



DISTRICT OF COLUMBIA

F A C E S . N E T

CHILD AND FAMILY SERVICES AGENCY

PRE-SERVICE MANUAL

Spring 2009
Version - 3.2

FACES.NET PRE-SERVICE MANUAL



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PREFACE

Course Objectives

- Course Overview
- Course Objectives
- Course Curricula Tools and Symbols



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Course Overview

Welcome to the FACES.NET three-day Pre-Service training. This course is designed to give trainees an understanding of the functions in FACES.NET pertaining to Case Management. The course is divided into sections, each having its own set of objectives and corresponding to a particular area of functionality in the FACES.NET system. A FACES.NET Scenario has been constructed to link the sections together and mimic the way FACES.NET will be used for Agency business. In the classroom, trainees will participate in a guided walkthrough of the FACES.NET Scenario in order to practice activities based on real-life situations.

Please keep in mind that the FACES.NET system is frequently updated, and some of the screens may have slightly changed after this document was printed.

Course Objectives

Upon completion of this course, the trainee will have an understanding of how CFSA business process correlates with FACES.NET data entry. FACES.NET Pre-Service training will reinforce the lessons covered in the three-month Pre-Service Training Program offered by the Office of Training Services. By giving trainees practice time in the classroom, they will build confidence in their ability to properly enter and access data in the FACES.NET system.

Remember that a system is only as good as the information it receives. This course will train trainees how to supply FACES.NET the proper information so that it can remain a Federally certified Child Welfare Information Systems in the Nation. Best Wishes!

Course Curricula Tools

Curricula Features:

- Performance Objectives
- FACES.NET Guide
- FACES.NET Scenarios

Curricula Symbols

The following icons are used throughout the FACES.NET Scenario Guide:

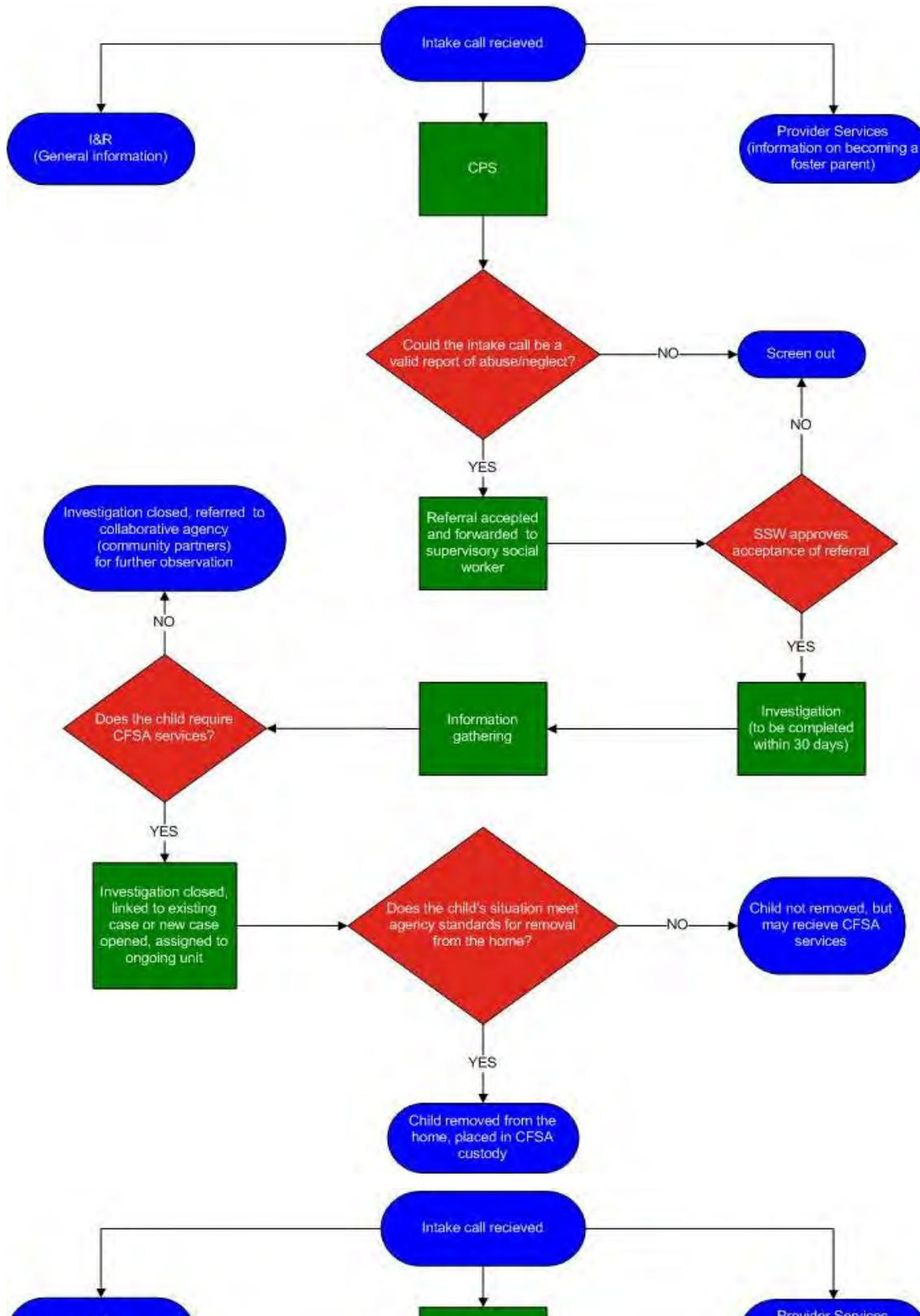
Icon	Title	Description
	Reminder	Indicates that there is an important point to which the trainee needs to pay attention.
	Definitions	Indicates that a word or concept is being defined.
	Note	Indicates a helpful piece of information for the trainee to know.
	Practice	Indicates Agency practice information.
	FACES.NET Guide	Indicates the section of the manual having FACES.NET step-by-step instructions.

Course/Classroom Rules

- Course begins promptly at 9:00AM and ends at 4:00PM on the each consecutive training day.
- Lunch is one (1) hour.
- Two fifteen (15) minute breaks. One in the morning and one in the afternoon.
- No eating or drinking in the classroom.
- No roaming on the Internet.
- Cell Phone should be off or in vibrate/silent mode.

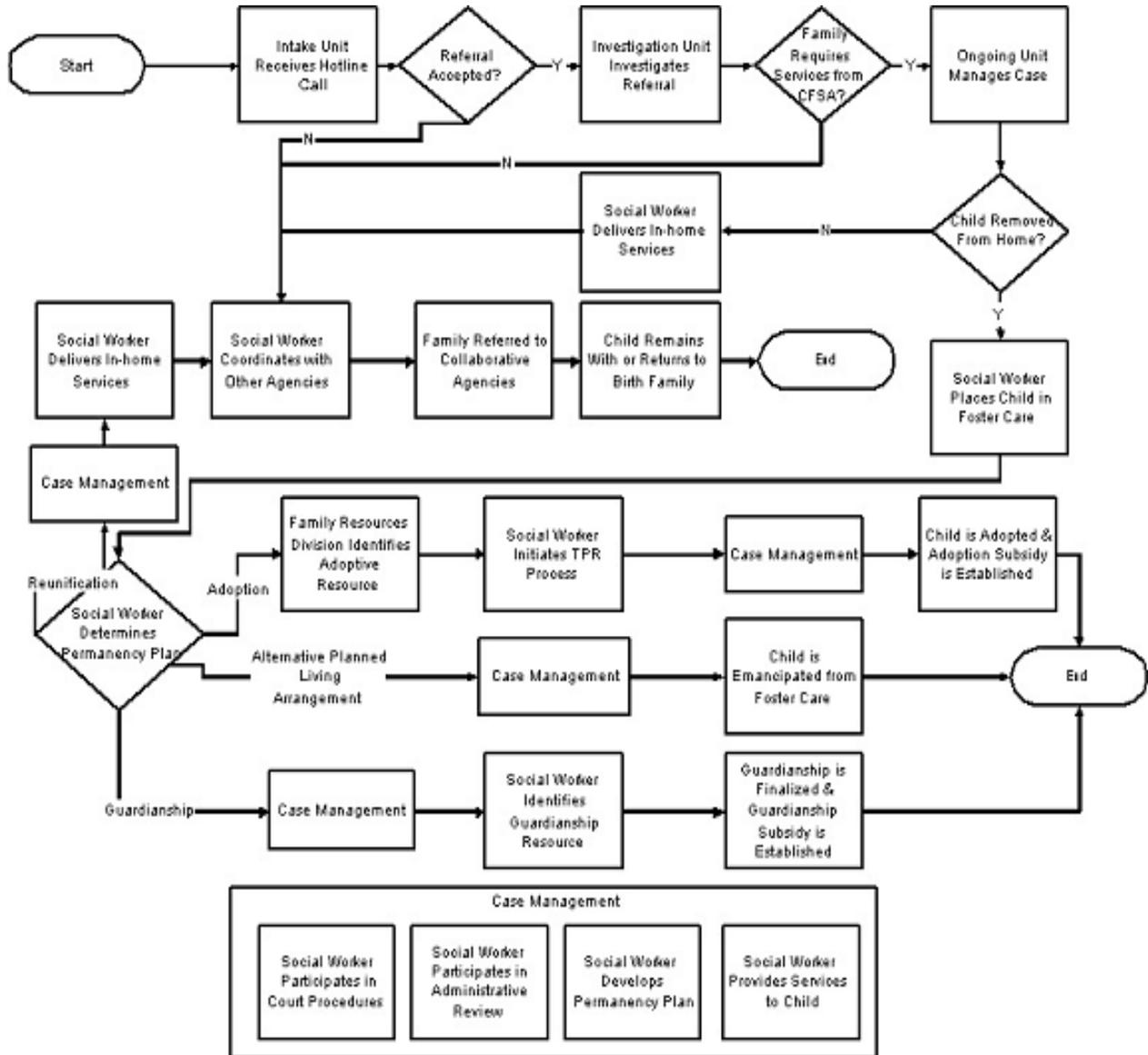
Child Protective Services & Placement Flow Chart

The flow chart below provides a high level overview of the flow from the Intake/Investigation and Placement information within the Agency. From this depiction you can visualize from the point of the initial hotline call to the many avenues taken to provide the best scenario for children and families that come into our care.



Life of a Case

The flow chart below provides a high level overview of the flow from the Intake/Investigation, Placement, and then Permanency information within the Agency. From this depiction you can visualize from the point of the initial hotline call to the many avenues taken to provide the best scenario for children and families that come into our care then ultimately find a permanent living environment.



Note: CFSA has embedded a permanency planning social worker (PPSW) in 29 out-of-home care units in In-Home & Reunification Services, Permanency & Family Resources, and Youth Development

SECTION 1: INTRODUCTION

- What is FACES.NET?
- How to Use This Manual
- How to Get Help
- The Family Case



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Introduction

What is SACWIS?

- Federally mandated through the Administration of Children and Families;
- Comprehensive automated case management tool that supports a case from investigation, removal of a child through placement, until the child achieves permanence, and all the other supportive functions such as finance, contracts, clinical practice, well being indicators, etc;
- Required to support mandated Federal reporting of data to the Adoption and Foster Care Analysis Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS).
- House and utilize information to promote stability, economic security, responsibility, and self-sufficiency of children and families within our care;
- Captures the entire life of a case;
- Ability to provide case specific and aggregate reports;
- Collects information relating to the eligibility of individuals under Title IV-E.

What is FACES.NET?

FACES.NET is the District of Columbia's Statewide Automated Child Welfare Information System (SACWIS). The Child and Family Services Agency (CFSA) is the District of Columbia's child protection agency, which employs more than 900 social workers, and partners with fifteen private agencies. FACES.NET is designed to support social workers and the Agency in the following areas:

- Case management activities, such as documenting contacts/visits, writing case plans and court reports;
- Issuing payments to service providers;
- Collecting data to produce outcome-based management;
- Standardizing policy and practice.

FACES.NET has enabled the Agency to collect and disseminate information to diverse audiences including the Court Monitor, the Mayor's Office, *The Washington Post*, Federal oversight agencies such as the General Accounting Office (GAO), Administration of Children and Families (ACF), and Congress.

How to Use this Manual

This FACES.NET Pre-Service manual is designed to introduce and reinforce the concept of using an automated information system to improve child welfare practice. In particular, the guide focuses on the responsibilities of social workers, who are the front-line workers of the Agency.

This manual further serves two functions. First, it will be your guide during the FACES.NET portion of your CFSA Pre-Service training. With your instructor, you will complete each of the Sections and gain an understanding of how to use the FACES.NET system in your day-to-day case management responsibilities. You will complete the Sections over the three-day course. Each section is organized in an easy-to-read manner laying the groundwork with a Practice Overview segment. Afterwards there are detailed step-by-step instructions on how to accomplish that topic using FACES.NET.

The second function of this manual is to serve as a desktop guide for FACES.NET use after you have completed the initial training. You may keep this copy of the manual, and make any notes that you desire during class. At the end of each section is a page designated for note-taking. Later, if you need to review how a particular task is performed in FACES.NET, you can look it up at your convenience.

This document adheres to standardized technical writing conventions. All command buttons are displayed the way they appear on the computer screen. All commands are in bold, indicating that an action should be taken. Each scenario is introduced using real case stories or training activities in order to provide an appropriate context for the particular module. Throughout the manual, participants in the Jackson case are highlighted using the underline feature.

How to Get Help

If you still have question after consulting this resource, you are of course welcome to contact the FACES.NET Helpdesk. Helpdesk staff is available from 8:00 AM - 5:00 PM every weekday to assist with FACES.NET and technical questions. The FACES.NET helpdesk can be reached at 202- 434-0009.

The Family Case

The Jackson family case is the case you may be familiar with from other elements of your Pre-service training, and is used as the sample case in this document. The scenario that you may use during the actual FACES.NET training may slightly differ. If so, follow your instructors' directions on how to reconcile this manual with the case details you see in FACES.NET. Details of the Jackson family case begin on the following pages.

Jackson Case Narrative

Office of Training Services Pre-Service Training for New Social Work Staff Field Practice Case

Learning Objectives:

1. Through using a case illustration, workers will have a better understanding of CFSA's programs and policies.
2. Through case illustration, workers will be able to understand how to effectively deliver services to clients.

Case Name: Shanté Jackson

Case Description:

The Jackson case came to the attention of Child and Family Services Agency's Child Protective Services Administration due to an allegation of abuse and neglect against Ms. Jackson. Ms. Jackson was previously known to CFSA. A neighbor reported Ms. Jackson's young children were left home alone and were seen in the streets unsupervised, unkempt and inappropriately dressed. It was also alleged that there were drug trafficking activities in Ms. Jackson's apartment. Upon investigation of the allegations, you observe that one child had (what appeared to be) belt marks on both arms and on her back.

Household Composition:

Name	Age	Gender	Description
<u>Shanté Jackson</u>	30 years old	Female	Mother
<u>Paul Williams</u>	16 years old	Male	Son/Sibling
<u>Femalé Scott</u>	15 years old	Female	Daughter/Sibling
<u>Keyshawn Jackson</u>	12 years old	Male	Twin Son/Sibling
<u>Reyshawn Jackson</u> (<u>Rey-Rey</u>)	12 years old	Male	Twin Son/Sibling
<u>Tanisha Holmes</u>	7 years old	Female	Daughter/Sibling
<u>Latonya Holmes</u>	5 years old	Female	Daughter/Sibling
<u>Lakeisha Jackson</u>	3 years old	Female	Daughter/Sibling
<u>Rodney Scott</u>	2 years old	Male	Grandson
<u>Kiana Scott (Bebe)</u>	6 months old	Female	Granddaughter

Family Description:

Shanté Jackson is a 30-year-old, single, African American female. She is the mother of seven children and two grandchildren. She has a 7th grade education and no history of employment. **Shanté** has a history of substance abuse, sexual abuse, and depression. She currently uses cocaine and alcohol and is involved in selling drugs from her apartment. **Shanté** receives public assistance. Last month, she was beaten by one of her drug dealer boyfriends. She received multiple bruises to her head and body, a broken arm, and a black eye. As a result, she continues to suffer from frequent severe stomach pains and headaches. **Shanté** is estranged from her family members and has no contact with the biological fathers of her children. She does not have a support system or friends.

Paul Williams is a 16-year-old, African American male. He attends Carter Senior High School where he is in the 9th grade for the third time. His grades are poor and he is often truant. Socially, **Paul** functions at a very low level. He has few friends, displays extreme anger and aggression towards others, and often gets into fights with peers and school officials. **Paul** smokes marijuana and drinks beer at least twice per week and on weekends. He also assists his mother sell drugs from their home. He has been involved in petty thefts and has had frequent trouble with law enforcement officials.

Femalé Scott is a 15-year-old African American female. She has two small children **Rodney**, age 2, and **Kiana (Bebe)**, age 6 months. **Rodney** displays temper tantrums and aggressive behavior that are often difficult for **Femalé** to handle. Otherwise he is progressing well and is happy and healthy. **Femalé** dropped out of junior high school when she became pregnant with her son **Rodney**. She sporadically attended an adult education program until she became pregnant with **Kiana**. During her pregnancy with **Kiana**, she occasionally drank beer and smoked marijuana. Currently, **Femalé** does not attend school. She is unaware of the whereabouts of her son **Rodney**'s father. However, she has sporadic contact with **Kiana**'s father, **Ricky Boone**, who provides no financial support to his daughter. **Femalé** smokes marijuana and drinks alcohol. She often hangs out on the corner with her friends and leaves **Rodney** and **Kiana** at home with her seven-year-old sibling, **Tanisha**. Although **Femalé** lives with her mother, they have a strained relationship. They frequently argue and fuss at each other regarding **Femalé**'s children and household responsibilities.

Rodney Scott is a 2 year old, African American toddler. He is a happy and healthy child. However, he displays temper tantrums and aggressive behavior that are difficult for his mother to handle. **Rodney** is progressing well developmentally. He enjoys playing with his 6 month old sibling, his aunt and uncles. He also enjoys watching Barney and Teletubbies.

Kiana Scott (known to her family as **Bebe**), is a 6 month old African American infant. She is progressing poorly physically and developmentally. **Kiana** possibly has failure to thrive syndrome. However, she sporadically receives her well baby check-ups as **Femalé** often forgets her appointments. **Kiana**'s eating habits are poor; she has not gained adequate weight in the last three months and has some developmental lags. **Kiana** cries excessively when she is not being held or played with.

Keyshawn Jackson is a 12-year-old African-American male and twin brother of **Reyshawan**. **Keyshawn** currently attends Parker Junior High School, where he is in the 6th grade. He

receives special education and is classified as emotionally disturbed. Keyshawn's grades are poor. He bullies other children in his class and is often involved in altercations. Keyshawn is disrespectful to his teachers and other school officials. He has been suspended twice in the last month. His grades are poor. Keyshawn displays anger and aggression both in school at home. His mother is unable to handle his angry outbursts and rages. He also destroys property at home and frequently gets into fights with his siblings and peers in the neighborhood.

Reyshawn Jackson (Rey-Rey) is a 12-year-old African-American male and twin brother of Keyshawn. Reyshawn attends Parker Junior High School, where he is in the 6th grade. He receives special education and is classified as learning disabled. Reyshawn is socially withdrawn and often appears sad and depressed. Reyshawn also stutters and prefers not to talk in order to avoid being teased. He has few friends and has difficulty fitting in with his peers. His grades are poor, but he tries very hard. At home he is sad, withdrawn, and is teased by his siblings.

Tanisha Holmes is a 7-year-old African-American female. She currently attends Lee Elementary School, where she is in the 3rd grade. Tanisha is an outgoing and friendly child. However, she is often attention seeking and overly affectionate with adults. Socially, she has few friends and gets along well with peers. Academically, she has difficulty with reading and math. She participates in a reading and math resource program at school and tries very hard to succeed. She is well liked by her teachers. Tanisha suffers from Enuresis and occasional Encopresis. She is embarrassed by her condition due to the fact that her classmates tease her about her odor. Tanisha also needs glasses. At home, Tanisha is overly sweet and compliant. However, her mother often physically punishes her for wetting and soiling herself. Tanisha also has unrealistic expectations and adult responsibilities placed on her, as she is often the caretaker for the younger children (Latonya, Lakeisha, Rodney, and Kiana) in the home. Consequently, Tanisha receives a beating for the wrongdoings of the other children. Tanisha enjoys her role as caretaker as she doesn't have many friends.

Latonya Holmes is a 5-year-old African American female. She attends Lee Elementary School, where she is Kindergarten. Latonya enjoys school and is generally a happy child. Latonya suffers from chronic bronchial asthma. She often requires hospitalization after an attack. Latonya's bronchial asthma is controlled with medication. At home, Latonya is quiet and withdrawn and cries easily. Latonya sleeps with her mother due to lack of space in the home. However, her mother's boyfriend also sleeps in the same bed occasionally. Due to the sleeping arrangements, Latonya has been subjected to ongoing sexual molestation by the mother's boyfriend. She revealed this to her sister Tanisha and told her not to tell. Latonya enjoys watching Barney and Teletubbies on television.

Lakeisha Jackson is a 3-year-old African American female. Lakeisha was born with a positive toxicology to cocaine. She was also born with the sickle cell trait. She was placed in foster care at birth, but returned home after three months. Lakeisha is developmentally delayed. She uses one to two word phrases, walks on her toes, and sucks her thumb. She is not potty trained and continues to use a bottle. Lakeisha also sleeps in the bed with her mother and Latonya. Lakeisha has frequent colds. She enjoys watching Barney and Teletubbies.

Description of Environment:

The family resides at 1254 Edgefield Terrace # T105, at the Brookfield Housing projects, in the N.E. section of Washington, D.C. The neighborhood is predominantly comprised of African Americans and some Hispanics. The neighborhood is heavily drug and crime infested. However, there are many community services and resources in the area. This includes substance abuse programs, mental health clinics, the Edgefield Collaborative, hospitals, and shelters.

Description of the Home:

The Jackson home consists of two bedrooms, one bathroom, a small living room/dining room, and a tiny kitchen. Home maintenance is very poor. The apartment reeks of urine, and is cockroach infested. There is dirty clothing and other miscellaneous items scattered all over the apartment floor. The kitchen is filthy with dirty dishes in the sink, on the countertops, and on the floor. The apartment is sparsely furnished with one couch, a small dining room table, one small television, two full size beds, one crib, and a playpen.

SECTION 2: SYSTEM NAVIGATION

- Definition of Icons and Language Usage in FACES.NET



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Practice Overview

FACES.NET is strategically used to support case practice and the business processes within each Administration. There are common icons and buttons that run throughout FACES.NET and aid in the ease of use of the FACES.NET screens. This segment illustrates some important features to know about the FACES.NET system.

Definition of Icons and Language Usage in FACES.NET

This segment reviews icons and language usage in this guide relative to FACES.NET.

Drop-Down Menu



Figure 2.1

The gray command buttons at the top of the FACES.NET screen are the Drop-Down Menus. These command buttons, which feature the Referral, Case, Client, Provider, and Admin, are always accessible in FACES.NET, no matter what screen you are on. The options, within the menu, dynamically change as different entities are brought into focus, but the five main command buttons remain accessible. The menu includes a parent/child system. What this means is that any menu that has a gray arrow on the right side of the menu contains additional screens within it.

Breadcrumbs Toolbar



Figure 2.2

This toolbar is displayed when a specific track (Referral, Case, etc.) is selected. This toolbar will change depending on where you are in the system. Blue areas are previous selections accessed through these command buttons display menu listings which will dynamically change. The orange button is the screen that is currently in the work area.

Quick Link



Figure 2.3

The Quick Link is a new functionality within FACES.NET. This box, in the upper right hand corner of FACES.NET, allows for the entry of a Referral, Case, Client, Provider, Staff, Workshop ID, or Contract ID to bring that entity into focus.

Toolbar Additional Screen Icon

The additional screen icon is a small picture found on certain toolbar buttons. If the button has this icon, it means that there are lower level screens associated with that button. When you click on that button, it will move to the left side of the breadcrumbs toolbar, and a new series of buttons will appear on the right side of the toolbar. If a toolbar button does not have an icon, it means that there is only one screen associated with that button.



Button with Icon

Figure 2.4



Button with no Icon

Figure 2.5

Radio Buttons

Radio buttons are the round circles found next to certain fields in FACES.NET. These allow you to quickly select a displayed option. Once selected, the radio button will turn to green. Only one radio button may be selected at a time.

Additional Information

Associated Referral and Assignment*

Do Not Associate
 Associate with Referral
 Associate with Case

Referral/Case ID:

Find:

Worker: Unit:

Figure 2.6

Select Boxes

Select Boxes are collections of check boxes within a pop-up screen. These allow you to quickly select a displayed option. Once selected, the check box will contain a ✓ inside the box. Unlike the radio button, more than one check box within the select box may be selected at a time.

Strengths

Available

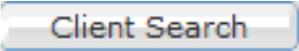
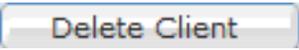
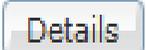
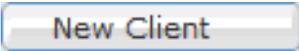
- Academically Successful
- Accepts Consequences for Own Behavior
- Accepts Discipline
- Accountable for Own Behavior
- Active/Energetic
- Adaptive
- Adorable
- Affectionate
- Alert
- Assertive
- Attentive
- Attractive
- Brave/Courageous
- Bright
- Bright Eyes

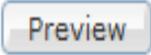
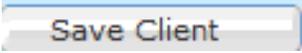
Ok Cancel

Figure 2.7

Command Buttons

The row of gray/orange buttons on the bottom of any FACES.NET screen is called the Command buttons. These buttons are used to perform specific actions. A list of common command buttons and their functions are provided below:

Command Buttons	Definition
	Approval – Sends information to the Supervisor for approval.
	Cancel - Exits the current screen (This should be used every time you exit a screen).
	Clear – Clears all the information out of all fields within the screen. This will not delete saved information within a record.
	Client Search – Searches the client within the FACES.NET System.
	Delete – Erases a record from the database. This action is normally disabled in most screens.
	Delete Client – Deletes a client from the referral in the Hotline Report Screen.
	Details – Shows the details of a file within the File Cabinet.
	Edit – Opens a field for editing.
	Import – Imports a file to the File Cabinet.
	New – Creates a new record. Creates a blank record on the screen in focus.
	New Client – Opens a new client in the Hotline Report Screen.

Command Buttons	Definition
	Ok – Enters a selection into the record.
	Open – Opens a file within the File Cabinet.
	Override – Allows for a supervisor to override a decision made within the CPS Outcome screen.
	Preview – Allows for viewing of a report as a .pdf file.
	Print – Prints a selected report from the Management Reports.
	Save – Saves the record to the database.
	Save Client – Saves a client to a referral in the Hotline Report screen.
	Search – Searches the database for a specific record.
	Show – Puts a selected entity/record into focus.
	Validate – Validates Information within the Hotline Report screen.

Notes

SECTION 3: CASELOAD REVIEW

Performance Objectives

In this Section, you gain confidence in your ability to:

- Navigate to your Caseload
- Review your Caseload
- Review Referral Information for a Case in your Caseload
- Access and Review Associated Cases
- Associate Cases
- View Associated Referrals and Cases
- Access and View Audit Trail Information



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Practice Overview

New social workers are guided through a rigorous training program before they receive case assignments. As a worker you may receive a case that has been transferred from the Child Protective Services unit. It is the responsibility of the social worker to identify the necessary resources and strategies, review case records and maintain documentation.

It is the policy of the Child and Family Services Agency that all cases being transferred should have a case transfer conference between the original worker and the worker receiving the case. Within five (5) days of receiving the case notification, the original and newly assigned social workers are to meet and discuss the case to assure continuity of planning and service delivery and to establish a joint home visit. During this transfer conference the social workers and supervisors are present to discuss and transfer knowledge of the case to the new worker. Family Team Meetings (FTMs) that are held when a child is removed during an investigation also serve as a transfer conference. In addition the hard copy record is given to the new worker/supervisor. If the case is transferred from an External Agency to CFSA, then the Program Monitor would also be included in the Case Transfer Conference meeting.

Case Transfer Requirements for Foster Care Cases

The following requirements apply to the case record being transferred to Foster Care:

1. Identification of all the children in the family and their whereabouts;
2. A home visit that included face-to-face contact within 7 days of the case transfer;
3. An updated family or child case plan, along with documentation in FACES.NET;
4. All current court orders and a current court report must be included in the case record;
5. Transfer summary report is to include:
 - a. Client Information;
 - b. Parent Information;
 - c. Sibling Information;
 - d. Placement Information;
 - e. Educational Information;
 - f. Court Information;
 - g. Reason for agency involvement; and
 - h. Summary of social history.
6. Risk Assessment Tool (to include Safety Plan, Family Assessment) is to be completed in FACES.NET;
7. Case Transfer Conference - within five (5) days of case notification the original and newly assigned social workers are to meet and discuss the case to assure continuity of planning and service delivery and to establish a joint home visit where possible;
8. If the case is being transferred from another ongoing unit the transferring social worker has responsibility for completing the following documentation before transferring of the case for the following:
 - a. completion of case plan;
 - b. completion of court report;
 - c. completion of permanency staffing; and
 - d. completion of administrative review.

Assignments

Often a social worker or a specialized unit needs access to a case to provide services to a client. When this occurs, the staff member is granted a family, child, or administrative assignment. Assignments are created by supervisors and program managers only or are system generated in some cases.

The social worker cannot update the case until they have an assignment to a particular child or family in FACES.NET.

If a family assignment is created, the worker is responsible for all children in the family unless a child assignment is designated for a particular child in the family.

Administrative assignments to specialized units such as Placement and Administrative Review are created automatically. For example, once a supervisor has approved a Placement Request, the Placement Unit automatically receives a placement request in their inbox.

Transfer Summary

All cases being transferred should have a case transfer conference between the worker receiving the case and the original worker of the case. Within five (5) days of receiving the case, the original and newly assigned social workers are to meet and discuss the case to assure continuity of planning and service delivery. During this transfer conference the social worker and supervisors are present to discuss and transfer knowledge of the case to the new worker and it is in this meeting that the worker receiving the case has an opportunity to ask any outstanding questions concerning the case. The Transfer Summary details the information with a case being transferred from one social worker to another.

For further reference to case transfer, assignment and transfer summary requirements see the electronic form of the CFSA's Policy and Procedures through the CFSA intranet or the Office of Policy, Planning, and Program Support at (202)724-7100.



FACES.NET Guide

The previous segment focused on agency practice revolving around reviewing risk assessment tools, case transfer conference and information pertaining to receiving new cases. This section will guide you through the relevant FACES.NET screens.

Navigate to your Caseload

The Workload dialog box displays all of the cases that have been assigned specifically to each worker. When a case is assigned to a worker it can be found in their workload.

Steps Include:

- Step 1: Click the **Workload** area, then click the **My Assignments (+)** link within the left pane to display your **Workload**.

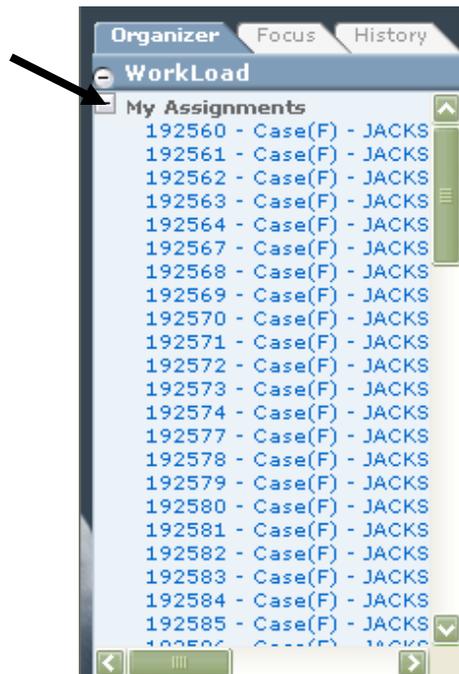


Figure 3.1

- Step 2: Click the Case name that is being worked on. This will bring that Case into focus.

Step 3: Or click anywhere on the words “My Assignments” to view the workload in detail. This will bring up the **Workload List** page.

The screenshot shows the 'Workload List' page. The left sidebar has a 'My Assignments' link highlighted. The main area shows a table of cases. The row for ID 192577 is selected. Below the table are buttons for 'Show', 'Caseload', 'Transfer Summary', 'Edit Name', 'Print', 'Restrict', 'Contacts', 'Assign/Transfer', 'Close Case', 'Cancel', and 'Alerts'. A red arrow points from the 'My Assignments' link in the sidebar to the 'Show' button.

ID	Restricted	Type	Responsib	Referral T	Name	Client	Date Assig	Open Date	Resp. Time
192581		Case	Family		JACKSON52	SHANTE JAC	01/10/2006	01/10/2006	
192580		Case	Family		JACKSON51	SHANTE JAC	01/10/2006	01/10/2006	
192579		Case	Family		JACKSON50	SHANTE JAC	01/10/2006	01/10/2006	
192578		Case	Family		JACKSON55	SHANTE JAC	01/10/2006	01/10/2006	
192577		Case	Family		JACKSON54	SHANTE JAC	01/10/2006	01/10/2006	
192574		Case	Family		JACKSON42	SHANTE JAC	01/10/2006	01/09/2006	
192573		Case	Family		JACKSON29	SHANTE JAC	01/10/2006	01/09/2006	
192572		Case	Family		JACKSON41	SHANTE JAC	01/10/2006	01/09/2006	
192571		Case	Family		JACKSON28	SHANTE JAC	01/10/2006	01/09/2006	
192570		Case	Family		JACKSON40	SHANTE JAC	01/10/2006	01/06/2006	
192569		Case	Family		JACKSON03	SHANTE JAC	01/10/2006	01/06/2006	
192568		Case	Family		JACKSON49	SHANTE JAC	01/10/2006	01/06/2006	

Figure 3.2

Step 4: Highlight the Case that you wish to be bringing into focus and click **Show**. This will put that case into focus.



Note: The Workload List screen can also be used to access the Transfer Summary, Assign/Transfer, and Case Load pages, as well as, Close, Restrict and/or edit the contacts and case name within them.

Sort Workload



Note: The Workload may be sorted using various key category heading, i.e. Case or Referral ID, Referral Type, Case Name, Client or Date Assigned etc. Using one of the sort criteria, it can then be put in ascending or descending order.

Steps Include:

Step 1: Click the **Workload** area, and then click the **My Assignments** link within the left pane to display your **Workload**. *This will display a list of cases in the workload in the right display window. See Figure 3.3*

Workload List

* Denotes Required Fields ** Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Case / Intake / Other Listing

Program Area*
FACESNET TRAINING

Unit
ADMIN, T. - Training ADMIN 1760

Workers
TRAINER, ADMIN

Sort By: ▾

ID	Restricted	Type	Responsib	Referral T	Name	Client	Date Assig	Open Date	Resp. Time
192581		Case	Family		JACKSON52	SHANTE JAC	01/10/2006	01/10/2006	
192580		Case	Family		JACKSON51	SHANTE JAC	01/10/2006	01/10/2006	
192579		Case	Family		JACKSON50	SHANTE JAC	01/10/2006	01/10/2006	
192578		Case	Family		JACKSON55	SHANTE JAC	01/10/2006	01/10/2006	
192577		Case	Family		JACKSON54	SHANTE JAC	01/10/2006	01/10/2006	
192574		Case	Family		JACKSON42	SHANTE JAC	01/10/2006	01/09/2006	
192573		Case	Family		JACKSON29	SHANTE JAC	01/10/2006	01/09/2006	
192572		Case	Family		JACKSON41	SHANTE JAC	01/10/2006	01/09/2006	
192571		Case	Family		JACKSON28	SHANTE JAC	01/10/2006	01/09/2006	
192570		Case	Family		JACKSON40	SHANTE JAC	01/10/2006	01/06/2006	
192569		Case	Family		JACKSON03	SHANTE JAC	01/10/2006	01/06/2006	
192568		Case	Family		JACKSON49	SHANTE JAC	01/10/2006	01/06/2006	

*** Indicates Restricted or *A* Indicates Restricted && Adoption Security or 'A' Indicates Adoption Security

Figure 3.3

Step 2: Click **Sort By** in the **Workload List** screen. *The Sort screen will appear as in Figure 3.4*

Sort

Column Name	Sort By
Name	Ascending
	Ascending

Ok Cancel

Figure 3.4

Step 3: Click on the drop-down arrow to the right of the **Column Name** column to display sort values.

Step 4: Select a sort criterion from the pick list values displayed.

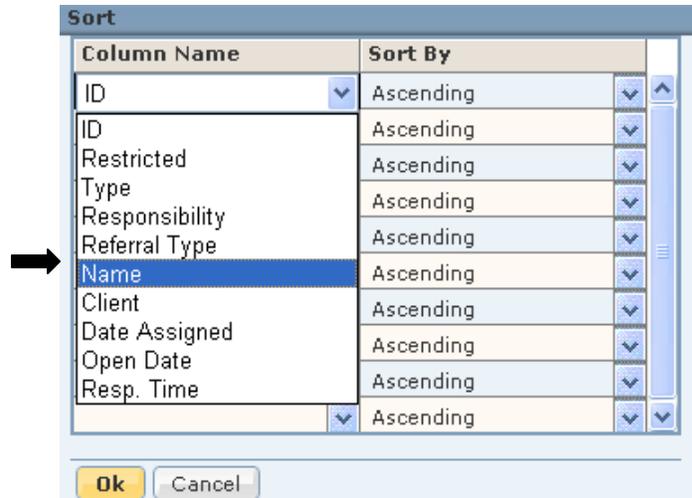


Figure 3.5

Step 5: Click **Ok**.

Step 6: Repeat Step 4 to indicate ascending or descending order of the sort under the **Sort By** column.

Perform a Case Search through the Case Search Screen



Note: A social worker can find any case in FACES.NET but will only be able to open cases to which the worker has been assigned or are assigned to another worker in the same unit.

Steps Include:

Step 1: Place the cursor over the **Case** menu and click **Search** from the drop-down menu.

The Search Criteria screen appears.

Step 2: Enter **Search Criteria** (Name, Case ID, or Focus ID).

Step 3: Click the **Search** button.



Note: The Search results show both the Case History and the Case Client list which shows all of the parties involved in the case.

The screenshot displays the FACES.NET Case Search interface. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The left sidebar contains 'Organizer', 'WorkLoad', 'My Assignments', 'My Units', 'My Workers', 'Other Program Areas', 'My Calendar', and 'My Tasks'. The main content area is titled 'Case Search' and includes a legend for field types: * Denotes Required Fields, ** Denotes Half-Mandatory Fields, and † Denotes AFCARS Fields. The 'Search Criteria' section has a 'Case Name' field containing 'JACKSON54', a 'Case ID' field, and radio buttons for 'CASE' and 'FOCUS'. Below this is a 'Type of Case' dropdown and a 'Threshold(1%-100%)' field set to '79'. The 'Search Results' section shows a table with 30 results, displaying columns for Case ID, Restricted, Case Name, Case Type, and % Match. The first row is highlighted, showing Case ID 192577, Restricted status, Case Name JACKSON54, Case Type CPS, and % Match 100. Below the table are tabs for 'Case History' and 'Case Client List', and a 'Search' button with 'Show', 'Clear', and 'Cancel' options.

Case ID	Restricted	Case Name	Case Type	% Match
192577		JACKSON54	CPS	100
192593		JACKSON45	CPS	94
192606		JACKSON59	CPS	88
192597		JACKSON58	CPS	88
192587		JACKSON57	CPS	88
192584		JACKSON56	CPS	88
192582		JACKSON53	CPS	88
192581		JACKSON52	CPS	88
192580		JACKSON51	CPS	88
192579		JACKSON50	CPS	88

Figure 3.6

Step 4: Click on the **Case Client List** tab.

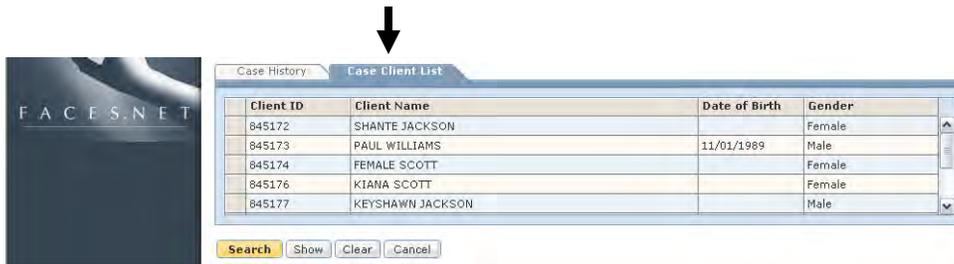


Figure 3.7

Step 5: Select the Jackson case and click the **Show** button to bring the case into focus.

Perform a Client Search

In the previous section we learned how to perform a case search. In the following exercises, you search for a Case and view additional Client information.



Note:

- A social worker will only be able to open cases to which the worker has been assigned;
- These screens are also available through both the Referral and Case tracks.

Steps Include:

Step 1: Place the cursor over the **Client** menu and click **Search**.

Step 2: Type Jackson in the **Last Name** field and click **Search**.

The screenshot displays the FACES.NET Client Search interface. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The 'Client' menu is active. The search criteria section is expanded, showing 'Client Search' selected. The 'Client Characteristics' section is checked, and the 'Last Name*' field is highlighted with a black arrow and contains the text 'JACKSON'. Other fields include 'First Name', 'Middle Name', 'Birth Date', 'Gender', 'Race', 'Address', 'SSN', 'FACES Client ID', 'FOCUS Client ID', and 'Social File/XREF #'. A 'Search' button is located at the bottom left of the search area.

Figure 3.8



Note: Client numbers are unique – a client will have the same number throughout his/her involvement with CFSA, except in Adoption cases where the case is split and the client has a new client and case ID.

Step 3: Select a member of the **Jackson** family in the **Search Results** list (i.e., Keyshawn Jackson).

Client Search

* Denotes Required Fields ** Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Search Criteria

Search Type

Client Search Adoptive Client Search Threshold(1%-100%) 79

Client Characteristics

First Name Middle Name Last Name* JAKSON1

Birth Date Gender Race

Address

Street # Street Name Suffix

Quadrant City State

SSN FACES Client ID FOCUS Client ID Social File #

Search Results

Results 11 - 20 of 32

Client ID	First Name	Mid Name	Last Name	Date of Birth	SSN	Duplicate	% Match
845312	KEYSHAWN		JACKSON41		--	<input checked="" type="checkbox"/>	88
845317	LAKEISHA		JACKSON41		--	<input type="checkbox"/>	88
845338	REYSHAWN		JACKSON15		--	<input type="checkbox"/>	88
845498	LAKEISHA		JACKSON17		--	<input type="checkbox"/>	88
845495	REYSHAWN		JACKSON17		--	<input type="checkbox"/>	88
845494	KEYSHAWN		JACKSON17		--	<input type="checkbox"/>	88
845358	KEYSHAWN		JACKSON51		--	<input type="checkbox"/>	88
845356	LAKEISHA		JACKSON51		--	<input type="checkbox"/>	88
845350	REYSHAWN		JACKSON51		--	<input type="checkbox"/>	88
845407	LAKEISHA		JACKSON16		--	<input type="checkbox"/>	88

Info Address Relations Case(s) Referral(s) Court Removal Status Placement Perm Goal

Name KEYSHAWN JACKSON41 Date of Birth

SSN -- Creation Date 1/6/2006

Address 3700 KING Street-NW WASHINGTON District of Columbia 20001 Gender Male Race Black or African American

Known Aliases

Type	Name

Search Show Clear Cancel

Figure 3.9

- Step 4: In the **Search Results** list you can see the client's client ID#, name, SSN, date of birth, % Match, and a column noting duplicates.
- Step 5: On the lower half of the screen, there are ten tabs that quickly display detail information that has already been entered in to FACES.NET for the selected client. Click each tab to display the information.
- Step 6: Click the **Show** button to bring the client's record into focus.

