

9. Monitor the Child Welfare Case Plan Through Required Contacts

A. Face-to-Face and Other Contact

The caseworker is responsible for 30-day face-to-face contacts. The purposes of this contact are twofold. First and foremost, the caseworker is managing child safety, and frequent contact is a part of the caseworker's role in managing child safety. The caseworker is also responsible for monitoring the changes in the family, for continually assessing protective capacity, for always ensuring that Child Welfare interventions are the least intrusive means of keeping the child safe, and for making adjustments to Child Welfare's interventions whenever indicated.

Procedure

- The caseworker must have the following contacts:
 1. Face-to-face contact with the child every 30 days.
 2. Face-to-face contact with the parents every 30 days.
 3. Contact with the safety service providers every 30 days.
 4. Contact with the substitute caregiver every 30 days when a child is in substitute care.
 5. Face-to-face contact with the substitute caregiver in the home or facility of the substitute caregiver every 60 days.
 6. Contact with the service providers a minimum of once every 90 days.



B. Monitor the Ongoing Safety Plan

Procedure

- The caseworker is responsible for reviewing and confirming the sufficiency of the ongoing safety plan every 30 days and making adjustments to either increase or decrease intrusiveness of Child Welfare intervention as necessary to manage child safety. For detailed procedures on Confirming the Ongoing Safety Plan, refer to Section 4 of this chapter.

C. Parent and Child Contact when a Child Remains in the Parents' Home

Procedure

- The caseworker must have face-to-face contact with the parents and the child at least every 30 days to monitor the safety of the child. This contact should occur in the parents' home. When needed to assure child safety, face-to-face contacts should be more frequent. Part of the visit should include time with the child away from the parents. During each face-to-face contact, monitor the safety of the child by:
 1. Looking for and evaluating any changes (increases and decreases) in the protective capacity of parents and changes in the ability or willingness of the parents to keep the child safe.
 2. Confirming the sufficiency of the Ongoing Safety Plan (refer to Section 4 of this chapter).

D. Safety Service Provider Contact (every participant in an ongoing safety plan)

Procedure

- The caseworker must have contact with each safety service provider in the ongoing safety plan every 30 days. This contact does not need to be face-to-face contact. Through this contact with the safety service provider in the ongoing safety plan, the caseworker must determine whether:
 1. Safety service providers in the ongoing safety plan are engaged and active in the safety activities.
 2. The parents are cooperating with the safety services.
 3. The safety service providers report that the interventions are effective.

4. The safety service provider agrees that the level of intervention assures the ongoing safety of the child.
- The caseworker must evaluate the ongoing safety plan and feel confident the services are the least intrusive available to assure the child's safety.
 1. Revise the ongoing safety plan if less intrusive actions are appropriate.
 2. Revise the ongoing safety plan if the current plan is insufficient to manage child safety.

E. Monitor Action Agreements

Procedure

- The caseworker must contact the service providers in an Action Agreement a minimum of once every 90 days. More frequent contact is recommended including email and phone communication to get updated information on parents' involvement and progress. The contact is a tool used to determine whether:
 1. The service provider is actively engaged with the family and providing the agreed upon services.
 2. The parents are making progress toward meeting the Expected Outcomes in a timely manner.
 3. The current Action Agreement is not working and alternative strategies should be implemented to facilitate change.

F. Contact with the Child Placed in Substitute Care

Contacts with the child in out-of-home care involve not only confirming the substitute caregiver's participation in the ongoing safety plan as a substitute care resource, but confirming that the substitute care environment is safe for the child and that the child's needs are being met while in substitute care. It includes monitoring services provided to the child (education, physical and mental health, or other treatment needs) and the child's adjustment to substitute care and the ability of the substitute caregiver to provide a safe environment for the child.

