
- C. CPS makes face to face contacts with children and or youth in custody and placement during the first week of placement (not including the day of placement) in the placement setting to assess the children or youth's adjustment to placement and identify support needs of the caregiver. Based on the placement setting, face-to-face contacts are made:
 - 1. Relative and Nonrelative kin and Family Foster home: every month in the foster home.
 - 2. Treatment or medically fragile foster home: every two weeks in the treatment or medically fragile foster home.
 - 3. Children's residential center (CRC); monthly in the CRC.
 - 4. Independent living arrangement: monthly in the living environment.
 - 5. Visitation for interstate placements follow the regulations of the interstate compact.

II. QUALITY ENGAGEMENT AND ONGOING ASSESSMENT

- A. Quality face to face contacts are purposeful interactions between the CPS and children, youth, families and placement providers that reflect engagement, collaboration and contribute to the assessment and case planning processes.
 - These contacts are intentional and purposeful, goal directed, culturally responsive, respectful, unbiased, tailored to the needs of the family, developmentally appropriate for the children being visited and reflective of critical thinking in evaluating continued strengths and needs of the family.

- B. CPS observes the home and placement environment to assess the following:
 - 1. The child's current condition.
 - 2. The parent or caregivers' interaction with the children.
 - 3. The interaction with the family in their home setting to identify strengths, areas of difficulty or stress.
 - 4. Parents utilizing enhanced or newly acquired skills.
 - 5. The conditions in the home and a determination of how it impacts the safety of the children.
 - 6. Other individuals visiting or residing in the home in relation to:
 - a. How frequent are these individuals in the home?
 - b. Are they living there?
 - c. Do they change or impact the risk levels or safety threats within the family?
 - d. Are these individuals a support or resource for the family?
 - 7. A review of case plan objectives includes:
 - a. Identification of any barriers in case plan services, such as transportation, availability of providers, costs, hours of service, not meeting the specific physical, social or emotional need of the child.
 - b. Determining the level of child and/or parent involvement in the case plan services and positive behavioral change observed.
 - c. Is the child and/or parent able to relate to the service providers?
 - d. Does the child and/or parent identify newly learned skills such as ways to manage anger, fear, and frustration?
 - e. Does the child and/or parent have a clear understanding of what the services are and how they are beneficial?
 - f. Consideration of the need for additional services.
 - 8. Ongoing assessment of Safety and Risk include:
 - a. Reassess whether there are new or continued safety threats or concerns.
 - b. Reassess whether there are new or continued risk contributors.
 - c. Assess parental strengths and needs and determine if the current case plan services are meeting the family's needs.
 - 9. Examine if changes within the family dynamic have occurred that impact the safety of the children.
 - 10. Examine if safety plan is needed.
 - 11. Examine if an effective safety plan is being implemented as planned and whether it is effective in controlling the safety threat.
 - 12. Assess if the parents' protective capacities have been enhanced or diminished.
 - 13. Assess if the child's vulnerability has increased or decreased.

III. DOCUMENTATION OF VISITS

- A. CPS documents key information, observations, and decisions in a concrete, concise and non-judgmental manner in SACWIS. Key information includes:
 - 1. Participants
 - 2. Date and Location
 - 3. Assessment of child safety and risk

- 4. Child or youth well-being
- 5. Progress toward case goals and any changes to the case plan or tasks
- 6. Concerns expressed by the child, youth, parents and providers
- 7. Cultural considerations
- 8. Follow-up activities and priorities
- B. Documentation is completed, not in draft status, within 72 hours of the activity.

SEE ALSO:

Ohio Administrative Codes

5101:2-38-01	Requirements for PCSA Case Plan for In-Home Supportive Service without Court Order
5101:2-38-05	PCSA Case Plan for Children in Custody or Under Protective Supervision
5101:2-42-65	Caseworker Visits and Contacts with Children in Substitute Care

Cuyahoga County Division of Children and Family Services Policies and Procedures Manual

Policy 5.01.02 Case Plan / Family Service Plan

Policy 6.07.02 Out of Town Investigations (OTI)/Interstate Compact on the Placement of (ICPC) Evaluation Process and Placement Supervision of Children from Other Jurisdictions

CPS Caseworker Manuals

Ohio's Child Protective Services WOR Manual and CAPMIS Field Guides – Effective Home Visitation Between Worker and Child

Ohio's Child Protective Services WOR Manual and CAPMIS Field Guides – Effective Home Visitation Between Worker and Parent

Minimum Contact Expectations

Case Status	Who	Face to Face Contact Expectation
Non-Custody		
Investigation	 Each child involved 	Within 24 hours of the screened in report
	Each child involved	Within 1 hour, if Emergency referral
	 Parents/Caregivers 	Within first 4 days
In-Home Safety Plan	■ Each child involved	Weekly
Out of Home Safety Plan	 Each child involved 	Every other week, with each child involved.
	 Child and persons responsible for an action step 	Weekly, either by telephone or face-to-face
Ongoing (Voluntary Services and COPS)	 Each child, parent and case plan participant 	 Once monthly, no more than 30 days apart
Alternative Response Ongoing	 Each child, parent and case plan participant 	Twice monthly no more than 14 days apart
Custody		
,	■ Each child	During 1st week, not including first day, in
Relative, foster, or group home	 Each child and caregiver 	placement settingOne additional time 1st month of
group nome	Each child and caregiver	placement, excluding 1st week
	_	 Monthly in substitute case setting
	Parents	Monthly in home
Treatment or	Each child	 During 1st week, not including first day, in placement setting.
medically fragile home	Each child and caregiver	 One additional time 1st month of placement, excluding 1st week
	 Each child and caregiver 	Every two weeks in substitute case setting
	■ Each caregiver	One contact weekly by phone
	Parents	Monthly in home
Children's Residential Center (CRC)	■ Each child	 Within in 10 days of placement, not including first day, in CRC Monthly in CRC
	Parents	Monthly in home
Independent Living	Each child	 Within 7 days of placement
_	■ Each child	Monthly in living environment