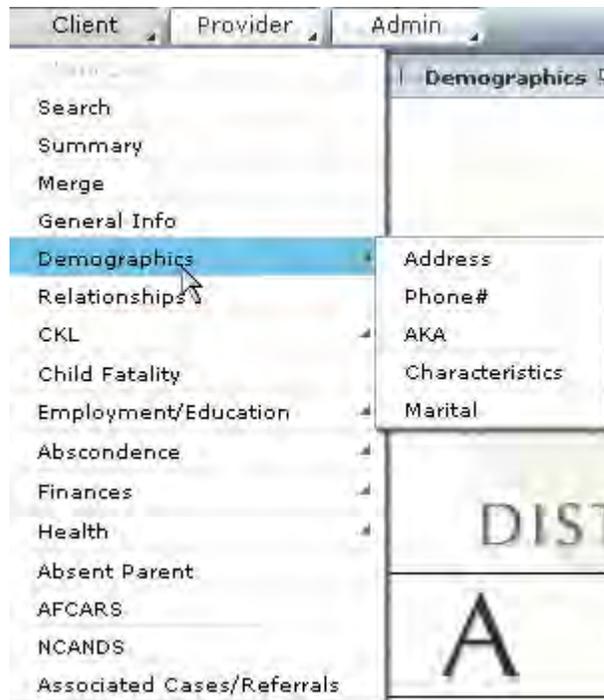


Figure 3.10

- Step 7: Click the **Demographics** button. It allows you to quickly view the client's name, address, personal, and alias information that has been entered into FACES.NET. Click **Cancel** to exit this screen.
- Step 8: Click the **Address** button on the breadcrumbs toolbar. This screen shows current and previous addresses associated with this member of the Jackson family. Click **Cancel**.
- Step 9: Click the **Phone** button on the breadcrumbs toolbar. This screen shows a list of all phone numbers associated with this client. Then click **Cancel**.
- Step 10: Click the **Merge** button. This screen is used to merge two client numbers connected to the same person.

FACES.NET Scenario

We will examine the following FACES.NET Scenarios:

- **Assignments;**
- **Viewing the case's associated referral(s);**
- **Opening a new case.**

Assign/Transfer

View Assignments

Steps Include:

Step 1: Place the cursor over the **Case** menu and click **Other**.

Step 2: Click the **Assign** button to display the **Assignment** screen.

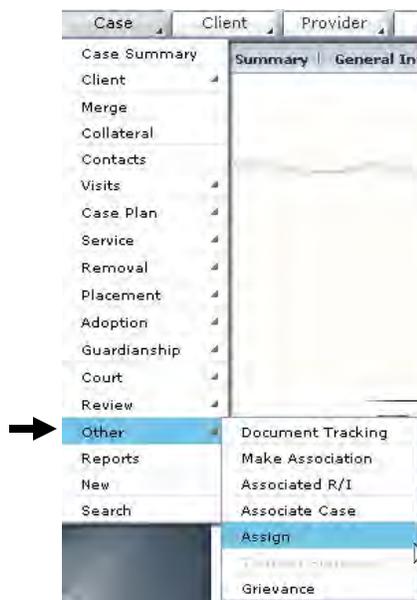


Figure 3.11

Step 3: View the top inset grid to see all past and present assignments of your case.



Note:

- The inset grid at the top of this screen will show the assignment history of this case. Remember that each case can have only one Family assignment. A case can have any number of administrative assignments and a Child assignment for each child in the case.
- Only Supervisors and Program Managers can create assignments in a case, unless there is a system generated assignment as with Administrative Assignments.

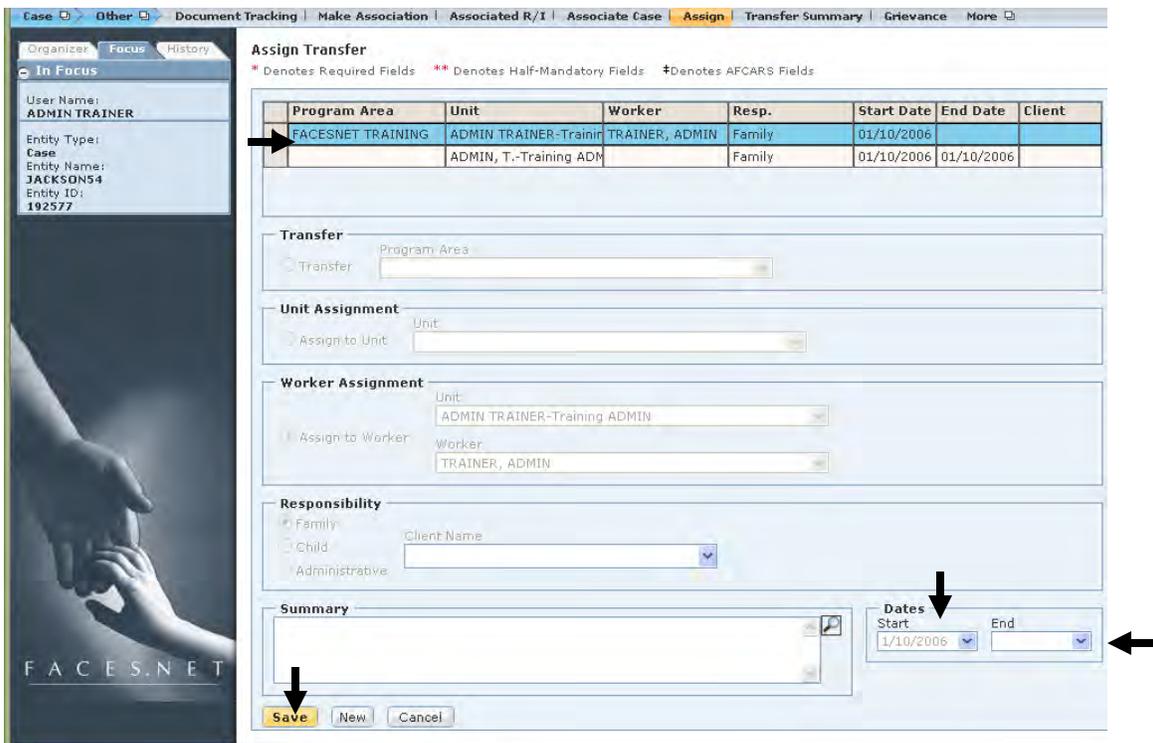


Figure 3.12

End Dating a Child Assignment

Steps Include:

- Step 1: In the top inset grid, highlight the assignment that you wish to end.
- Step 2: Enter the end date for this assignment in the **End** field (See Figure 3.12).
- Step 3: Click **Save**.



Note:

- Social workers cannot end-date Administrative Assignments.
- Family Assignments cannot be end-dated unless a new Family Assignment is created or the case is being closed.

Transfer Summary

In the Jackson case, your supervisor has asked you to prepare to transfer child responsibility for one of the clients to a consortium agency. Before transferring the client, a transfer summary will be created and a case transfer conference held.

To create the summary, first click the **Transfer Summary** item within the **Case - Other - Transfer Summary** drop down menu to display the **Transfer Summary** screen. The Transfer Summary should be completed whenever a case or client is transferred. The Transfer Summary report is generated from this screen.

Steps Include:

Step 1: Enter the **Summary Date**. This will default to the date that the record is being entered.

The screenshot shows the 'Transfer Summary' form in the FACES.NET system. The form is divided into several sections:

- Client Table:** A table with columns: Summary Date, Type, ID, Social Worker, and Approval Date. The first row contains the value '02/26/2007' in the Summary Date column and 'ADMIN TRAINER' in the Social Worker column. Four black arrows point downwards from the table to the 'General' section.
- General Section:** Contains input fields for 'Summary Date' (set to 2/26/2007), 'Social Worker' (ADMIN TRAINER), 'Approval Date', 'Program Area & Unit' (FACESNET TRAINING), and 'Supervisor' (ADMINTRAINER).
- Clients Involved In Transfer:** A section with a yellow background and a 'Select' button. A black arrow points to the 'Select' button.
- Buttons:** 'Save', 'New', 'Approval', 'Preview', and 'Cancel' buttons are located at the bottom of the form.

Figure 3.13

Step 2: Enter the **Clients Involved in Transfer**.

Step 3: Enter the **Reason for Agency Involvement**.

Step 4: Enter the **Summary of Social History**.

Step 5: Enter the **Reason for Transfer**.

Step 6: Click **Save**.

Step 7: Click the **Approval** button then the **Request** checkbox to request supervisory approval.



Note: You must enter all of the narratives on this tab before requesting supervisory approval. Upon supervisory approval, this Transfer Summary will automatically be saved to the File Cabinet.

Step 8: Click **Preview** to view the Transfer Summary. This will be in Draft format until approved by the supervisor.

View Associated Cases or Referrals and Linked Referrals

The **Associated Referrals** and **Associated Cases** screens allow you to view all of the referrals and cases that have been associated to the case that you have been assigned.

Viewing Associated Cases

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Other**, and click **Associate Case**.

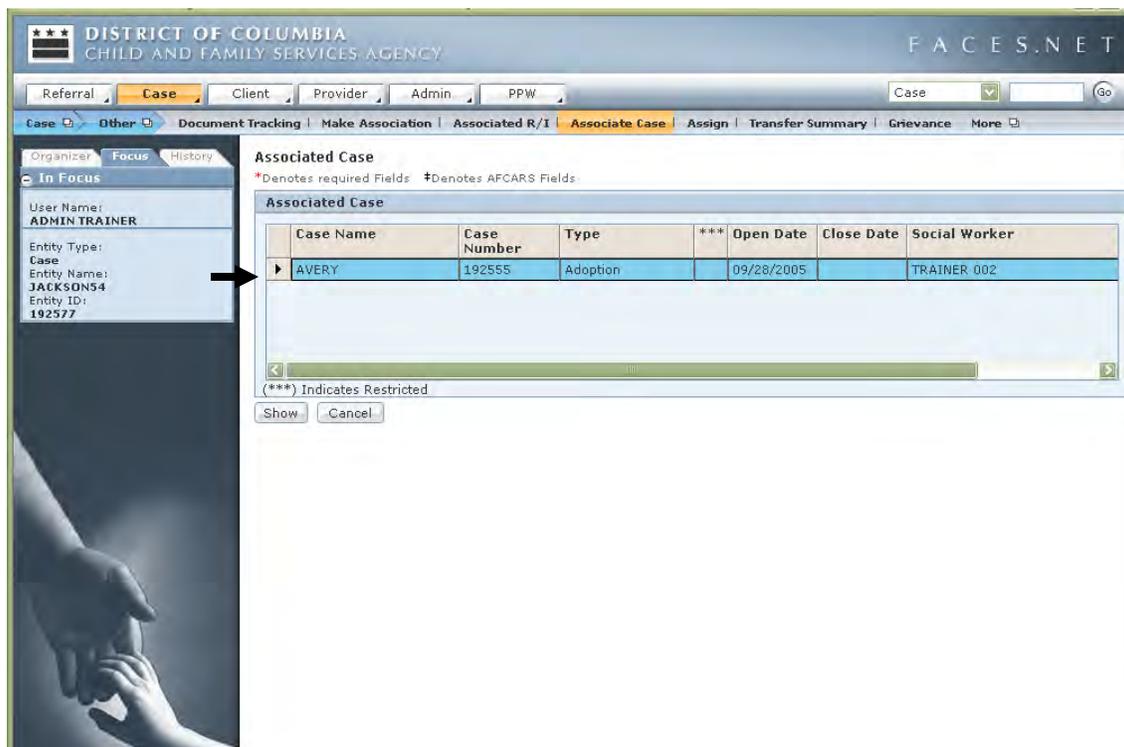


Figure 3.14

Step 2: Select the case you would like to view and click **Show**. This will take you to the case screens.

Step 3: Browse through the case screens.

Step 4: To return to the Jackson case, click on the **Other** button, click the **Associate Case** button, highlight your case and click **Show**.

View Associated Referrals or Investigations

There are a couple of ways to access the Associated Referrals or Investigations.

Method 1

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Other**, and click **Associated R/I**.

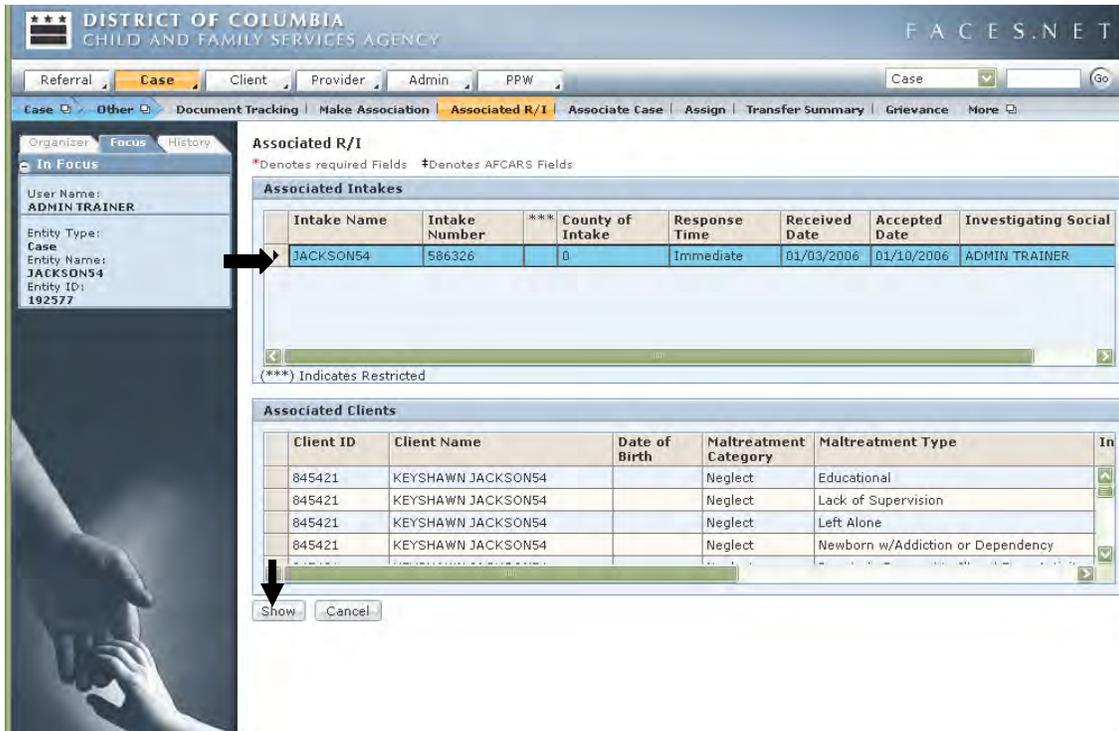


Figure 3.15

Step 2: If desired, click an associated investigation in the grid at the bottom of the screen and click the **Show** button to display it.

Step 3: Browse through the screens.

Step 4: To return to the Jackson case, click on the **Other** button, click the **Assoc Case** button, highlight your case and click **Show**.

Method 2

Steps Include:

Step 1: Click the **Case Summary** button.

Step 2: Find the **Referral ID** number.

Step 3: Enter the **Referral ID** into the quick link box in the upper right corner and select **Referral**.



Step 4: Click **Go**.

Step 5: Place the cursor over the **Referral** menu and click **Reports**.

Step 6: Click the desired report in the list that appears. The most useful reports are likely to be the Investigation Summary and Referral Acceptance reports. Click the **Preview** button.

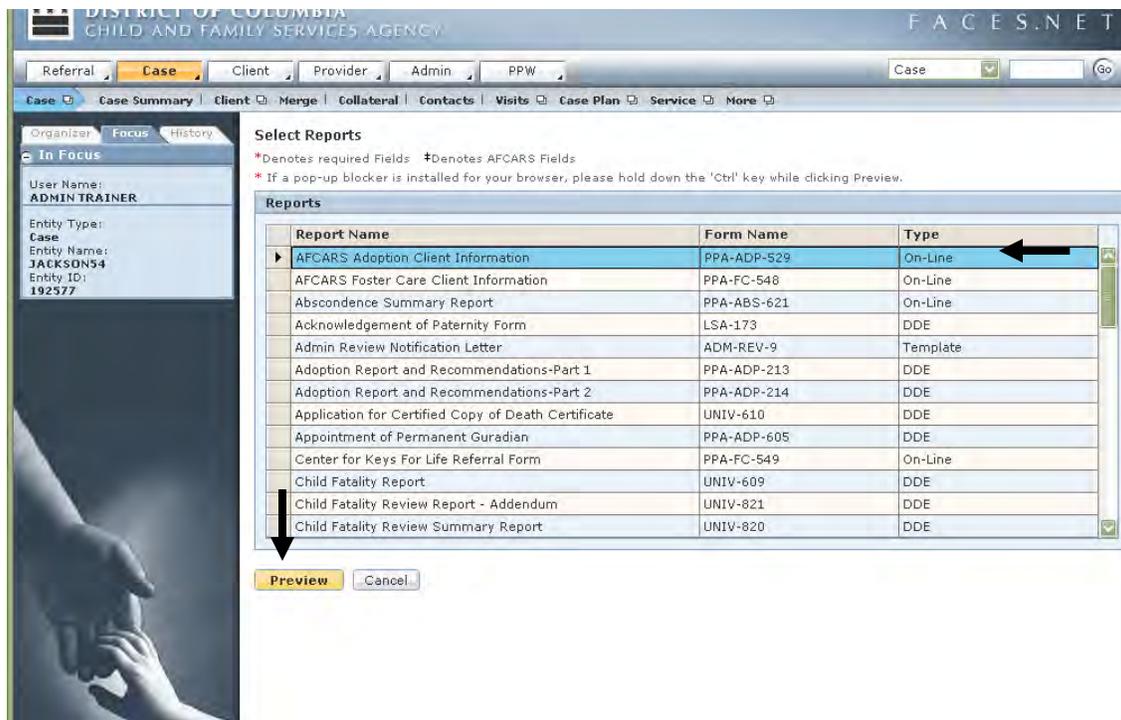


Figure 3.16



Note: If report does not display after clicking Preview, then hold down the ctrl key continuously and click Preview again until the report opens.

FACES.NET Scenario

Workers are assigned cases either because an allegation was substantiated and made into a case, or because an already open case was transferred from one social worker to another social worker for further management. Once a case is assigned to a worker, that case resides in the worker's caseload.

In this FACES.NET Scenario, you have learned that the Jackson case has been assigned to you by your supervisor, and you would like to review the information in the referral and any of the associated cases. You can do this by completing following:

Steps Include:

Step 1: Click on **My Assignments** on the left menu.

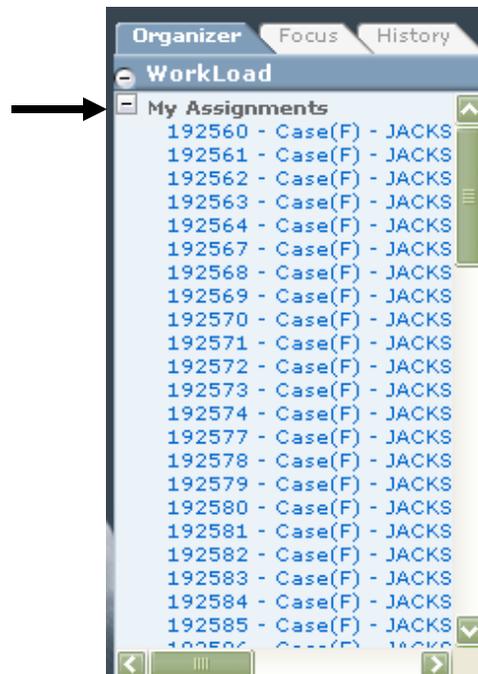


Figure 3.17

Step 2: Click the **Jackson** case.

Step 3: Place cursor over **Case**, and **Other**.

Step 4: Click on **Associated R/I**.

Step 5: Highlight the associated referral.

Step 6: Click on **Show**.

Step 7: Now that you are in the referral, you may navigate through the CPS screens to view information such as referral narratives and investigation notes. These screens will be read-only for the social worker.



Points to Remember:

When entering a case name the social worker should enter the family's last name. If there are different last names within the family, the mother's last name should be used.

Reviewing Screens Relative to the Referral

In the next task, we will discuss the key points to look for when reviewing a Referral.

Each screen under the CPS module contains pertinent information relative to the referral.

Steps include:

- Step 1: Place the cursor over the **Referral** menu and click **Investigation**.
- Step 2: Click on the **Notes** button on the breadcrumbs toolbar. The **Notes** screen should have a description of the investigation and any significant aspects about that investigation that the worker noted.

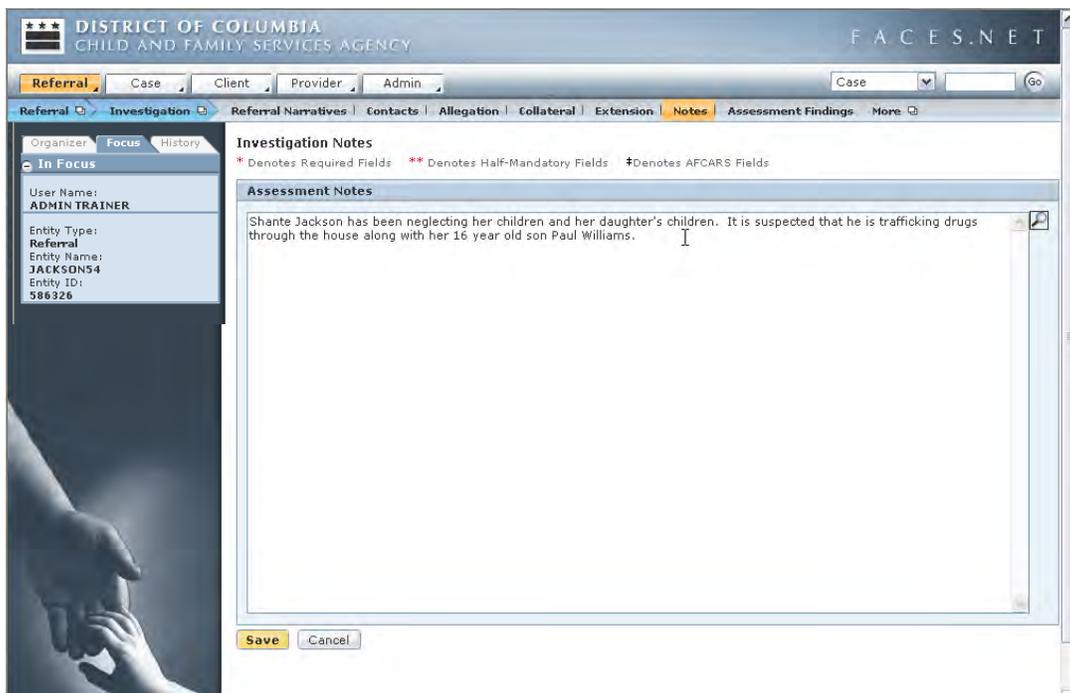


Figure 3.18

Step 3: Place the cursor over the **Referral** menu, then **Investigation**, and click **Assessment Findings**. The **Assessment Findings** button will show the outcome of the investigation results. If the investigation became a case, then at least one allegation would have been substantiated (found to be true).

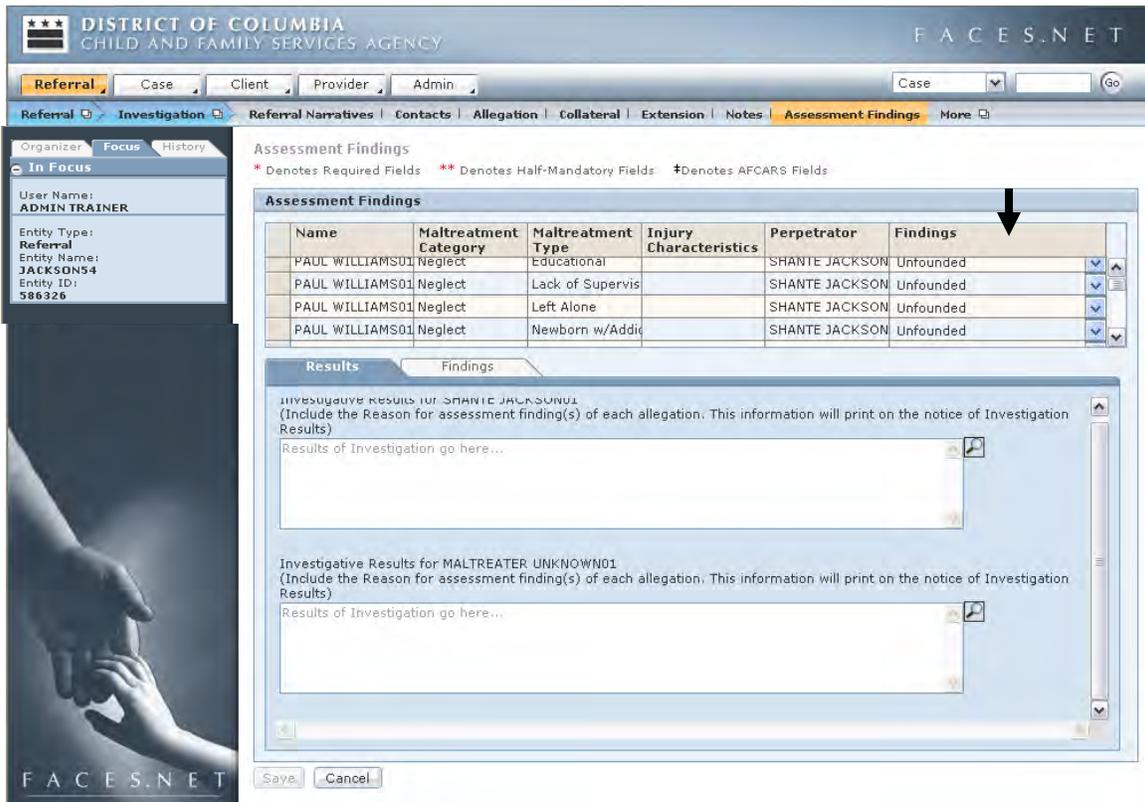


Figure 3.19

Associating Cases

If you have found that you have a duplicate case then you may need to associate the case. The purpose of the **Make Association** screen is to associate cases without merging them (FACES.NET cases cannot be merged).



Note: Know the number of the case to associate when it is not in your workload.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Other**, and click **Make Association**.

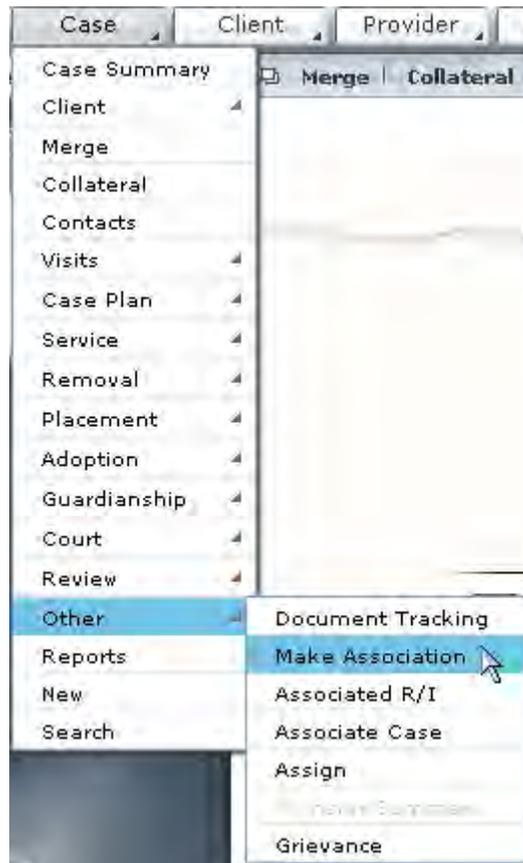


Figure 3.20

Step 2: Enter the Case number in the **Associate to Case #** field.

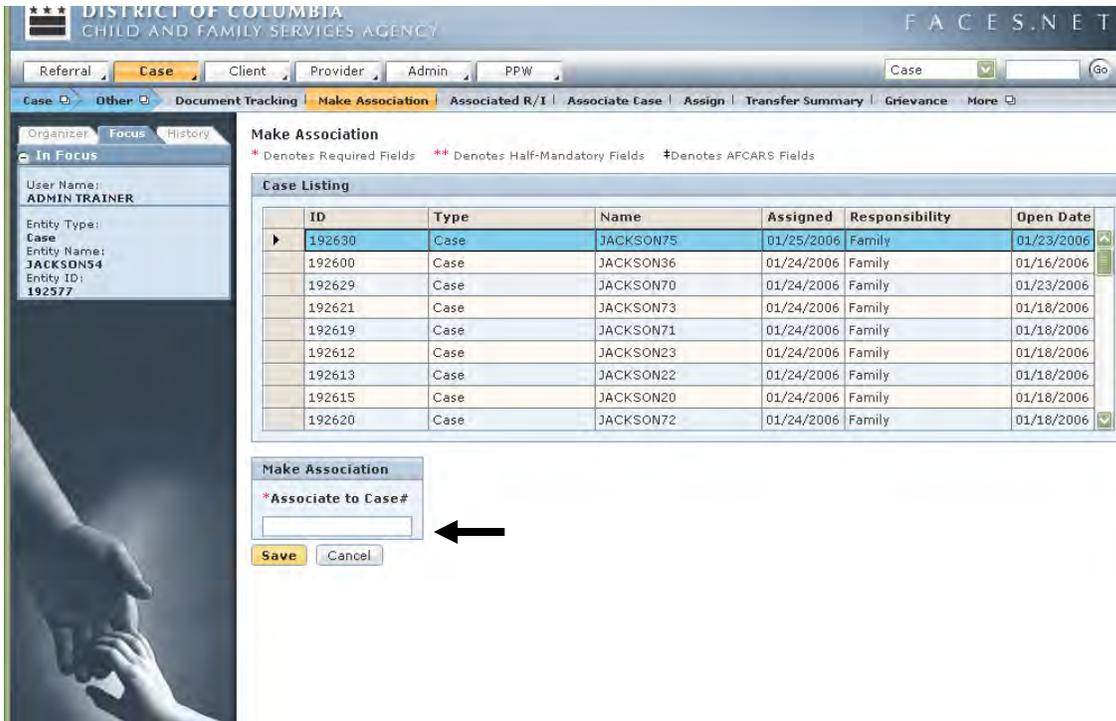


Figure 3.21

Step 3: Click the **Save** button.

Step 4: Click the **Cancel** button to exit the screen.



Note:

- Remember that associating cases simply associates them—it does not change any of the information in either case.
- This screen may only be used to associate cases.

Resolving Duplicate Clients

An important part of case management is to monitor the progress, quality, and accurateness of the information entered.

A duplicate client is a client that is entered into FACES.NET more than one time. The personal information is the same or similar, but the clients have different Client ID numbers. There are important reasons to avoid creating duplicate clients and to quickly handle them when they appear in a case. They are as follows:

- Duplicate clients cause confusion in screens that include a client select feature, such as Clients, Contacts, Legal Status, Removal, Placement, just to name a few. If a worker does not consistently use the same Client ID number, there may be incomplete, duplicated, or conflicting information in the case. This will present inaccurate information in court reports, case plans, administrative reviews, or any other function of FACES.NET that uses client information. It also creates more work for the social worker;
- Duplicate clients can cause serious legal and financial problems. For example, Placements, Services, Court Status, and other client screens may be affected. Entering services, placements, etc. for duplicate client records can result in double payments, double court reports, double administrative reviews, and so on;
- Multiple client records also skew FACES.NET-generated statistics, as there appears to be more clients than actually exist. FACES.NET statistics are used for federal and management reporting.

As the social worker, you should investigate whether or not the clients are in fact the same. The social worker should then complete the merging of client information in FACES.NET.

The purpose of merging the client records in FACES.NET is to ensure that there is only one complete record for each client. If there are multiple records, each record may have more or less information. For example, Client 1 and Client 2 are the same person. Removal information for Client 1 has been entered. However, instead of entering placement information for Client 1, placement information was entered for Client 2. From a data viewpoint, we do not know the whereabouts of Client 1.

To avoid such scenarios, clients should be merged in FACES.NET. Since a social worker is most familiar with their clients, it is best to leave the client merging task to the social worker. Workers should attempt to merge records that have entered twice or mistakenly prior to flagging as duplicate. In a case where merging is not possible, due to incomplete or incompatible data, clients should be red flagged as duplicate.

NEW TERMS



Merging Clients Merging Clients is important when one client has two client IDs. It allows you to put information from both clients into one client ID.

In the event that FACES.NET will not allow you to merge two clients, you will be given the option to mark one of the client IDs as duplicate. This is known as red flagging a client.

Steps Include:

Step 1: Open the Jackson case from your **My Assignments** icon on left menu.

Step 2: Place the cursor over the **Case** menu and click **Merge**.

Step 3: Choose a **Client ID to be retained**. Select Reyshawn.

The screenshot displays the FACES.NET 'Client Merge' interface. At the top, the header reads 'DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY' and 'FACES.NET'. Below the header is a navigation bar with tabs for 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. The 'Case' tab is selected, and a dropdown menu is open showing 'Case Summary', 'Client', 'Merge', 'Collateral', 'Contacts', 'Visits', 'Case Plan', 'Service', and 'More'. The 'Merge' option is highlighted. The main content area is titled 'Client Merge' and contains two sections. The first section, 'Client ID to be retained', is highlighted in yellow and has a black arrow pointing to it. It contains a dropdown menu with '845195' selected. Below this are input fields for Name (REYSHAWN JACKSON01), SSN, Address (3700 KING Street NW WASHINGTON, District of Columbia 20001), DOB, Creation Dt (01/05/2006), Gender (Male), and Race (Black or African American). The second section, 'Client ID to be merged', is also highlighted in yellow and contains empty input fields for Name, SSN, Address, DOB, Creation Dt, Gender, and Race. At the bottom of the form are buttons for 'Merge', 'Swap', and 'Cancel'. A sidebar on the left shows the user's name 'ADMIN TRAINER' and the current case details: 'Entity Type: Case', 'Entity Name: JACKSON01', and 'Entity ID: 192566'.

Figure 3.22

- Step 4: Choose **Client ID to be merged**. If there were a duplicate Reyshawn Jackson, you would select that client ID.
- Step 5: Review the information in all of the tabs. Ensure that you are merging information into the correct Client ID.
- Step 6: Use the **Swap** button to swap the selected clients if you find you have selected the incorrect Client ID to be retained.

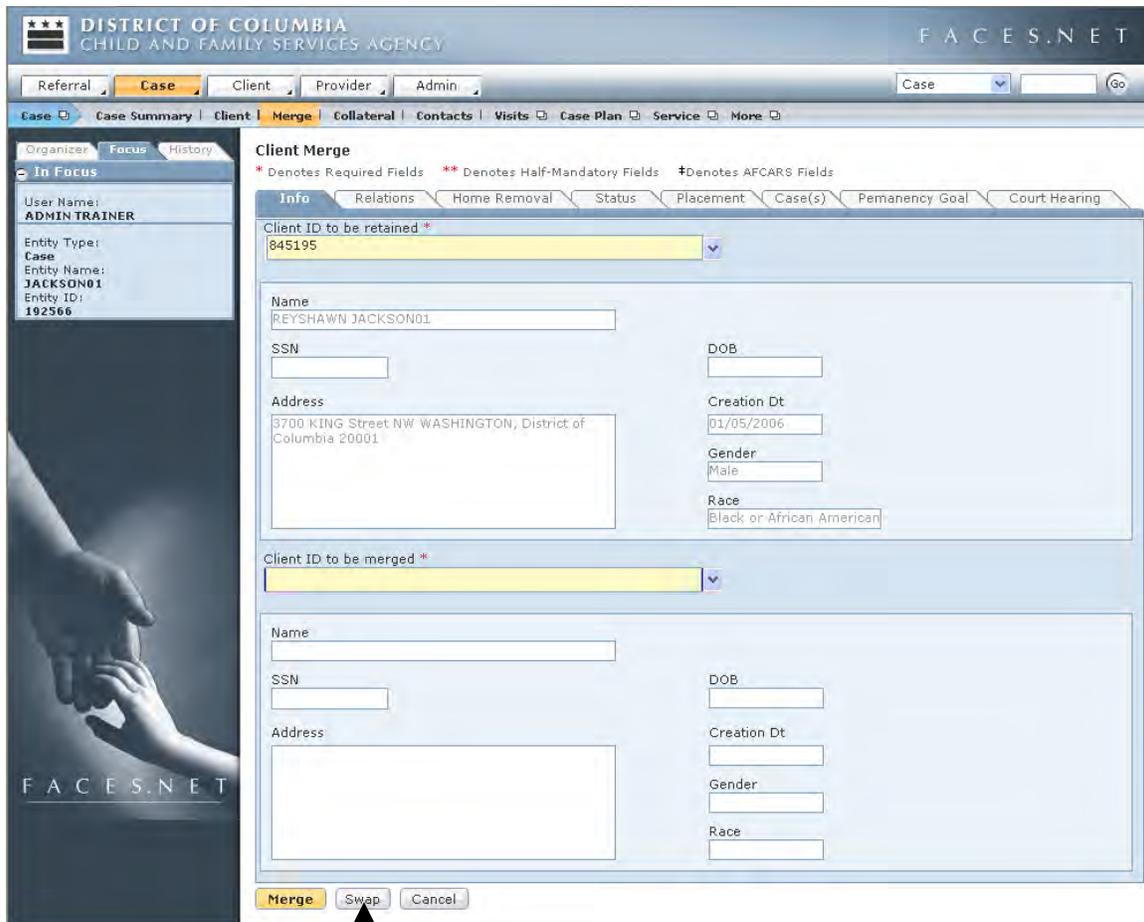


Figure 3.23



Note:

- The merge process is permanent and cannot be reversed;
- If the client information is unable to merge you will receive the option of marking the Client ID to be merged as a duplicate client;
- Duplicate clients are marked in red in client lists in FACES.NET, and should be end-dated as soon as possible.
- Certain fields are required to match prior to merger (i.e. DOB, SSN, etc.).

Notes

SECTION 4: CLIENT INFORMATION AND CONTACT/VISITS

Performance Objectives

In this Section, you gain confidence in your ability to:

- Add a New Client
- Update and View Client Information
- Record a Contact/Visit



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Practice Overview

Client Information

Accurate client information entered into the FACES.NET system is crucial to the working of a case and the care of the children and families in the care of the Agency. Some information may not be known to the Agency at the early stages of the case but the social worker is responsible for acquiring this information and entering it into the FACES.NET system.

In addition the Agency uses FACES.NET data (mostly, entered by the social worker) to determine the eligibility of a child for IV-E claiming, and then submits its findings to the Federal government for subsidies. Client information entered in FACES.NET is utilized to generate management and federal reporting, as well as guide the social workers' performance measures.

It is the responsibility of the social worker to verify the client information in FACES.NET. If the case has been recently transferred to you, then after reviewing the hardcopy case records and participating in the Transfer Staffing, the worker would schedule a visit with the child/family to build rapport. Much of the information in the demographics segment of the case may need to be verified, i.e. if there is missing social security numbers or missing birth dates.

Contacts/Visits

Contacts/Visits with the child and the foster provider on a regular basis are an essential part of evaluating the progress of the child(ren) and how they react to their new environment. It also helps the social worker understand whether or not the current foster provider is able to meet the needs of the child(ren) and families. The **Contacts** screen in FACES.NET is used to record contacts between the social worker and a client. The **Visits** screen in FACES.NET is used to document court-ordered or non-court-ordered plans of visitation between parents and child(ren) or siblings. Both screens will pull information to the contact and visit management reports.

Reviewing Contacts/Visits

Frequent, purposeful contacts/visitations with children and families are central to promoting safety, permanence, and well being.

Contacts with Families Receiving In-Home Services:

- A CFSA worker or a qualified worker from a service provider authorized by CFSA shall make twice-monthly visits to families in which there has been substantiated abuse or neglect, with a determination that each child can be maintained safely in the home with services;
- At least one visit per month shall be in the home, but the second can be at the child's school, day care or elsewhere.

- Workers are responsible for assessing the safety of each child at every visit and each child must be separately interviewed at least monthly outside of the presence of the caretaker child (except when the child is less than 18 months);
- During visits:
 - Assess safety;
 - Ensure children's needs are being met;
 - Assess progress on the case plan and initiate updates through discussions with parent(s).
- Document the details of the contact in FACES.NET within 24 hours, on the contact screen.

Contacts with Children in Out-of-Home Care:

- CFSA or contract agency social workers with case responsibility shall make weekly visits during the first four weeks of placement and twice monthly visits thereafter to each child newly placed in out-of-home care (foster family homes, group homes, congregate care, independent living programs, etc.) or moved to a new placement;
- At least one visit one visit per month shall be in Provider's home, but the second can be at the child's school, day care or elsewhere.
- Workers are responsible for assessing the safety of each child at every visit and each child must be separately interviewed at least monthly outside of the presence of the caretaker.
- Every visit to include a private visit with the child (except when the child is less than 18 months);
- Children placed more than 100 miles outside of D.C. shall have a social worker from the receiving state supervise the placement through the ICPC, but the CFSA or contracted agency social worker shall call the social worker from the receiving state monthly, when possible, call the child monthly, when he or she has a relationship with the child, and visit with the child face-to-face at least twice per year;
- During visits:
 - Assess safety;
 - Ensure children's needs are being met;
 - Assess progress on the case plan and initiate updates;
 - Discuss upcoming events and children's concerns.
- Document the details of the contact in FACES.NET within 24 hours on the contact screen.

Contacts with Parents of Children in Out-of-Home Care:

- When the goal is reunification, visit the parent(s) in the home a minimum of twice per month in the first 3 months post-placement; After the first 3 months, for as long as the goal remains reunification, visit a minimum of once per month;
- During visits:
 - Ensure progress on the child and family plans;

- Assist in attaining needed resources;
 - Affirm progress and discuss issues;
 - Discuss any health needs or appointments for the child.
- Document the details of the contact in FACES.NET within 24 hours on the contact screen.

Visits Between Children in Out-of-Home Care and Their Families:

- When the goal is reunification, visits shall be a minimum of once per week, unless the child's best interest (documented in the case plan) requires less frequent visitation;
- When the goal is not reunification, visits are based on the child's best interest. If reasons are identified for visits to be limited or denied, present a recommendation to the Court for a determination;
- Visits between siblings shall be a minimum of twice per month;
- Visits shall be in the parent's home when the goal is reunification, unless there are reasons against it documented in the record. In all cases, visits shall be in the most family-like setting possible;
- CFSA may request that the Court deny or limit visitation with individuals if in the child's best interest; Document suspended visits on the **Visit Plan** screen.
- Document the details of the visit in FACES.NET within 24 hours of the visit on the visit log screen.

For further reference to visit and contact requirements see the electronic form of the CFSA's Policy and Procedures on the CFSA intranet.



FACES.NET Guide

The previous section reviewed agency practices around updating client information with accurate data and also contacts/visits; this section will go through all the relevant FACES.NET screens.

Modifying the Client Screens

When a case is created in FACES.NET, it is transferred to the appropriate unit and specific social worker for case management and providing of services to the family. During the management phase, the social worker is able to record all client information and contacts in FACES.NET. Many of the screens within the Case Management toolbar are relatively straightforward, and for these screens, this section will point out their location and briefly describe their purpose. Other screens within the toolbar are more complex, incorporating several sub-screens and various ties to other areas of the FACES.NET application. This section will address these more elaborate screens through FACES.NET Scenario based instruction highlighting the special features of the area in focus.

FACES.NET Scenario

As mentioned previously, the Jackson case was brought to the attention of Child and Family Services Agency’s CPS Unit due to an allegation of neglect against Ms. Jackson. Ms. Jackson was previously known to the system. A neighbor reported that Ms. Jackson’s young children were left home alone and were seen in the streets unsupervised, unkept, and inappropriately dressed. It was also alleged that there were drug trafficking activities in Ms. Jackson’s apartment.

As the social worker you realize that Rodney Scott, also a member of the family, was not entered into the FACES.NET system during the investigation, so you will need to enter his information yourself. You also need to enter information for visits you have made to the family. This Section will show you how to accomplish this.

For your reference there are 10 members of the family and they are as follows:

The Jackson Case		
<u>Shanté Jackson</u>	30 years old	Mother
<u>Paul Williams</u>	16 years old	Son
<u>Femalé Scott</u>	15 years old	Daughter
<u>Key Shawn Jackson</u>	12 years old	Twin Son
<u>Rey Shawn Jackson (Rey-Rey)</u>	12 years old	Twin Son
<u>Tanisha Holmes</u>	7 years old	Daughter
<u>Latonya Holmes</u>	5 years old	Daughter
<u>Lakeisha Jackson</u>	3 years old	Daughter
<u>Rodney Scott</u>	2 years old	Grandson
<u>Kiana Scott (Bebe)</u>	6 months old	Granddaughter

Add a New Client

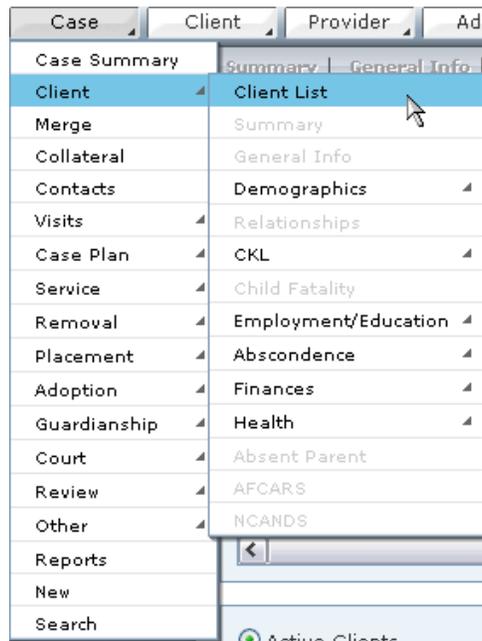


Figure 4.1

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Client** and click **Client List**.
- Step 2: Click the **New** button.