Contact with the Child Placed in a Foster Home or with a Relative Caregiver

Procedure

During each face-to-face contact, the caseworker must monitor the safety of the child by:

- Assessing the progress in and adjustment to the placement of the child.
- Receiving updates from the child and the substitute caregiver.
- If the child has a supervision plan, ensure that the plan continues to meet the child's enhanced supervision needs as identified by the CANS and make adjustments with the substitute caregiver as necessary.
- If the child is receiving Personal Care Services, ensure that the Personal Care Services Plan is meeting the child's additional service needs. If you are unsure as to whether the plan is meeting the child's needs, consult with your supervisor. If a supervisor approves, consult with the child's physician or the Personal Care Nurse Manager regarding your concerns about the child's medical needs.
- Assessing the safety and well being of the child by determining whether each of the following conditions exists in the home:
 1. The child is comfortable and the environment of the home is supportive and safe.
 - a. The caseworker should talk to the child alone and if the child is able, ask him or her questions about how they feel in the placement, and whether they feel comfortable in the home.
 2. Adults in the home take an active role in caring for and supervising the child.
 - a. The caseworker should talk to the child, if child is old enough to communicate, about who takes care of him or her, what they do, etc.

Chapter III - Managing Child Safety In and Out of Home

3. Adult family members possess the physical, emotional, and cognitive capacity to sufficiently care for the child.
 - a. The caseworker should assess whether the child is getting to medical and other appointments, getting to school on time, what treatment providers for the child report about the child's needs being met or not met.
4. Family members and the child have contact with others in the community.
 - a. The caseworker should ask the substitute caregiver and the child what they do for recreation, and whether they attend school functions, church, other neighborhood events, etc.
5. The child is accepted as part of the household.
 - a. The caseworker should ask questions like where the child eats, where they spend their time in the home (is much of the home restricted to the foster child), does the child participate in family activities with the substitute caregiver?
6. The substitute caregiver understands and is attentive to the child's vulnerability and need for protection.
 - a. Is the substitute caregiver attending to the child's special circumstances and protective of the child when they may be fearful or sensitive to the special issues that a victim of child abuse may need to address?
7. The substitute caregiver is amenable to Child Welfare oversight and willing to partner with Child Welfare.
 - a. Is the substitute caregiver following the Child Welfare Case Plan, including the visitation plan? Does the substitute caregiver share negative information about the case with the child?
8. If the child is placed with a relative caregiver, the child's parents and other family understand the role of the relative caregiver in managing safety as a substitute caregiver.
 - a. The child's parents may not support the placement, but it is a factor to consider in the quality of the placement. In addition, consider whether other extended family members can support the relative caregiver.
9. The child has a sufficiently positive relationship with the substitute caregiver's own children who live in the home.
 - a. The caseworker should talk to the child about their interactions with the foster parents own children, do they play together, do they fight or argue?
10. The substitute caregiver is caring for children matching the preferences and experience of the family.
 - a. The caseworker should talk with the substitute caregiver about how they are managing the care of the children in their home; are they stressed, do they feel overwhelmed?

Chapter III - Managing Child Safety In and Out of Home

11. The interactions between the child and other children placed in the home are sufficient to assure safety.
 - a. The caseworker should talk to the child about the interactions with other foster children in the home, do they play together, argue or fight, do they generally get along?
12. The present demands do not exceed the ability of the substitute caregiver to provide safe and protective care.
 - a. The caseworker should talk to the substitute caregiver about their stress level, how they handle stress, do they get breaks, do they enjoy foster parenting, how are circumstances in their own lives and impacting the children in the home?
- If any of the above conditions do not exist in the home, and the caseworker cannot confirm the safety and well-being of the child, the caseworker must:
 1. Assess child safety immediately to determine if there is a safety threat
 - a. If a safety threat is identified, the caseworker must immediately:
 - Consult with the caseworker's supervisor to determine any immediate protective action required to assure the child's safety or any action required to assure the safety of the child.
 - Contact a CPS screener and report the identified safety threat to the child.
 2. Document the behaviors, conditions, or circumstances observed in the home and any immediate protective actions in FACIS.
- When the child is currently safe in the home but a certification rule is being violated or, for other reasons, the caregiver is struggling with the responsibilities of caregiving, the caseworker must:
 1. Document date, time, location, and current behaviors, conditions, or circumstances observed in the home in FACIS case notes and notify the certifier or certifier's supervisor within one day.
 2. The caseworker must have face-to-face contact with the substitute caregiver within the next 30 days and the visit must occur in the home. The caseworker must observe the behaviors, conditions, or circumstances of the substitute caregiver, the child, and other children in the home, and conditions in the home.
 3. When the caseworker can confirm that the child is safe, current conditions in the home provide safety and well being for the child and the certification violation has been remediated or, for other reasons, the caregiver's struggles with caregiving have been resolved, the caseworker must:
 - a. Document the date, time, location, and observations of the condition of the environment in FACIS.

