

# INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY

Chapter 4: Assessment

**Section 26:** Determining Service Levels and Transitioning to Permanency Services

Effective Date: April 1, 2024 Version: 5

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#### **POLICY OVERVIEW**

The Indiana Department of Child Services (DCS) intervenes at the least intrusive level possible, given the assessment findings and circumstances of each case. As the case transfers from assessment to permanency, a determination is made of the child and family's initial service needs to plan for appropriate services.

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#### PROCEDURE

The Family Case Manager (FCM) will:

- 1. Identify any challenges, including those disclosed by the family (e.g., a lack of adequate food, housing, employment, transportation, healthcare, childcare, language barriers, reasonable modifications to accommodate a disability). If assistance is requested and/or a need is identified:
  - a. Provide the family with information regarding community resources and service providers (see 4.G Tool: Community Resources and Prevention Services); and/or
  - b. Request emergency funds when other resources are not immediately available by submitting the Request for Additional Funding form to the FCM Supervisor. See policy 16.03 Assistance for a Family of Origin's Basic Needs.
- Utilize the Child and Adolescent Needs and Strengths (CANS) Assessment, Risk Assessment, Safety Assessment, and the Family Functional Assessment (FFA) Field Guide as tools to mutually determine the family's strengths and underlying needs. See policies 4.18 Establishing Initial Child Safety, 4.23 Initial Risk Assessment, and 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment;
- 3. Ensure a plan is developed for visitation between the child and parent, guardian, or custodian within 48 hours of removal, if applicable. See policy 8.12 Developing the Visitation Plan;
- 4. Collaborate with the family and the Child and Family Team (CFT) to identify needed services based on the family's strengths and underlying needs. See policy 5.07 Child and Family Team (CFT) Meetings and 5.10 Family Services;

**Note:** A transition CFT Meeting attended by both the assessment and permanency FCM is a vital function for successful case transfer, but may be completed after a case is officially transferred. See policy 5.01 Assessment to Permanency Case Transfer Process.

- 5. Complete a provider referral in KidTraks to refer the family for any appropriate services prior to case transfer;
- 6. Continue to monitor the child's safety and well-being until the official transfer to the permanency FCM;
- 7. Ensure the permanency FCM is aware of visitation plans, Safety Plan and/or Plan of Safe Care, services referred, and any additional needs of the family (see policies 4.18 Establishing Initial Child Safety and 4.42 Plan of Safe Care);
- 8. Communicate with the DCS Staff Attorney when the case has transferred to the permanency FCM; and
- 9. Document all actions taken in the case management system.

#### The FCM Supervisor will:

- 1. Review assessment details with the FCM during regular case staffing;
- 2. Ensure the visitation plans (if applicable) and referrals for services are completed as required;
- 3. Ensure all actions taken are documented in the case management system; and
- 4. Ensure the permanency worker is aware of the details of the case and actions taken.

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## **RELEVANT INFORMATION**

### **Definitions**

## Case Staffing

Case staffing is a systematic and frequent review of all case information with safety, stability, permanency, and well-being as driving forces for case activities.

## Community Resources

Community resources can be essential in helping children and families access support and assistance to meet their unique needs. Community resources may include, but are not limited to, the following:

- 1. Concrete support (e.g., public assistance, food pantries, utility assistance);
- 2. Housing assistance;
- 3. Child care:
- 4. Parenting education;
- 5. Child development activities;
- 6. Transportation; and
- 7. Access to mental health and substance abuse treatment.

#### **Functional Strengths**

Functional strengths are "the buildable" strengths of our families, which help build toward goal achievement.

#### Protective Factors

Protective Factors are conditions or attributes in individuals, families, and communities that promote the safety, stability, permanency, and well-being of children and families.

## **Underlying Needs**

Underlying needs are the root source of an individual and/or family's challenges, which determines the appropriate use of services or interventions.

#### **Forms and Tools**

- 4.G Tool: Community Resources and Prevention Services
- Case Plan/Prevention Plan (SF 2956) Available in the case management system
- Child and Adolescent Needs and Strengths (CANS) Assessment Available in KidTraks
- <u>Division of Family Resources</u>
- Family Functional Assessment Field Guide
- Initial Family Risk Assessment Available in the case management system
- Initial Safety Assessment Available in the case management system
- In-Home Risk and Safety Reassessment– Available in the case management system
- Out-of-Home Risk and Safety Reassessment Available in the case management system
- Plan of Safe Care (SF 56565)
- Program of Informal Adjustment Available in the case management system
- <u>Protective Capacities and Protective Factors: Common Ground for Protecting Children and Strengthening Families</u>
- Provider Referral Available in KidTraks
- Request for Additional Funding (SF 54870)
- Safety Plan (SF 53243)
- Service Standards Summaries and Comparisons

#### **Related Policies**

- 4.18 Establishing Initial Child Safety
- 4.23 Initial Family Risk Assessment
- 4.42 Plan of Safe Care
- 5.01 Assessment to Permanency Case Transfer Process
- 5.07 Child and Family Team (CFT) Meetings
- 5.08 Developing the Case Plan/Prevention Plan
- 5.09 Informal Adjustment/Prevention Plan (IA)
- 5.10 Family Services
- 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment
- 8.12 Developing the Visitation Plan
- 16.03 Assistance for a Family's Basic Needs

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#### LEGAL REFERENCES

N/A

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#### PRACTICE GUIDANCE- DCS POLICY 4.26

Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.

## Consideration of Protective Factors to Ensure Safety

Protective Factors are directly connected to the strengths of the family and may be used as a resource to learn new skills and solve problems. By using a protective factors approach, child welfare professionals and others can help parents find resources and supports that emphasize their strengths while also identifying areas where they need assistance, thereby mitigating the chances of child abuse and neglect. When completing a Safety Plan, consider the protective factors listed on the Protective Capacities and Protective Factors: Common Ground for Protecting Children and Strengthening Families document under Forms and Tools as part of an evaluation of the family's ability to ensure the safety of the child.

### **Recommended Service Levels**

**No services needed**: Children are assessed as safe. There are no (or extremely low) risk factors. Children and their families are able to manage any risk factors using their own strengths and resources.

**Referral to prevention services**: There is low risk to the children, but their families are not able to manage risk factors using their own strengths and resources. However, the families are able to use prevention resources for support without ongoing DCS case management services. DCS involvement is limited to actively linking the families with those prevention services and community resources that effectively and safely address their needs.

Informal Adjustment/Prevention Plan (IA): An IA may be appropriate for children in families where risk levels range from moderate to very high, but coercive intervention of the court is not needed. DCS will work with families to develop the terms of the IA, monitor participation in services, and regularly evaluate the safety of children. The court must approve IAs. Consequences for not complying with the terms of an IA may include, but are not limited to, court intervention, such as filing a Child in Need of Services (CHINS) petition (see policy 5.09 Informal Adjustment/Prevention Plan [IA]).

**CHINS:** DCS may file a CHINS petition (highest level of intervention) for children in families where the risk level is high or very high and coercive intervention of the court is needed to ensure safety and well-being of children. The children may stay in the home or be placed in substitute care. The court monitors CHINS cases, including the Case Plan/Prevention Plan and permanency goal (see policy 5.08 Development the Case Plan/Prevention Plan). Consequences for parental noncompliance with the Case Plan/Prevention Plan and permanency goal may include, but are not limited to, a placement in substitute care, and in the most extreme circumstances, termination of parental rights (TPR).

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