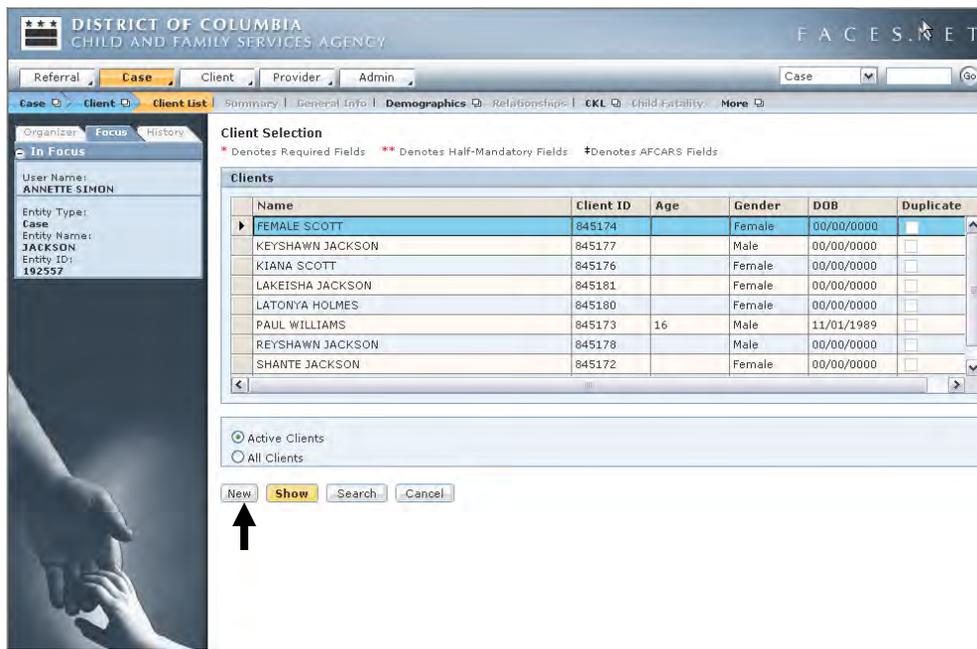


Figure 4.2

- Step 3: Enter the following information into the correct fields:
- First Name: **Rodney**
 - Last Name: **Scott**
 - DOB **12/01/2005**
 - Gender: **Male**
 - Participating as a Child: **Yes**
 - Role In Case: **Child, Sibling**

The screenshot shows the FACES.NET interface for the District of Columbia Child and Family Services Agency. The main content area is titled 'Client Summary' and contains several sections:

- Client Details:** Fields for Prefix, First (Rodney), Middle, Last (Scott), Suffix, and Maiden Name. Mandatory fields are highlighted in yellow.
- Demographics:** Fields for Gender (Male), Date of Birth (12/01/2005), SSN, Medicaid#, and In Household#.
- Dates of Involvement in Case:** Fields for Start Date (12/1/2005), End Date, Reason For End Date, and checkboxes for 'Non-participating Member', 'Head of the Household', and 'Participating as a Child'.
- Citizenship/Religion:** Fields for Citizenship/Alienage, Alien Registration Number, Nationality, and Religion.
- Role In Case / Language:** Fields for Role In Case and Languages, with a 'Need Interpreter' checkbox.

At the bottom of the form, there are buttons for 'Save', 'Cancel', and 'RFAI'. A red arrow points to the 'Save' button.

Figure 4.3



Note:

- All fields with asterisks and colored yellow are mandatory and must be filled out in order to save the information;
- All fields with double asterisks are half mandatory, meaning that information must be in at least one of the fields in order to save the information;
- FACES.NET will check entries for duplicates before adding the record.



Points to Remember:
Blue fields in FACES.NET are Federal Reporting fields. Although not mandatory in order to save the screen, they must be filled in.

- Step 4: To enter information on the client's current residence, click the **Residence** tab. To enter other descriptive information, such as physical characteristics and race, click the **Other** tab.
- Step 5: Click **Save** to save the information entered. FACES.NET will now search to see if the client is already in the system. If possible matches are found, a list will be shown allowing you to check these clients' information. This helps prevent the entry of duplicate clients.
- Step 6: If there are matches, the **Potential Matches** dialog box appears. At the bottom are the same 9 tabs that are found in the Client Search Results pop-up box.
- Step 7: If the client is found in the **Potential Matches** list, highlight that client and click the **Select** button in the Potential Matches section to import this client and data into your case.
- Step 8: If the client is not found in the **Potential Matches** list, click the **Select** button in the top section beside the name of the new client. This will add that client as new and assign a unique client ID number to him/her.

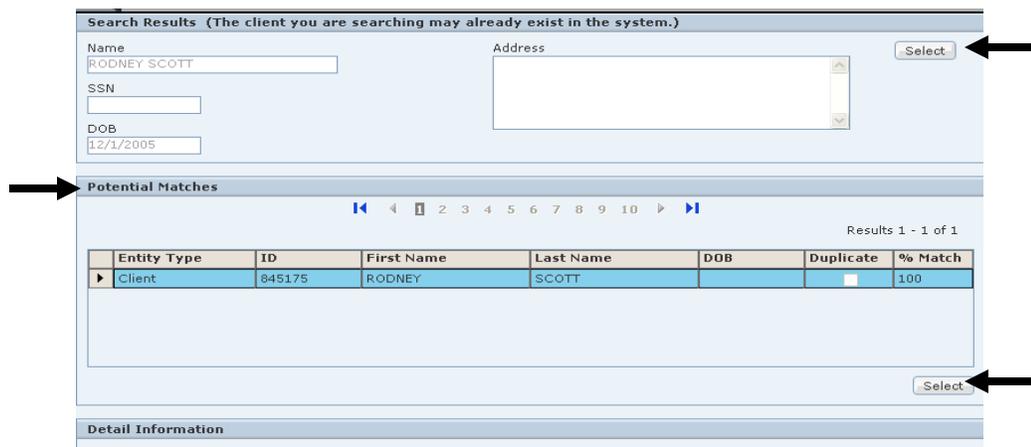


Figure 4.4

- Step 9: If after clicking **Save** on the main screen, there are no matches, you will receive a pop-up window with a message saying that there are no matches and to click **Yes** if you wish to add this client as new.

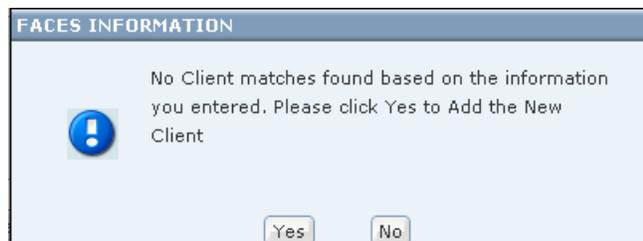


Figure 4.5

Viewing General Client Information

To view general client information, complete the following steps:

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Client**, and click **Client List**.

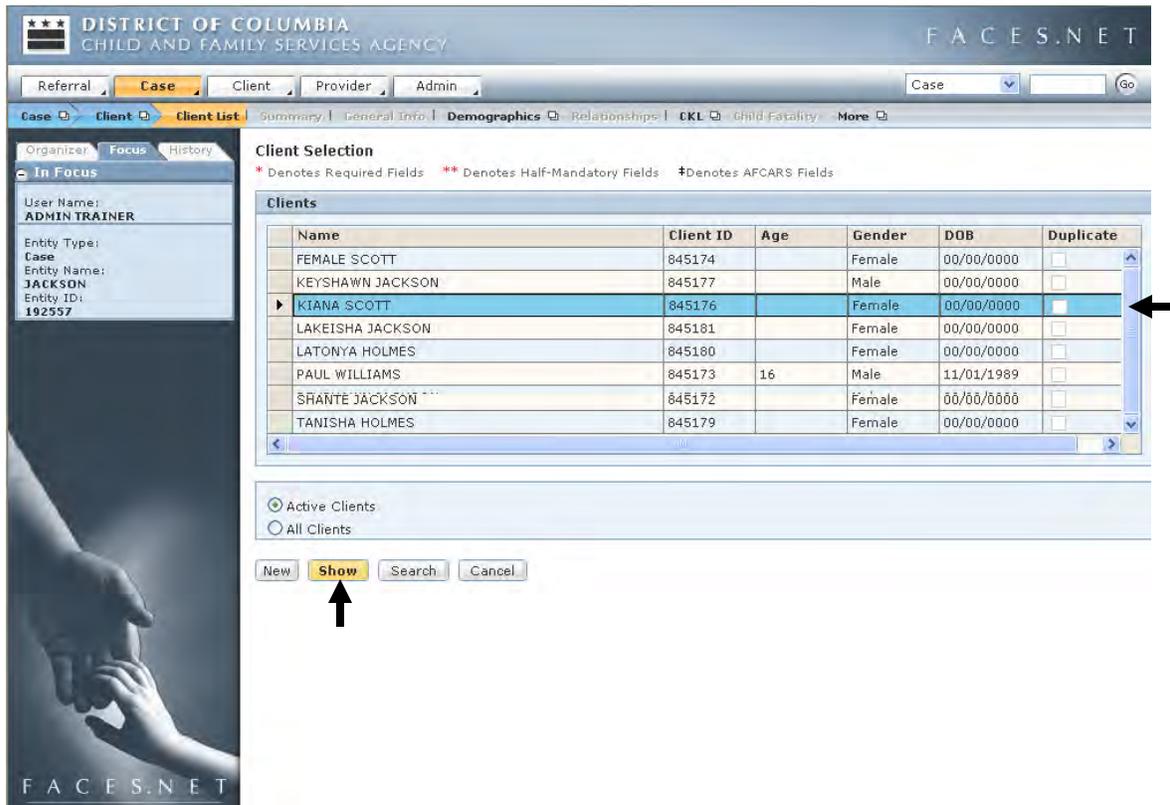


Figure 4.6

Step 2: Click an existing client from the **Client List** and click **Show** to display or edit general information for this client.

Step 3: Click **New** to enter information for a new client. Enter information for **Kiana Scott** from the sample case.

Viewing Cases and Entering Client Information

The client screens in the FACES.NET application allow you to enter many types of information about clients, including demographic data, the client's role in the case, clients' relationships with each other, employment, medical, and educational information, and data for compliance with Federal standards. This section will show you how to enter this information accurately.

In the following exercises, you will view and edit case and client information.

View General Case Information

Steps Include:

Step 1: Place the cursor over the **Case** menu and click **Case Summary**.

The screenshot displays the FACES.NET Case Summary interface. At the top, the header reads "DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY" and "FACES.NET". Below the header is a navigation bar with tabs for "Referral", "Case", "Client", "Provider", and "Admin". The "Case" tab is active, and a sub-menu is open showing "Case Summary" selected. The main content area is titled "Case Summary" and includes a legend: "* Denotes Required Fields", "** Denotes Half-Mandatory Fields", and "† Denotes AFCARS Fields".

The "Information" section contains the following fields:

Case Name	Family Case Type	Case Number	Family Worker
JACKSON01	CPS	192566	ADMIN TRAINER

The "Assignment" section contains a table:

Client	Program	Worker	Case Assignment
--------	---------	--------	-----------------

The "Reason for Agency Involvement" section contains a table:

Referral ID	Referral Date
586303	01/05/2006

Below the table is a text box containing the text: "Ms. Jackson01 and her children are involved with CFSX because a report came into the Agency alleging that Ms. Jackson01 was leaving her underaged children unsupervised at".

The "Case History" section contains a table:

Open Date	Close Date	Reason
01/06/2006		

At the bottom, there is a "Recommend Case Closure" section with a checkbox, a "Closure Reason" dropdown, a "Date" dropdown, and a "Closure Summary" text area. The bottom of the screen features buttons for "Save", "Reopen", "Close Case", and "Cancel".

Figure 4.7

Step 2: If necessary, the general case name can be changed by entering a new name into the Case Name field and clicking **Save**.

Step 3: Place the cursor over the **Case** menu, then **Client**, and click **Client List**.

Step 4: Click **Cancel** to exit this screen.

The Client Button

This functionality is used to select the client in a case whose information you want to add, view or update. It contains all of the same buttons as under the investigation toolbar with the addition of the **AFCARS** (discussed later in Section 14) and **CKL**, (discussed later in Section 9), **Abscondence**, (discussed later in Section 10) **Financial Accounts** (discussed later in Section 11). **Child Fatality**, (discussed later in Section 13) buttons

NEW TERM



Client ID – This is a unique series of numbers assigned to each client in a case or referral. When a client is first entered on the client screen, the FACES.NET system automatically generates a client ID number for that client.

Client Information Summary

To view a summary of entered client information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Client** and click **Client List**.

Step 2: Highlight client and click **Show**.

Step 3: To view the Client Summary screen, click **Summary**.

Step 4: This read-only screen displays key information entered on other screens, such as the client's location, court status, and the reason for agency involvement.

Client Demographics

To add, view or update client demographic information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Client** and click **Client List**.

Step 2: Highlight client and click **Show**.

Step 3: To enter detailed demographic information for a client, click **Demographics**.

Step 4: There are five sub-screens under Demographics. Each allows the entry of different information, as follows:

- Address information can be entered on the **Address** screen;
- Phone numbers can be entered on the **Phone #** screen;
- Aliases can be entered on the **AKA** screen. This information can prove useful in many situations (for example: Perhaps while making a home visit, the client is nowhere to be found and you need to ask a neighbor if they have seen or heard from your client. However, the neighbor only knows your client by his/her nickname.);
- Additional physical and behavioral traits can be entered on the **Characteristics** screen;
- Marital status can be entered on the **Marital** screen.

Client Relationships

To enter relationships between clients, complete the following steps:

Steps Include:

- Step 1: Place the cursor over the **Case** menu and click **Case**. This will bring up the **List of Clients** screen.
- Step 2: Highlight client and click **Show**.
- Step 3: Client relationships can be entered on the Relationship screen, which can be displayed by clicking **Relationships**.
- Step 4: Since we have just entered Kiana as a client in the example case, we will need to set up her relationship to the other clients. Make sure that Kiana is the client in focus by clicking **Client**, selecting her name, and clicking **Show**. Then click **Relationships**.

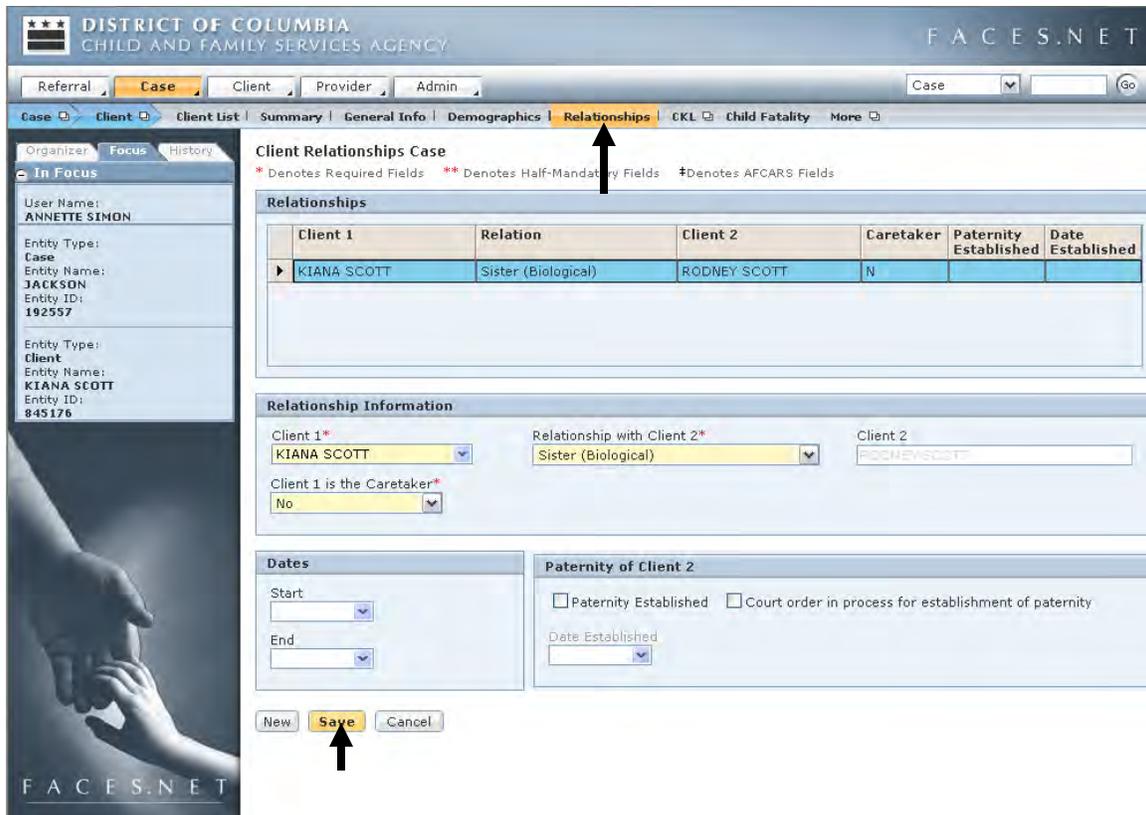


Figure 4.8

- Step 5: First, enter Kiana's relationship with her brother, Rodney. Select Rodney from the **Client 1** drop-down list. Then select Brother (Biological) in the Relationship with **Client 2** drop-down list. Finally, select No in the **Client 1 is the Caretaker** pick list. Click **Save** to add the relation information.
- Step 6: To enter additional relations, for example between Kiana and her parents, first click **New**. Then enter the relation information and click **Save**.

Center of Keys for Life

Center of Keys for Life referrals can be entered on the CKL screen. This screen will be covered in greater detail in Section 9.

Child Fatality

The policy of the CFSA that all death of children who are involved in foster care or protective cases as well as children who are know to the agency at any time within 4 years of the child's death shall be promptly and appropriately reviewed by the CFSA Child Fatality Review Team (CFRT).

Steps Include:

Step 1: End-Date a Client from a Case with a Reason of Death*.

Step 2: Enter a Child Fatality Report*.

Employment or Education Information

To add, view or update client employment, education or military information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Client**, and click **Client List**.

Step 2: Highlight client and click **Show**.

Step 3: Click **Employment/Education** to display the Employment, Education, and Military screens.

Step 4: Enter information pertaining to the client's occupation on the **Employment** screen.

Step 5: Enter information pertaining to the client's military status on the **Military** screen.

Step 6: Enter information pertaining to the client's educational level and school on the **Education** screen. The education screen has three tabs.

Step 7: On the **School/DayCare/College/University** tab, enter the name of school that your client attends.



Note: Schools in the District of Columbia and Prince George's County (i.e. High schools, local universities and colleges) are listed in the Name** field. Once a school is selected, the phone number and address will automatically populate to their respective fields.

Client Education

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

A NEW education record must be created for each new school year (usually as the grade level changes). To create a new education record click the "NEW" button at the bottom of the screen.

Date Update	School Name	Daycare Name	City Name	Grade Level	Status	Grade Enrollment Date
05/02/2007	Spingarn Senior High School		WASHINGTON		Attending	09/05/2006

School

Type ** District of Columbia Name ** Spingarn Senior High School

Specify Phone Ext Grade Enrollment Date 9/5/2006

Address
2500 Benning Road NE
WASHINGTON, District of Columbia 20002
Ward:5, Census Tract:89.5

DayCare

Name ** Phone Ext Enrolled Date

Address

New Save Cancel

Figure 4.9

Step 8: On the **Education** tab, enter information about the client's educational level.



Note:

- Whenever the educational status of a client has changed (i.e.: client has been truant) it is important to record and keep track of that information in FACES.NET.
- A NEW education record must be created for each new school year (usually as the grade level changes). To create a new education record click the "NEW" button at the bottom of the screen.

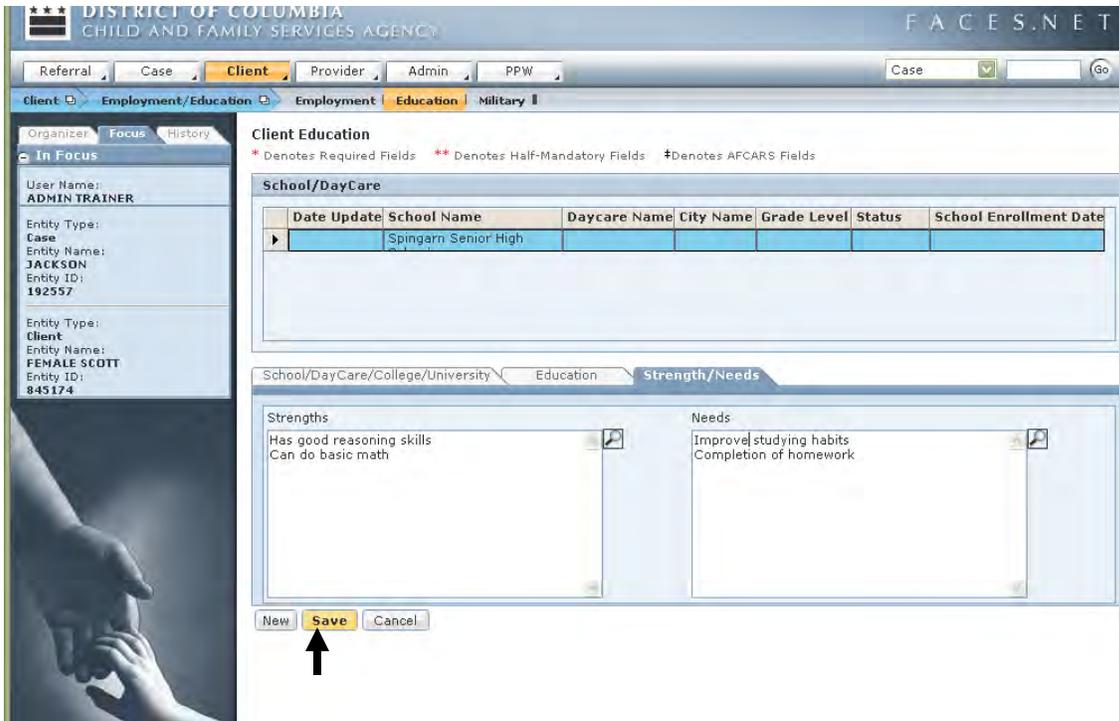


Figure 4.10

Step 9: Lastly, on the **Strengths/Needs** tab, note some educational strengths and needs for your client.

Step 10: Click **Save** to save the screen.

Absondence

If a child absconds/goes missing, then the Caretaker/Group Home should contact:

- MPD to file a missing person report;
- The CFSA Intake Hotline;
- The CFSA Social Worker

Finances

To view or edit client financial information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the Case menu, then Client and click Client List.

Step 2: Click **Finances**.

Step 3: The **Finances** screen will be displayed; where client financial and payment information can be entered.

Step 4: The **Finances** screen will be covered in detail in Section 11.

Health

To add, view or update client health information, complete the following steps:

Steps Include:

Step 1: Place the cursor over the Case menu and then Client.

Step 2: Click the **Client List** button.

Step 3: Highlight client and click **Show**.

Step 4: Medical information, such as immunization records, allergies, test results, and medical appointments can be entered or viewed in the Health screens. To display the Health screens, click **Health**.

Step 5: Most medical information can be entered into the FACES.NET database in the form of an appointment. To view an existing appointment, schedule or create a new one, click **Appointments**. A list of appointments will be displayed (See Figure 4.9).

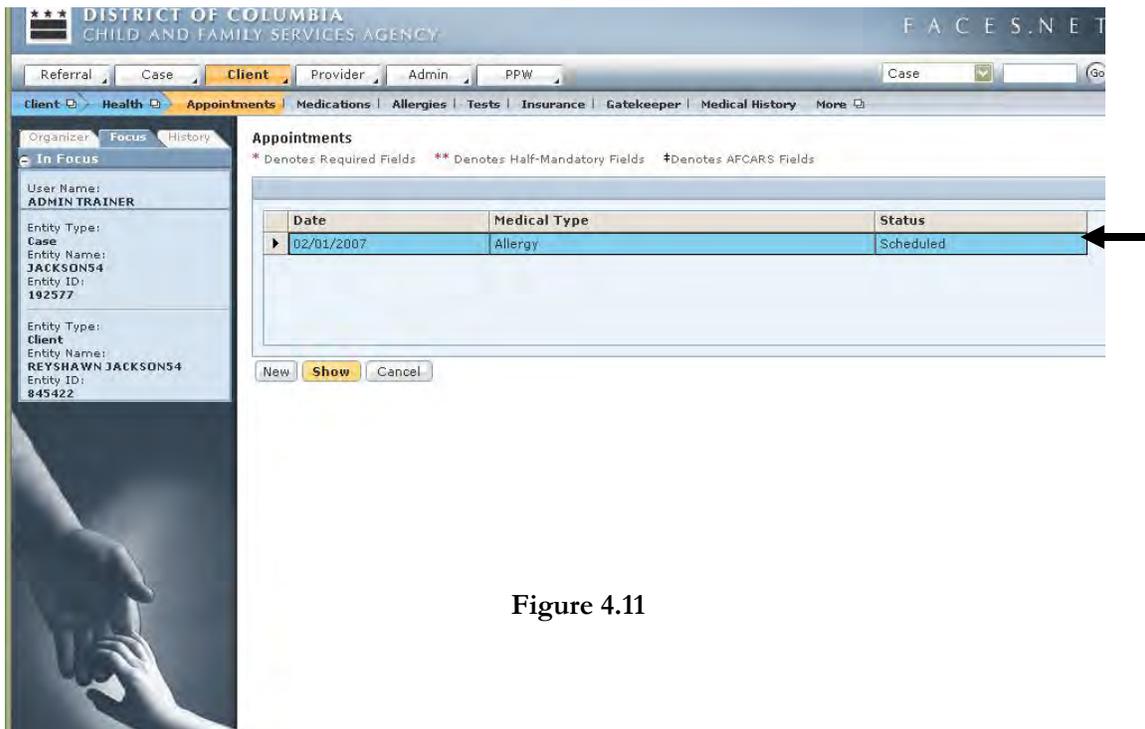


Figure 4.11

Step 5: To view an existing appointment, click the desired appointment and click **Show**.
To create a new appointment, click **New**.

Create a New Appointment

Steps Include:

Step 6: Create a new allergy appointment for Keyshawn. First, make sure that Keyshawn is the active client. Then click **Health**, then **Appointments**, to display the **Select Medical Appointment** list. Click **New** and the Medical Appointment Details screen will be displayed.

Step 7: Assume that the child has just returned from the appointment at which he received allergy shots and that we are entering the results. In reality, the appointment would probably have been entered in advance with a status of Scheduled, and the social worker would return here and change it to **Completed** before entering additional details. In any case, let's select **Completed** in the **Status** drop-down list and enter today's date in the **Date** field. Select **Allergy** in the **Medical Type** pick list.

Step 8: Next, enter the doctor's name into the **Health Professional's Name** field. Assume that Keyshawn's pediatrician is Dr. Jones. Enter his name in the appropriate field.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The main content area is titled 'Appointments' and includes a 'Client Medical Appointments' section with fields for 'Current Primary Physician', 'Current Primary Dentist', 'DC KIDS MR#', and 'Created By'. Below this is an 'Allergies' section with a text input field, which is pointed to by a black arrow. The 'Summary' tab is active, showing a form with the following fields: 'Date*' (2/1/2007), 'Time' (10:00 AM), 'Medical Type*' (Allergy), 'Status*' (Scheduled), 'Other Specify', 'Health Professional's name**' (Dr. Jones), 'Agency**', and 'Address'. The left sidebar shows the user name 'ADMIN TRAINER' and the client name 'KEYSHAWN JACKSON54'.

Figure 4.12



Note: This field and the **Agency** field are marked by asterisks. Remember that this indicates that one of the two must be filled out in order to proceed.

The screenshot shows a software interface for managing appointments. The main window is titled 'Appointments' and contains several sections. The 'Client Medical Appointments' section has four input fields: 'Current Primary Physician', 'Current Primary Dentist', 'DC KIDS MR#' (with a value of '1'), and 'Created By' (with a value of 'TADMIN'). Below this is the 'Allergies' section, which has a text input field. A black arrow points to this field. The 'Summary' and 'Detail' tabs are visible, with 'Detail' selected. The 'Diagnosis' section has a dropdown menu with 'Allergy, Unspecified' selected, a 'Select...' button, and an 'Other Specify' field. The 'Date/Time' field is set to '2/1/2007 10:00 AM' and the 'Medical Type' is 'Allergy'. The 'Brief Summary, Recommendation' section has a text area. The 'Dental conditions (Dental Problems, Special Conditions)' section has a text area. The 'Developmental History' section has a text area. The 'Physical Exam (Include all Laboratory and Radiology Evaluations)' section has a text area. The 'Specialty Update*' section has a text area containing 'Keyshawn is allergic to pet dander.'. At the bottom, there are 'Save' and 'Cancel' buttons. On the left side, there is a sidebar with 'In Focus' information for 'ADMIN TRAINER' and 'KEYSHAWN JACKSON54'.

Figure 4.13



Note:

- AFCARS data element #10 looks to the **Diagnosis** field to see if a client has a handicap or disability. Should the social worker choose one of the pre-defined disabilities, the client will be indicated as having a handicap on their general information screen;
- Medical screens will primarily be populated by data retrieved from Children's National Medical Center (CNMC) for children flagged as part of the DC Kids program;
- If a client's medical information was entered via the Children's National Medical Center, then the **DC Kids MR#** will be displayed at the top of the screen;
- If you had selected a different appointment type, different listing of options would be shown here from which to choose;
- The **Details** tab unlocks after a status of "Completed" has been selected.
- The child's current Primary Physician and current Primary Dentist populate from the collateral screen (discussed early in Section 3).

Absent Parent Information

To add, view or update absent parent information for a client, complete the following steps.

Steps Include:

- Step 1: Place the cursor over the Case menu, then Client, and click the Client List button.
- Step 2: Highlight a client and click **Show**.



Note: You may only enter absent parent information for a client who is participating as a child in the case.

Step 3: Click **Absent Parent** to display the Absent Parent screen.

Step 4: Enter absent parent information for the client.



Points to Remember:
Remember that the client who is being entered as the absent parent must first be indicated as an absent parent on the general information screen. Their Role in Case should read **Absent Parent**.

AFCARS

To add, view or update AFCARS information for a client, click on the AFCARS button. AFCARS information will be discussed throughout the FACES.NET guide, but covered in detail in Section 16 (Federal Reporting).

NCANDS

To add, view or update NCANDS information for a client, click the NCANDS button. NCANDS information will be covered in detail in Section 16 (Federal Reporting).

Record Client Contacts

Regular contacts from social workers are the primary vehicle for monitoring each child's safety, well being, and progress towards achieving permanence.

Whenever a social worker either attempts or completes a contact with anyone involved in a case (Client, Provider, Collateral, or Others), it is recorded on the **Case - Contacts** screen in FACES.NET. An attempted contact is when actual communication is not made with the client. A completed contact is when communication is made with the client. Remember that in order to show reasonable efforts, attempted contacts should always be recorded even if the social worker did not see the client or the non-client participant.

In the following steps, we will enter a contact in FACES.NET detailing a visit made by a social worker of the Jackson family.

Create New Contact

Steps Include:

Step 1: Place the cursor over the Case menu and click Contacts.

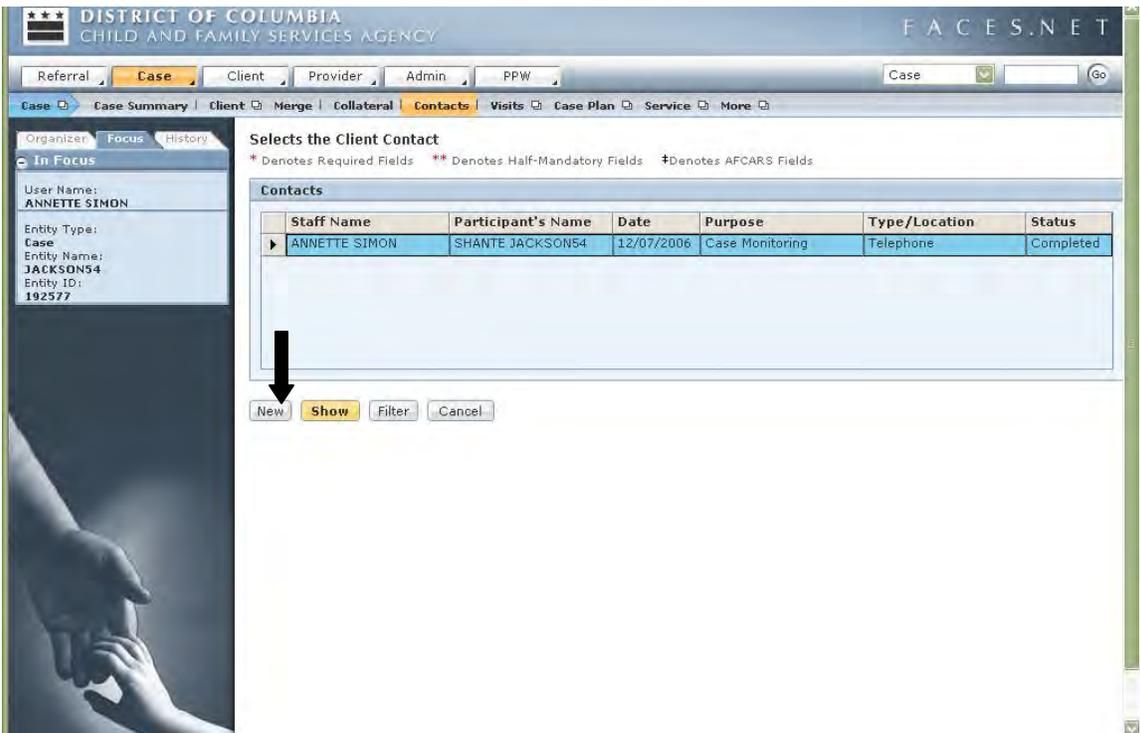


Figure 4.14

Step 2: Click **New**. (This will take you to the **Contacts** screen, containing only one screen.)

General Information Screen

The **Staff Name** field will default to the worker inputting the information. If you are an SSA entering the contact on behalf of the social worker, then click the **Find** button to search for the worker's name that actually made the contact/visit.

The screenshot shows the 'Selects the Client Contact' form in the FACES.NET system. The form is divided into several sections:

- Contact History:** A table with columns: Staff Name, Location/Type, Contact Status, Source, Updated Date. One entry is visible: ANNETTE SIMON, Face to Face (Home), Completed, Case.
- General Information:** Fields for Staff Name (ANNETTE SIMON), Type / Location* (Face to Face (Home)), Source (Case), Date* (12/20/2006), Time* (10:00), Status (Completed), Duration (00:00), and Travel Time (00:00). A black arrow points to the Staff Name field.
- Clients Discussed:** A list box containing 'KEYSHAWN JACKSON54' and a 'Select' button.
- Contact Participants:** Two list boxes: 'Client/Collateral**' (containing 'SHANTE JACKSON54') and 'Non-Client/Non-Collateral Participants**'. Both have 'Select' buttons.
- Purpose:** A list box containing 'Assessment' and a 'Select' button.
- Type of Contact:** An empty list box with a 'Select' button.
- Comments*:** A text area containing 'Social Worker completed assessment.' and a 'Select' button.

At the bottom of the form are buttons for 'New', 'Save', 'Cancel', and 'Find'.

Figure 4.15

Steps Include:

- Step 1: Change the **Status** of the contact to **Completed** by clicking the radio button.
- Step 2: Choose **Face to Face (Home)** as the location of the visit in the **Type/Location*** field, indicating that this visit took place at the client's home.

- Step 3: Enter the date and time of the contact.
- Step 4: Select Keyshawn under **Clients Discussed**. This section is for recording the clients discussed during the visit.
- Step 5: Click the **Select** button in the **Contact Participants** section and select Shanté from the **Client** select box. Place a check in the box in front of her name. This section is for recording actual participants in the visit.
- Step 6: Click the **Select** button below the **Purpose** box.
- Step 7: Click **Assessment** in the list of purposes that appears, as well, as any other desired options.
- Step 8: Click the **Select** button next to the **Type of Contact** box.
- Step 9: Enter comments detailing the visit in the **Comments*** field.
- Step 10: Click **Save**.
- Step 11: A verification message will appear: “The initial version of this contact will become read-only once it is saved. Changes can be made, but will be recorded as amendments to the original contact record”. Click **OK** to verify the save or click **Cancel** to return to the screen to edit.



Notes:

- Collaterals and Providers associated with a case can also be listed as contact participants by selecting the appropriate radio button within the contact participants select button.
- A client participating in the visit need not be discussed, and a client discussed need not participate – these fields are independent of each other. Remember particularly to select a client present at the visit in the **Contact Participants** section of this screen, even if you have already selected him or her in the **Clients Discussed** section. If you do not, you will not receive credit for the visit.
- The **Clients Discussed** box is populated with client names that have been selected from the **Multi Select** pop-up window after clicking on **Select**. Highlight client(s) from the **Available Values**, then click the >> sign to move selected client(s) to the **Selected Values** windows. After clicking **OK**, the client(s) name(s) will then pull to Contact screen. The opposite process can be completed in order to remove any clients that were selected in error.
- The **New** button is active on the Contact screen for both closed and case connected investigations.
- Please refer to the modified final order and Amended Best Practice Implementation Plan in LaShawn A. vs. Fenty for policies and guidelines concerning the frequency of visits to children. This information can be found on the CFSA Intranet and Internet.

Recording Client Visits

Whenever visits between family members (supervised or unsupervised) are either attempted or completed, documentation of such visit involving anyone in a case (Parent-Child, Mother-Children, Father – Children, Sibling, etc.) should be recorded on the **Case – Visit Log** screen in FACES.NET. An attempted visit is when actual visit/communication is not made between family members. A completed visit is when communication is made between family members. Remember that in order to show reasonable efforts, attempted visits should always be recorded even if the scheduled visit did not occur. Also, visits that have been suspended (court order, family member residing over a 100 mile radius outside of the District, or incarceration) should be documented on the Visit Plan screen as a **Suspended Visit**. This will prevent the worker statistics from reflecting negatively on management reports.

In the following steps, we will enter a contact in FACES.NET detailing a visit between the Jackson family.

Record Client Visits

Steps Include:

- Step 1: Hold mouse over **Case**, then **Visits**.
- Step 2: Click on **Visit Log**.
- Step 3: Enter **Date of Visit***.
- Step 4: Change the **Status** of the contact to **Completed** by clicking the radio button.
- Step 5: Select **Visitation Type***.
- Step 6: Select **Visit Purpose***.
- Step 7: Select Shante, Keyshawn, and LaTonya under **Who Was Present***. This section is for recording the clients who attended the visit.
- Step 8: Select **Supervision Type***.
- Step 9: If supervised, enter who supervised the visit in the **Supervised By** text box.
- Step 10: Enter **Location** of visit.
- Step 11: Enter comments detailing the visit in the **Comments** field.
- Step 12: Click **Save**.

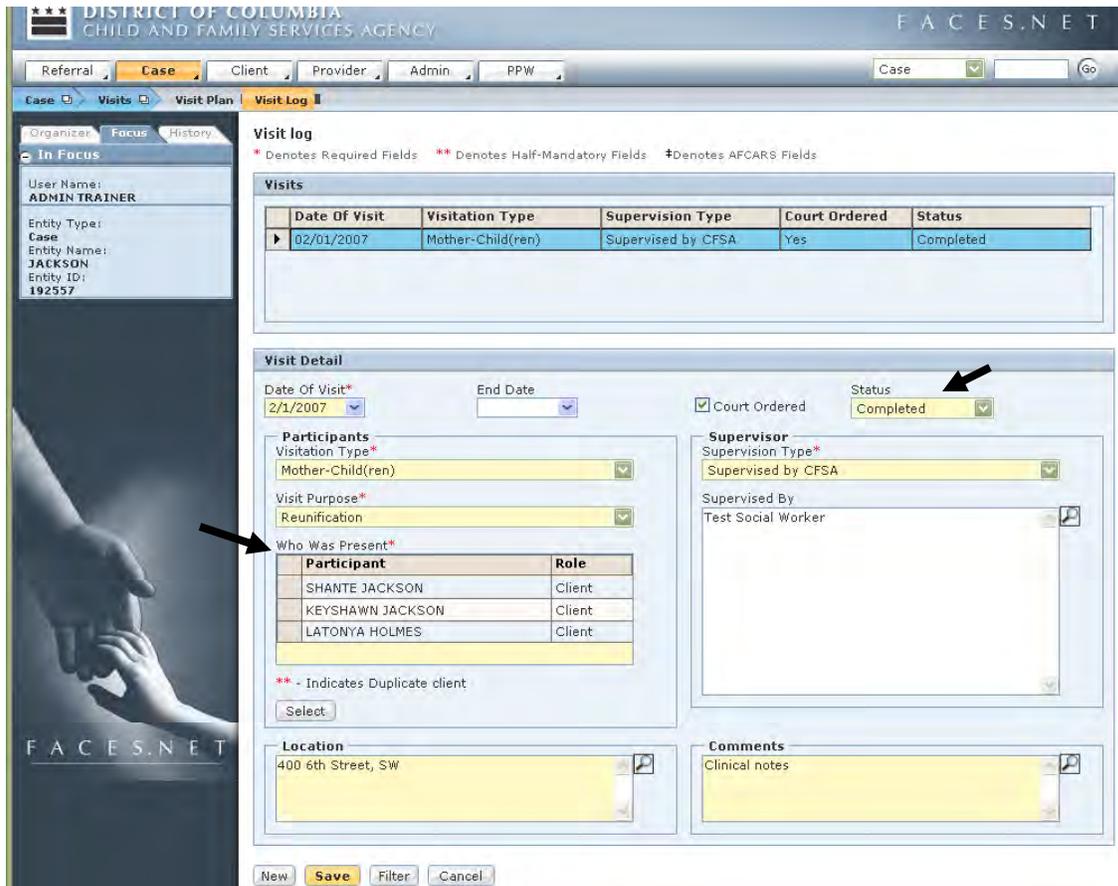


Figure 4.16

Record Suspended Visits

Steps Include:

- Step 1: Hold mouse over **Case**, then **Visits**.
- Step 2: Click on **Visit Plan**.
- Step 3: Select Shante Jackson and Paul Williams as **Client/Client Collateral** to which visits are terminated.
- Step 4: Check **Suspended** box.
- Step 5: Select **Visitation Type***.
- Step 6: Select **Visit Purpose***.
- Step 7: Select **Suspension Reason***.

Step 8: Enter **Dates of Visitation Plan Start Date***.

Step 10: Click **Save**.

The screenshot shows the 'Visit Plan' form in FACES.NET. The form is titled 'DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY' and 'FACES.NET'. It has a navigation bar with 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The 'Case' tab is selected. The 'Visit Plan' section is active, showing a table with columns: VISITATIONTYPE, SUPERVISIONTYPE, FREQUENCYTYPE, STARTDATE, and ENDDATE. The table contains one row: Mother-Child(ren), [blank], [blank], 02/01/2007, 00/00/0000. Below the table are sections for 'Client/Collateral' and 'Restricted Visitors'. The 'Visit Plan' section includes fields for 'Court Ordered', 'Suspended', 'VisitPurpose', 'Dates of Visitation Plan' (Start Date, End Date), 'Location', and 'Suspension Reason'. Arrows point to the 'Suspended' checkbox and the 'Suspension Reason' dropdown menu.

Figure 4.17



Points to Remember:

- Remember that contacts/visits must be recorded in FACES.NET prior the 15th day of the following month, so record your visits in a timely manner. (i.e.: Visits that occurred in January must be entered by February 14th)
- Special attention should be given to ensure that you select only active clients in the case.
- Always include all the **Clients** that were present in the **Contact Participant** grid.
- Verify that the proper client is indicated as the caretaker on the relationship screens so that the correct information populates on the contacts/visits management reports.
- Follow steps 1-3, 5, 6, 8, 9 to record a regular visit plans.

Notes

SECTION 5: COURT

Performance Objectives

In this Section, you gain confidence in your ability to:

- Record Hearing Information
- Modify the Court Screens
- Enter a Court Order
- Update Client Status



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Practice Overview

Court intervention and/or removal of the child from his or her home may be necessary when the parent or caregiver is unwilling or unable to change his or her neglect and/or abusive behaviors.