- b. Notify the certifier of the improved behaviors, conditions, or circumstances in the home.
4. When the caseworker can confirm the child is safe but cannot confirm that the certification standard has been remediated or if the caregiver continues to struggle with the responsibilities of caregiving, the caseworker must:
 - a. Consult with the supervisor to determine whether to recommend implementation of a Placement Support Plan (Refer to Chapter VII for detailed procedures regarding the Placement Support Plan) to the certifier, or whether the child should no longer remain in the home because the conditions necessary to provide safety and well being cannot be sustained in this home.
 - b. Notify the certifier of the behaviors, conditions, or circumstances in the home.
 - c. Document the date, time, location, and the behaviors, conditions, or circumstances in the home in FACIS.

Contact with a Child Placed with a Provider

A provider is defined as a “person approved by a licensed private child-caring agency to provide care for children or an employee approved by a licensed private child-caring agency.” In other words, it is a placement in a residential treatment facility or a foster home licensed or approved by someone other than a Child Welfare certifier.

Procedure

During every contact with a provider, the caseworker must:

- Assess the progress in and adjustment to the placement of the child.
- Receive updates from the child and from the provider.
- Assess the safety of the child in the home or facility by determining whether each of the following conditions exists:
 1. The child is comfortable and the environment is supportive and safe.
 - a. The caseworker should talk to the child alone and if the child is able, ask him or her questions about how they feel in the placement, and whether they feel comfortable.
 2. Adults take an active role in caring for and supervising the child.
 - a. The caseworker should talk to the child, if child is old enough to communicate, about who takes care of him or her, what they do, etc.
 3. Adults possess the physical, emotional, and cognitive capacity to sufficiently care for the child.

Chapter III - Managing Child Safety In and Out of Home

- a. The caseworker should assess whether the child is getting to medical and other appointments, getting to school on time, what the treatment service providers for the child report about the child's needs being met or not met.
4. The child has formal and informal contact with others in the community.
 - a. The caseworker should ask the substitute caregiver and the child what they do for recreation, do they participate in school functions, church, other neighborhood events, etc.
5. The child is accepted as part of the household or facility.
 - a. The caseworker should ask questions like where the child eats, where they spend their time in the home or facility (are there restrictions placed on the child), does the child routinely participate in activities with the substitute caregiver?
6. The provider understands and is attentive to the vulnerability and need for protection of the child.
 - a. Is the substitute caregiver attending to the child's special circumstances and protective of the child when they may be fearful or sensitive to the special issues that a victim of child abuse may need to address?
7. The provider is amenable to Child Welfare oversight and willing to partner with Child Welfare.
 - a. Is the substitute caregiver following the Child Welfare Case Plan, including the Visit and Contact Plan? Does the substitute caregiver share negative information about the case with the child? Is the substitute caregiver ensuring the child is receiving the treatment services he or she needs?
8. The child has a sufficiently positive relationship with other children in the home or facility of the provider.
 - a. Observe the child in the home or facility. Ask about his or her relationships with others, the friends he or she has developed, and what relationships are meaningful to the child.
9. The substitute caregiver is caring for children matching the preferences and experience of the substitute caregiver.
 - a. The caseworker should talk to the child about the interactions with other foster children in the home, do they play together, argue or fight, do they generally get along?
10. The interactions between the child and other children placed in the home or facility is sufficient to assure safety.
 - a. Observe the care provided to all the children in the home or facility. Do people seem to get along? Is everyone valued as a member of the group? Do caregivers appear to possess the knowledge and skills needed to care for the child and other children in the home?

Chapter III - Managing Child Safety In and Out of Home

11. The present demands of the home or facility do not exceed the ability of the substitute caregiver to provide safe and protective care.
- Document the date, time, location, and observations of the condition of the environment in FACIS.
- If any of the above conditions do not exist in the home or facility, and the caseworker cannot confirm the safety and well-being of the child, the caseworker must:
 1. Assess child safety immediately to determine if there is a safety threat.
 - a. If a safety threat is identified, the caseworker must immediately:
 - Consult with the caseworker's supervisor to determine any immediate protective action required to assure the child's safety or any action required to assure the safety of the child.
 - Contact a CPS screener and report the identified safety threat to the child.
 2. Document the behaviors, conditions, or circumstances observed in the home or facility and any immediate protective actions in FACIS.
- When the child is currently safe in the home or facility but the conditions described above are not fully met, the caseworker must:
 1. Contact the child caring agency's management to report the conditions of the home or facility and request additional supportive resources for the provider.
 2. Document in FACIS case notes the contact with the child caring agency's management.
 3. Have face-to-face contact with the provider and the child within the next 30 days and the visit must occur in the home or facility. The caseworker must observe the behaviors, conditions, or circumstances of the home or facility and the child and other children in the home or facility.
 4. When the caseworker can confirm that current conditions in the home or facility provide safety and well being for the child the caseworker must:
 - a. Document the date, time, location, and observations of the condition of the environment in FACIS.
 - b. Contact the child caring agency's management and report the improved behaviors, conditions, or circumstances in the home.
 5. When the caseworker can confirm the child's safety but cannot confirm that current conditions in the home or facility meet the requirements in OAR 413-080-0059 (3)(a)(D), the caseworker must:

Chapter III - Managing Child Safety In and Out of Home

- a. Consult with the supervisor to determine whether an immediate protective action is required to assure the child's safety or any other action is required to assure the child's safety. –OR–
- b. Whether consultation with the child caring agency's management is necessary to provide additional support and assure child safety.
- c. Document the date, time, location, and the behaviors, conditions, or circumstances in the home or facility and any actions in FACIS.
- d. Document contact with the child caring agency's management.

Monitor the Case Plan

Procedure

- The caseworker is responsible for continually monitoring all aspects of the Child Welfare Case Plan:
 1. The sufficiency of the ongoing safety plan.
 2. The safety of the child.
 3. The interventions are the least intrusive available to keep the child safe.
 4. The parents' progress in the activities and services focused on enhancing protective capacity and/or managing safety threats.
 5. The child's needs are being met.
- The contact requirements are the caseworker's vehicle to monitor the Child Welfare Case Plan. Consider the following questions:
 1. Am I confident that the child is safe now?
 2. Does the child report that he or she is safe and can you observe a safe environment in the home?
 3. How are parents progressing in enhancing protective capacity? What behaviors, conditions or circumstances have I observed that indicate change is occurring?
 4. Am I learning new things about the family that would indicate that the Child Welfare Case Plan or services should be modified to more specifically focus on the diminished protective capacities that make the child unsafe?
 5. Are there ways services can be less intrusive and still keep the child safe?
 6. Are the parents making sufficient progress that I can begin to work toward case closure?

Chapter III - Managing Child Safety In and Out of Home

7. What do I need to feel confident that child safety can be sustained without Child Welfare involvement?
- Consult regularly with your supervisor on the case.

Documentation

- Document in FACIS case notes:
 1. The date, type, and location of each contact with the child and parent.
 2. The date and type of each contact with each participant in the in-home ongoing safety plan.
 3. Observations and condition of the child during the home visit.
 4. Observations and condition of each parent during the home visit.
 5. Changes observed in the ability of the parents to provide protective care.
 6. Observations or reports from ongoing safety plan participants and service providers.;
 7. How the ongoing safety plan continues to assure the safety of the child, or any revised safety plan and the facts supporting that revision.
 8. Any immediate protective action if required to assure the safety of the child.

What do I talk to a child about?

For a toddler or a young child, the caseworker can observe the child to see how comfortable the child is in the home and around their parent. The caseworker can ask the child simple questions like what type of things they do, are there lots of people in their house and, even if it is a child a little bit older, if they feel safe.

For an older child, the caseworker can ask specific questions about how safe they feel, how they get to school, who is at the home when they are, what type of things they like to do. Also refer to Chapter IV for more information on visitation.



Chapter III - Managing Child Safety In and Out of Home



Legal References

- I-AB. 4 CPS Assessment
http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-ab4.pdf
- I-B.1 Monitoring Child Safety
http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-b1.pdf