The social worker must take several steps if the child is placed outside of the home. He/she has to be able to document reasonable efforts both to prevent an out-of-home placement and, following a placement, to minimize the child's length of time in out-of-home placement.

The court hearing following removal of the child is called the initial hearing. If the court continues the out-of-home placement at the time of the initial hearing, then the social worker must ensure that the child is placed in a licensed CFSA foster care facility, temporary licensed foster home, or a licensed kinship care foster home.

Once a child is removed from the home, an initial hearing must take place within 72 hours of that removal. The child (ren)'s parents or caregiver must be given notice of the time, date and location of each court hearing pertaining to the child (ren).

In the event that a child remains in an out-of-home placement after the initial hearing and continues in the legal custody of CFSA, the case shall be transferred to the appropriate CFSA service program (i.e. Out of Home Unit).

The key court scenario that we will describe in the following section involves:

- Locating and recording hearing information;
- Locating and updating client custody status.

There are three types of Court Reports:

- Disposition Court Report;
- Interim Court Report;
- Permanency Review Court Report.

Disposition Hearing

The court report provides the Court with information regarding the family in an effort to help guide the Court in determining a child's legal status, placement, and service needs. The Disposition hearing is usually held within three months of the initial hearing. The court report should be sent to the Court ten (10) business days before the Disposition hearing.

Permanency Planning Hearing

The Permanency hearing is a required hearing that is held after the child has been in foster care for twelve months and every six months thereafter. The purpose of the hearing is to ensure that there is an appropriate plan for achieving permanency for the child. The Permanency/Review court report establishes the goal for the child or family, whether it is Reunification, Guardianship, Adoption, or Alternative Planned Living Arrangement. It contains information regarding the efforts made by the parents and the Agency to achieve the permanency goal. The report should be sent to the Court ten (10) business days before the Permanency Planning hearing.

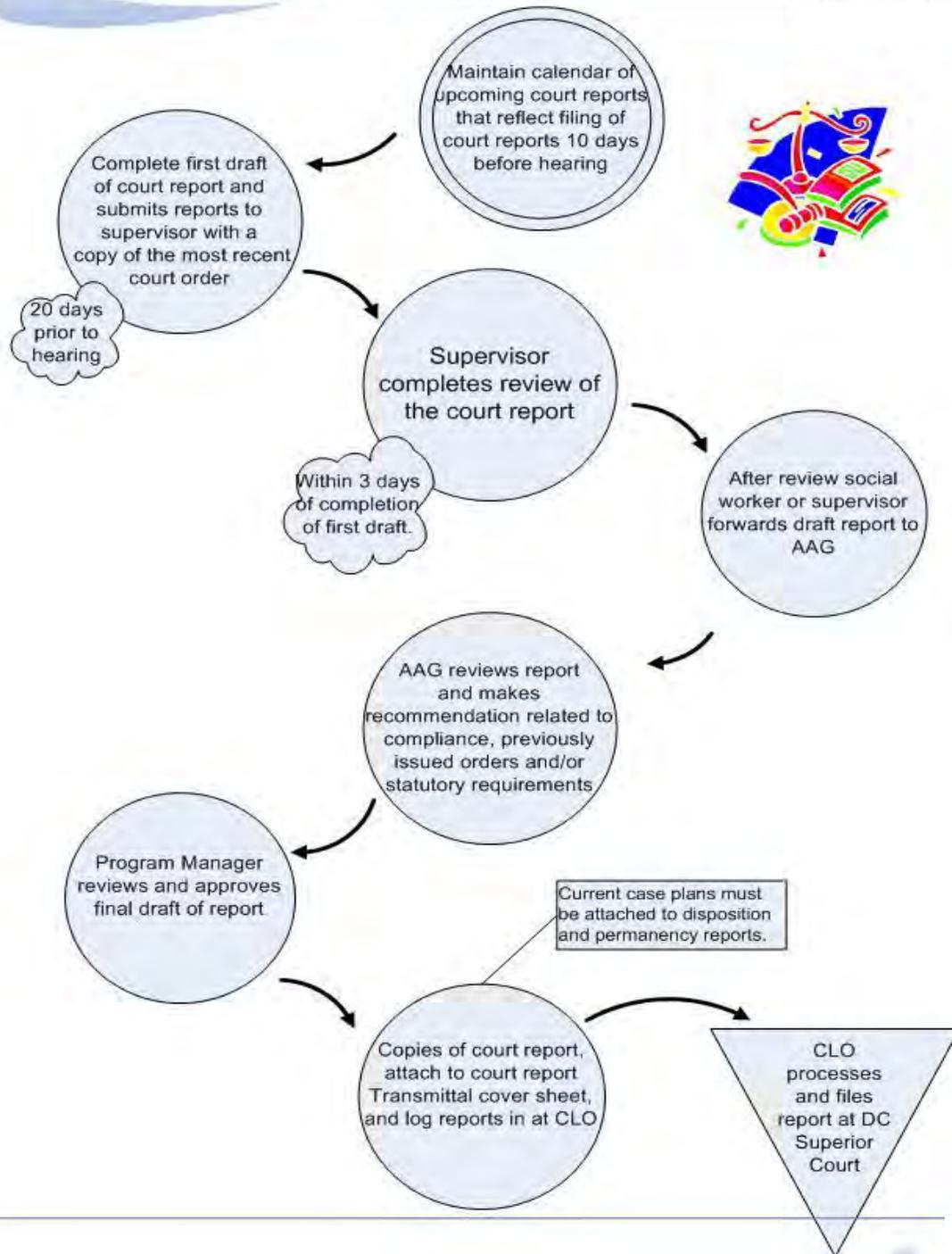
Interim - No Hearing Scheduled

Even when a hearing is not scheduled, a social worker may be required to complete an Interim Court Report to keep the Court abreast of all activities of the case.

When the permanency goal is established, the interim report must detail all specific activities and tasks with concrete timeframes, in which these activities related to the permanency goal will transpire. Upon the Court's sanction of the permanent plan, it is required that a permanency planning hearing be held every six (6) months thereafter. The interim court report will focus on the case plan progress that occurs between permanency planning hearings.

For further reference to court requirements see the electronic form of the CFSA's Policy and Procedures through the CFSA's Policy and Procedures through the [FACES.NET](#) link on the CFSA Internet/Intranet site.

Court Report Process





FACES.NET Guide

In the previous section, we introduced the practice that must be followed when recording and updating hearing information and client status. In this section we will review the relevant screens in FACES.NET.



Figure 5.1

This section teaches social workers how to use FACES.NET to capture court-related information. The Court section of FACES.NET provides workers with access to their clients' entire court histories. The Court section also allows workers the ability to easily update information. Some Court screens will be grayed out until the CPS Intake/Investigation becomes a case.

FACES.NET Scenario

Role: You are an In-Home and Reunification worker, and the Jackson case has been assigned to you.

In preparation for the permanency hearing, you will first complete a court report.

As mentioned previously there are three types of court reports – Permanency Review, Disposition, and Interim reports. Permanency Review reports are completed in advance of permanency review hearings every six months. Disposition reports are completed in advance of disposition hearings which must occur within 105 days of the child’s removal from the home. However, disposition hearings can take place 30 days of trial or stipulation. Interim reports are not necessarily linked to a specific hearing, and the frequency with which they are required is variable. In this FACES.NET Scenario, we will complete a Permanency/Review report.

After the hearing, the worker records the hearing summary. The worker (or Court Liaison Office) also records the following hearing results:

- New neglect court numbers assigned for the children;
- Pre-trial order placing children in CFSA custody.

Hearing Information/Schedule

Details for most hearings are entered into FACES.NET automatically by an electronic transfer from the DC Family Court, to FACES.NET; however, new hearings may be added by social workers if needed. You may enter a future court hearing but the results section will not unlock until the date of the hearing. For purposes of this FACES.NET Scenario, we will create a new hearing.

Steps Include:

Step 1: Click **My Assignments** on the left menu.

Step 2: Click the Jackson case.

Step 3: Place the cursor over the **Case** menu, then **Court**, and click the **Hearing** button.

Step 4: Click the **List of Hearings** button.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. The main content area is titled 'Select Court Hearing' and features a table of hearings. A black arrow points to the first row of the 'Hearing' table, which contains the following data:

Hearing Date	Hearing Time	Court Room	Judge's Name
11/01/2005			Wendell P. Gardner Jr.

Below the hearing table, there is a 'Respondents' table with the following data:

Client ID	Client Name
845177	KEYSHAWN JACKSON
845178	REYSHAWN JACKSON

To the right of the respondents table is a 'Hearing Type' dropdown menu with 'Permanency Hearing' selected. At the bottom of the screen, there are buttons for 'New', 'Show', and 'Cancel'.

Figure 5.2

Step 5: Click the **New** button.

Step 6: Enter the following information into the correct fields:

Respondents = **Keyshawn, Reyshawn**

Hearing Type = **Permanency Review**

Hearing Date (make sure this is a future date)

Judge – if not listed, choose “**Other**” and enter name in **Specify** field.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

F A C E S . N E T

Referral Case Client Provider Admin Case

Case Court Hearing List of Hearing Summary Child Information Court Order

Organizer Focus History
In Focus
User Name: ANNETTE SIMON
Entity Type: Case
Entity Name: JACKSON
Entity ID: 192557

Court Hearing Summary
* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Entry Information

Creation Date: 11/10/2005 Updated Date: 11/10/2005
Created By: ANNETTE SIMON Updated By: ANNETTE SIMON

Respondent's Name
KEYSHAWN JACKSON
REYSHAWN JACKSON
Select

Court Hearing Type
Permanency Hearing
Select

Recommendation

Court Hearing Participants

Name	Role
SHANTE JACKSON	Client

Select

Save Cancel

Figure 5.3



Note: The Child Information button unlocks once you have completed the Hearing Summary.

- Step 7: Click the **Select** button for Court Hearing Participants (a pop-up window is displayed to select participants). Use the **Client**, **Collateral**, and **Provider** radio buttons to select different types of participants.
- Step 8: Click the **Save** button.
- Step 9: To view court information entered for each child, click the **Child Information** button on the Court Hearing track.

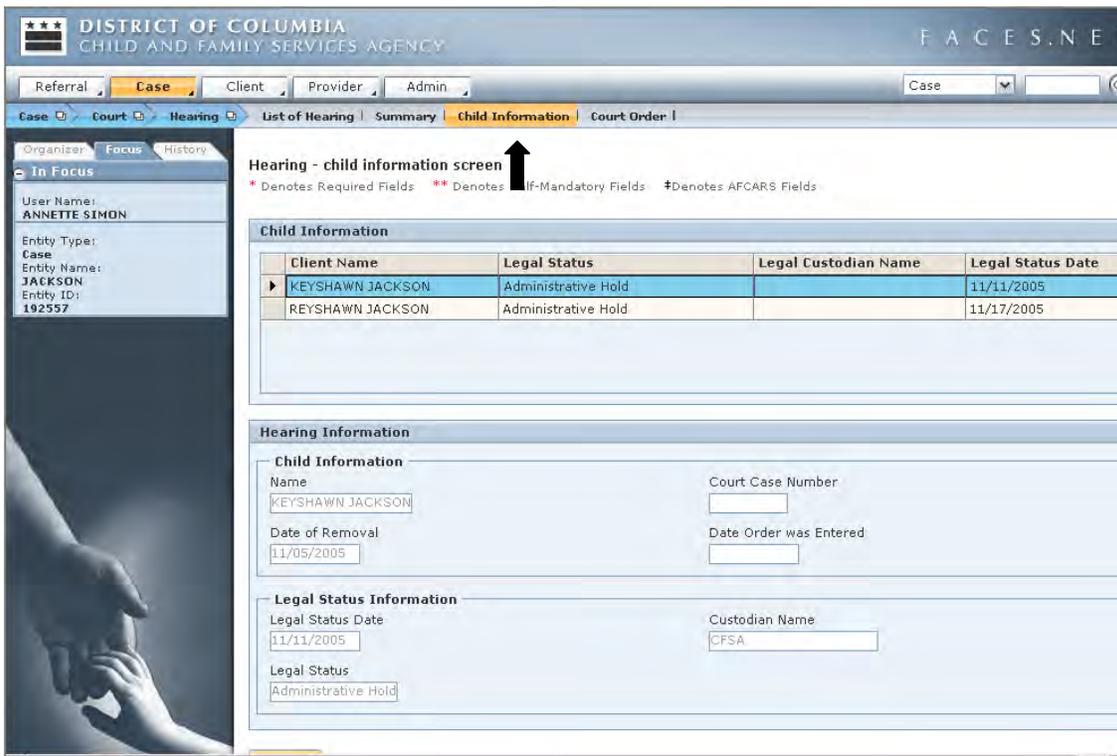


Figure 5.4

- Step 10: To view the Court Order issued at this hearing, click the **Court Order** button. Select a court order and click the **Preview** button to show the scanned court order. These court orders are scanned in by the court liaison unit.

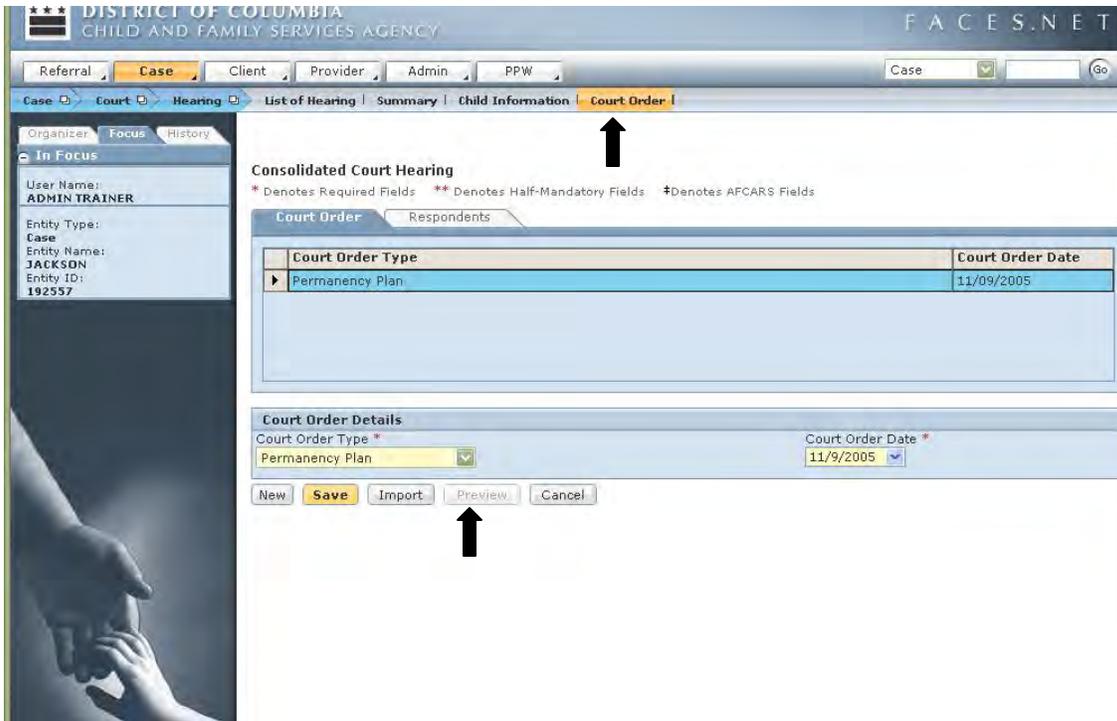


Figure 5.5

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY DIVISION

In the Matter of:

<u>Keyshawn Jackson</u> (Child's Name)	Case No. <u>N-724</u> Social File No. <u>203</u> Date of Birth <u>1-26-95</u>
<u>Reyshawn Jackson</u> (Child's Name)	Case No. <u>N-1276</u> Social File No. <u>215333</u> Date of Birth <u>5-10-2000</u>
_____ (Child's Name)	Case No. _____ Social File No. _____ Date of Birth _____

Next Hearing Date: _____

Anne O'Regan Keary
JUDGE MARCOLO CUGHENBERNE, JR.

PERMANENCY HEARING ORDER

This matter came before the Court on the 9th day of January, 2002. The following interested parties were present at the Permanency Planning Hearing.

INTERESTED PARTIES

MOTHER <u>Katherine Heslep (SI for Food)</u> OFFICE OF CORPORATION COUNSEL	Robert Jackson (F of Jessup) was Frank <u>John</u> <u>Head (F of Joshua)</u> FATHER <u>Tonya Peebles and Michelle Torra bene</u> SOCIAL WORKER for Timothy
RESPONDENT <u>Ravi Basu</u> GUARDIAN AD LITEM	CARETAKER CARETAKER'S COUNSEL <u>Al Gonzalez for Mr. Head</u> FATHER'S COUNSEL Lawrence Spillan for Mr. Jackson

OTHER PARTIES

NAME _____	CASA director for Jessup + Joshua
NAME _____	RELATIONSHIP TO CASE _____
NAME _____	RELATIONSHIP TO CASE _____
NAME _____	RELATIONSHIP TO CASE _____

Write a Court Report

As mentioned previously there are 3 different types of court reports available: Disposition, Interim, and Permanency/Review. The Interim is submitted in lieu of requesting an emergency hearing and it updates the judge in regards to a significant event during the life of the case. The Disposition and Permanency/Review reports are slightly different and contain information targeted to those specific types of hearings.

Steps Include:

Step 1: Place the cursor over the **Case** menu and then **Court**.

Step 2: Click the **Court Reports** button.

Step 3: Enter the appropriate information:

- Hearing Date: Select the future date from the pick list;
- Choose “Permanency/Review” report.



Note: Once the **Hearing Date** is selected, the **Judge’s Name**, **Hearing Time**, **Hearing/Review Type** and **Respondents** will automatically populate based on the information entered in the Hearing screen. You would still however have to enter the type of court report under the General Information section of the screen.

Step 4: Click **Save**.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin PPW

Case Court Hearing Court Order Court Report Complain Mediation Motions Parental Rights More

Organizer Focus History

In Focus

User Name: ADMIN TRAINER

Entity Type: Case

Entity Name: JACKSON

Entity ID: 192557

Entity Type: Client

Entity Name: KEYSHAWN JACKSON

Entity ID: 845177

Court Report

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Court Hearing Date	Type of Court Report	Creation Date
	Permanency/Review Report	03/12/2007

Hearing Information

Hearing Date* 03/12/2007 Hearing Time 00:00 Judge's Name* A Howard Specify

Hearing/Review Type Permanency Hearing

Respondents KEYSHAWN JACKSON

General Information

Type* Permanency/Review Report Creation Date 03/12/2007 Date Sent to Supervisor

Date Supervisor Approved Date Due to Court Date Program Manager Approved

Court Date (Old Format) Staff Name ADMIN TRAINER Unit / Prog. Area

Save New Approval Find Report Amend Preview Cancel

Step 5: Click the **Report** button to enter details of the court report:

- Complete the **Narrative** tab (each Narrative question must be completed prior to sending this report to the supervisor for approval);
- Complete the **Recommendations** tab for each child (each recommendation must be addressed for each child prior to sending this report to the supervisor for approval. You do not complete recommendations for an Interim report);
- To copy a recommendation, highlight the name of the child for whom you have entered a recommendation, highlight the name(s) of the child (ren) for whom the recommendation is the same, and click **Copy**;
- Click **Save**.

Step 6: Click the **Approval** button to request supervisory approval for a report.

Step 7: Click the **Amend** button to amend an approved report. This must also be then sent to the supervisor for approval. Note that this is the only change that can be made to an approved court report.

Step 8: Click the **Preview** button to review/print a copy of the report generated from the information entered. Reports that are not yet approved will print with the word “DRAFT” as a watermark.



Points to Remember:

Court Reports require an approval from both your Supervisor and Program Manager prior to submission to the courts.

Attend the Hearing

After completion of the finalized and approved Court Report, signatures from the worker, supervisor, and program manager are required on the hardcopy document. The worker will then file the court report through the Court Liaison's Office ten (10) business days before the hearing. Worker should print their own copy to the court proceedings. Additional copies of the report should be made available to the judge, attorneys and other significant participants in the case.

Summarize the Hearing

After the hearing, return to the **Hearing** screen and enter information about the results of the hearing in the lower portion of this screen.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin PPW Case [Go]

Case Court Hearing List of Hearing Summary Child Information Court Order

Organizer Focus History

In Focus

User Name: ADMIN TRAINER

Entity Type: Case

Entity Name: JACKSON

Entity ID: 192557

Court Hearing Summary
* Denotes Required Fields ** Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Entry Information

Creation Date: 3/12/2007 Updated Date: 3/12/2007

Created By: ADMIN TRAINER Updated By: ADMIN TRAINER

Respondent's Name

KEYSHAWN JACKSON
REYSHAWN JACKSON

Select

Court Hearing Type

Permanency Hearing

Select

Court Hearing Date *

2/1/2007 ←

Time Hearing Scheduled

09:00 A.M. P.M.

Judge's Name *

A Howard ←

Time Arrived at court

00:00 A.M. P.M.

Court Hearing Participants

Name	Role
SHANTE JACKSON	Client
KEYSHAWN JACKSON	Client
REYSHAWN JACKSON	Client

Select

Save Cancel

Figure 5.7



Note: Some fields will remain read-only (grayed out) until the date of the hearing.

Court Numbers

All clients who are court-involved will be assigned a court number by the D.C. Family Court System. The social worker should record the court numbers in FACES.NET.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Court**, and select **Court Numbers**.

Step 2: Select a client.

Step 3: Click the **Show** button.

Step 4: Enter information in the Court Number Details Section.

- **Number;**
- **State of Jurisdiction:** (if the state is Maryland or Virginia, the County Jurisdiction field allows you to select a county);
- Select **Neglect** as the **Type** of court number entered;
- **Start Date.**

Note:

- You must enter the court order number that appears on the court order to include the entire four digit year (e.g.: enter the Neglect number N0004-07 as N0004-2007).
- Documents sent to the court without all identifying court numbers will be returned to the social worker.
- The Court Liasion's Office will not accept any documents that are missing any coresponding court numbers.



The screenshot shows the FACES.NET web application interface. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The 'Case' menu is expanded, showing 'Court', 'Hearing', 'Court Order', 'Court Report', 'Complaint', 'Mediation', 'Motions', 'Parental Rights', and 'More'. The 'Court' menu is further expanded to show 'Court Numbers'. The main content area is titled 'Client Selection from List of Clients' and displays a table of court numbers for the selected client, JACKSON. The table has columns for Type, Start Date, End Date, County of Jurisdiction, and State of Jurisdiction. The first row shows 'Neglect' with a Start Date of '2/1/2007' and State of Jurisdiction of 'District of Columbia'. Below the table is the 'Court Number Details' section, which includes fields for Type (set to 'Neglect'), Number (set to 'N0004-2007'), State of Jurisdiction (set to 'District of Columbia'), Start Date (set to '2/1/2007'), County of Jurisdiction, End Date, Client's Attorney, Adjudication Date, Adjudication Comments, Stipulation Date, and Stipulation Comments. The 'Save' button is highlighted in yellow.

Type	Start Date	End Date	County of Jurisdiction	State of Jurisdiction
Neglect	2/1/2007			District of Columbia

Court Number Details

Type*: Neglect
Number*: N0004-2007
State of Jurisdiction*: District of Columbia
Start Date*: 2/1/2007
County of Jurisdiction:
End Date:
Client's Attorney:

Adjudication Date:
Adjudication Comments:
Stipulation Date:
Stipulation Comments:

New Save Cancel

Figure 5.8

Step 5: Enter the **Adjudication Date** and any comments.

Step 6: Enter the **Stipulation Date** and any comments.

Step 7: Click the **Save** button.



Note: If court numbers for additional clients must be entered, click again at the Court Numbers button to select the next client.



Points to Remember:

Don't forget that a social file number or cross reference (XREF) must be recorded in FACES.NET in order to interface with the DC Family Court.

Record Court Orders

Two court order buttons are available in FACES.NET. The **Court Order** button in the following example is associated to a particular hearing. The social worker will now enter the court order given in Jackson case.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Court, Hearing**, and then **List of Hearings**.
- Step 2: Select **Hearing**.
- Step 3: Click **Show**.
- Step 4: Place the cursor over the **Case** menu, then **Court**, and then **Hearing**.
- Step 5: Click **Court Order**.

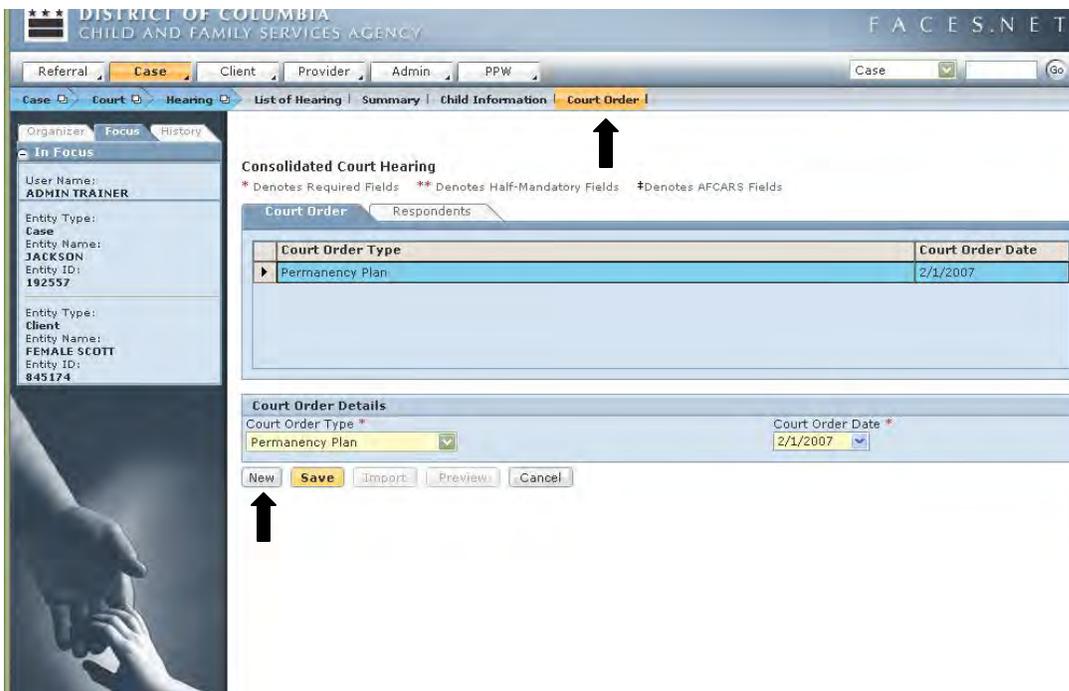


Figure 5.9

- Step 6: Click **New**.
- Step 7: Enter the **Court Order Type***.
- Step 8: Enter the **Court Order Date***.

Step 9: Complete **Respondents** tab.

Step 10: Click **Save**.

Step 11: Click **Preview** to Court Orders that have been scanned in.



Note: The social worker should receive a copy of the court order at the hearing unless otherwise specified by the judge.

Status

During the **Permanency Hearing** the judge ordered Female to CFSA Legal Custody. Follow the steps below to enter different types of legal status. Your instructor will tell you which children in the Jackson case to assign to each status.



Note: Once a CFSA legal status has been recorded in FACES.NET, an automatic Administrative assignment is given to the Administrative Review Unit and the initial administrative review is scheduled for the client.

For CFSA custody

Steps Include:

Step 1: Click the **CFSA** radio button (See Figure 5.10).

Step 2: Pick the **Legal Status**.

Step 3: Enter the **Begin Date**.

Step 4: Click **Save**.

Referral Case Client Provider Admin PPW Case

Case Court Hearing Court Order Court Report Complaint Mediation Motions Parental Rights More

Organizer Focus History

In Focus

User Name: ADMIN TRAINER

Entity Type: Case
Entity Name: JACKSON
Entity ID: 192557

Entity Type: Client
Entity Name: FEMALE SCOTT
Entity ID: 845174

Client Selection from List of Clients

* Denotes Required Fields ** Denotes Half-Mandatory Fields #Denotes AFCARS Fields

Legal Custody Status	Legal Status	Begin Date	End Date
CFSA	Administrative Hold	02/01/2007	

Legal Custody Information

Legal Custody Status

CFSA Non CFSA Court Ordered Exception

Reason

Legal Status* Begin Date* End Date

Administrative Hold 2/1/2007

Relationship Name Address

New Save Cancel

Figure 5.10

For Non-CFSA custody

The following are the non-CFSA legal statuses:

Conditional Release to Parent - This legal status is used when a case first enters the court system and the neglect case has not gone to trial. It is only used when the child is released to a parent. Once the case goes to disposition Conditional Release to Parent changes to Protective Supervision (if the child remains with the parent)

Conditional Release to Third Party - This legal status is used when a case first enters the court system and the neglect case has not gone to trial. It is only used when the child is released to a relative or non-relative. Once the case goes to disposition Conditional Release – Third Party changes to Third Party Placement (if the child remains with the relative/non relative).

Protective Supervision – This is the post disposition legal status that is used when children are placement with their parent(s).

Private Third Party Placement – This is the post disposition legal status that is used when children are placed with relatives/non relatives who are not foster parents.

No Court Involvement – This legal status should be used for all children who are home with their parent and there is no neglect case in DC Superior Court.

Non ward – This legal status is only used for the babies of the teen mothers who are in foster care

Steps Include:

Step 1: Click the **Non-CFSA** radio button.

Step 2: Pick the **Legal Status**.

Step 3: Pick the **Relationship** of the custodian.

Step 4: Pick the **Name** of the custodian. The custodian must first either be entered as a client and have their relationship and address screens filled out or be entered as a collateral and association with the child, and address filled out. The address will automatically populate.

Step 5: Enter the **Begin Date**.

Step 6: Click **Save**.



Point to Remember:

For Court Ordered Exceptions – only Supervisors and higher can enter this information.

To enter a change in custody status

Steps include:

Step 1: End date the current Custody Status that has changed.

Step 2: Click **Save**.

Step 3: Click **New**.

Step 4: Enter the new Custody Status.

Step 5: Click **Save**.



Note: If a legal status is end dated, you will receive a message asking if the child is still in agency care. If the answer is “Yes” then you **MUST** enter another legal status before leaving this screen.

Notes

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SECTION 6: HOME REMOVAL AND PLACEMENT

Performance Objectives

In this Section, you gain confidence in your ability to:

- Verify And Record A Child's Removal Status
- Record Placement Information



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Practice Overview

Placement

Placements may be either planned or emergency. Planned placements allow the social worker to ensure the best possible placement match for the child and allows for the efficient delivery of pre-placement services to ease the child's adjustment.

Emergency placements shall be made only when there is an unforeseen and unavoidable removal from either a child's legal guardian or foster home. Emergency placements follow the same procedure as a planned placement with the exception that the steps are accelerated.

The social worker shall consult with his or her supervisor on all placement requests. Assessment of the child's needs and identifiable information is used to match children with providers, and shall be included in the Placement Recommendation screen in FACES.NET.

Social worker shall forward to the Placement/Reconciliation Unit information that will assist in making a placement decision that is in the child's best interest and in the least restrictive and most family-like setting.

Out-of-home placements are appropriate in any of the following situations:

- When a child who has been neglected, abused, or abandoned by his/her parent and cannot, based on the social worker's assessment, safely remain in that home, even with the provision of services;
- When a child, who is placed with another facility or agency, requires transfer to another home in order to receive the most appropriate medical, psychological, social, and educational services;
- When a child's family which experiences, or is about to experience, an anticipated short-term change in circumstances (i.e. parental drug treatment, hospitalization, etc).

The following rules apply for placement eligibility:

- A child must have an open home removal and CFSA legal status before a placement can be initiated;
- If the child is in need of a therapeutic foster home, the social worker must provide diagnostic information to support the need for a therapeutic setting;
- If the child (17 years old or younger) is being placed out-of-the District of Columbia with relatives, foster parents, or a treatment facility, an ICPC must be completed.

For further reference to home removal and placement requirements see the electronic form of the CFSA's Policy and Procedures through the FACES.NET link on the CFSA Internet/Intranet site.



Note:

All reasonable efforts must be made so that children can safely remain within their own homes, also to reunite children with their parent(s) or legal guardian as soon as safely possible when removal has occurred, and to promote permanency whether in the child's own home, a kin's home, or other permanent arrangement. Whatever the individual circumstances, the goals of safety, permanency and well-being are paramount in the placement process. For those children who can not remain safely in their homes, it is the policy of CFSA that children should be placed in accordance with balancing the best interest of each individual child and taking strong consideration of the following factors:

- Each child is placed in the least restrictive, most family-like setting appropriate for their needs. Congregate care shall be considered as an option only after a foster home or kin placement has been considered and determined not to be appropriate for the child's needs.
- Efforts are made to place children in kin placements, thus creating a continuance of family bonds within a safe environment.
- Efforts are made to preserve sibling groups, further recognizing the importance of family bonds and minimizing trauma to the child.
- Special care is made to place children in the communities in which they resided prior to placement.
- Encompassing the above considerations, children in need of a placement shall be matched with an appropriate placement based on the individual needs of the child and family, designed to minimize placement disruptions, and thus promote stability and permanency for children.

This practice recognizes the fact that each placement disruption and subsequent re-placement compounds the trauma in each child's life, thus the CFSA recognizes the importance on maintaining a stable placement.



FACES.NET Guide

The previous segment focused on agency practice revolving around placement and home removal. To record a placement in FACES.NET the social worker will have to first record the home removal and legal status of the child. This section will guide you through the relevant FACES.NET screens.

FACES.NET Scenario

Role: You are a social worker in an In-home and Reunification unit.

You have determined that for the safety of the children, Keyshawn and Reyshawn need to be removed. Though placing children with their siblings is preferable, for the sake of this example, Keyshawn and Reyshawn will go into two different Traditional Foster Care programs.

Record a Home Removal

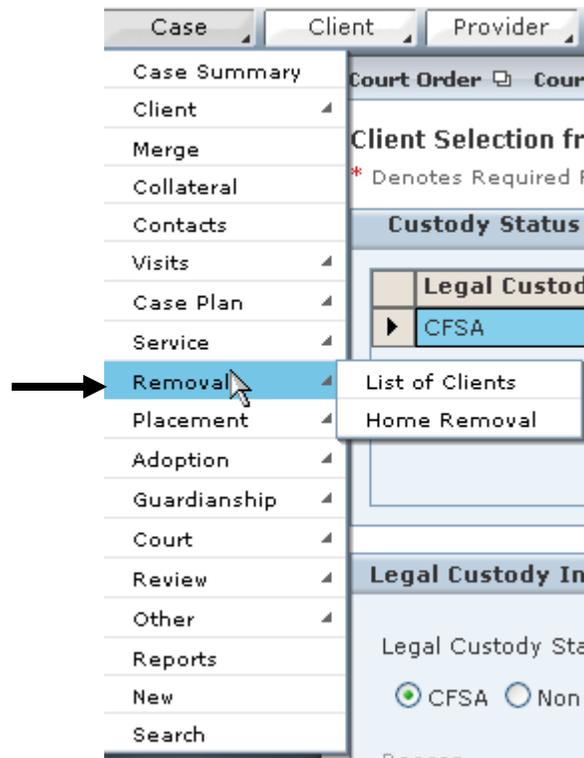


Figure 6.1

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Removal**, and click **List of Clients**.

Step 2: Select Keyshawn and click **Show**.

Step 3: Click **Home Removal**.

The screenshot shows the FACES.NET interface for the District of Columbia Child and Family Services Agency. The 'Home Removal' tab is selected. On the left, the 'In Focus' sidebar shows user information for ANNETTE SIMON and details for a client named JACKSON (Entity ID: 192557). The main area displays a 'Client Selection' screen with a table of clients. The table has columns for Name, Client ID, Age, Gender, and DOB. The row for KEYSHAWN JACKSON (Client ID 845177) is highlighted. Below the table, there are radio buttons for 'Active Clients Participating as Child' (selected) and 'All Clients Participating as Child'. At the bottom, there are buttons for 'New', 'Show', 'Search', and 'Cancel'. A black arrow points to the 'Show' button.

Name	Client ID	Age	Gender	DOB	Duplicate
FEMALE SCOTT	845174		Female	00/00/0000	<input type="checkbox"/>
KEYSHAWN JACKSON	845177		Male	00/00/0000	<input type="checkbox"/>
KIANA SCOTT	845176		Female	00/00/0000	<input type="checkbox"/>
LAKEISHA JACKSON	845181		Female	00/00/0000	<input type="checkbox"/>
LATONYA HOLMES	845180		Female	00/00/0000	<input type="checkbox"/>
PAUL WILLIAMS	845173	16	Male	11/01/1989	<input type="checkbox"/>
REYSHAWN JACKSON	845178		Male	00/00/0000	<input type="checkbox"/>
TANISHA HOLMES	845179		Female	00/00/0000	<input type="checkbox"/>

Figure 6.2

Step 4: Enter information on the **Removal** tab.



Note: The End of Care Date[‡] and the End of Care Reason[‡] fields do not get filled out until the child has left a placement.

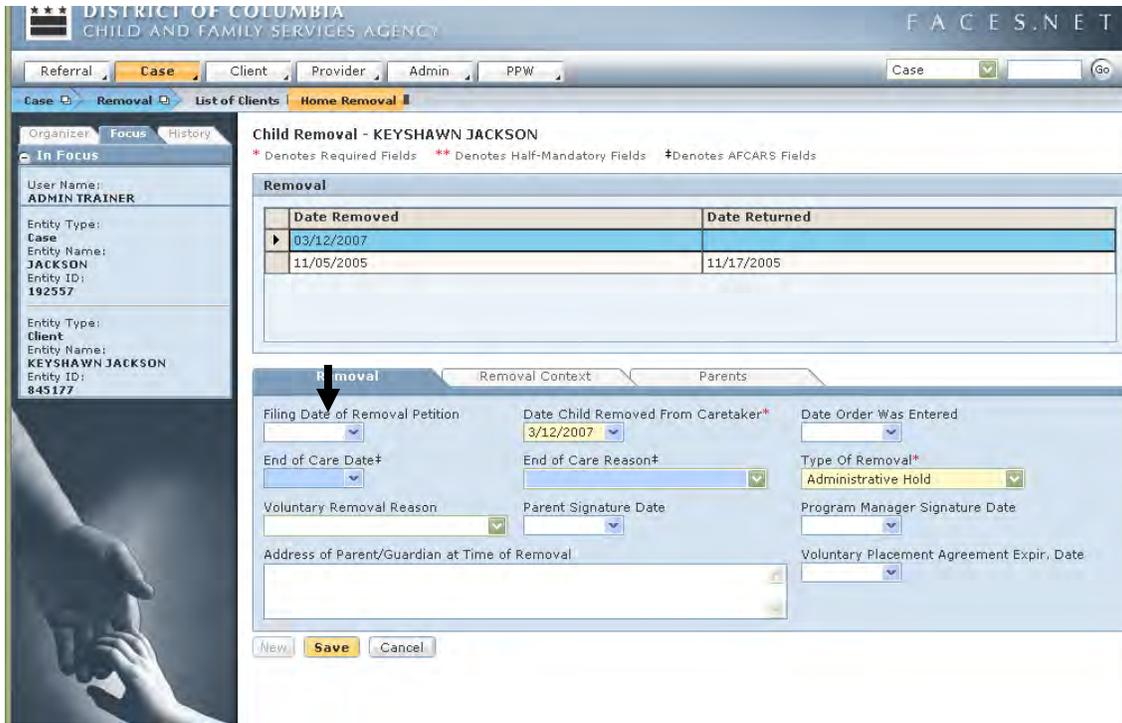


Figure 6.3

Step 5: Enter information on the **Removal Context** tab.

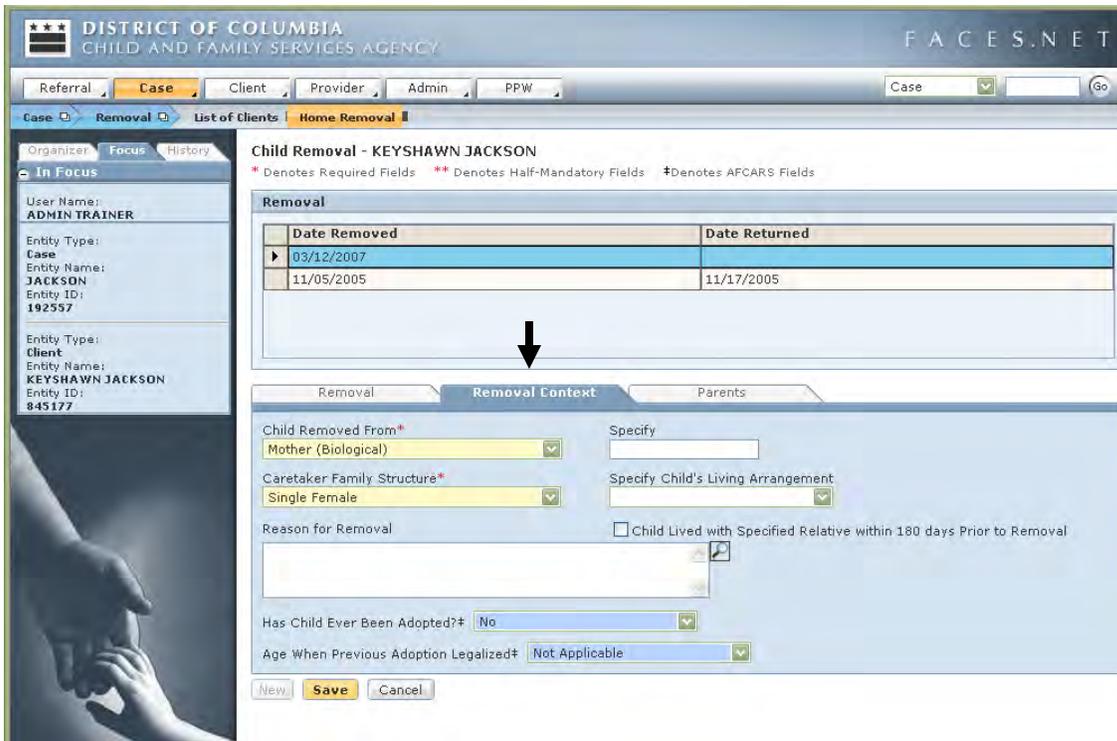


Figure 6.4

Step 6: Enter information on the **Parents** tab.

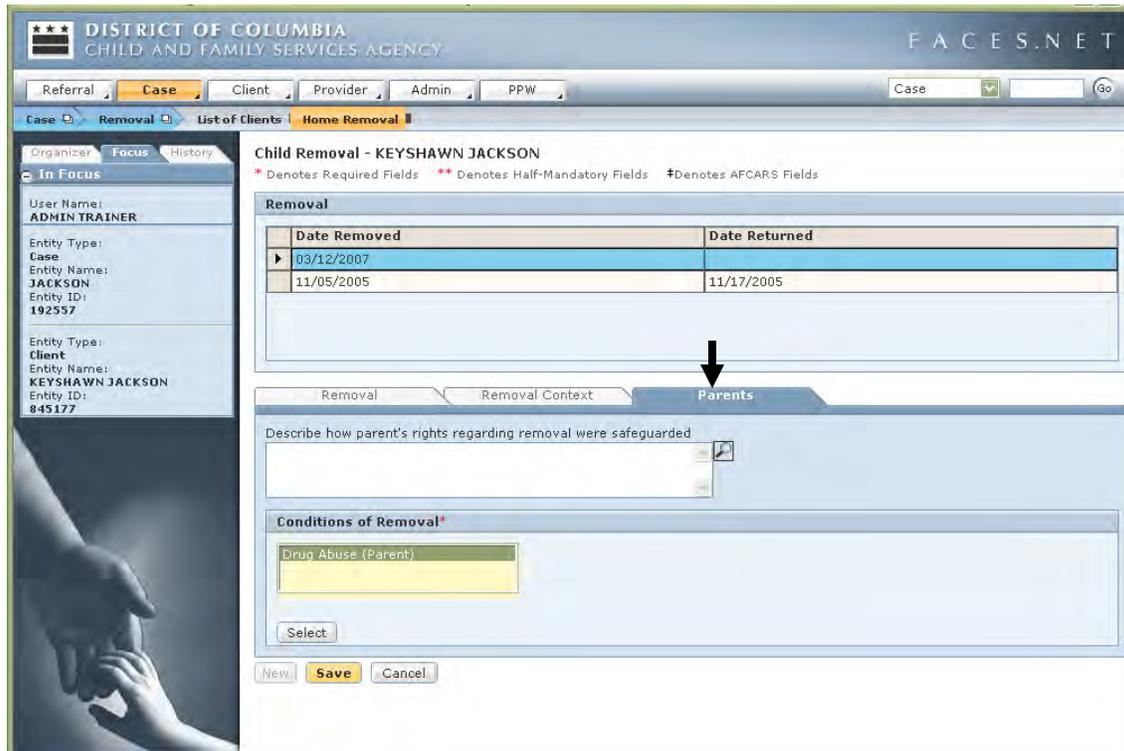


Figure 6.5

Step 7: Click **Save**.

Step 8: Repeat steps 1 through 6 for Reyshawn.

(While in class and for the FACES.NET Scenario purposes, please backdate the removal date for Reyshawn by 7 months.)



Points to Remember:
If you remove a child from his/her current home in FACES.NET, be sure to immediately enter the child's new placement entry (and future placement end date) in FACES.NET. If the child has been removed and there is no placement information recorded, then we are unable to tell where that child is placed.

Enter the Client's Legal Status

(For FACES.NET Scenario purposes, please back date the status begin dates for Reyshawn by 7 months. This is to ensure that he is eligible for guardianship in later sections.)

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Court**, and then click **Status**.

Step 2: Highlight Keyshawn and click **Show**.

Step 3: Click the **Status** button.

Step 4: Select the **CFSA** radio button.

Step 5: Pick "Commitment" as the Legal Status.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. The main menu shows 'Case', 'Court', 'Hearing', 'Court Order', 'Court Report', 'Complaint', 'Mediation', 'Motions', 'Parental Rights', and 'More'. The left sidebar shows 'In Focus' with user information for ANNETTE SIMON and KEYSHAWN JACKSON. The main content area is titled 'Client Selection from List of Clients' and features a table with columns: 'Legal Custody Status', 'Legal Status', 'Begin Date', and 'End Date'. The table contains one row with 'CFSA' in the first column, 'Commitment' in the second, and '01/11/2006' in the third. Below the table is the 'Legal Custody Information' section, which includes radio buttons for 'CFSA', 'Non CFSA', and 'Court Ordered Exception'. The 'CFSA' radio button is selected. Below this are fields for 'Reason', 'Legal Status*' (set to 'Commitment'), 'Begin Date*' (set to '1/11/2006'), 'End Date', 'Relationship', 'Name *', and 'Address'. At the bottom are 'New', 'Save', and 'Cancel' buttons.

Figure 6.6

Step 6: Enter the **Begin Date***.

Step 7: Click **Save**.

Step 8: Repeat steps 1 through 7, selecting Reyshawn as the client in Step 2.



Note: If a legal status is end dated, you will receive a message asking if the child is still in agency care. If the answer is “Yes” then you **MUST** enter another legal status before leaving the screen. **THE CANCEL BUTTON WILL NOT UNLOCK UNTIL YOU ENTER ANOTHER LEGAL STATUS FOR THIS CHILD.**

Record a Placement (Traditional Foster Care)

Importance of Placement Information

It is essential that the whereabouts of a child under the care of the agency be known at all times. The agency is responsible for all children under their care. It is the duty of all social workers to ensure that the safety and well being of the child is ensured. If we do not know where the child (ren) is, we cannot ensure the safety of the child (ren).

CFSA Social Workers should always send an email to the placement/reconciliation administration when a child enters or exits a placement.

To record a placement you must have first entered the legal status and the home removal information for a client. That placement will remain “In-Process” until the Placement/Reconciliation Unit reviews the recommendation request from the social worker and then “Authorizes” a placement. Once that authorization is approved, the social worker is able to enter placement entry date in FACES.NET.

View Placement History

Before entering a placement, perhaps you would like to see a history of the child’s past placements. You can view these past placements on the **List of Placement Episodes** screen. This screen is Read-only.

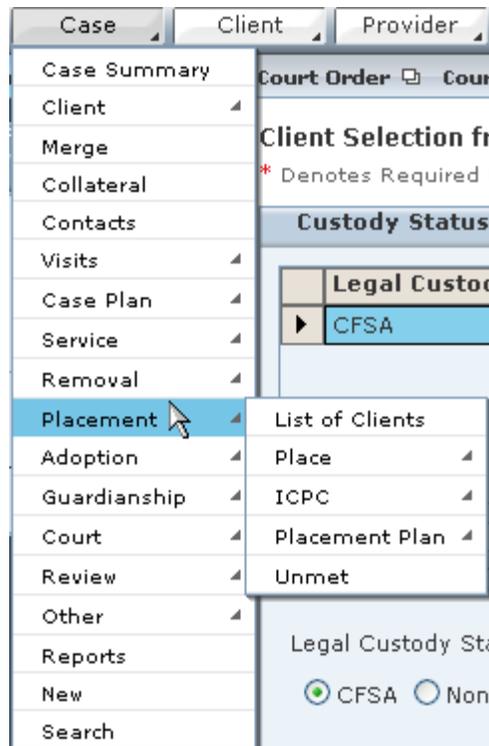


Figure 6.7

Record a Placement

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Placement**, and click **List of Clients**.
- Step 2: Select Keyshawn and click **Show**.
- Step 3: Click the **Place** button.
- Step 4: Click the **New** button on the Select Placement Episode window.
- Step 5: Click the **Paid Placement** radio button and click **OK**.
- Step 6: Click the **Planned Placement** radio button. Note that emergency placements can only be entered by supervisors, Placement Providers, and the Placement Unit.
- Step 7: Enter Traditional Foster Home as the **Type of Care** on the **Social Worker's Recommendation** tab.

The screenshot displays the 'Placement Recommendation' form in the CFS system. The form is titled 'Social Worker's Recommendation' and includes the following fields and options:

- Anticipated Placement Date:** 3/7/2007
- Projected Length of Stay for Placement Requested Date:** 9/7/2007
- Court Ordered Placement:**
- Post Placement Planning:** [Dropdown menu]
- Type of Care:** Traditional Foster Home
- Special Placement Needs:** [Text area]

The left sidebar shows the user 'ADMIN TRAINER' and the client 'KEYSHAWN JACKSON'.

Figure 6.8

- Step 8: Enter the **Anticipated Placement Date**. This date will be the recommended start date of a placement for this child.

- Step 9: Enter the **Anticipated Length of Stay for Placement Requested Date**. This will be the recommended amount of time at the placement.
- Step 10: Select a **Type of Care**. In this case it will be Traditional Foster Care.
- Step 11: Choose Initial Placement as the **Reason for Placement Request** on the **Placement Reason** Tab.
- Step 12: Choose Room & Board/Traditional Foster Family/Continuing/Level 1 using the **Services Needs of Child** button within the **Placement Criteria** Tab.
- Step 13: Complete all other applicable information on the screen, and then click the **Save** button.
- Step 14: Click the **Approval** button to request approval of the recommendation.



Points to Remember:

The placement recommendation must be approved by the supervisor.
As soon as the supervisor approves the placement recommendation, an automatic Administrative assignment to the case will be given to the placement unit and this screen will become “Read Only.”

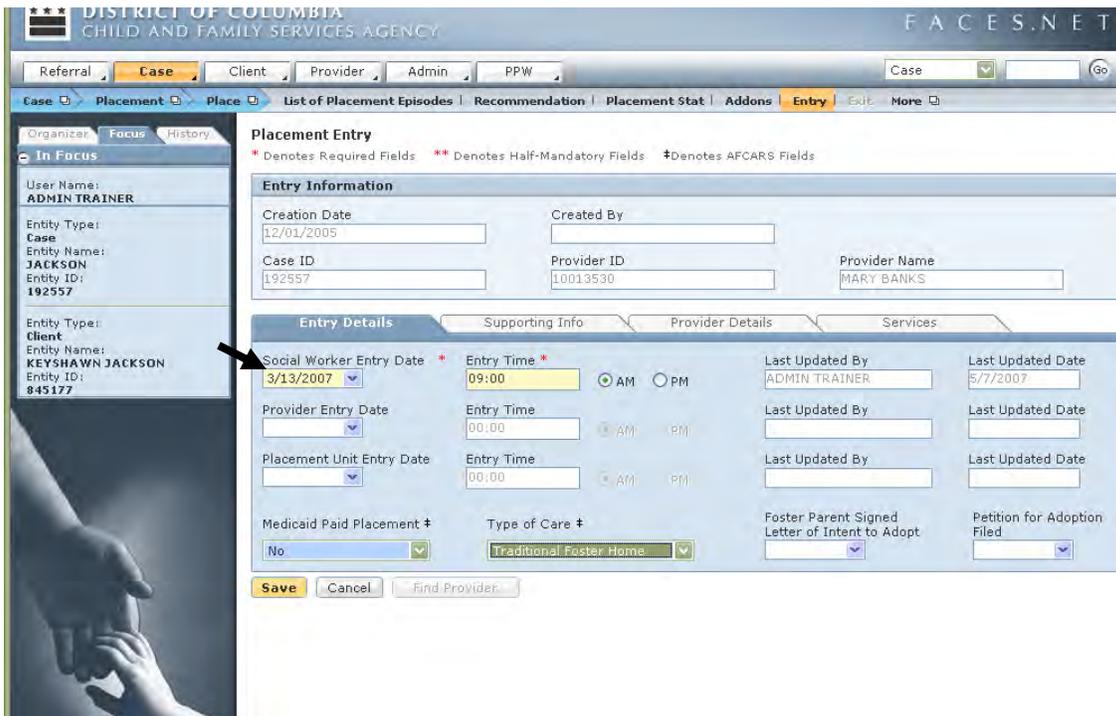
Enter Client into “Approved” Placement

Once a placement recommendation has been approved by the Placement Unit and a Provider has been found, you will be able to input placement entry information for the client. Social workers, placement providers, and the placement unit each input this information so that a record of a child’s location is kept in multiple modules in FACES.NET (i.e. Case Management and Placement Provider Web (PPW)) The placement unit and provider enter their information through the PPW module, explained in detail later in this section.

While in class - your instructor will approve your placement requests in this FACES.NET Scenario. After this has been done, proceed with the following steps to enter Keyshawn into his placement.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Placement** and click the **List of Clients**.
- Step 2: Select Keyshawn and click **Show**.
- Step 3: Click the **Place** button in the drop-down menu.
- Step 4: Highlight the desired placement episode and click **Show**.
- Step 5: Click the **Entry** button on the breadcrumbs toolbar.



The screenshot shows the 'Placement Entry' form in FACES.NET. The breadcrumb trail is 'Case > Placement > Place > List of Placement Episodes > Recommendation > Placement Stat > Addons > Entry > Exit > More'. The left sidebar shows the user 'ADMIN TRAINER' and the client 'KEYSHAWN JACKSON' (Entity ID: 845177). The main form has several sections:

- Entry Information:** Includes fields for Creation Date (12/01/2005), Created By, Case ID (192557), Provider ID (10013530), and Provider Name (MARY BANKS).
- Entry Details:** Includes fields for Social Worker Entry Date (3/13/2007), Entry Time (09:00 AM), Provider Entry Date, Placement Unit Entry Date, Medicaid Paid Placement (No), and Type of Care (Traditional Foster Home). It also has fields for Last Updated By and Last Updated Date.
- Buttons:** Save, Cancel, and Find Provider.

Figure 6.9

- Step 6: On the **Entry Details** tab, record the child's actual date and time of placement in the **Social Worker Entry Date*** field.
- Step 7: Click the **Supporting Info** tab and record some placement mandates.
- Step 8: Then click the **Provider Details** tab and verify the Placement Provider information.
- Step 9: Click the **Service** tab, and then click the **Service** button in the **Social Worker Entered** section. Select the desired service. (in our FACES.NET Scenario, Room & Board/Traditional Foster Family/Continuing/Level I) Click **OK**. If selected from the last screen the field will already be populated with information.
- Step 10: Click the **Save** button.



Note:

- If the foster parent signs a letter of intent to adopt or files an adoption petition, your supervisor must enter the date of these items on the **Entry Details** tab. A placement entry date cannot be entered which is earlier than the last exit date. The child must first be exited from a placement before he/she can be entered into a new one;
- The Removal date must be entered before entering the new placement entry date.
- Placement information is not official until confirmed by the Placement/Reconciliation Unit for contracted placements;
- Payments to the provider are generated based on the Placement/Reconciliation Unit's entry date;
- If the placement entry is part of an Investigative Referral, a case connection must have been done before entering the placement date;
- A CFSA legal custody status must be entered prior to entering the placement entry date.
- If the placement is out of state for a client who is under 17 years old or younger, an ICPC 100A must be completed before entering the placement entry date.

Exit a Client from the Current Placement

Placements can be exited on the **Exit** screen. When exiting a child from a placement, you must give an exit date, time, and exit reason. (For the purposes of the FACES.NET Training Scenario, do not do this at this time).

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Placement**, and click **Place**.

Step 2: Select Keyshawn.

Step 3: Click the **Exit** button.

The screenshot shows the 'Exit Placement' form in the FACES.NET system. The form is divided into several sections: 'Exit Information', 'Exit Details', 'Provider', and 'Placement Unit'. The 'Exit Information' section includes fields for 'Creation Date', 'Created By', and 'Case ID#'. The 'Exit Details' section has a 'Social Worker' section with fields for 'Date' (3/14/2007), 'Time' (10:00), 'AM/PM' (AM selected), 'Last Updated By', and 'Last Updated Date'. The 'Reason' dropdown is set to 'Reunification'. Below this are sections for 'Provider' and 'Placement Unit', each with similar date, time, and reason fields. At the bottom, there are 'Status' and 'Living Arrangement' dropdowns. A 'Save' button is highlighted with an arrow.

Figure 6.10

Step 4: Enter **Placement Exit Date and Time**.

Step 5: Enter the **Exit Reason** – Reunification. (Exiting a child out of placement will terminate payments to a provider based on the exit date.)

Step 6: Click **Save**.



Note:

- If end dating the placement for Permanency reasons of Adoption, Death of Child, Emancipation, Guardianship, Independence Achieved, Reunification, or Service to be provided by another District agency, FACES.NET will automatically end date the removal, custody statuses, and any scheduled Administrative Reviews as of the placement end date. If there is a future Administrative Review for this child, FACES.NET will cancel it.
- End dating a placement for reason of Living with Other Relatives (Non-CFSA Custody) will only automatically end date the removal, custody status and cancel the Administrative Review if the child's status is CFSA and not the status of Court Ordered Exception.
- Court Ordered Exception was created in FACES.NET as a combination of all of the above indicated legal statuses. It was created for those situations where the court orders a child in a placement status that is not consistent with CFSA policy. Such as, ordering a committed child into an unlicensed foster home. You must consult a supervisor before using the court ordered exception legal status.



Points to Remember:

Children are exited from placements for various reasons (relocating from one foster care setting to another; achieved permanency and are no longer in foster care; etc.). Whatever the reason, it is imperative that the reason why a child is being exited out of his/her current placement is accurately documented, as the exit reason may update other data in the system for that child. This tip sheet will take you through the process of exiting a client out of placement, and understanding the importance of choosing appropriate placement exit reasons.

1. **Home Removal vs. Change in Placement:** A home removal refers to the month, day and year that the child was removed from the care and supervision of his or her parent or parental substitutes (does not include foster parents), during or as a result of the CPS response. A change of placement occurs when a child moves from one foster care setting to another. For example, although the court may order that a child be “removed” from a provider, this is truly a change in placement, not a home removal by definition.
2. **Placement Exit Reasons:** The following Placement Exit Reasons in FACES.NET will end-date a Legal Status, Home Removal Episode and cancel an Administrative Review for a client: Placement/Custody to be provided by another District agency, Adoption, Death of Child, Emancipation, Guardianship, Independence Achieved, Living with Other Relatives (Non CFSA custody), and Reunification. Therefore, use caution when choosing a placement exit reason, and read all system messages before proceeding.
3. **Title IV-E:** Federal funding through Title IV-E is dependent upon home removal information. The accuracy of this home removal information affects Title IV-E claiming in many ways. A Title IV-E pending eligibility record is created for a child when a home removal is created/entered in FACES.NET. Erroneous/invalid home removal entries create unnecessary and ineligible IV-E determinations. When a home removal is end dated, this terminates claiming of federal funding for an eligible client. For these reasons, it is critical that when exiting a placement, utmost attention is paid to the exit reason. The exit reasons identified in Pointer #2 should not be selected unless a child has reached permanence and is no longer in CFSA custody.
4. **AFCARS:** AFCARS reporting is based on children with an open home removal and placement episode in foster care. It is important to ensure that home removal and placement information is entered in an accurate and timely manner. Each of the placement exit reasons identified in pointer #2 generates an AFCARS measure regarding timeliness. If a child’s home removal is end dated, the placement exit must also be entered in the FACES.NET system within 60 days of the child’s placement exit date or the agency will fail that AFCARS measure.
5. **Invoice Discrepancy:** Contracts staff can exit a placement for invoice discrepancies, which stops payment to a provider. If a placement exit reason is identified as “Invoice Discrepancy” the social worker should change the exit reason to the appropriate reason (child requested change in placement, reunification, etc.).

This is particularly important as related to AFCARS and the 60-day window for timeliness of recording placement exits. Periodic social worker review of placement and home removal information should reduce the number of errors for this AFCARS measure.

Record a Non-Paid Placement

The following steps show how to enter a non-paid placement. In our FACES.NET Scenario, we will enter Tanisha into this kind of placement.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Placement** and click **List of Clients**.

Step 2: Select Tanisha.

Step 3: Click the **Place** button.

Step 4: Click the **New** button on the Select Placement Episode window.

Step 5: Click “Non Paid Placement” and **OK**.

Step 6: Enter **Placement Date** and **Time**.

Step 7: Click **Find** to choose a provider.

Step 8: Select **Room and Board/Kinship Non-FosterCare** (non-paid) as the service.

Step 9: Click **Find** to search for a provider who offers that service. (See results of search below.)

The screenshot shows the FACES.NET interface for recording a non-paid placement. The main window is titled "Non-Paid Placement" and contains several sections:

- Social Worker:** Fields for Entry Date (3/13/2007), Entry Time (10:00 AM), Exit Date, Exit Time, and Exit Reason. There are also fields for Last Updated By (ADMIN TRAINER) and Last Updated Date.
- Status:** A dropdown menu with a "Select" button.
- Living Arrangement:** A dropdown menu with a "Select" button.
- Comments:** A text area for entering comments.
- Provider Details:** Fields for Name (TASHA JACKSON), Type (CFSA/Non-Contracted), Agency, Service (Room & Board/Traditional Foster Family, Continuing, Level I), and Phone (Home: 2027458080).
- Phone:** Fields for Home, Work, and Fax.

At the bottom of the form are "Save", "Cancel", and "Find" buttons. The sidebar on the left shows the user's name (ADMIN TRAINER) and the client's name (TANISHA HOLMES).

Figure 6.11

Step 10: Select the **Provider**.

Step 11: Click **OK**.

Step 12: Click **Save**.



Note: When exiting a client from a non-paid placement, return to the Non-Paid screen and record the exit information there.

ICPC Requests



Pointers to Remember:

1. The **Interstate Compact on the Placement of Children (ICPC)** is a uniform law that was enacted by all fifty states and the District of Columbia to coordinate the movement of a child across state lines for the purpose of placement in foster care, adoptive homes, or residential treatment facilities. The **ICPC** includes referrals on parents, relatives, foster parents, adoptive parents, and residential treatment facilities.
2. The **ICPC 100A** screen should be completed prior to entering an **entry date** on the **Placement Enter** screen
3. The **ICPC 100A Sent** form allows the District to seek permission from another state agency to place a child in the state's jurisdiction.
4. The **ICPC 100A Received** form allows another state to request from the District to place a child within our jurisdiction.
5. The **ICPC** icons (**100A** and **100B**) are accessible through the **Placement** module.

CFSA must comply with the Interstate Compact on the Placement of Children (ICPC) whenever a child may be sent to another state for any of the following reasons:

- The placement is preliminary for an adoption;
- The child will be placed into a foster home, group home residential treatment facility, or other institution;
- The placements will be with a parent or relative; and
- It is the placement of an adjudicated delinquent in another state's institution.

CFSA is not required to comply with the ICPC when making placements into medical, mental health or mental retardation facilities or boarding schools.

There are 2 types of ICPC forms:

1. 100A – This must be signed by the sending state ICPC office.
2. 100B – The ICPC 100B will be used to report the following placement status changes of a child:
 - Placement cancelled/withdrawn;
 - Change of address;
 - Discharge from placement;
 - Legal custody changed;
 - Adoption finalized;
 - Type of care changes, e.g., from foster care to adoption.

Interstate Compact Placement Request (100A)

Before a social worker completes a placement entry for a client under 18 years old who will be placed outside of the District, they must first record an ICPC 100A form on the **ICPC** screen under **Placement**.

This screen is for entering ICPC information about clients who are being placed outside of the District.

Steps Include:

- Step 1: Place the cursor over the **Case** menu and then **Placement**.
- Step 2: Click the **ICPC** button.
- Step 3: Click the **List of ICPC 100A** button.
- Step 4: Click **New ICPC**.
- Step 5: Select 100A sent or 100A received radio button.
- Step 6: Enter the information on all the tabs and click **Save**.
- Step 7: Click the **Approval** button to send to your supervisor for approval.

The screenshot displays the 'Select ICPC 100A' form within the FACES.NET interface. The form is divided into several sections:

- ICPC Section:** Contains fields for Date (3/15/2007), From State (District of Columbia), and To State (Maryland). It also features radio buttons for '100A Sent' and '100A Received'.
- Identifying Data Section:** Includes tabs for 'Planning Information', 'Service Request', 'Enclosure Checklist', and 'Placement Decision'.
- Planning Section:** Contains fields for Type (CFSA), Agency, Sending State Agency, Name (ADMIN TRAINER), ICWA Eligible, Title IV-E determination, Address (400 6th Street SW, Washington, District of Columbia 20024), and Phone (202) 434-0009.
- Financial Planning Section:** Contains fields for Type (CFSA), Agency, Sending State Agency, Name, Address (400 6th Street SW, Washington, District of Columbia 20024), and Phone.

At the bottom of the form are buttons for 'Save', 'Approval', 'Preview', and 'Cancel'. An arrow points to the 'Approval' button.

Figure 6.12 Interstate Compact Report on Child Placement Status (100B)

Steps Include:

- Step 1: Place the cursor over the Case menu, the Placement and click the ICPC button.
- Step 2: Click the **100B** button.
- Step 3: Click **New ICPC**.
- Step 4: Select 100B sent or 100B received radio button.
- Step 5: Enter the information on this screen.
- Step 6: Click **Save**.
- Step 7: Click the **Approval** button to send to your supervisor for approval.

Placement Plans

The series of screens under the **Placement Plan** screen are used to record information regarding the placement into which the child will be entered.

Family Info

The **Family Information** screen must be completed before the other placement plan screens will unlock.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Placement** and click **List of Clients**.
- Step 2: Select Keyshawn.
- Step 3: Click the **Show** button.
- Step 4: Click the **Placement Plan** button.
- Step 5: Click the **New Plan** button on the Select **Placement Plan** window.
- Step 6: Complete all applicable information on the **Family Information** screen.
- Step 7: Click the **Save** button.

The screenshot displays the 'Placement Plan - Family Information screen' within the FACES.NET interface. The top navigation bar includes 'Case', 'Placement', 'Placement Plan', 'List of Placement Plans', and 'Family Information'. The main content area is divided into several sections:

- Removal Information:** Contains fields for 'Placement Plan Creation Date' (3/15/2007), 'Anticipated Parent Involvement' (Some), and 'Parental Attitude Towards Agency Intervention & Child Placement' (Cooperative).
- Placement Plan End Date:** A dropdown menu.
- Change in Placement Submitted to Parents:** A checkbox and a 'Date' field.
- Why Out of Home Placement is Necessary:** A text area containing 'Client is in immediate danger'.
- Emergency Removal:** A checkbox and a 'Date Of Removal' field.
- Official/Custody Status:** A dropdown menu set to 'Administrative Hold'.
- Placement Type:** A dropdown menu set to 'Traditional Foster Home'.
- Current Placement Date:** A dropdown menu set to 3/12/2007.

At the bottom left, there are 'Save' and 'Cancel' buttons. A legend at the top of the form indicates that * denotes Required Fields, ** denotes Half-Mandatory Fields, and # denotes AFCARS Fields.

Figure 6.13

Child Information

The Child Information screen is used to show placement qualifications and additional placement information on a specified child.

Steps Include:

Step 1: Click the **Child Information** button.

Step 2: Complete all applicable fields and click **Save**.



Note: The **Attorney Information** is not used at this time.

Unmet Needs

This screen is where the worker views a list of the child's previously unmet needs if the child were previously in the system.



Note: This **Unmet Needs** screen is locked down. It only becomes available when searching for a provider that does not exist in the FACES.NET system.

Notes

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SECTION 7: HOUSEHOLD

Performance Objectives

In this Section, you gain confidence in your ability to:

- Create a new Household for a Case.
- View and amend members of a Household.



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Practice Overview

Create a New Household

The Household screens are accessible in the Case Module of FACES.NET. In the Case Module, you will be able to create and modify households on which to perform the household based assessments:

- Risk Reassessment;
- Family Reunification Assessment;
- Caretaker Strengths and Needs Assessment;
- Child Strengths and Needs;
- In-Home Safety Assessment.

At least one household must be defined for each case.

Household: All persons who have significant in-home contact with the child, including those who have a familial or intimate relationship with any person in the home.

Caretaker: Adult in the household who is obligated and entitled to provide for the child's safety, well-being, routine care, and supervision.

For the purposes of completing the SDM assessments, it is necessary to identify a Primary Caretaker in each household being assessed. If a child is a member of two households, a different person will be identified as the "Primary Caretaker" in each household.

Primary: The primary caretaker is the adult living in the household who has legal responsibility and assumes the most responsibility for the child. For example, when a mother and her boyfriend reside in the same household and appear to equally share child care responsibilities, the mother is selected. If both caretakers in the household have legal responsibility and child care equally, the maltreater or alleged maltreater should be selected. For example, when a mother and a father reside in the same household and appear to equally share child care and the mother is the maltreater or the alleged maltreater, the mother is selected. In circumstances where both caretakers are in the household, equally sharing child care responsibilities, and both have been identified as maltreaters or alleged maltreaters, the caretaker demonstrating the more severe behavior is selected. A primary caretaker is required, and only one primary caretaker can be identified.

Secondary: The secondary caretaker is defined as an adult living in the same household who has routine child care responsibility but less responsibility than the primary caretaker. A paramour, caretaker, or adult living in the home may be a secondary caretaker, even though he/she is not a legal caretaker and has minimal responsibility for

childcare. A secondary caretaker is optional since there might not be one included in the household. This does not include a nanny or au pair living in the home.

Child: A child is anyone acting as a child in a household. A child may be a part of multiple households. At least one child is required to complete a household.

Family: Caretakers, adults fulfilling the caretaker role, guardians, children, and others related by ancestry, adoption, or marriage; or as defined by family.

SDM assessments are completed on households; therefore, when a child's caretakers do not live together, the child may be a member of two households. Because only one household can be assessed on each SDM assessment tool, there will be cases in which the worker will complete two of each SDM assessment. Identify which household is being assessed using the "Household Name" field in the header.

SDM assessments must be completed on the household that is the primary residence of the child, **AND** the household of the caretaker who is the alleged maltreater. If no alleged maltreater is identified, the caretaker's household where the alleged abuse/neglect occurred is assessed. If the child is a member of two households, and both caretakers are identified as alleged maltreaters, complete a separate stream of SDM assessments for each household. Not completing SDM assessments as described above requires supervisory approval.

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The household list screen lists all the households present within the case. You can navigate to this screen from the menu structure by selecting Household. You initially see a list of all the households that are present within the case. Households are identified by the primary caretaker's name and FACES.NET Client ID on the screen. You either select a current household to modify it or select "New" to create an entirely new household with a new primary caretaker. If no clients have been assigned the role of primary or secondary caretaker, then the "New" button will be disabled until there is a caretaker selected. Once a household has been selected or "New" has been clicked, the "Household Details" section at the bottom of the screen populates with the appropriate data.

Then you will select a primary caretaker and a Start Date to define when the household was formed. The End Date is used to mark a household as inactive. You may then click the "Show" button and the selected household will be brought into focus allowing you to move onto the Member List screen by using the breadcrumbs.

Complete New Household

The Household screens provide you with the ability to create, add, and modify households and household members.

Household Manager

Household manager consists of two screens: **Household List** and **Member List**.

Steps Include:

Step 1: Hold cursor over **Case**.

Step 2: Click on **Household** (see *Figure 7.1*).

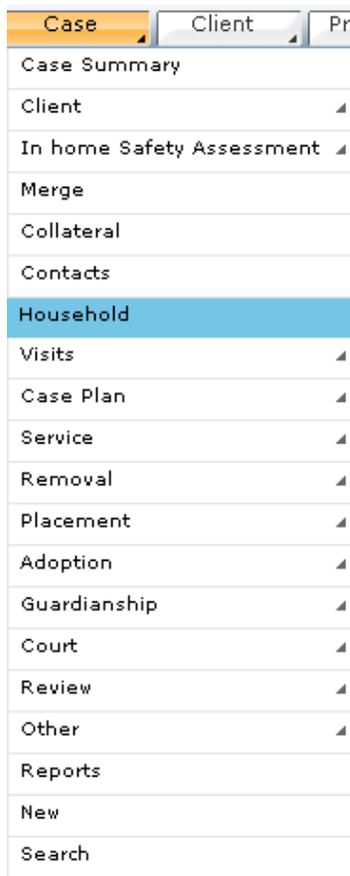


Figure 7.1

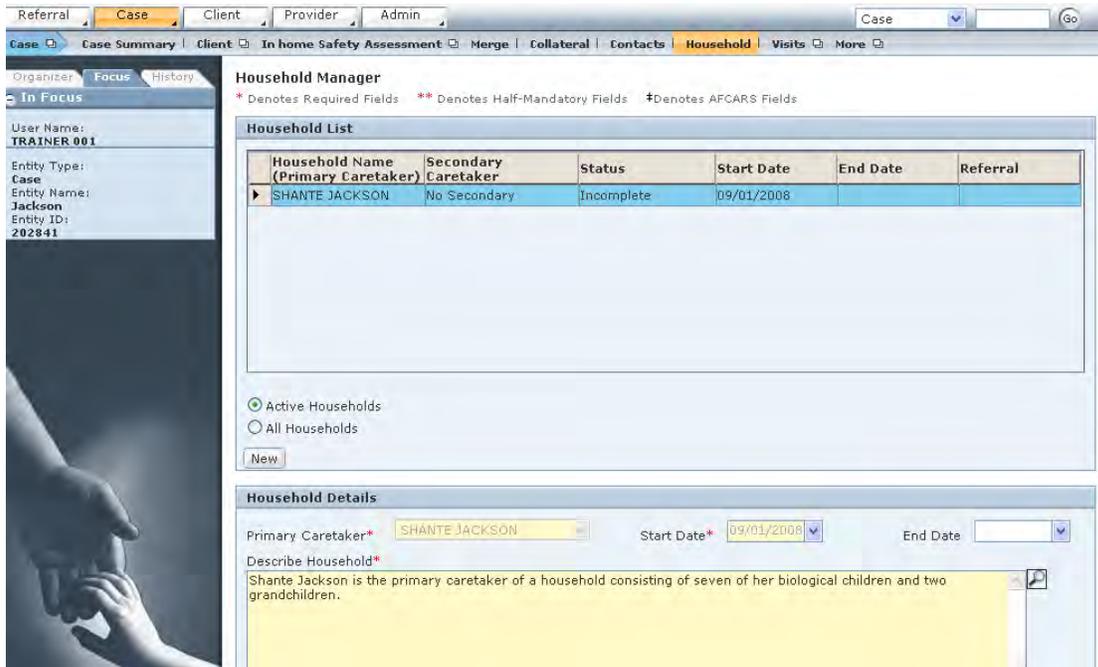
Step 3: Select the **Primary Caretaker**.



Note:

- The household is based on the Primary Caretaker. Therefore, if the primary dies and the secondary takes over the household, the original household would be marked inactive and a “New” household would be created under the name of the new Primary Caretaker.
- A client can only participate as a primary caretaker for one household at a time. Once a client is identified as a primary caretaker for one household, that client will not be able to be selected as a primary or secondary caretaker for subsequent households within that case.
- A client can only participate as a secondary caretaker for one household at a time within a single case. Once a client is identified as a secondary caretaker for one household they will not be able to be selected as a primary or secondary caretaker for subsequent households within that case.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has been approved**, then the assessment’s current status will be non-applicable. Then you can then create new assessment(s) for that amended household.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) has **not yet been approved**, then the assessment’s current status will be incomplete. You can amend answers on the current assessment(s).
- If you end date the entire household from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has not yet been approved**, then the assessment’s status will be invalid. Then you can create a new household and new assessments.

- Step 4: Enter the **Start Date**.
- Step 5: Describe the **Household**.
- Step 6: Click **Save** (see *Figure 7.2*).



Referral Case Client Provider Admin Case

Case Case Summary Client In home Safety Assessment Merge Collateral Contacts Household Visits More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 202841

Household Manager

* Denotes Required Fields ** Denotes Half-Mandatory Fields * Denotes AFCARS Fields

Household List

Household Name (Primary Caretaker)	Secondary Caretaker	Status	Start Date	End Date	Referral
▶ SHANTE JACKSON	No Secondary	Incomplete	09/01/2008		

Active Households
 All Households

New

Household Details

Primary Caretaker* SHANTE JACKSON Start Date* 09/01/2008 End Date

Describe Household*

Shante Jackson is the primary caretaker of a household consisting of seven of her biological children and two grandchildren.

Figure 7.2

Member List

The **Member List** screen lists everyone in the household identified by the Primary Caretaker in the header. You can select “All Members,” listing all who have lived in that household in the past and in the present. You can select “Active Members” to see who is currently a part of the household of the active Case.

- Step 1: Click **Show**. This automatically navigates to the **Member List**.
- Step 2: Click **Add Members** button to add household members.

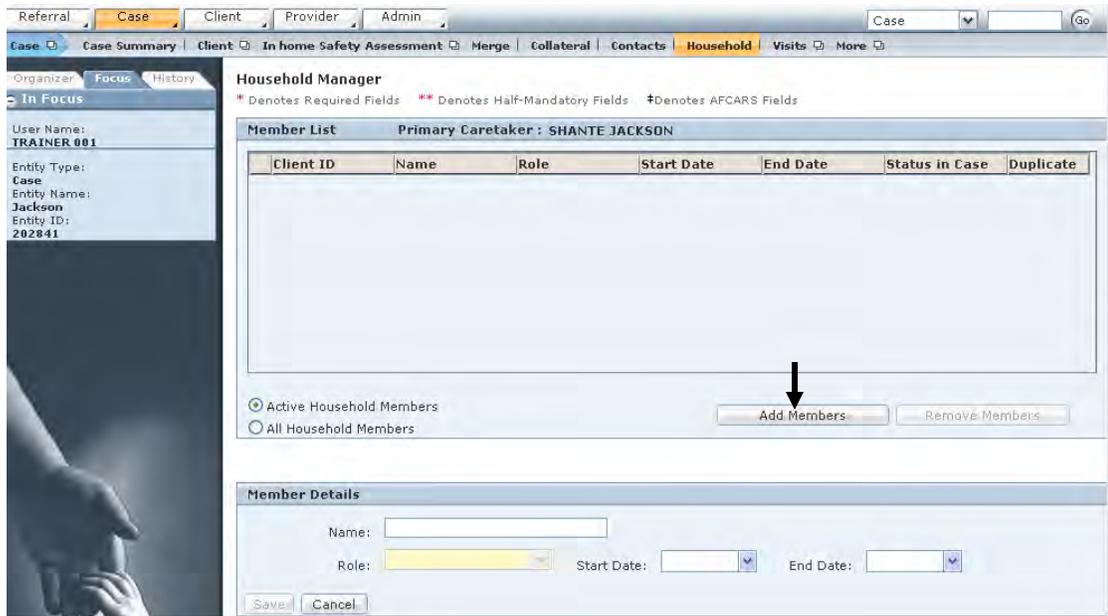


Figure 7.3



Note: The **Add Members** option enables you to add multiple household members in a single step. These household members will all have the same role and start date for that household. The “Acting as” column will provide a guideline for you to select household roles. The filter drop down allows you to assign the selected members to a role of caretaker, child, or other. The start date and role will apply to all the selected clients when “Save” is selected.

*The **Clients in Case/Referral** pop-up window will display.*

- Step 3: Select member(s) to be added to household by **Child**, **Caretaker** or **Other** using the filter feature.
- Step 4: Select **Role** and **Start Date**.
- Step 5: Select **Save**.

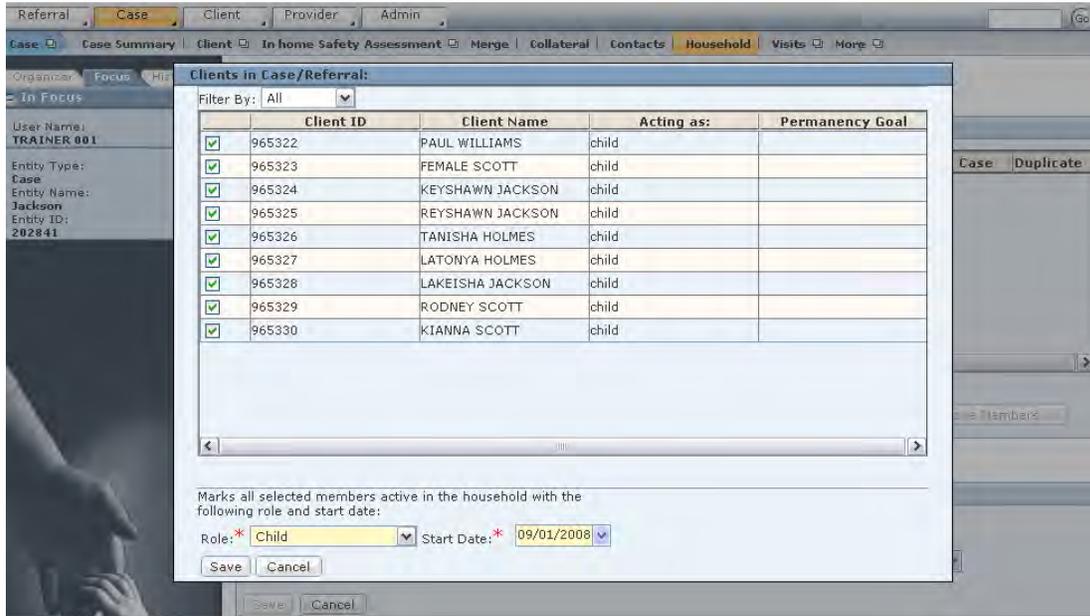


Figure 7.4



Note: The household member(s) you added will populate onto the Member List screen.

The screenshot displays the 'Household Manager' interface. At the top, there are navigation tabs: Referral, Case, Client, Provider, Admin, and a search bar. Below these are sub-tabs: Case Summary, Client, In home Safety Assessment, Merge, Collateral, Contacts, Household, Visits, and More. The 'Household' sub-tab is active.

On the left, there is a sidebar with 'Organizer', 'Focus', and 'History' tabs. Under 'In Focus', it shows: User Name: TRAINER 001, Entity Type: Case, Entity Name: Jackson, and Entity ID: 202841. Below this is a small image of hands.

The main area is titled 'Household Manager' and includes a legend: * Denotes Required Fields, ** Denotes Half-Mandatory Fields, † Denotes AFCARS Fields. Below the legend is the 'Member List' section, which shows the 'Primary Caretaker: SHANTE JACKSON'. A table lists household members:

Client ID	Name	Role	Start Date	End Date	Status in Case	Duplicate
▶ 965322	PAUL WILLIAMS	Child	09/01/2008		Active	<input type="checkbox"/>
965323	FEMALE SCOTT	Child	09/01/2008		Active	<input type="checkbox"/>
965324	KEYSHAWN JACKSON	Child	09/01/2008		Active	<input type="checkbox"/>
965325	REYSHAWN JACKSON	Child	09/01/2008		Active	<input type="checkbox"/>
965326	TANISHA HOLMES	Child	09/01/2008		Active	<input type="checkbox"/>
965327	LATONYA HOLMES	Child	09/01/2008		Active	<input type="checkbox"/>
965328	LAKEISHA JACKSON	Child	09/01/2008		Active	<input type="checkbox"/>
965329	RODNEY SCOTT	Child	09/01/2008		Active	<input type="checkbox"/>

Below the table are radio buttons for 'Active Household Members' (selected) and 'All Household Members', along with 'Add Members' and 'Remove Members' buttons.

The 'Member Details' section at the bottom shows fields for Name (PAUL WILLIAMS), Role (Child), Start Date (09/01/2008), and End Date, with 'Save' and 'Cancel' buttons.

Figure 7.5

Step 6: Click **Remove Members** button to remove household members. *The **Clients in Case/Referral** pop-up window will display member(s) listed in this household.*

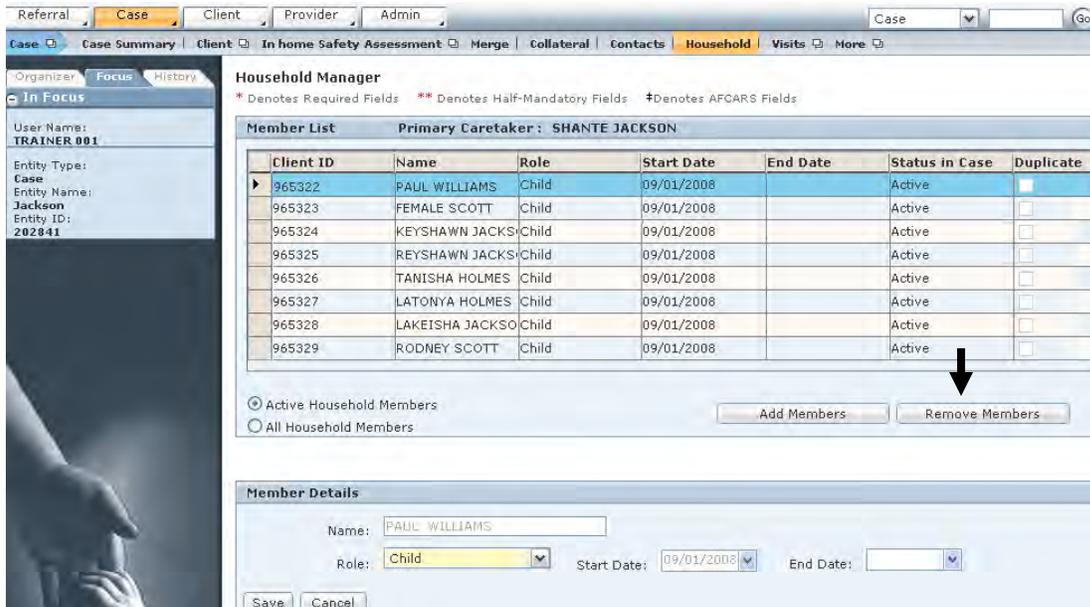


Figure 7.6



Note: Remove Members will function the same way as Add Members, except that it populates a list of all the clients already in the case and allows you to select and end date them. Clients who have an end date will be considered “inactive” and not a part of the current household.

- Step 7: Select member(s) to be removed from household by **Child, Caretaker** or **Other** using the filter feature.
- Step 8: Select **Role** and **End Date**.
- Step 9: Select **Save**. This automatically saves all information on the Member List screen.

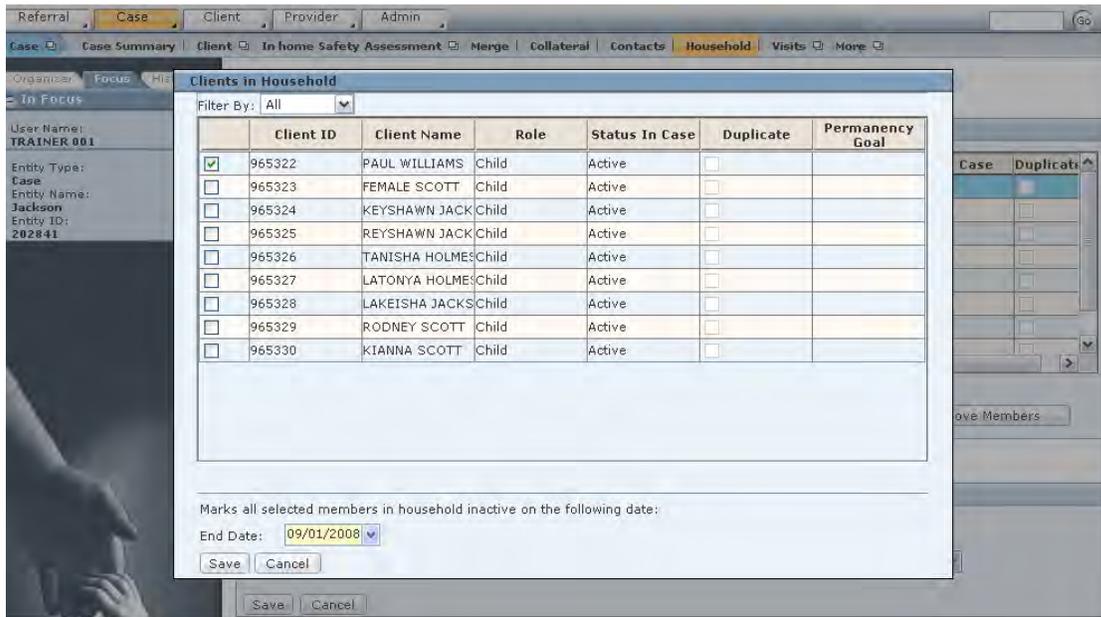


Figure 7.7



Note: The Member List will be updated and show only the clients who remain a part of the household.

Household Manager

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Primary Caretaker: SHANTE JACKSON

Client ID	Name	Role	Start Date	End Date	Status in Case	Duplicate
965323	FEMALE SCOTT	Child	09/01/2008		Active	<input type="checkbox"/>
965324	KEYSHAWN JACKS	Child	09/01/2008		Active	<input type="checkbox"/>
965325	REYSHAWN JACKS	Child	09/01/2008		Active	<input type="checkbox"/>
965326	TANISHA HOLMES	Child	09/01/2008		Active	<input type="checkbox"/>
965327	LATONYA HOLMES	Child	09/01/2008		Active	<input type="checkbox"/>
965328	LAKEISHA JACKSO	Child	09/01/2008		Active	<input type="checkbox"/>
965329	RODNEY SCOTT	Child	09/01/2008		Active	<input type="checkbox"/>
965330	KIANNA SCOTT	Child	09/01/2008		Active	<input type="checkbox"/>

Active Household Members
 All Household Members

Add Members Remove Members

Member Details

Name: FEMALE SCOTT

Role: Child Start Date: 09/01/2008 End Date:

Save Cancel

Figure 7.8



Point to Remember:

Once a case plan has been sent for approval, the households and the assessments will no longer be editable.

Notes

SECTION 8: SDM ASSESSMENTS

Performance Objectives

In this Section, you gain confidence in your ability to:

- Select the appropriate household or households on which a caretaker strengths and needs assessment will be completed.
- Identify the correct household members as primary and secondary caretakers.
- Complete the Caretaker Strengths and Needs Assessment.
- Complete the Child Strengths and Needs Assessment for all children who will be included in the case Plan.
- Select the appropriate household or households on which a Risk Reassessment will be completed.
- Identify the correct household members as primary and secondary caretakers.
- Complete the Family Risk Reassessment.
- Select the appropriate household or households on which a reunification assessment will be completed.
- Complete the Family Reunification Assessment.
- Identify a change in circumstances that requires a safety assessment.
- Complete the In-home Safety Assessment.



SECTION 8.1: CARETAKER STRENGTHS AND NEEDS ASSESSMENT

Performance Objectives

In this Section, you gain confidence in your ability to:

- Select the appropriate household or households on which a caretaker strengths and needs assessment will be completed.
- Identify the correct household members as primary and secondary caretakers.
- Complete the Caretaker Strengths and Needs Assessment.



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Practice Overview

The caretaker strengths and needs assessment is used to evaluate the presenting strengths and needs of each caretaker in the family. This tool is used to systematically identify critical needs and helps to plan effective service interventions. The strengths and needs assessment serves several purposes. It ensures all workers consistently consider the strengths and needs of caretakers in an objective format when determining the need for services. It provides an important case planning reference, and when periodic reassessments are made, it permits social workers and their supervisors to easily assess changes in functioning and, thus, the impact of services.

The caretaker strengths and needs assessment must be completed for every investigation opened as a case. Only one household can be assessed on the caretaker strengths and needs assessment form. If both legal caretakers are part of the same household, one strengths and needs assessment is completed, with one caretaker identified as the primary caretaker and one legal caretaker identified as the secondary caretaker. If there are two legal caretakers living in separate households, two separate caretaker strengths and needs assessments should be completed. Each assessment would have the legal caretaker identified as the primary caretaker, and each assessment may have another adult (paramour, grandparent, etc.) as a secondary caretaker.

The caretaker strengths and needs assessment should be completed by the social worker responsible for developing the case plan in conjunction with the family. The assessment should be completed prior to developing the initial case plan, which occurs within 30 days of the case being opened for ongoing services or within 30 days of placement. Caretaker strengths and needs reassessments should be completed in conjunction with each case plan review, at least every 90 days from the date the case was opened. Each assessment and reassessment requires supervisory approval as part of the case plan approval process.

This assessment identifies the three highest priority needs of caretakers that must be addressed in the case plan. Goals, objectives, and interventions in a case plan should relate to one or more of the priority needs.



FACES.NET Guide

There are two steps involved in the caretaker strengths and needs assessment process:

1. Select the caretaker to assess.
2. Complete the Caretaker Strengths and Needs Assessment.

Select the Caretaker to Be Assessed

The first step is to make sure the case is in focus. This is achieved by either retrieving the case from your workload or completing a case search.

The next step in the caretaker strengths and needs assessment process is selecting the caretaker to be assessed. This is done on the Caretaker Strengths and Needs List of Households screen.

Steps include:

Step 3: Hold cursor over **Case**.

Step 4: From the drop-down menu, place cursor over **Case Plan**.

Step 5: Place cursor over **Household Assessment**.

Step 6: Place cursor over **Caretaker Strengths and Needs Assessment**.

Step 7: Click on **List of Assessments**. *List of Assessments opens the Caretaker Strengths and Needs List of Households screen.*

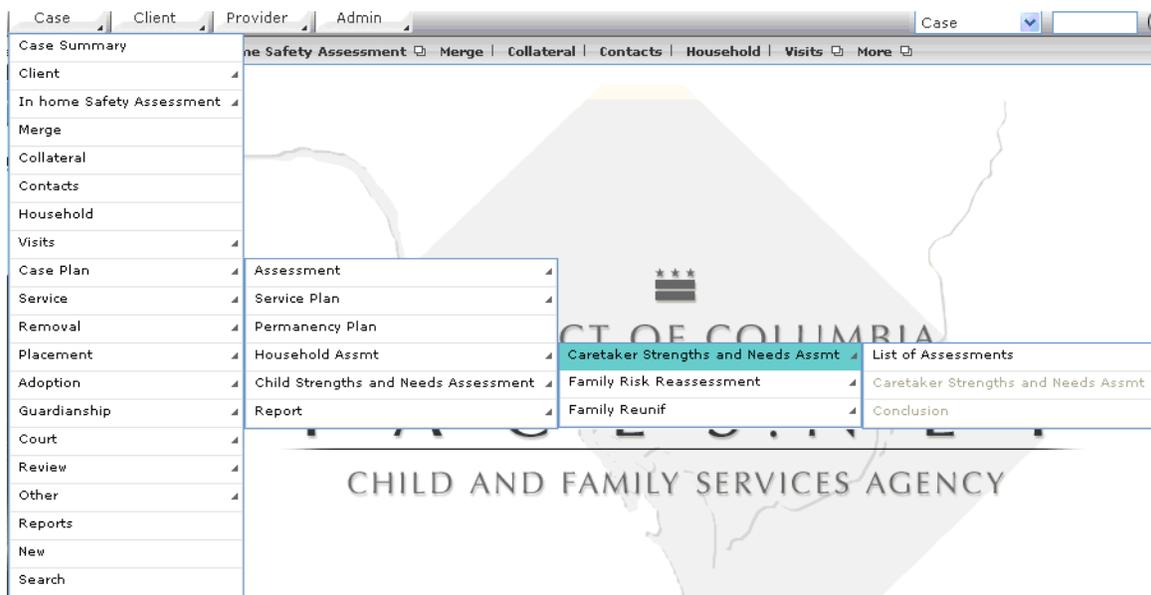


Figure 8.1.1

- Step 8: Select the **Name of the Caretaker** who will be assessed. *If there is only one caretaker, it will be selected by default.*
- Step 9: Click **New**.
- Step 10: The List of Households screen will close, and the Caretaker Strengths and Needs Assessment will appear.

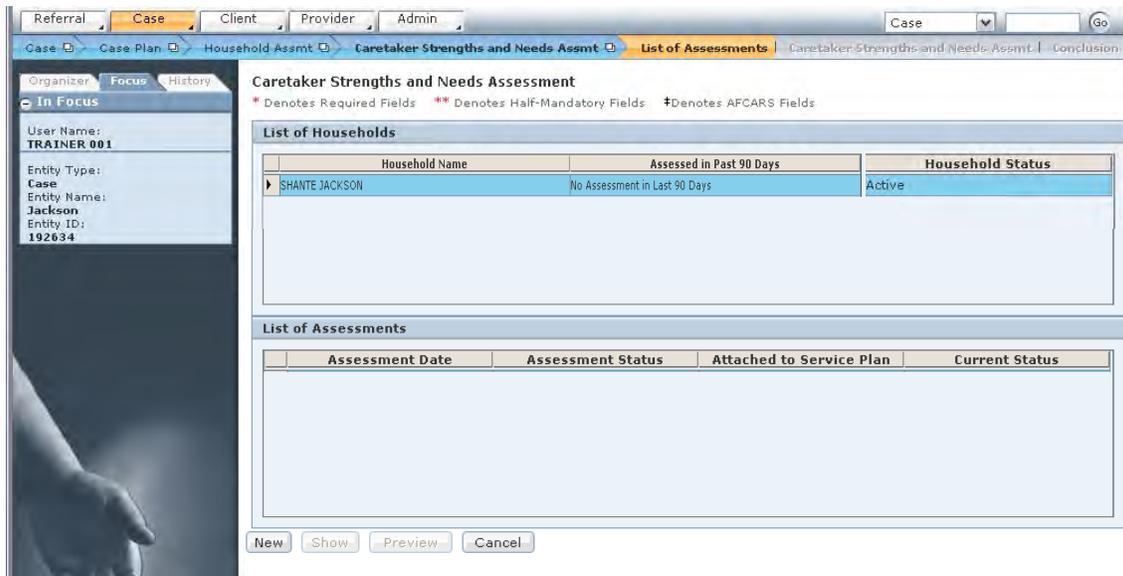


Figure 8.1.2



Points to Remember:

From the list of households, you must click to select the name of the caretaker to be assessed. When the caretaker to be assessed has been selected, click **New** to begin a new Caretaker Strengths and Needs Assessment.

Complete the Caretaker Strengths and Needs Assessment



Note: The caretaker's name appears at the top right of the assessment, which identifies the selected client in focus (*Figure 8.1.3*).

Steps include:

Step 1: Enter the **Assessment Date**.

Step 2: Answer each of the first eight questions on the assessment. *A score will appear after each question is answered.*

Referral Case Client Provider Admin Case Case Plan Household Assmt Caretaker Strengths and Needs Assmt List of Assessments Caretaker Strengths and Needs Assmt Conclusion

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Entity Type: Client

Entity Name: SHANTE JACKSON

Entity ID: 846015

Caretaker Strengths and Needs Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Caretaker Characteristics

Completion Status: []

Assessment Date: [] Household Structure: Primary Caretaker SHANTE JACKSON

? **1. Substance Abuse/Use**
(Substances: alcohol, illegal drugs, inhalants, prescription/over-the-counter drugs)

a. Teaches and demonstrates healthy understanding of alcohol and drugs

b. Alcohol or prescribed drug use/no use

c. Alcohol or drug abuse

d. Chronic alcohol or drug abuse

? **2. Household Relationships/Domestic Violence**

a. Supportive

b. Minor or occasional discord

c. Frequent discord or some domestic violence

d. Chronic discord or severe domestic violence

? **3. Social Support System**

a. Strong support system

b. Adequate support system

c. Limited support system

d. No support system

? **4. Caretaking Skills**

a. Strong skills

b. Adequately caretakers and protects child

c. Inadequately caretakers and protects child

Figure 8.1.3



Note:

- As you complete each item, the Completion Status bar at the top will indicate your progression toward completing the assessment.
- For each question answered, a blue box will appear in this status bar.
- The completion bar when four of the assessment questions have been answered (see *Figure 8.1.4*).

Caretaker Strengths and Needs Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Caretaker Characteristics

Completion Status: **Incomplete**

Assessment Date: 09/01/2008 Household Structure: Primary Caretaker SHANTE JACKSON

1. Substance Abuse/Use
(Substances: alcohol, illegal drugs, inhalants, prescription/over-the-counter drugs)

- a. Teaches and demonstrates healthy understanding of alcohol and drugs
- b. Alcohol or prescribed drug use/no use
- c. Alcohol or drug abuse
- d. Chronic alcohol or drug abuse -5

2. Household Relationships/Domestic Violence

- a. Supportive
- b. Minor or occasional discord
- c. Frequent discord or some domestic violence -3
- d. Chronic discord or severe domestic violence

3. Social Support System

- a. Strong support system
- b. Adequate support system
- c. Limited support system -2
- d. No support system

4. Caretaking Skills

- a. Strong skills
- b. Adequately provides care for and protects child
- c. Inadequately provides care for and protects child -2

Figure 8.1.4



Note:

- When you click the question mark icon to the left of each question, a pop-up definition box will appear.
- This pop-up box contains the definition for that question from the Protocol Manual.
- The pop-up definition box for question 1 of the Caretaker Strengths and Needs Assessment (see *Figure 8.1.5*).

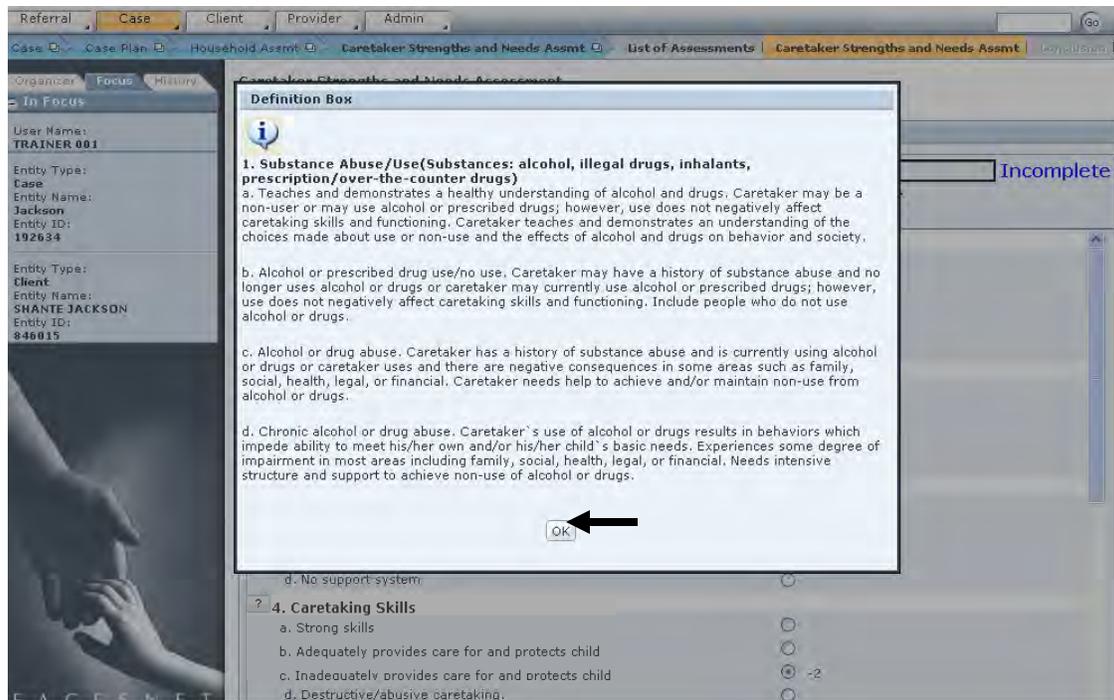


Figure 8.1.5



Note:

- Question # 9 is optional and should be completed only if a family member possesses a particular strength or need not addressed in the first eight questions.
- Because question #9 is optional, the assessment Completion Status will display as “Complete” if this question remains unanswered (see *Figure 8.1.7*).

Step 3: Question #9, **Family Identified Strength/Need**: If applicable, click on the checkbox next to “Yes, Identified.” You must explain the strength or need in the text box provided and select an answer below (see *Figure 8.1.6*).

The screenshot displays the 'Caretaker Characteristics' assessment interface. On the left, a sidebar shows user information for 'TRAINER 001' and 'SHANTE JACKSON'. The main area shows the assessment progress as 'Complete' and the household structure as 'Primary Caretaker' for 'SHANTE JACKSON'. The assessment date is '09/01/2008'. Questions 6 through 9 are listed. Question 9, 'Family Identified Strength/Need (not covered in 1-8)', is selected with the 'Yes, Identified:' checkbox checked. A text box for question 9 contains the text: 'Family communication: either not talking but if they do, it is by shouting.' Below the text box are four radio button options: 'a. Significant strength', 'b. Good/adequate functioning', 'c. Minor need', and 'd. Significant need'. The 'Save' and 'Cancel' buttons are at the bottom.

Figure 8.1.6

Step 4: Click **Save**.

Step 5: Click the **Conclusion** breadcrumb.



Note:

- Clicking the **Conclusion** breadcrumb takes you to the Caretaker Strengths and Needs Conclusion Priority Needs and Strengths screen. This screen displays a breakout of which items scored as strengths and which items scored as needs.
- The needs list on the Caretaker Strengths and Needs Conclusion (*Priority Needs and Strengths*) screen will have the top three scoring needs selected as priorities by default.
- You can select any of the needs listed as priority needs; the three that are selected by default do not need to remain as the priority need selections. At least one, and no more than three, priority needs can be selected.

Step 6: Select at least one need by clicking in the checkbox.

Step 7: Click **Save**.

Caretaker Strength And Needs Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Completion Status: Complete

PRIORITY NEEDS AND STRENGTHS

Check item number and description of up to three most serious needs (lowest scores) and greatest strengths (highest scores) from items SN1- SN9 for each caretaker (P=Primary, S=Secondary; B=Both).

Strength	P/S/B	Scores
Cultural Identity	P	1

Need	P/S/B	Scores
Substance Abuse	P	-5 <input checked="" type="checkbox"/>
Household Relationships/Domestic Violence	P	-3 <input checked="" type="checkbox"/>
Social Support System	P	-2 <input checked="" type="checkbox"/>
Caretaking Skills	P	-2 <input type="checkbox"/>
Mental Health/Coping Skills	P	-2 <input type="checkbox"/>
Family Identified Strength/Need	P	-2 <input type="checkbox"/>
Resource Management/Basic Needs	P	-1 <input type="checkbox"/>
Physical Health	P	-1 <input type="checkbox"/>

↓



Note:

- No more than three priority needs should be selected.
- If more than one household needs assessing, navigate back to the **Caretaker Strengths and Needs Assessment** screen.
- When you return to the **Caretaker Strengths and Needs** screen after assessing the household, the Assessed in the past 30 days column will show “Complete.” As you complete the Caretaker Strengths and Needs Assessment for each household as needed, this “Complete” status will appear for each household with a completed assessment.
- The **Preview** button allows a document to be viewed and printed.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has been approved**, then the Current Status column will show “Non-Applicable.” Otherwise, the column will remain blank. Then you can create new assessment(s) for that amended household.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has not been approved**, then the assessment’s Current Status will show “Incomplete.” You can amend answers on the current assessment(s).
- If you end date the entire household from the **Household Manager** screen or remove a primary caretaker from **Client General Information** screen and the assessment(s) **has not yet been approved**, then the Assessment Status column will show “Invalid.” Then you can create a new household and new assessments.

Notes

SECTION 8.2: CHILD STRENGTHS AND NEEDS ASSESSMENT

Performance Objective

In this Section, you gain confidence in your ability to:

- Complete the Child Strengths and Needs Assessment for all children who will be included in the Case Plan.



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Practice Overview

The child strengths and needs assessment is used to evaluate the presenting strengths and needs of each child in the family. This tool is used to systematically identify critical needs and helps to plan effective service interventions. The strengths and needs assessment serves several purposes. It ensures all workers consistently consider the strengths and needs of each child in an objective format when determining the need for services. It provides an important case planning reference, and when periodic reassessments are made, it permits social workers and their supervisors to easily assess changes in functioning and, thus, the impact of services.

The child strengths and needs assessment must be completed for every investigation that is opened as a case. The assessment is completed for each child who will be included in the case plan.

The child strengths and needs assessment should be completed by the social worker responsible for developing the case plan in conjunction with the family. The assessment should be completed prior to developing the initial case plan, which occurs within 30 days of the case being opened for ongoing services or within 30 days of placement. Child strengths and needs reassessments should be completed in conjunction with each case plan review, at least every 90 days from the date the case was opened. Each assessment and reassessment requires supervisory approval as part of the case plan approval process.

This assessment identifies the three highest priority needs of each child that must be addressed in the case plan. Goals, objectives, and interventions in a case plan should relate to one or more of the priority needs.

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There are two steps involved in the child strengths and needs assessment process:

3. Select the child to assess.
4. Complete the Child Strengths and Needs Assessment.

You will complete the first step, selecting the child to assess, by selecting **Case, Case Plan, Child Strengths and Needs Assessment, List of Assessments** from the menu structure. The Child Selection screen appears, which lists all children associated with the case.

From the child selection list, you must click to select the name of the child to be assessed. When the child to be assessed has been selected, you click **New** to open a blank, new Child Strengths and Needs Assessment for that child.

The worker will complete Child Strengths and Needs Assessment for the selected child. If more than one child will be assessed, this two-part process will be repeated until all the children in the household have been assessed.

Complete the Child Strengths and Needs Assessment

After placing a Case into focus, select the child that needs to be assessed.

Steps include:

Step 11: Hold cursor over **Case, Case Plan, Child Strengths and Needs Assessment.**

Step 12: Click on **List of Assessments.** *This opens the **Child Selection** screen.*

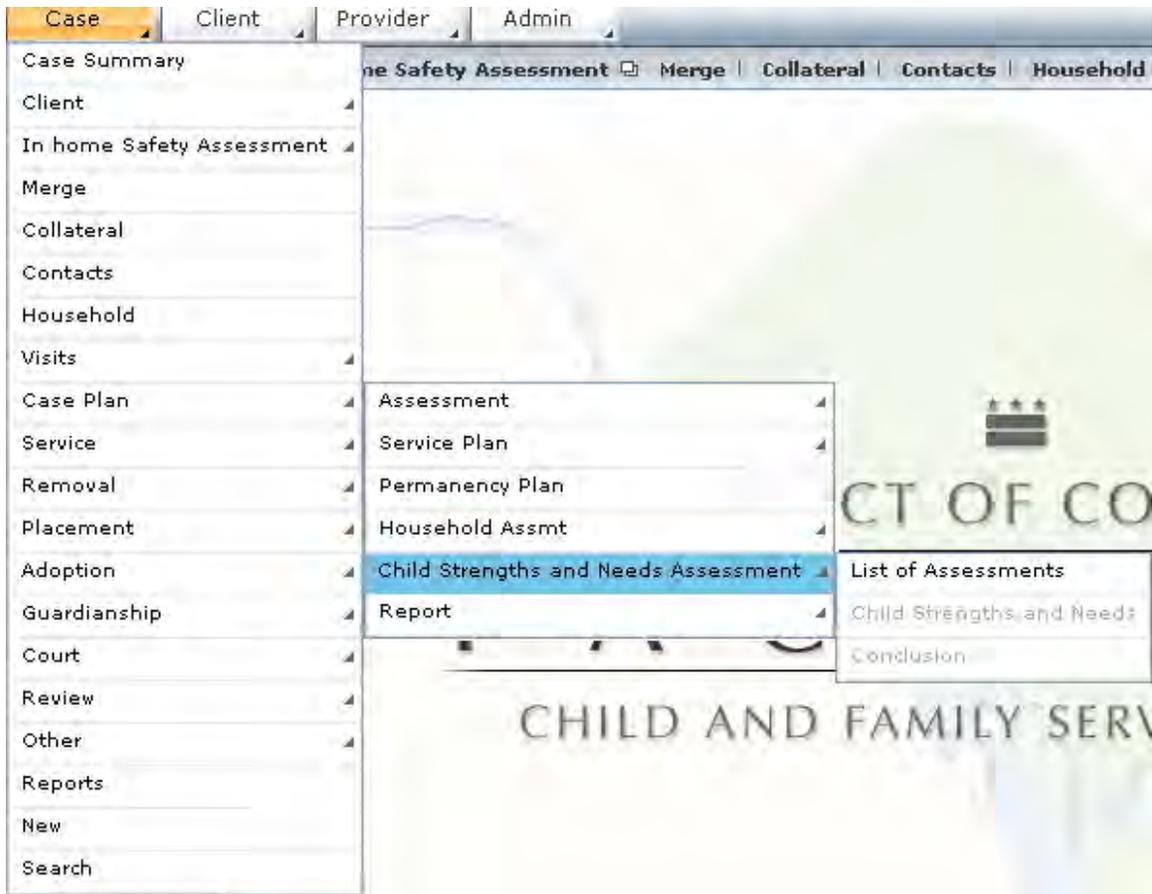


Figure 8.2.1

Step 13: Select the name of the child who will be assessed by highlighting the child's name in the inset grid.

Step 14: Click **New**. *The Child Selection screen will close, and the Child Strengths and Needs Assessment will appear.*

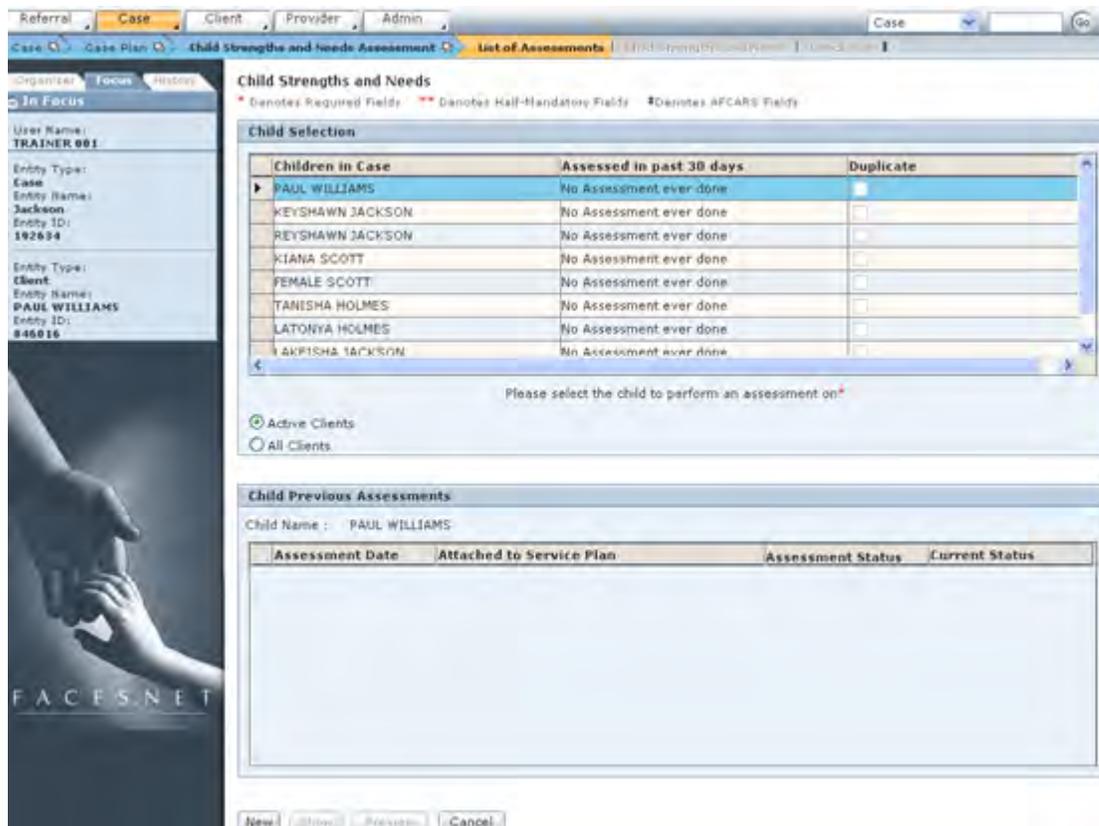


Figure 8.2.2



Note:

- The child's name appears at the top right of the assessment, making it clear which child is being assessed (see *Figure 8.2.3*).
- The **Child Strengths and Needs Assessment** must be completed for each child in the household.

The screenshot shows the 'Child Strengths and Needs Assessment' software. The left sidebar shows the user 'TRAINER 001' and the client 'PAUL WILLIAMS'. The main content area is titled 'Child Strengths and Needs Assessment Progress' and 'Child Strengths and Needs Assessment Questions'. The questions are categorized into four sections: 1. Emotional/Behavioral/Mental Health, 2. Physical Health/Disability, 3. Education, and 4. Family Relationships. Each question has radio buttons or checkboxes for selection.

Figure 8.2.3

Step 5: Enter the **Assessment Date**.

Step 6: Answer each of the first nine questions on the assessment by selecting the radio button and/or checkbox. *An assessment score will display by your corresponding answer.*



Note:

- As you complete each item, the Completion Status bar at the top will indicate your progression toward completing the assessment.
- For each question you answer, a blue box will appear in the Completion Status bar (see *Figure 8.2.4*).
- The Completion bar in *Figure 8.2.4* shows the completion of three answered assessment questions.
- The Completion Status bar will also display the word “Incomplete” until the entire child strengths and needs assessment has been completed for the child in focus.

Step 7: Click the question mark (?) icon to display the definition of the question.

Step 8: Click **OK** after reading the definition.



Note:

- When you click the question mark icon to the left of each question, a pop-up definition box will appear.
- This pop-up box contains the definition for that question from the Protocol Manual.
- The pop-up definition box for question 1 of the Child Strengths and Needs Assessment is displayed (see *Figure 8.2.5*).

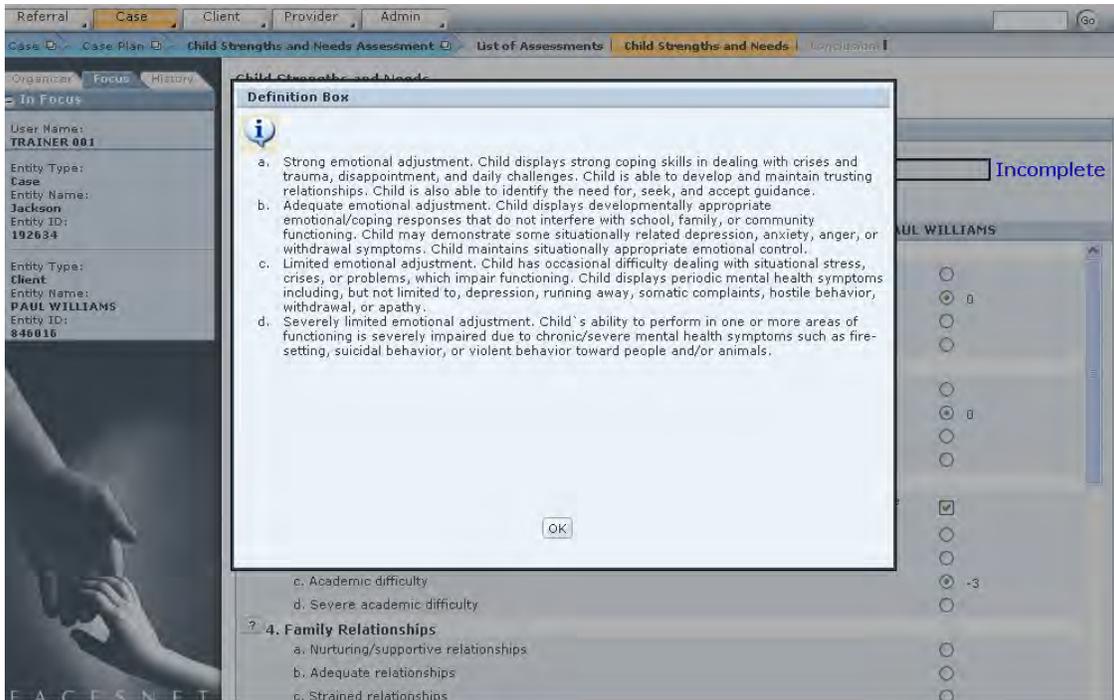


Figure 8.2.5

Step 9: Select the checkbox for question 10 if applicable.

Step 10: Click on **Save**.

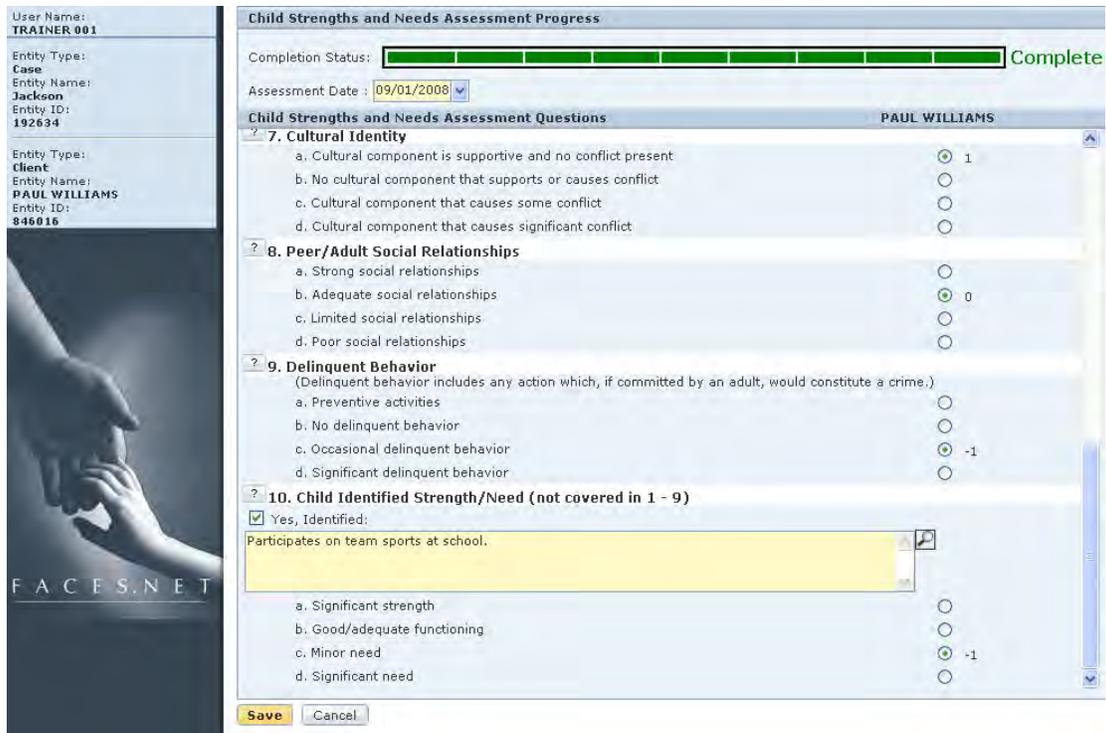


Figure 8.2.6



Note:

- Question 10 is not mandatory, and should be completed only if the child possesses a particular strength or need that is not addressed in the first nine questions.
- Because question 10 is not mandatory, the assessment **Completion Status** will display as “Complete” even if this question remains unanswered (see *Figure 8.2.7*).

User Name: TRAINER 001
Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Entity Type: Client
Entity Name: PAUL WILLIAMS
Entity ID: 846016

Child Strengths and Needs Assessment Progress

Completion Status: Complete

Assessment Date: 09/01/2008

Child Strengths and Needs Assessment Questions PAUL WILLIAMS

7. Cultural Identity

a. Cultural component is supportive and no conflict present 1

b. No cultural component that supports or causes conflict

c. Cultural component that causes some conflict

d. Cultural component that causes significant conflict

8. Peer/Adult Social Relationships

a. Strong social relationships

b. Adequate social relationships 0

c. Limited social relationships

d. Poor social relationships

9. Delinquent Behavior
(Delinquent behavior includes any action which, if committed by an adult, would constitute a crime.)

a. Preventive activities

b. No delinquent behavior

c. Occasional delinquent behavior -1

d. Significant delinquent behavior

10. Child Identified Strength/Need (not covered in 1 - 9)

Yes, Identified:

a. Significant strength

b. Good/adequate functioning

c. Minor need

d. Significant need

Save Cancel

Figure 8.2.7

Conclusion

- Step 3: Hold cursor over **Case, Case Plan, Child Strengths and Needs Assessment,** and then **Child Strengths and Needs.**
- Step 4: Click on **Conclusion.**
- Step 5: Click **Cancel.**



Note:

- The **Conclusion** screen displays a breakout of which items scored as strengths and which items scored as needs for the child in focus.
- This is a read-only screen.

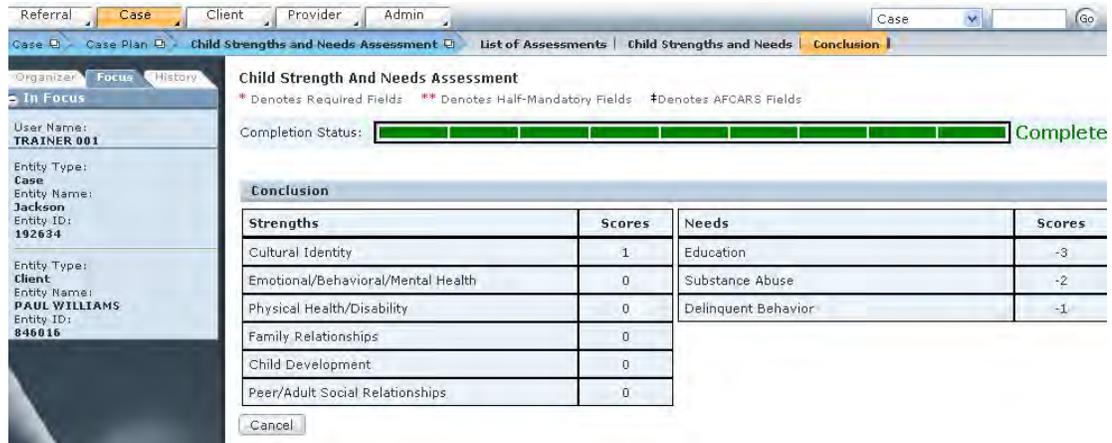


Figure 8.2.8



Note:

- If more than one child needs assessing, navigate back to the **Child Strengths and Needs** screen.
- When you return to the **Child Strengths and Needs** screen after assessing the first child, the **Assessed in the past 30 days** column will show “Complete” for that child. As you complete the Child Strengths and Needs Assessment for each child, this “Complete” status will appear for each child with a completed assessment.
- The **Preview** button allows a document to be viewed and printed.
- If you end date the child from the **Client General Information** screen and the assessment **has been approved**, then the Current Status column will show “Non-Applicable.” Otherwise, the column will remain blank.
- If you end date a child from the **Client General Information** screen and the assessment has **not yet been approved**, then the Assessment Status column will show “Invalid.”

Notes

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SECTION 8.3: RISK RE-ASSESSMENT

Performance Objective

In this Section, you will gain confidence in your ability to:

- Select the appropriate household or households on which a Risk Reassessment will be completed.
- Identify the correct household members as primary and secondary caretakers.
- Complete the Family Risk Reassessment.



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Practice Overview

The family risk reassessment combines items from the original family risk assessment with additional items that evaluate a family's progress toward case plan goals.

The family risk reassessment is completed for all open cases in which all children remain in the home, or cases in which all children have been returned home and family maintenance services are being provided. The assessment is completed by the social worker assigned to the case, and supervisory approval is required as part of the case plan approval process.

The family risk reassessment is completed in conjunction with each case plan review, at least every 90 days. It may be completed sooner if there are new circumstances or new information that would affect risk.

If a new referral is received while a case is open, an initial risk assessment (not a risk reassessment) will be completed during the investigation. This does not alter the reassessment schedule.

The family risk reassessment informs the decision to keep a case open or to close a case. Low and moderate risk cases may be closed if there are no unresolved safety concerns. High and intensive risk cases should remain open. For cases that remain open following reassessment, the new risk level guides minimum contact standards that will be in effect until the next reassessment.

Practice Scenario

Role: Social Worker

After the investigation of the Jackson referral, a case was opened for the family to receive on-going services. It is now time to complete the first reassessment. Because all children have remained in the home, you meet with the family to gather information to complete the Family Risk Reassessment for In-Home Cases.

In the past three months, there have been some changes for the family. Femalé has improved her parenting of Rodney and Kiana. She has been taking Kiana to her well baby appointments regularly, and Kiana has been gaining weight at a healthy rate. She has become less fussy, and her pediatrician is satisfied with her improvement. Femalé has been spending most of her time at a friend's home with both children in the past month. Her friend also has an infant, and they are hoping to share an apartment and childcare responsibilities.

Shanté has demonstrated less progress. She has failed several drug tests in the past three months, and her participation in services has been sporadic at best. There is some food in the kitchen, and the roaches observed during the investigation are no longer present. The children report that Paul has been preparing meals regularly. The twins have been made

responsible for the laundry, and all children have clean clothes and are well-groomed. The children appear to have been taking care of their own basic needs.

In the past three months, there have been no new referrals.

Use information from the initial Family Risk Assessment and this report to complete the In-Home Risk Reassessment.



FACES.NET Guide

There are two steps involved in the risk reassessment process:

5. Select the household to assess.
6. Complete the Risk Reassessment.

You will complete the first step, selecting the household to assess, by selecting **Case, Case Plan, Household Assmt, Family Risk Reassessment, List of Assessments** from the menu structure. The **List of Households** screen will appear, which lists all households associated with the case.

From the List of Households screen, you must click to select the name of the household to be assessed. When the household to be assessed has been selected, you click **New** to open a blank, new Risk Reassessment for that household.

You will complete the Risk Reassessment for the selected household. If more than one household will be assessed, this two-part process will be repeated until all the households have been assessed.

Complete the Risk Reassessment

After placing a Case into focus, select the household that needs to be assessed.

Steps include:

- Step 1: Hold cursor over **Case, Case Plan, Household Assmt, Family Risk Reassessment**.
- Step 2: Click on **List of Assessments**. *This opens the **List of Households** screen.*

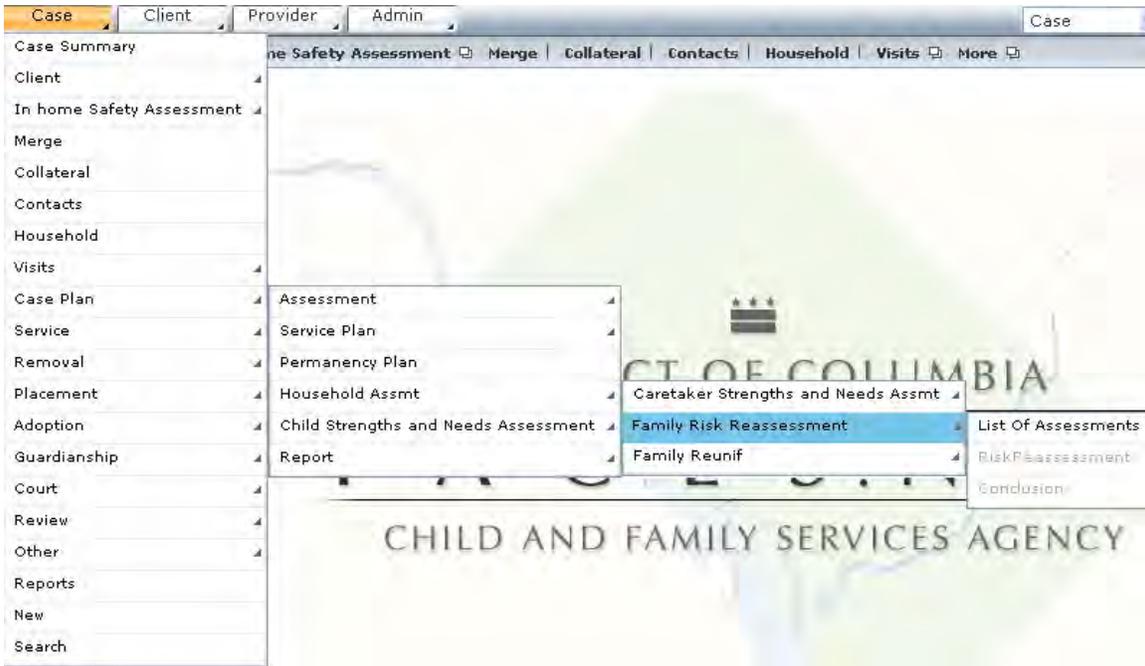


Figure 8.3.1

Step 3: Select the name of the household that will be assessed by highlighting the household's name in the inset grid.

Step 4: Click **New**. (*The Household screen will close, and the Risk Reassessment will appear.*)

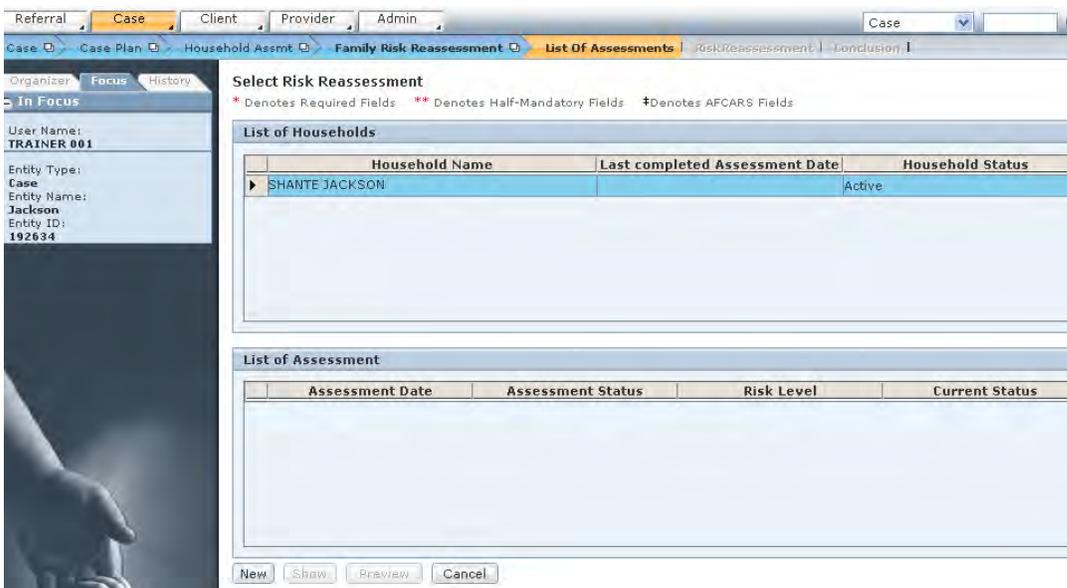


Figure 8.3.2



Note:

- The Risk Reassessment must be completed for each household associated with the case that is receiving services.
- The household name appears at the top of the assessment, making it clear which household is being assessed (see *Figure 8.3.3*).

The screenshot shows a web-based application for conducting risk reassessments. The main content area is titled 'Family Risk Reassessment' for 'Primary Caretaker: SHANTE JACKSON'. It features a 'Completion Status' field, an 'Assessment Date' dropdown menu, and a 'Household Structure' icon. Below this is a 'CPS History' table with five rows of questions, each with a question mark icon and a 'Score' column. The questions are: 1. Number of prior investigations (radio buttons for None, One, Two or more); 2. Household has previously received services (court or non-court involved) (radio buttons for No, Yes); 3. Primary caretaker has a history of abuse or neglect as a child (radio buttons for No, Yes); 4. Characteristics of children in household (checkboxes for developmentally/physically disabled, medically fragile, or no child with characteristics); 5. New investigation of abuse or neglect since the initial Risk Assessment or last Reassessment. A legend at the top indicates that * denotes Required Fields, ** denotes Half-Mandatory Fields, and † denotes AFCARS Fields.

Figure 8.3.3

- Step 5: Enter the **Assessment Date**.
- Step 6: Answer all nine questions on the assessment.
- Step 7: Click the question mark (?) icon to display the definition of a question.
- Step 8: Click **OK** to close the pop-up definition.



Note:

- As you complete each item, the Completion Status bar at the top will indicate your progression toward completing the assessment.
- For each question you answer, a blue box will appear in the Completion Status bar (see *Figure 8.3.4*).
- The Completion bar in *Figure 8.3.4* shows the completion of five answered assessment questions.
- The Completion Status bar will also display the word “Incomplete” until the entire risk reassessment has been completed for the household in focus.

The screenshot shows the 'Risk Reassessment' interface. At the top, there are tabs for 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. Below these are sub-tabs for 'Case', 'Case Plan', 'Household Assmt', 'Family Risk Reassessment', 'List Of Assessments', 'RiskReassessment', and 'Conclusion'. The main content area is titled 'Risk Reassessment' and includes a 'Completion Status' bar with five blue boxes and the word 'Incomplete'. Below this is the 'CPS History' section with five questions and their scores. Question 1: 'Number of prior investigations' (score 0). Question 2: 'Household has previously received services (court or non-court involved)' (score 0). Question 3: 'Primary caretaker has a history of abuse or neglect as a child' (score 1). Question 4: 'Characteristics of children in household' (score 1). Question 5: 'New investigation of abuse or neglect since the initial Risk Assessment or last Reassessment' (score 1).

Figure 8.3.4



Note:

- When you click the question mark icon to the left of each question, a pop-up definition box will appear.
- This pop-up box contains the definition for that question from the Protocol Manual.
- The pop-up definition box for question 1 of the Risk Reassessment is displayed (see *Figure 8.3.5*).

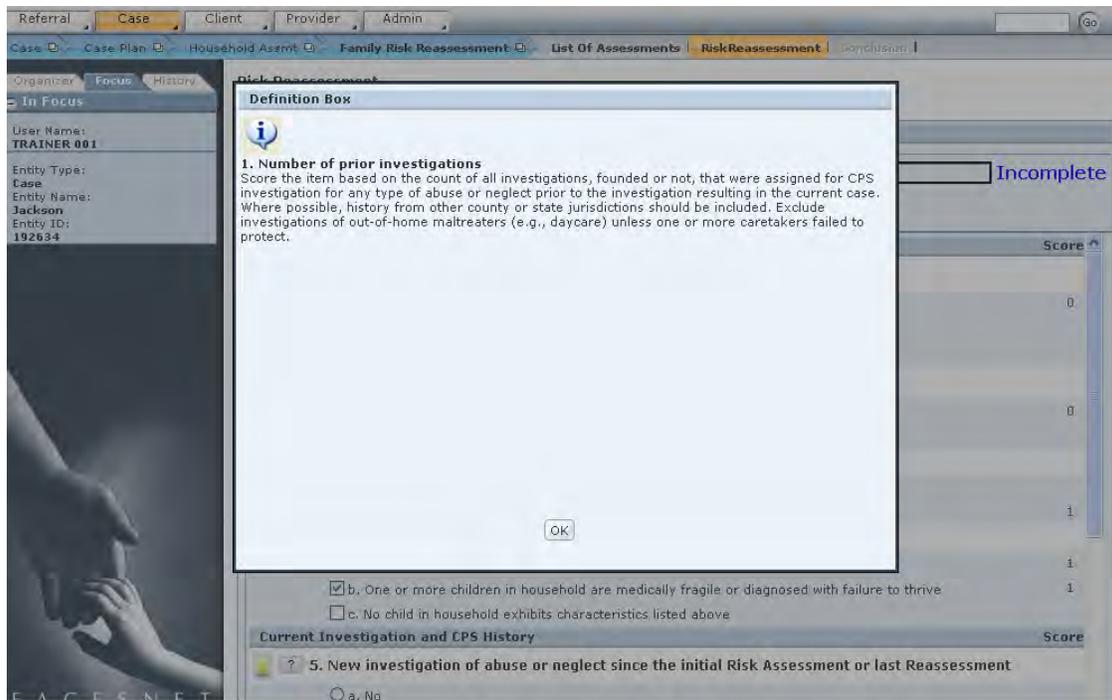


Figure 8.3.5



Note:

- The completion status will still show “Incomplete” after all nine questions are answered until the additional screen (Conclusion) is completed.
- The Conclusion screen is not accessible until you answer all nine questions and click Save on the current screen. Then the Conclusion breadcrumb will become enabled.
- *Figure 8.3.6* shows how the Completion Status is “Incomplete,” even after all nine questions have been answered.

Step 9: Click **Save**.

Step 10: Click the **Conclusion** breadcrumb. *This opens the **Risk Reassessment Override** screen (see *Figure 8.3.7*)*

In Focus

User Name: **TRAINER 001**

Entity Type: **Case**

Entity Name: **Jackson**

Entity ID: **192634**

FACTS.NET

Family Risk Reassessment Primary Caretaker: SHANTE JACKSON

Completion Status: **Incomplete**

Assessment Date: 09/01/2008 Household Structure:

a. No 0

b. Yes

6. Caretaker has not addressed alcohol or drug abuse problem since last assessment/reassessment

a. No history of alcohol or drug abuse problem

b. No current alcohol or drug abuse problem; no intervention needed

c. Yes, alcohol or drug abuse problem; problem is being addressed 0

d. Yes, alcohol or drug abuse problem; problem is not being addressed

7. Problems with adult relationships

a. No problems observed

b. Yes, harmful/tumultuous relationships with adults 1

c. Yes, domestic violence

8. Primary caretaker provides physical care consistent with child needs

a. No

b. Yes 0

Children in the Household Score

9. Caretaker's progress with case plan (check one, based on the Caretaker demonstrating the least progress)

P S

a. Demonstrates behaviors consistent with all case plan objectives; has successfully met or is pursuing all case plan objectives

b. Demonstrating some improved behavior; participating in some case plan goals; this includes waitlisted service 2

c. No improvement in behavior; fails to participate or has minimal/sporadic participation

d. No Secondary Caretaker

Save **Cancel**

Referral Case Client Provider Admin

Case Case Plan Household Assmt Family Risk Reassessment List Of Assessments Risk Reassessment Conclusion

Risk Reassessment Override

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Family Risk Reassessment Primary Caretaker: SHANTE JACKSON

Completion Status: **Incomplete**

ReAssessment Score: 5 **Moderate** ?

Override: No Override Applies

Final Risk Level: **Moderate** Case open/close guidelines:

Override

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

Yes No 1. Sexual abuse case where the maltreater is likely to have access to the child victim.

Yes No 2. Non-accidental injury to a child under age two years.

Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.

Yes No 4. Death of a sibling as a result of abuse or neglect.

Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override If a discretionary override is made, change risk by one level, and indicate reason.

Discretionary Override Reason:

Figure 8.3.7



Note:

- The top portion of the screen above the override questions displays the risk score and scored risk level, which are based on your selections from the first screen of the Risk Reassessment.
- The risk score (the number that appears on the Reassessment Score line) is the total number of points from the score column on the first screen of the Risk Reassessment.
- The scored risk level (appearing to the right of the risk score on the Reassessment Score line) is assigned based on the risk score.
- To see how the scored risk level corresponds to the risk score, click the question mark icon to the right of the risk level. A pop-up definition box appears that breaks out the levels by score range (see *Figure 8.3.8*).

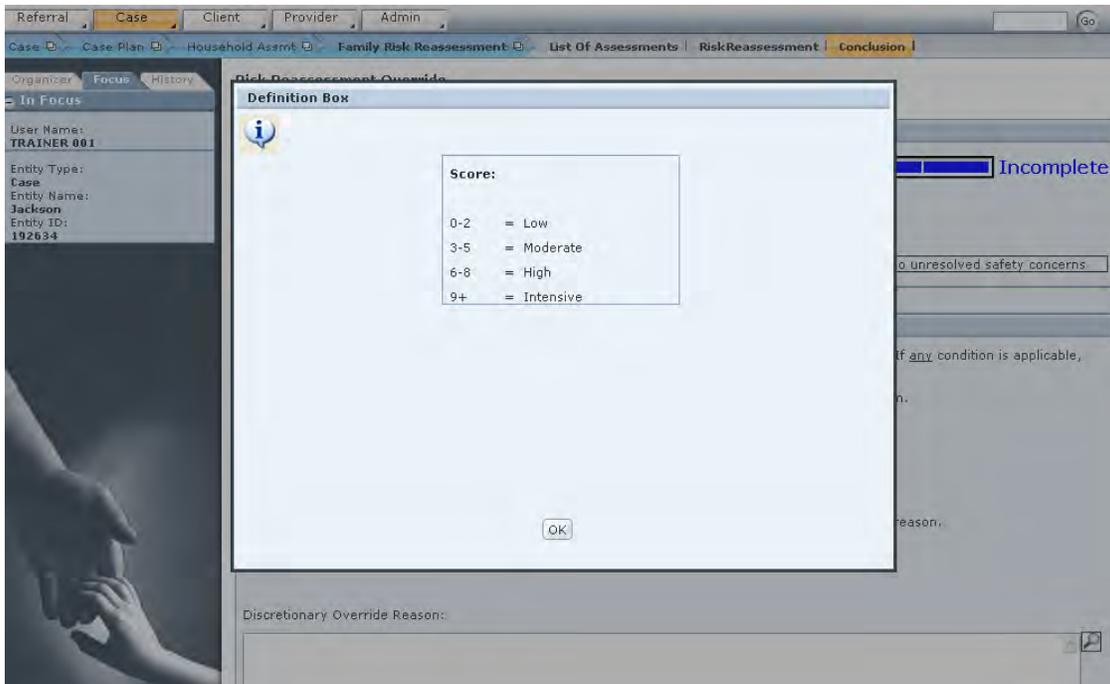


Figure 8.3.8

- Step 11: Answer **“Yes” or “No”** to each policy override item. *If you answer “Yes” to one or more items, you have applied a policy override.*
- Step 12: If a discretionary override is appropriate, mark the checkbox next to Discretionary Override.
- Step 13: Enter the reason for the discretionary override in the **Discretionary Override Reason** text box, and select the new override risk level for override item 6.



Note:

- The top portion of the screen above the override questions displays information on whether or not an override has been applied and how any selected override affects the final risk level.
- When the Override section has not been completed, or when no policy or discretionary overrides are selected, the Override: display will say “No Override Applies” (see *Figure 8.3.9*).
- If no overrides are selected, the Final Risk Level remains the same as the Scored Risk Level (see *Figure 8.3.9*).
- If a policy override is applied, the Final Risk Level changes to “Intensive” (see *Figure 8.3.10*).

The screenshot displays a web application interface for a 'Risk Reassessment Override'. The top navigation bar includes tabs for 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. The main content area is titled 'Risk Reassessment Override' and includes a sub-section for 'Family Risk Reassessment' with 'Primary Caretaker: SHANTE JACKSON'. The 'Completion Status' is shown as a green progress bar labeled 'Complete'. The 'ReAssessment Score' is 5, with 'Moderate' selected. The 'Override' field displays 'No Override Applies'. The 'Final Risk Level' is 'Moderate'. Below this, there is a 'POLICY OVERRIDES' section with five questions, each with 'Yes' and 'No' radio buttons. The questions are: 1. Sexual abuse case where the maltreater is likely to have access to the child victim. 2. Non-accidental injury to a child under age two years. 3. Serious non-accidental physical injury requiring hospital or medical treatment. 4. Death of a sibling as a result of abuse or neglect. 5. Child or sibling has been diagnosed or is suspected of failure to thrive. A 'Discretionary Override' checkbox is also present, with a text box for 'Discretionary Override Reason:' below it.

Figure 8.3.9



Note:

- When a discretionary override is applied, the override risk level can be adjusted to one level higher OR one level lower than the scored risk level (see *Figure 8.3.11* and *Figure 8.3.12*).
- After a discretionary override is applied and the new risk level is selected, this risk level appears as the Final Risk Level at the top of the screen (see *Figure 8.3.11* and *Figure 8.3.12*).

Case | Case Plan | Household Assmt | **Family Risk Reassessment** | List Of Assessments | RiskReassessment | Conclusion |

Organizer | Focus | History

In Focus

User Name: **TRAINER 001**

Entity Type: Case

Entity Name: **Jackson**

Entity ID: **192634**

Risk Reassessment Override

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Family Risk Reassessment Primary Caretaker: SHANTE JACKSON

Completion Status: Complete

ReAssessment Score: 5 Moderate ?

Override: Override Applies

Final Risk Level: Case open/close guidelines: Close if there are no unresolved safety concerns

Override

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

Yes No 1. Sexual abuse case where the maltreater is likely to have access to the child victim.

Yes No 2. Non-accidental injury to a child under age two years.

Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.

Yes No 4. Death of a sibling as a result of abuse or neglect.

Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override If a discretionary override is made, change risk by one level, and indicate reason.

6. If checked, override risk level:

Low Moderate High Intensive

Discretionary Override Reason:

Caretaker has enrolled self in community support group for parents. Attends AA meetings and has abstained from drug use.

Save Approval Cancel

Figure 8.3.11

Step 14: Click **Save**.

Step 15: Click **Approval**.

Case Case Plan Household Assmt **Family Risk Reassessment** List Of Assessments RiskReassessment Conclusion

Organizer Focus History

In Focus

User Name: **TRAINER 001**

Entity Type: **Case**

Entity Name: **Jackson**

Entity ID: **192634**

Risk Reassessment Override

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Family Risk Reassessment Primary Caretaker: SHANTE JACKSON

Completion Status: Complete

ReAssessment Score: 5 Moderate ?

Override: Override Applies

Final Risk Level: High Case open/close guidelines: Case remains open

Override

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

Yes No 1. Sexual abuse case where the maltreater is likely to have access to the child victim.

Yes No 2. Non-accidental injury to a child under age two years.

Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.

Yes No 4. Death of a sibling as a result of abuse or neglect.

Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override If a discretionary override is made, change risk by one level, and indicate reason.

6. If checked, override risk level:

Low Moderate High Intensive

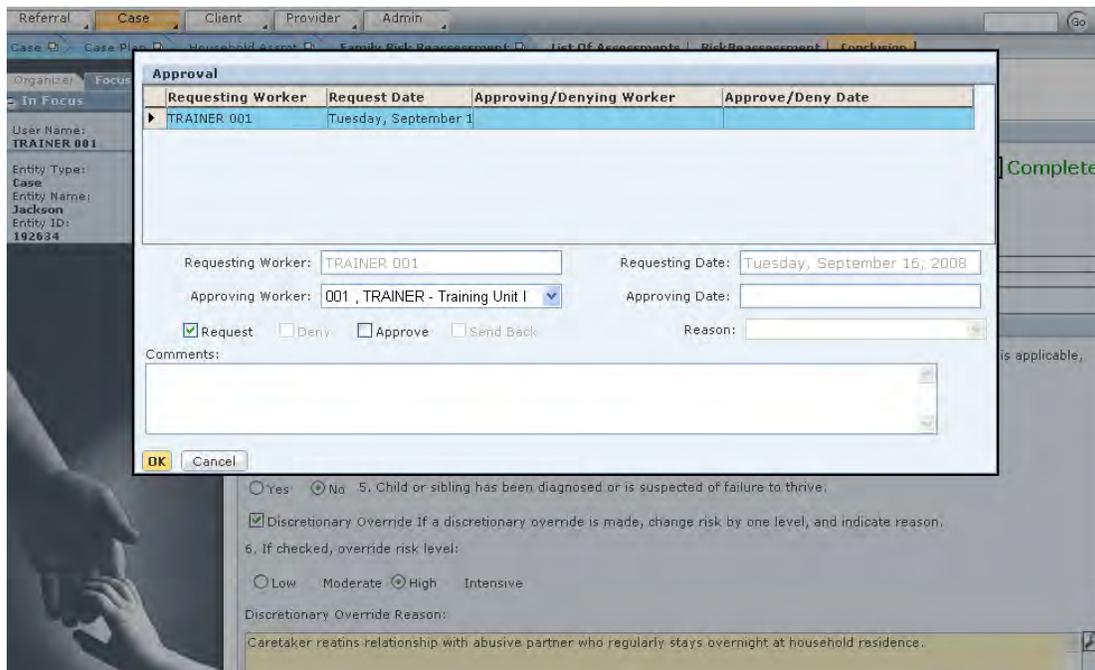
Discretionary Override Reason:

Caretaker retains relationship with abusive partner who regularly stays overnight at household residence.

Save **Approval** **Cancel**

Step 16: In the **Approval** pop-up window, select the **Approving Worker** from the drop-down menu.

Step 17: Click **OK** at the bottom of the **Approval** pop-up window.



Note:

- If more than one household needs assessing, navigate back to the **Select Risk Reassessment** screen.
- When you return to the **Select Risk Reassessment** screen after assessing the household, the Assessment Status column will show “Complete.” As you complete the Risk Reassessment for each household as needed, this “Complete” status will appear for each household with a completed assessment.
- The **Preview** button allows a document to be viewed and printed.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) has been **approved**, then the Current Status column will show “Non-Applicable.” Otherwise, the column will remain blank. Then you can create new assessment(s) for that amended household.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) has **not yet been approved**, then the assessment’s Current Status will show “Incomplete.” Then you can amend answers on the current assessment(s).
- If you end date the entire household from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has not yet been approved**, then the Assessment Status column will show “Invalid.” Then you can create a new household and new assessments.

Notes

SECTION 8.4: REUNIFICATION ASSESSMENT

Performance Objective

In this Section, you will gain confidence in your ability to:

- Select the appropriate household or households on which a reunification assessment will be completed.
- Complete the Family Reunification assessment.



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Practice Overview

The family reunification assessment consists of six components that are used to evaluate risk, visitation compliance, safety, and permanency planning decisions. Results are used to reach a permanency plan recommendation and to guide decisions about whether to return a child home.

The family reunification assessment is completed for all families with an open protective services case in which at least one child is in placement (including relative placements) with a permanency goal of “reunification.” It may also be used when assessing non-removal caretaker households that are being considered as reunification resources. The assessment is completed by the child worker(s), and supervisory approval is required as part of the case plan approval process.

The family reunification assessment is completed no later than three months from the date of placement and every three months thereafter. It should also be completed prior to any court hearing to review the permanency goal and/or progress towards case plan goals and objectives or when a child is being considered for a return home. The caretaker and child strengths and needs assessments should be completed in conjunction with the reunification assessment.

This assessment guides the decision to recommend reunification or to recommend a change to the permanency goal.

If families have effectively reduced risk to low or moderate and have achieved at least “good” compliance with visitation, a reunification safety review is conducted and the results are used to determine if the home environment is safe. The permanency goal guidelines and recommendation section guides the decision to return a child home or to change the permanency goal.

Practice Scenario

Role: Social Worker

After an in-home safety assessment, the children of the Jackson family were determined to be unsafe, and were placed in care. Family strengths and needs were reassessed, and a new case plan was written. After three months, the family was re-assessed using the Family Reunification Assessment, although Shanté had made some progress, completing in-patient treatment for her substance abuse, reunification was not appropriate at that time. It is three months later (six months after the children were placed in care), and time to complete a new reunification assessment.

Shanté has maintained her sobriety, and has complied with all drug testing requirements. She has a new job and a new apartment. She has paid her utility bills on time for each of the past three months. She has successfully met all of her case plan goals, and is cooperating with all ongoing services. There have been no new investigations in the past three months.

In the past review period, Shanté has progressed to unsupervised visits with her children, and has only had to call in advance and reschedule one visit for an acceptable reason. You have observed her interactions with all her children to be appropriate and improved.

The safety concerns which led to the children's removal have been remedied. Shanté now has a new home and has maintained working utilities for several months. No roaches or other vermin have been observed in the home, and Shanté has provided several nutritious and appropriate meals for her children during family visits. She has expressed an understanding of the importance of appropriate supervision and care for her children and has demonstrated improved behavior during visits.

However, the new apartment is not child-safe. There are currently exposed electrical wires in the living area, and several windows without guards. Shanté is working with her landlord to make appropriate repairs, but the work has been delayed. No safety plan is possible to remedy this situation.



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There are two steps involved in the reunification assessment process:

7. Select the household to assess.
8. Complete the Reunification Assessment.

You will complete the first step, selecting the household to assess, by selecting **Case, Case Plan, Household Assmt, Family Reunif, List of Assmt** from the menu structure. The **Select Reunification Assessment** screen appears which lists all households receiving reunification services.

From the Select Reunification Assessment screen, you must click to select the name of the household to be assessed. When the household to be assessed has been selected, you click **New** to open a blank, new Reunification Assessment for that household.

The worker will complete a Reunification Assessment for the selected household. The Reunification Assessment is made up of five separate screens:

1. Reunification Risk Assessment;
2. Reunification Risk Override;
3. Visitation Evaluation;
4. Safety Review;
5. Recommendation.

Complete the Reunification Assessment

After first placing a Case into focus, select the household that needs to be assessed.

Steps include:

Step 1: Hold cursor over **Case, Case Plan, Household Assmt, Family Reunif.**

Step 2: Click on **List of Assmt.** *This opens the **Select Reunification Assessment** screen (see *Figure 8.4.1*).*

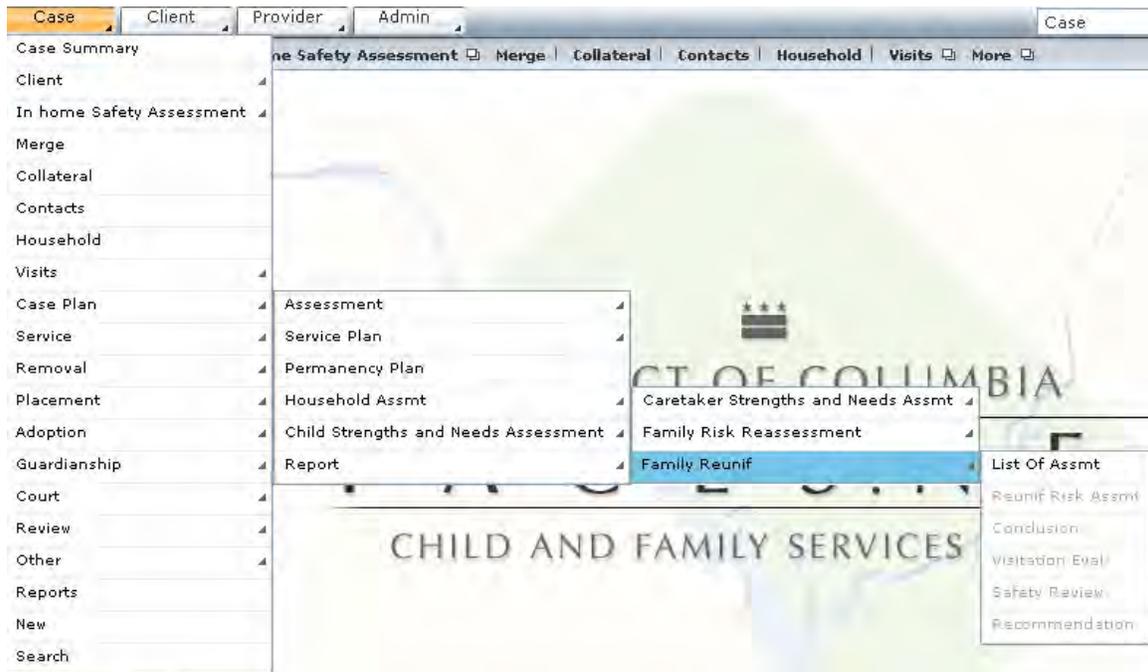


Figure 8.4.1

Step 3: Select the name of the household that will be assessed by highlighting the household's name in the inset grid (see *Figure 8.4.2*).

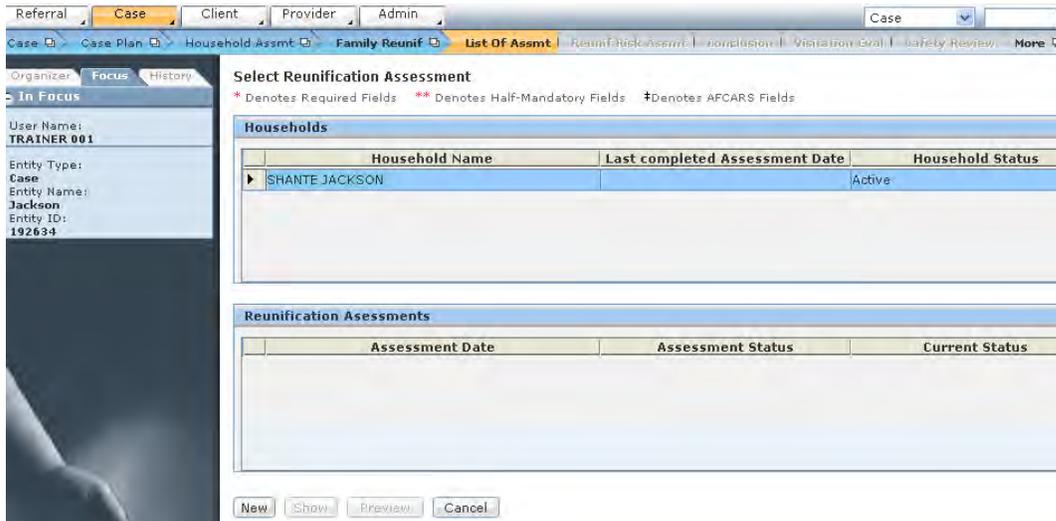


Figure 8.4.2

Step 4: Click **New**. *The **Select Reunification Assessment** screen will close.*

Step 5: Hold cursor over **Case**, **Case Plan**, **Household Assmt**, **Family Reunif**.

Step 6: Click on **Reunif Risk Assmt** (see *Figure 8.4.3*). *This opens the **Reunification Risk Assessment** screen.*

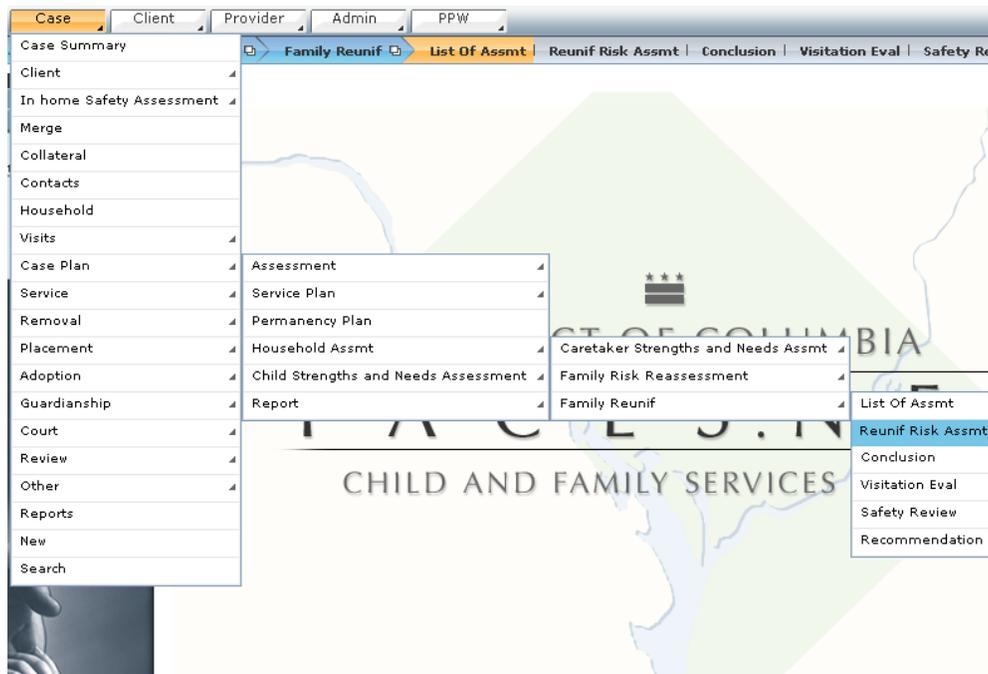


Figure 8.4.3



Note:

- The primary caretaker's name appears at the top of the assessment making it clear which household is being assessed (see *Figure 8.4.4*).
- The Reunification Assessment must be completed for each household associated with the case that is receiving reunification services.

Referral Case Client Provider Admin Case [dropdown] [Go]

Case Case Plan Household Asmt Family Reunif List Of Asmt Reunif Risk Assmt Conclusion Substantiation Eval Safety Review More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Select Reunification Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: [dropdown] **Incomplete**

Scored Risk Level: 5 **High** ? Safety Review:

Risk Override: Safety Decision:

Final Risk Level: Household Structure: [lightbulb]

Reunification Risk Reassessment

	Score
1. Initial Family Risk Level(after overrides), Intensive	5
2. Family's Progress Toward Case Plan Goal(s)	
a. Substantially improved functioning in all applicable priority needs areas; successfully meeting all current case plan outcomes; continuing cooperation with ongoing services	
b. Partially improved functioning in all applicable priority needs areas; actively participating in services; pursuing outcomes detailed in the case plan	
c. Some improved functioning in at least one applicable priority needs area; partial participation in pursuing outcomes in the case plan	
d. Minimal improved functioning in the applicable priority needs areas; minimal level of participation in pursuing outcomes of the case plan; marginal engagement with case plan tasks	
e. Refuses involvement in services; no improved functioning in priority needs areas	
3. Has There Been a New Substantiation (in this household) Since the Last Family Risk Assessment, Risk Reassessment, or Reunification Assessment?	
a. No	
b. Yes	

Figure 8.4.4

Step 7: Enter the **Assessment Date**.

Step 8: Answer the three questions on the **Reunification Risk Reassessment** screen.

The screenshot displays the 'Select Reunification Assessment' interface. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. The main content area is divided into a left sidebar and a main panel. The sidebar shows 'In Focus' with user information: User Name: TRAINER 001, Entity Type: Case, Entity Name: Jackson, and Entity ID: 192634. The main panel is titled 'Select Reunification Assessment' and contains a 'Reunification Status' section with the following details: Primary Caretaker: SHANTE JACKSON, Assessment Date: 09/01/2008, Status: Incomplete, Scored Risk Level: 4 High, Risk Override: ?, Safety Review: ?, Risk Override: ?, Safety Decision: ?, and Final Risk Level: ?. Below this is the 'Reunification Risk Reassessment' section with a table of questions and scores:

Question	Score
1. Initial Family Risk Level(after overrides).	5
2. Family's Progress Toward Case Plan Goal(s)	-1
3. Has There Been a New Substantiation (in this household) Since the Last Family Risk Assessment, Risk Reassessment, or Reunification Assessment?	0

The 'Reunification Risk Reassessment' section includes three questions with radio button options. Question 1 is 'Initial Family Risk Level(after overrides)' with a dropdown menu set to 'Intensive'. Question 2 is 'Family's Progress Toward Case Plan Goal(s)' with five options (a-e). Question 3 is 'Has There Been a New Substantiation (in this household) Since the Last Family Risk Assessment, Risk Reassessment, or Reunification Assessment?' with two options (a-b). The screen also features a 'FACES.NET' logo and 'Save' and 'Cancel' buttons at the bottom.

Figure 8.4.5

Step 9: Click the question mark (?) icon to display the definition of a question.

Step 10: Click **OK** to close the pop-up definition.



Note:

- The completion status will still show “Incomplete” after all three questions are answered because there are additional screens that need to be completed (see *Figure 8.4.7*).
- The second screen of the Reunification Assessment that needs completing is the Conclusion screen.
- The Conclusion screen is not accessible until you answer all three questions and click **Save** on the current screen.

Select Reunification Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status	
Primary Caretaker:	SHANTE JACKSON
Assessment Date:	09/01/2008
Scored Risk Level:	4 High ?
Safety Review:	
Risk Override:	No Override Applies
Safety Decision:	
Final Risk Level:	4 High
Household Structure:	

Reunification Risk Reassessment		Score
1. Initial Family Risk Level(after overrides).	Intensive	5
2. Family's Progress Toward Case Plan Goal(s)		
<input type="radio"/>	a. Substantially improved functioning in all applicable priority needs areas; successfully meeting all current case plan outcomes; continuing cooperation with ongoing services	
<input checked="" type="radio"/>	b. Partially improved functioning in all applicable priority needs areas; actively participating in services; pursuing outcomes detailed in the case plan	-1
<input type="radio"/>	c. Some improved functioning in at least one applicable priority needs area; partial participation in pursuing outcomes in the case plan	
<input type="radio"/>	d. Minimal improved functioning in the applicable priority needs areas; minimal level of participation in pursuing outcomes of the case plan; marginal engagement with case plan tasks	
<input type="radio"/>	e. Refuses involvement in services; no improved functioning in priority needs areas	
3. Has There Been a New Substantiation (in this household) Since the Last Family Risk Assessment, Risk Reassessment, or Reunification Assessment?		
<input checked="" type="radio"/>	a. No	0
<input type="radio"/>	b. Yes	

Save **Cancel**

Figure 8.4.7

Step 11: Click **Save**.

Step 12: Hold cursor over **Case, Case Plan, Household Assmt, Family Reunif**.

Step 13: Click on **Conclusion**. *This opens the **Reunification Risk Override** screen (see Figure 8.4.8).*



Figure 8.4.8



Note:

- The **Reunification Status** box, located above the **Overrides** questions, displays the risk score and scored risk level, which are based on your selections from the first screen of the Reunification Assessment.
- The risk score (the number that appears on the **Scored Risk Level** line) is the total number of points from the score column on the Reunification Risk Assessment screen.
- The scored risk level (appearing to the right of the risk score on the **Scored Risk Level** line) is assigned based on the risk score (see Figure 8.4.9).
- To see how the scored risk level corresponds to the risk score, click the question mark icon to the right of the risk level. A pop-up definition box appears that breaks out the levels by score range (see Figure 8.4.10).

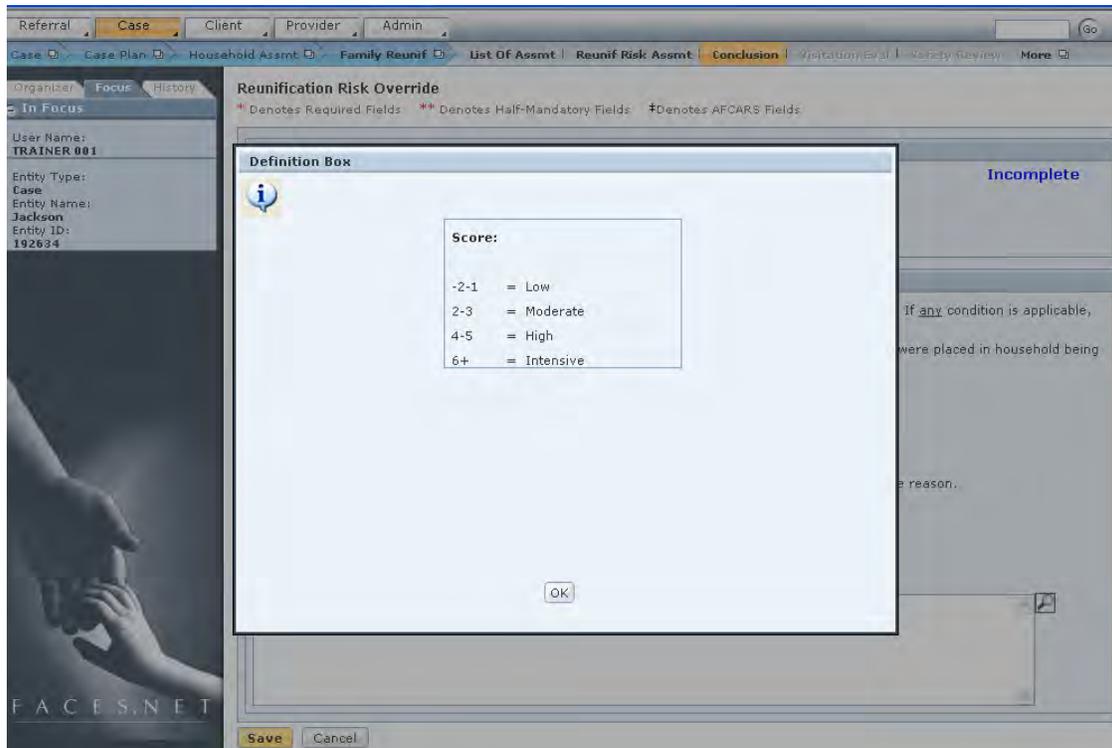
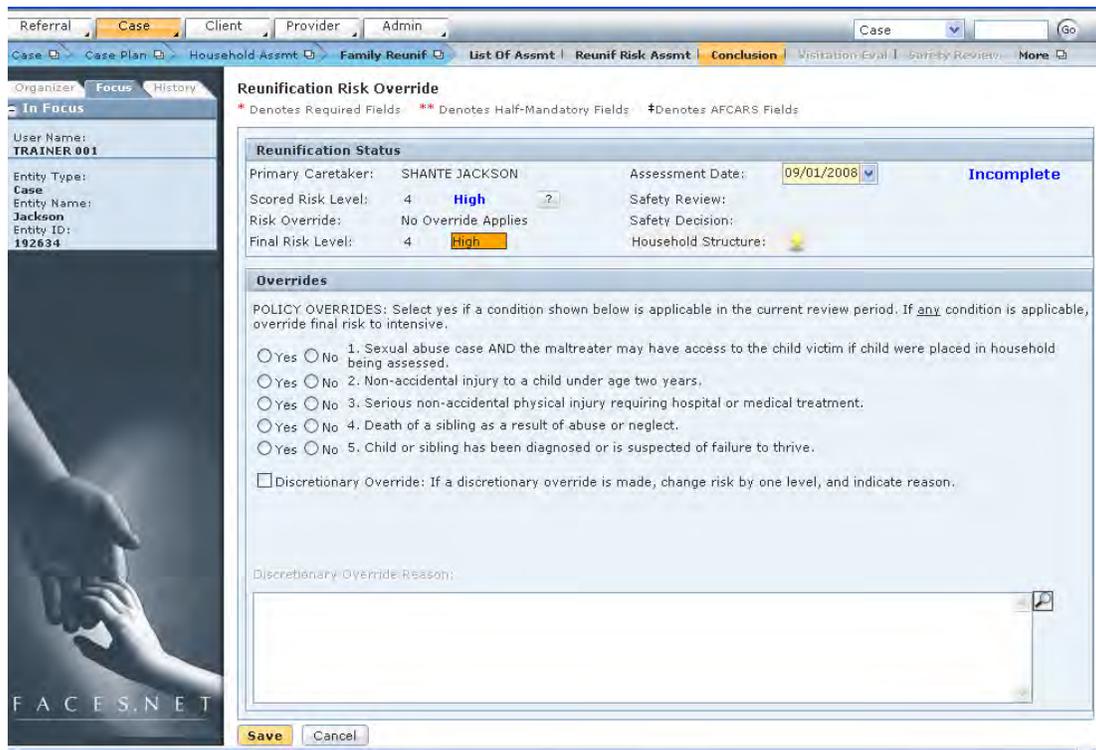


Figure 8.4.10

Step 14: Answer “Yes” or “No” to each policy override item. If “Yes” is selected for one or more items, a policy override has been applied.

Step 15: If a discretionary override is appropriate, mark the checkbox next to Discretionary Override. Enter the reason for the discretionary override in the **Discretionary Override Reason** text box, and select the new override risk level for override item 6.



Note:

- The top portion of the screen above the **Overrides** questions displays information on whether or not an override has been applied, and how any selected override affects the final risk level.
- When the Override section has not been completed, or when no policy or discretionary overrides are selected, the **Risk Override** display will say “No Override Applies” (see *Figure 8.4.11*).
- If no overrides are selected, the Final Risk Level remains the same as the Scored Risk Level (see *Figure 8.4.11*).
- When an override is selected, the **Risk Override** display will say “Override Applies,” and the Final Risk Level changes to reflect the type of override selected (see *Figure 8.4.12*).
- If a policy override is applied, the Final Risk Level changes to “Intensive” (see *Figure 8.4.12*).

Referral Case Client Provider Admin Case [v] [Go]

Case Case Plan Household Assmt Family Reunif List Of Assmt Reunif Risk Assmt Conclusion Visitation Eval Safety Review More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Reunification Risk Override

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker:	SHANTE JACKSON	Assessment Date:	09/01/2008	Incomplete
Scored Risk Level:	4 High	Safety Review:		
Risk Override:	No Override Applies	Safety Decision:		
Final Risk Level:	4 High	Household Structure:		

Overrides

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

Yes No 1. Sexual abuse case AND the maltreater may have access to the child victim if child were placed in household being assessed.

Yes No 2. Non-accidental injury to a child under age two years.

Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.

Yes No 4. Death of a sibling as a result of abuse or neglect.

Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override: If a discretionary override is made, change risk by one level, and indicate reason.

Discretionary Override Reason:

Save Cancel

Referral Case Client Provider Admin Case [v] [Go]

Case Case Plan Household Assmt Family Reunif List Of Assmt Reunif Risk Assmt Conclusion Visitation Eval Safety Review More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Reunification Risk Override

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker:	SHANTE JACKSON	Assessment Date:	09/01/2008	Incomplete
Scored Risk Level:	4 High	Safety Review:		
Risk Override:	Override Applies	Safety Decision:		
Final Risk Level:	4 Intensive	Household Structure:		

Overrides

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

Yes No 1. Sexual abuse case AND the maltreater may have access to the child victim if child were placed in household being assessed.

Yes No 2. Non-accidental injury to a child under age two years.

Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.

Yes No 4. Death of a sibling as a result of abuse or neglect.

Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override: If a discretionary override is made, change risk by one level, and indicate reason.

Discretionary Override Reason:

Save Cancel

Figure 8.4.12



Note:

- When a discretionary override is applied, the override risk level can be adjusted one level higher OR one level lower than the scored risk level (see *Figure 8.4.13* and *Figure 8.4.14*).
- When a discretionary override is applied, you must enter a discretionary override reason in the text box provided (see *Figure 8.4.13* and *Figure 8.4.14*).
- After a discretionary override is applied and the new risk level is selected, this risk level appears as the **Final Risk Level** at the top of the screen (see *Figure 8.4.13* and *Figure 8.4.14*).

The screenshot displays the 'Reunification Risk Override' interface. At the top, navigation tabs include Referral, Case, Client, Provider, and Admin. The main content area is titled 'Reunification Risk Override' and includes a legend for field types: * Denotes Required Fields, ** Denotes Half-Mandatory Fields, and † Denotes AFCARS Fields.

Reunification Status

Primary Caretaker:	SHANTE JACKSON	Assessment Date:	09/01/2008	Incomplete
Scored Risk Level:	4 High	Safety Review:		
Risk Override:	Override Applies	Safety Decision:		
Final Risk Level:	4 Moderate	Household Structure:		

Overrides

POLICY OVERRIDES: Select yes if a condition shown below is applicable in the current review period. If any condition is applicable, override final risk to intensive.

- Yes No 1. Sexual abuse case AND the maltreater may have access to the child victim if child were placed in household being assessed.
- Yes No 2. Non-accidental injury to a child under age two years.
- Yes No 3. Serious non-accidental physical injury requiring hospital or medical treatment.
- Yes No 4. Death of a sibling as a result of abuse or neglect.
- Yes No 5. Child or sibling has been diagnosed or is suspected of failure to thrive.

Discretionary Override: If a discretionary override is made, change risk by one level, and indicate reason.

6. If checked, override risk level:

Low Moderate High Intensive

Discretionary Override Reason:

Shante Jackson has been attending parenting classes three times a week provided by a community resource. She has also begun a twelve-step program for drug and alcohol abuse.

Buttons: Save, Cancel

Figure 8.4.13

The screenshot shows a web application interface for a 'Reunification Risk Override'. The top navigation bar includes tabs for 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. Below this, a breadcrumb trail shows 'Case' > 'Case Plan' > 'Household Assmt' > 'Family Reunif' > 'List Of Assmt' > 'Reunif Risk Assmt' > 'Conclusion'. The main content area is titled 'Reunification Risk Override' and includes a legend: '* Denotes Required Fields', '** Denotes Half-Mandatory Fields', and '† Denotes AFCARS Fields'. The 'Reunification Status' section displays: Primary Caretaker: SHANTE JACKSON, Assessment Date: 09/01/2008, Scored Risk Level: 4 (High), Risk Override: Override Applies, Final Risk Level: 4 (Intensive), and Assessment Status: Incomplete. The 'Overrides' section contains a 'POLICY OVERRIDES' section with five conditions, each with 'Yes' and 'No' radio buttons. A 'Discretionary Override' checkbox is checked, with a risk level of 'Intensive'. A text area for 'Discretionary Override Reason' contains the text: 'Shante Jackson refuses help for for drug and alcohol addictions. Client states she has passed out "only a couple of times."'.

Step 16: Click **Save**. *This saves the **Reunification Risk Override** screen.*



Note:

- The completion status will still show “Incomplete” after completion and saving of the Reunification Risk Override screen because there are additional screens that need to be completed.
- The third screen of the Reunification Assessment that needs completing is the **Visitation Evaluation** screen.
- The **Visitation Evaluation** screen is not accessible until you complete and save the Reunification Risk Override screen.

Step 17: Hold cursor over **Case, Case Plan, Household Assmt, Family Reunif.**

Step 18: Click on **Visitation Eval.** *This opens the **Visitation Evaluation** screen (see Figure 8.4.15).*

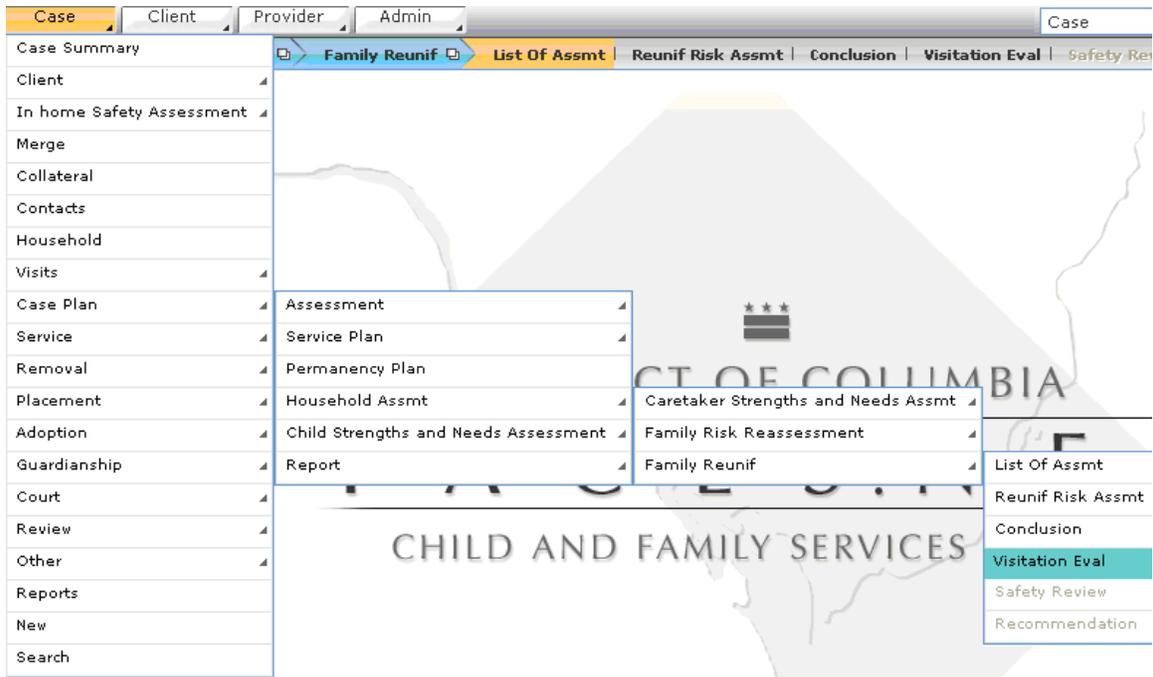


Figure 8.4.15

Step 19: Select the child you will be evaluating from the **Visitation Evaluation by child** list (see *Figure 8.4.16*). This will activate the **Visitation Evaluation** questions for that child.

The screenshot shows a web application interface for 'Visitation Evaluation'. The top navigation bar includes tabs for 'Referral', 'Case', 'Client', 'Provider', and 'Admin'. Below this, a breadcrumb trail shows 'Case' > 'Case Plan' > 'Household Assmt' > 'Family Reunif' > 'List Of Assmt' > 'Reunif Risk Assmt' > 'Conclusion' > 'Visitation Eval' > 'Safety Review' > 'More'. The left sidebar shows 'In Focus' with user information: 'User Name: TRAINER 001', 'Entity Type: Case', 'Entity Name: Jackson', and 'Entity ID: 192634'. The main content area is titled 'Visitation Evaluation' and includes a legend: '* Denotes Required Fields', '** Denotes Half-Mandatory Fields', and '† Denotes AFCARS Fields'. The 'Reunification Status' section shows: 'Primary Caretaker: SHANTE JACKSON', 'Assessment Date: 09/01/2008', 'Scored Risk Level: 4 High', 'Risk Override: Override Applies', 'Final Risk Level: 4 Moderate', and 'Household Structure: [lightbulb icon]'. The 'Visitation Evaluation by child' table has one entry: 'TANISHA HOLMES' with a status of 'Incomplete'. Below the table, the 'Visitation Evaluation' section contains radio button options: 'a. No visitation plan. Check the reason' (with sub-options: '1) court order prohibits', '2) unable to locate', '3) Other, specify:'), 'b. Excellent', 'c. Good: unsupervised, no missed visits without good explanation', 'd. Fair: supervised, improvement necessary', 'e. Poor: supervised, more than one missed visit, negative interaction', and 'f. No Visitation : Caretaker did not attend any visits'. At the bottom are 'Save' and 'Cancel' buttons.

Figure 8.4.16

- Step 20: Select a visitation rating for the selected child under the **Visitation Evaluation** portion of the screen (see *Figure 8.4.17*).
- Step 21: Click **Save**. *This saves the selected child's **Visitation Evaluation**.*
- Step 22: Repeat steps 19 through 21 for each child in the **Visitation Evaluation by child** list.

Visitation Evaluation

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**

Scored Risk Level: 4 **High** ? Safety Review: Required

Risk Override: Override Applies Safety Decision:

Final Risk Level: 4 **Moderate** Household Structure:

Visitation Evaluation by child

Child Name	Status	Visitation Evaluation
TANISHA HOLMES	Complete	Good

Visitation Evaluation

? a. No visitation plan. Check the reason

1) court order prohibits

2) unable to locate

3) Other, specify: _____

? b. Excellent

? c. Good: unsupervised, no missed visits without good explanation

? d. Fair: supervised, improvement necessary

? e. Poor: supervised, more than one missed visit, negative interaction

? f. No Visitation : Caretaker did not attend any visits

Save **Cancel**

Figure 8.4.17



Note: If option “a” (No visitation plan) is selected as the visitation evaluation rating, a reason must be selected from one of the three provided. If reason “3” (Other) is selected, the worker must describe the reason in the associated narrative field (see *Figure 8.4.18*).

Visitation Evaluation

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**

Scored Risk Level: 4 **High** ? Safety Review: Required

Risk Override: Override Applies Safety Decision:

Final Risk Level: 4 **Moderate** Household Structure:

Visitation Evaluation by child

Child Name	Status	Visitation Evaluation
TANISHA HOLMES	Complete	Good

Visitation Evaluation

a. No visitation plan. Check the reason

1) court order prohibits

2) unable to locate

3) Other, specify in hospital

b. Excellent

c. Good: unsupervised, no missed visits without good explanation

d. Fair: supervised, improvement necessary

e. Poor: supervised, more than one missed visit, negative interaction

f. No Visitation : Caretaker did not attend any visits

Save **Cancel**

Figure 8.4.18



Note:

- The completion status will still show “Incomplete” after each child’s visitation evaluation is completed and saved because there are additional screens that need to be completed.
- Whether or not the fourth screen of the Reunification Assessment, the **Safety Review** screen, is required depends on the final risk level from the Reunification Risk Assessment and the visitation evaluation results.
- The **Safety Review** is required when the final risk level is low or moderate and the visitation evaluation for at least one child is Good or Excellent (see *Figure 8.4.17*).
- The **Safety Review** is NOT required when the final risk level is high or intensive or the visitation evaluation for all children is Fair, Poor, No Visitation, or No Visitation Plan (see *Figures 8.4.18 and 8.4.19*).

Referral Case Client Provider Admin Case

Case Case Plan Household Assmt Family Reunif List Of Assmt Reunif Risk Assmt Conclusion Visitation Eval Safety Review More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Visitation Evaluation

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 Incomplete

Scored Risk Level: 4 High ? Safety Review: Not Required

Risk Override: Override Applies Safety Decision:

Final Risk Level: 4 Moderate Household Structure:

Visitation Evaluation by child

Child Name	Status	Visitation Evaluation
TANISHA HOLMES	Complete	Poor

Visitation Evaluation

? a. No visitation plan. Check the reason:

1) court order prohibits

2) unable to locate

3) Other, specify:

? b. Excellent

? c. Good: unsupervised, no missed visits without good explanation

? d. Fair: supervised, improvement necessary

? e. Poor: supervised, more than one missed visit, negative interaction

? f. No Visitation : Caretaker did not attend any visits

Save Cancel

When the Safety Review is required, follow steps 23-28. When the Safety Review is NOT required, jump ahead to step 29.

Step 23: Hold cursor over **Case, Case Plan, Household Assmt, Family Reunif.**

Step 24: Click on **Safety Review** (see Figure 8.4.20). *This opens the **Safety Review** screen.*

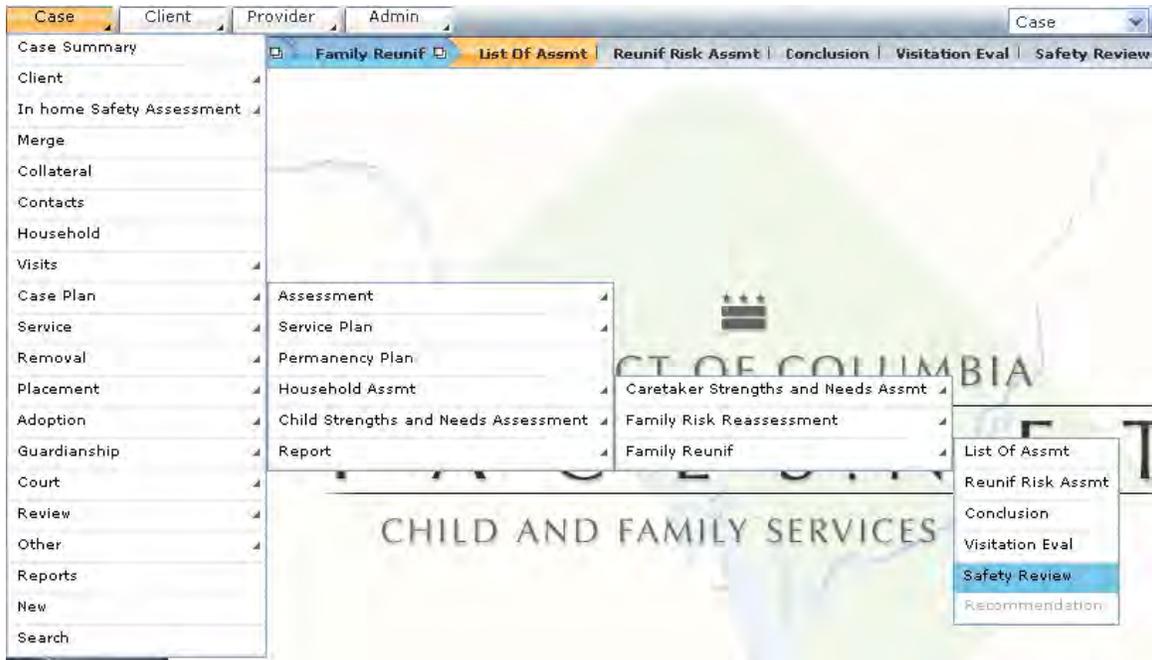


Figure 8.4.20

Step 25: Answer questions 1 and 2 in the **Safety Concerns** section.

Step 26: If applicable, answer questions 1a and 2a in the **Safety Concerns** section.



Note:

- Both questions in the **Safety Concerns** section have sub-questions associated with them.
- If the response to question 1 is “No,” the associated subquestion becomes disabled, and a description of the intervention must be entered (see *Figure 8.4.21*).
- If the response to question 2 is “No,” the associated subquestion becomes disabled.
- If the response to question 1 and/or 2 is “Yes,” a description must be entered in the text box provided, and the associated subquestion (1a and/or 2a) must be answered (see *Figure 8.4.22*).
- If the response to subquestion 1a and/or 2a is “Yes,” a description must be entered in the text box provided (see *Figure 8.4.22*).

Referral | Case | Client | Provider | Admin | Case | Go

Case | Case Plan | Household Assmt | Family Reunif | List Of Assmt | Reunif Risk Assmt | Conclusion | Visitation Eval | Safety Review | More

Organizer | Focus | History

In Focus

User Name: TRAINER 001

Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Reunification Safety Concern

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker:	SHANTE JACKSON	Assessment Date:	09/01/2008	Incomplete
Scored Risk Level:	4 High ?	Safety Review:	Required	
Risk Override:	Override Applies	Safety Decision:		
Final Risk Level:	4 Moderate	Household Structure:		

Safety Concerns

? 1. Are any safety factors identified on the safety assessment that resulted in the child's removal still present?

a. Yes, please describe safety factor(s) as it currently exists below.

b. No, describe how the initial safety factor(s) was ameliorated or mitigated after the child's removal below.

Describe:

? 1a. If yes, are there interventions that will be incorporated into the case plan to mitigate the safety factor(s)?

a. Yes

b. No

Describe:

? 2. Have any new safety factors emerged since the child's removal or are there any other circumstances or conditions present in the reunification household that, if the child were to be returned home, would present an immediate danger of serious harm?

a. Yes

b. No

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Referral | Case | Client | Provider | Admin | Case | Go

Case | Case Plan | Household Assmt | Family Reunif | List Of Assmt | Reunif Risk Assmt | Conclusion | Visitation Eval | Safety Review | More

Organizer | Focus | History

In Focus

User Name: TRAINER 001

Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Reunification Safety Concern

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker:	SHANTE JACKSON	Assessment Date:	09/01/2008	Incomplete
Scored Risk Level:	4 High ?	Safety Review:	Required	
Risk Override:	Override Applies	Safety Decision:		
Final Risk Level:	4 Moderate	Household Structure:		

Safety Concerns

? 1. Are any safety factors identified on the safety assessment that resulted in the child's removal still present?

a. Yes, please describe safety factor(s) as it currently exists below.

b. No, describe how the initial safety factor(s) was ameliorated or mitigated after the child's removal below.

Describe:

Piles of garbage still exist.

? 1a. If yes, are there interventions that will be incorporated into the case plan to mitigate the safety factor(s)?

a. Yes

b. No

Describe:

Cleaning schedule will be created.

? 2. Have any new safety factors emerged since the child's removal or are there any other circumstances or conditions present in the reunification household that, if the child were to be returned home, would present an immediate danger of serious harm?

a. Yes

b. No

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Figure 8.4.22



Note:

- When you click the question mark icon to the left of each question, a pop-up definition box will appear.
- This pop-up definition box contains the definition for that question from the Protocol Manual.
- The pop-up definition box for Safety Concern question 1 is displayed (see *Figure 8.4.23*).

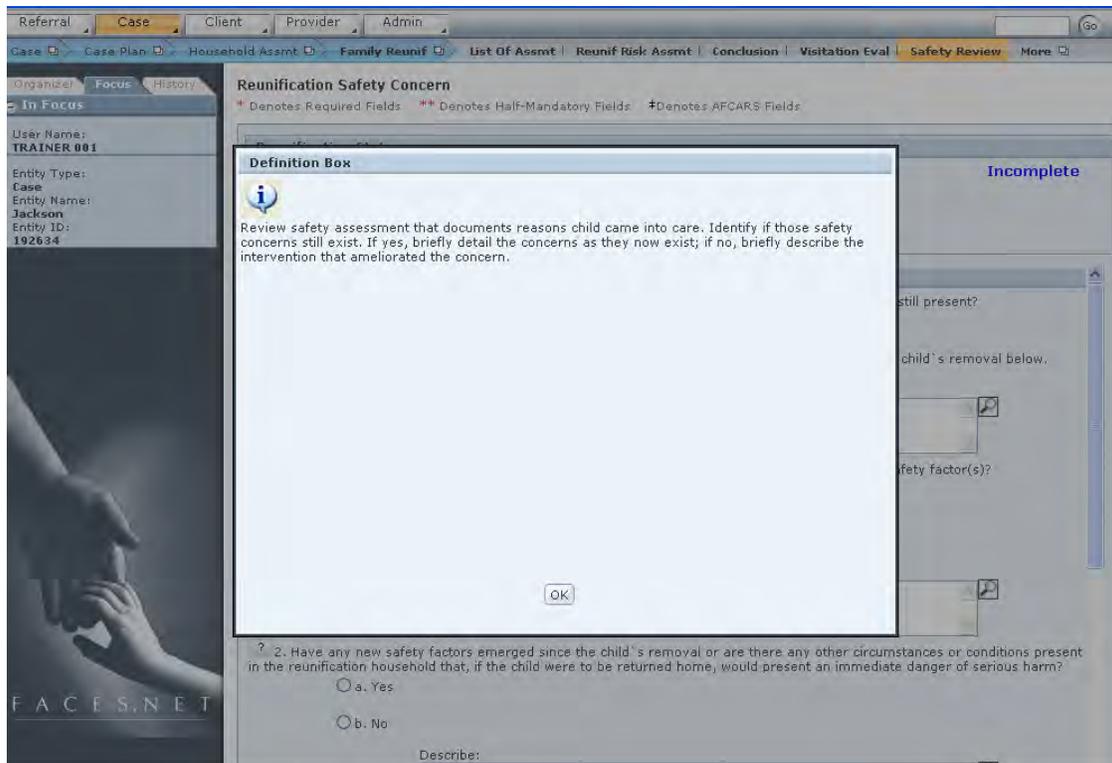


Figure 8.4.23

Step 27: The safety decision is automatically selected in the **Safety Documentation and Design** section based on user responses in the **Safety Concerns** section.

Step 28: Click **Save**.



Note:

- If the response to both questions 1 and 2 is “No,” the safety decision will be “Safe” (see *Figure 8.4.24*).
- If the response to question 1 and/or 2 is “Yes,” and the associated subquestion for each has an answer of “Yes,” the safety decision will be “Conditionally Safe” (see *Figure 8.4.25*).
- If the response to question 1 and/or 2 is “Yes,” and the associated subquestion for at least one of these questions has an answer of “No,” the safety decision will be “UNSAFE” (see *Figure 8.4.26*).

User Information:
User Name: TRAINER 001
Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Reunification Status
Primary Caretaker: SHANTE JACKSON
Assessment Date: 09/01/2008
Scored Risk Level: 4 **High**
Risk Override: Override Applies
Final Risk Level: 4 **Moderate**
Safety Review: Required
Safety Decision:
Household Structure: *

2. Have any new safety factors emerged since the child's removal or are there any other circumstances or conditions present in the reunification household that, if the child were to be returned home, would present an immediate danger of serious harm?
 a. Yes
 b. No
Describe:

2a. If yes, are there intervention that will be incorporated into the case plan to mitigate the safety factor(s)?
 a. Yes
 b. No
Describe:

Safety Documentation and Design

A. Safe. Safety factors that resulted in the child's removal (as documented on the initial safety assessment) are no longer present, and no additional safety factors were identified. Specific services to support successful reunification are described in the case plan.

B. Conditionally Safe. One or more safety factors are present, as identified by a "Yes" in question 1 and/or 2 above.

Save **Cancel**

Figure 8.4.24

User Name: TRAINER 001

Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**

Scored Risk Level: 4 **High** ? Safety Review: Required

Risk Override: Override Applies Safety Decision:

Final Risk Level: 4 **Moderate** Household Structure:

a. Yes

b. No

Describe:

? 2a. If yes, are there intervention that will be incorporated into the case plan to mitigate the safety factor(s)?

a. Yes

b. No

Describe:

Safety Documentation and Design

? A. Safe. Safety factors that resulted in the child's removal (as documented on the initial safety assessment) are no longer present, and no additional safety factors were identified. Specific services to support successful reunification are described in the case plan.

? B. Conditionally Safe. One or more safety factors are present, as identified by a "Yes" in question 1 and/or 2 above. Specific services will be put in place to mitigate safety factors are described in the case plan.

Save **Cancel**

User Name: TRAINER 001

Entity Type: Case
Entity Name: Jackson
Entity ID: 192634

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**

Scored Risk Level: 4 **High** ? Safety Review: Required

Risk Override: Override Applies Safety Decision:

Final Risk Level: 4 **Moderate** Household Structure:

a. Yes

Describe:

? 2a. If yes, are there intervention that will be incorporated into the case plan to mitigate the safety factor(s)?

a. Yes

b. No

Describe:

Safety Documentation and Design

? A. Safe. Safety factors that resulted in the child's removal (as documented on the initial safety assessment) are no longer present, and no additional safety factors were identified. Specific services to support successful reunification are described in the case plan.

? B. Conditionally Safe. One or more safety factors are present, as identified by a "Yes" in question 1 and/or 2 above. Specific services will be put in place to mitigate safety factors are described in the case plan.

? C. UNSAFE. One or more safety concerns are present, as described above, and interventions are not available or possible to ensure child safety in the home

Save **Cancel**

Figure 8.4.26



Note: Once the **Safety Concerns** questions have been answered and saved, and the safety decision is generated, the safety decision is displayed in the **Reunification Status** box at the top of the screen (see *Figure 8.4.27*).

Referral Case Client Provider Admin Case Case Plan Household Assmt Family Reunif List Of Assmt Reunif Risk Assmt Conclusion Visitation Eval Safety Review More

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Reunification Safety Concern

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Reunification Status

Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**

Scored Risk Level: 4 **High** ? Safety Review: Required

Risk Override: Override Applies Safety Decision: SAFE

Final Risk Level: 4 **Moderate** Household Structure: [Icon]

Safety Concerns

? 1. Are any safety factors identified on the safety assessment that resulted in the child's removal still present?

a. Yes, please describe safety factor(s) as it currently exists below.

b. No, describe how the initial safety factor(s) was ameliorated or mitigated after the child's removal below.

Describe: [Text Input Field]

? 1a. If yes, are there interventions that will be incorporated into the case plan to mitigate the safety factor(s)?

a. Yes

b. No

Describe: [Text Input Field]

? 2. Have any new safety factors emerged since the child's removal or are there any other circumstances or conditions present in the reunification household that, if the child were to be returned home, would present an immediate danger of serious harm?

Figure 8.4.27

Step 29: Hold cursor over **Case, Case Plan, Household Assmt, Family Reunif.**

Step 30: Click on **Recommendation** (see *Figure 8.4.28*). This opens the **Reunification Recommendation** screen.

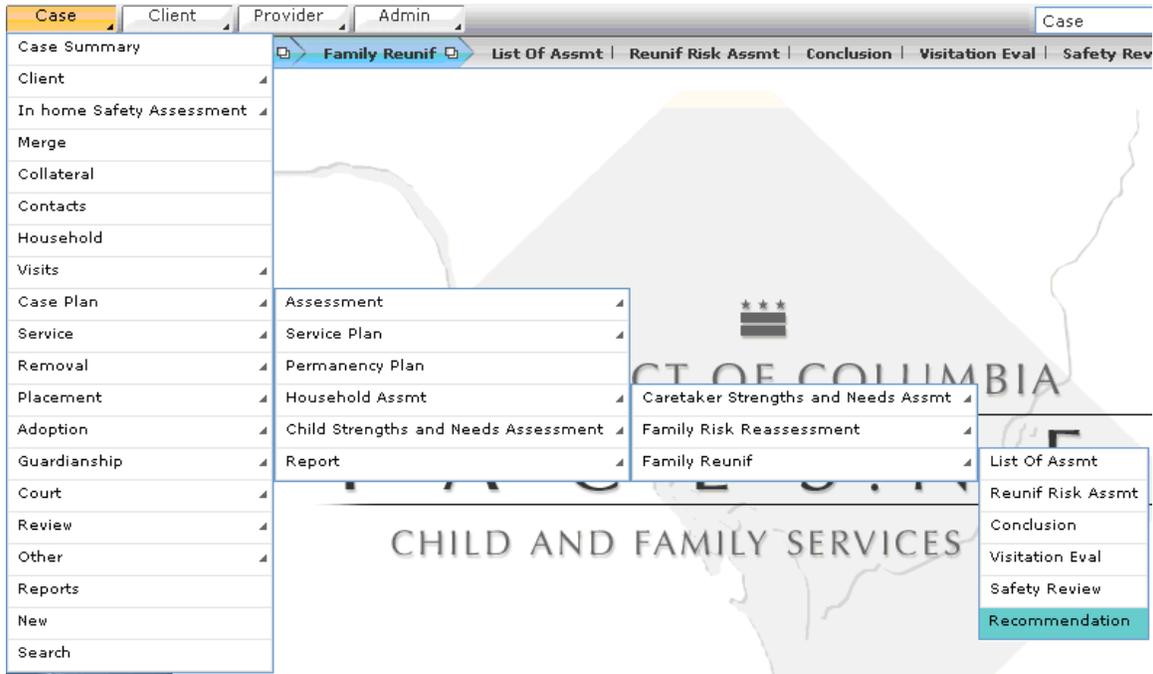


Figure 8.4.28

Step 31: Select the child you will be evaluating from the child list at the top of the screen. *This will activate the **Permanency Goal Guidelines** questions for that child (see Figure 8.4.29).*

The screenshot displays a web application interface for 'Reunification Recommendation'. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. Below this, a breadcrumb trail shows the path: Case > Case Plan > Household Assmt > Family Reunif > List Of Assmt | Reunif Risk Assmt | Conclusion | Visitation Eval | Safety Review > More. A left sidebar shows the user's name as TRAINER 001 and the case name as Jackson, with Entity ID 192634. The main content area is titled 'Reunification Recommendation' and includes a legend for field types: * Denotes Required Fields, ** Denotes Half-Mandatory Fields, and † Denotes AFCARS Fields.

The 'Reunification Status' section contains the following information:

- Primary Caretaker: SHANTE JACKSON
- Assessment Date: 09/01/2008
- Scored Risk Level: 4 **High**
- Risk Override: Override Applies
- Final Risk Level: 4 **Moderate**
- Safety Review: Required
- Safety Decision: SAFE
- Household Structure: (empty)

The status is marked as **Incomplete**. Below this is a table with the following data:

Child Name	Visitation Evaluation	Status	Final Recommendation
TANISHA HOLMES	Good	Incomplete	

The 'Permanency Goal Guidelines' section contains three questions with radio button options:

- Yes No In care 15 of 22 months?
- Yes No Administrative Review or Permanency Hearing in the next 30 days?
- Yes No Other Reason to expedite permanency

The 'Reunification Recommendation' section includes a 'Recommended Action' dropdown menu, an 'Override' checkbox, a 'Final Recommendation' dropdown menu, and a 'Discretionary Override Reason' text area. At the bottom, there are 'Save', 'Cancel', and 'Approval' buttons.

Figure 8.4.29

- Step 32: Answer “Yes” or “No” to each of the three **Permanency Goal Guidelines** questions.
- Step 33: If “Yes” is selected for the third **Permanency Goal Guidelines** question, enter a brief description of the reason in the text box provided (see *Figure 8.4.30*).

TRAINER 001
 Entity Type: Case
 Entity Name: Jackson
 Entity ID: 192634

Reunification Status
 Primary Caretaker: SHANTE JACKSON Assessment Date: 09/01/2008 **Incomplete**
 Scored Risk Level: 4 **High** ? Safety Review: Required
 Risk Override: Override Applies Safety Decision: SAFE
 Final Risk Level: 4 **Moderate** Household Structure: *

Child Name	Visitation Evaluation	Status	Final Recommendation
TANISHA HOLMES	Good	Incomplete	

Permanency Goal Guidelines
 Yes No In care 15 of 22 months?
 Yes No Administrative Review or Permanency Hearing in the next 30 days?
 Yes No Other Reason to expedite permanency

Reunification Recommendation
 Recommended Action: Reunify
 Override
 Final Recommendation:
 Discretionary Override Reason:

Save Cancel **Approval**

Figure 8.4.30

- Step 34: The **Recommended Action** will automatically be generated at the top of the **Reunification Recommendation** section (see *Figure 8.4.30*).

- Step 35: If an override to the recommended action is appropriate, mark the checkbox next to “Override” in the **Reunification Recommendation** section (see *Figure 8.4.31*).
- Step 36: If an override is applied, select the override recommendation from the drop-down menu that becomes activated (see *Figure 8.4.31*).

TRAINER 001
 Entity Type: Case
 Entity Name: Jackson
 Entity ID: 192634

Reunification Status
 Primary Caretaker: SHANTE JACKSON
 Assessed Risk Level: 4 **High**
 Risk Override: Override Applies
 Final Risk Level: 4 **Moderate**
 Assessment Date: 09/01/2008
 Safety Review: Required
 Safety Decision: SAFE
 Household Structure: [Icon]

Child Name	Visitation Evaluation	Status	Final Recommendation
TANISHA HOLMES	Good	Incomplete	

Permanency Goal Guidelines
 Yes No In care 15 of 22 months?
 Yes No Administrative Review or Permanency Hearing in the next 30 days?
 Yes No Other Reason to expedite permanency

Reunification Recommendation
 Recommended Action: Reunify
 Override
 Final Recommendation: [Dropdown: Maintain Goal of Reunification, Maintain Goal of Reunification, Change Permanency Goal]
 Discretionary Override Reason: [Text Area]

Save Cancel **Approval**

Figure 8.4.31

- Step 37: If the selected override recommendation is “Change Permanency Goal,” select the new goal from the second drop-down menu (see *Figure 8.4.32*).
- Step 38: Enter a reason for the override in the **Discretionary Override Reason** text box.

TRAINER 001
 Entity Type: Case
 Entity Name: Jackson
 Entity ID: 192634

Reunitation Status
 Primary Caretaker: SHANTE JACKSON
 Assessment Date: 09/01/2008
 Scored Risk Level: 4 **High**
 Risk Override: Override Applies
 Final Risk Level: 4 **Moderate**
 Safety Review: Required
 Safety Decision: SAFE
 Household Structure:

Child Name	Visitation Evaluation	Status	Final Recommendation
TANISHA HOLMES	Good	Incomplete	

Permanency Goal Guidelines
 Yes No In care 15 of 22 months?
 Yes No Administrative Review or Permanency Hearing in the next 30 days?
 Yes No Other Reason to expedite permanency

Reunitation Recommendation
 Recommended Action: Reunify
 Override
 Final Recommendation: **Change Permanency Goal**
 Discretionary Override Reason: **Reunitation to Removal Household**

Save Cancel **Approval**

Figure 8.4.32



Note: When you click the question mark icon to the left of the Final Recommendation, a pop-up box appears that shows the reason for the recommended action (see *Figure 8.4.33*).

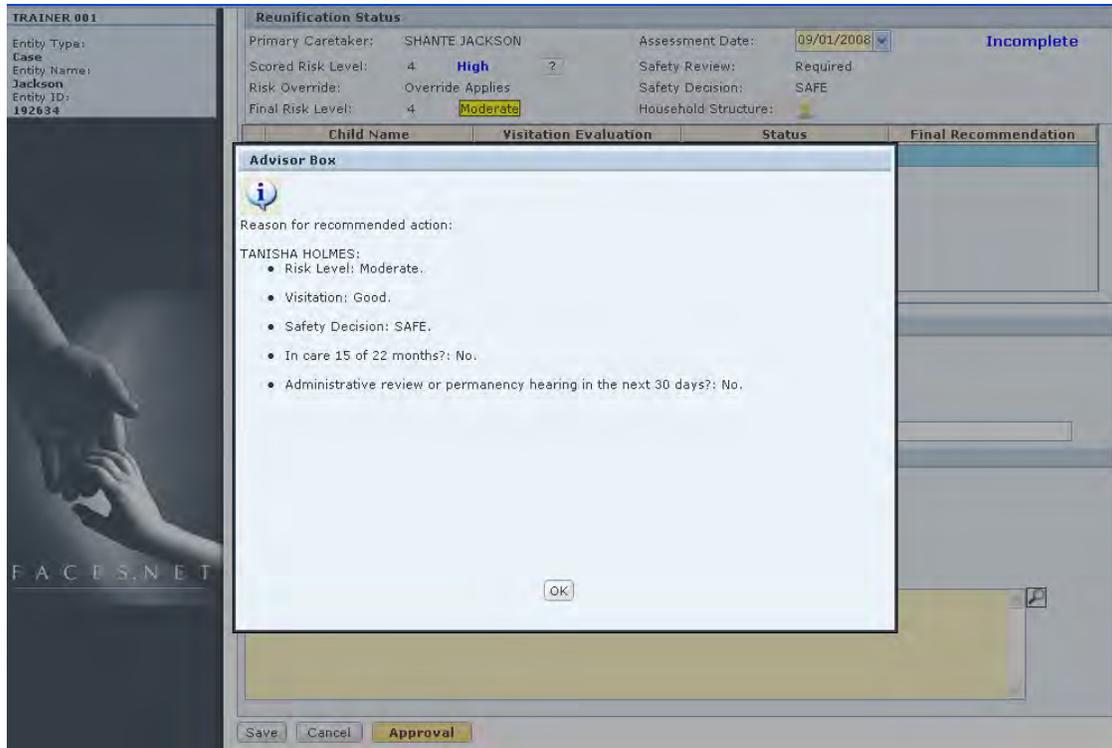


Figure 8.4.33

Step 39: Click **Save**.

Step 40: Repeat steps 31-39 for each child in the child list.



Note:

- The completion status will still show “Complete” after all children in the child list have complete recommendations (see *Figure 8.4.34*).
- After the recommendation for a child has been saved, the final recommendation appears in the corresponding “Final Recommendation” column of the child list at the top of the screen (see *Figure 8.4.34*).

Step 41: Click **Approval** to submit the assessment for supervisor approval.

Step 42: In the **Approval** pop-up window, select the **Approving Worker** from the drop-down menu.

Step 43: Click **OK** at the bottom of the **Approval** pop-up window.



Note:

- If more than one household needs assessing, navigate back to the **Select Reunification Assessment** screen.
- When you return to the **Select Reunification Assessment** screen after assessing the household, the Assessment Status column will show “Complete.” As you complete the Reunification Assessment for each household as needed, this “Complete” status will appear for each household with a completed assessment.
- The **Preview** button allows a document to be viewed and printed.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) has been **approved**, then the Current Status column will show “Non-Applicable.” Otherwise, the column will remain blank. Then you can create new assessment(s) for that amended household.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s)

has not yet been approved, then the assessment's Current Status will show "Incomplete." Then you can amend answers on the current assessment(s).

- If you end date the entire household from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) has **not yet been approved**, then the Assessment Status column will show "Invalid." Then you can create a new household and new assessments.

Notes

SECTION 8.5: IN-HOME SAFETY ASSESSMENT

Performance Objectives

In this Section, you gain confidence in your ability to:

- Identify a change in circumstances that requires a safety assessment.
- Complete the In-home Safety Assessment.



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Practice Overview

The purpose of the in-home safety assessment is to assess whether any child is likely to be in immediate danger of serious harm/maltreatment requiring a protecting intervention and to determine what interventions should be initiated or maintained to provide appropriate protection.

It is important to keep in mind the difference between safety and risk when completing this form. Safety assessment differs from risk assessment in that it assesses the child's present danger and the interventions needed to protect the child. In contrast, the risk assessment looks at the likelihood of future maltreatment.

The in-home safety assessment is completed for any open in-home case in which changing circumstances impact the safety of the child(ren) in the family. Examples of such changes include changes in family composition or living situation, changes in information known about the family, or changes in the ability of safety interventions to mitigate safety concerns. The in-home safety assessment should be completed by the social worker assigned to the case.

In-home safety assessment is both a process and a document. A worker is not expected to fill out a form while in the middle of a face-to-face contact, but is expected to evaluate for the presence of all safety concerns, to note the presence of specific concerns, and to consider potential safety interventions for identified concerns. The safety assessment process is completed immediately. The safety assessment document is completed within one working day.

A safety assessment is not required at specified time intervals. The worker is expected to conduct a safety assessment during every face-to-face contact. Completion of the safety assessment document is required any time a worker determines that changing circumstances impact the safety of the children in the family.

A case cannot be closed if safety concerns are present. If the most recent safety assessment documents the existence of safety concerns, the worker must complete an in-home safety assessment and the home must be identified as safe prior to closing the case. The in-home safety assessment provides structured information concerning the immediate danger of serious harm/maltreatment to a child. This information guides the decision about whether the child may remain in the home with no intervention, may remain in the home with safety interventions in place, or must be removed.

Practice Scenario

Role: Social Worker

One month after completing the In-Home Risk Reassessment, you encounter some changes in the Jackson household situation that prompt an in-home safety assessment. There is no food in the home, and the roach infestation has returned. Shanté lost her job and has not paid the household bills, so the water and electricity have been turned off. The older children bathe at school or at friends' houses, but the younger children have been unable to wash at home for the past week. The twins take the younger children to their grandmother's home to wash up when they can. Shanté has made no alternative plans for her children's bathing or nutritional needs since the utilities have been cut off. She believes that they are taking care of themselves perfectly well.

Shanté has been unwilling to meet the children's immediate needs for food, because she has not kept any food in the home and the children complain of hunger and missing meals. In addition, the household presents environmental hazards in the form of lack of water and electricity. Shanté has made no alternative arrangements for her children to eat or bathe, and when these safety factors are discussed with Shanté, no safety intervention can be found.

The children are determined to be unsafe in the home and will be removed.



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There are two steps involved in the in-home safety assessment process:

9. Select the household to assess.
10. Complete the In-Home Safety Assessment.

You will complete the first step, selecting the household to assess, by selecting **Case, In home Safety Assessment, List of Assessments** from the menu structure. The **Households** screen appears, which lists all households associated with the case.

From the households list, you must click to select the name of the household to be assessed. When the household to be assessed has been selected, you click **New** to open a blank, new In-Home Safety Assessment for that household.

The worker will complete the In-Home Safety Assessment for the selected household. If more than one household will be assessed, this two-part process will be repeated until all the households have been assessed.

Complete the In-Home Safety Assessment

After first placing a Case in focus, select the household that needs to be assessed.

Steps include:

Step 1: Hold cursor over **Case, Case Plan, Household Assmt, In home Safety Assessment.**

Step 2: Click on **List of Assessments** (see *Figure 8.5.1*). This opens the **Households** screen.

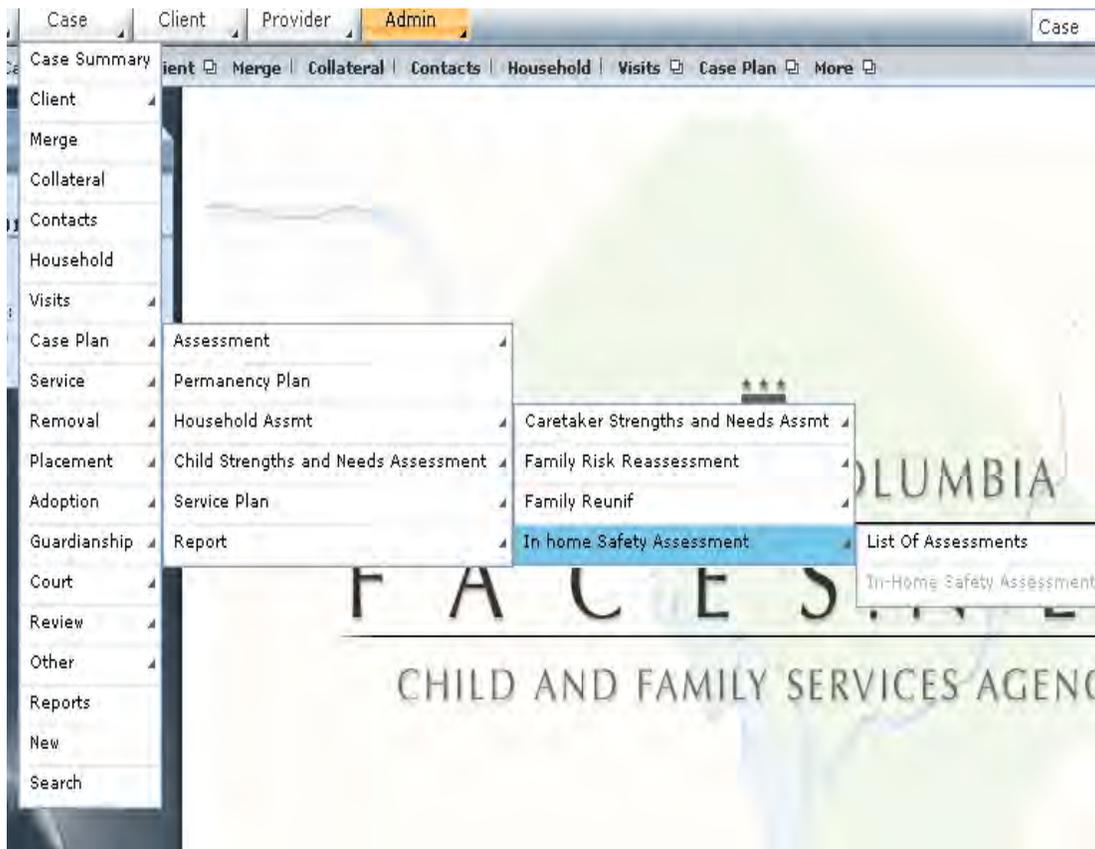


Figure 8.5.1

Step 3: Select the name of the household that will be assessed by highlighting the household's name in the inset grid (see *Figure 8.5.2*).

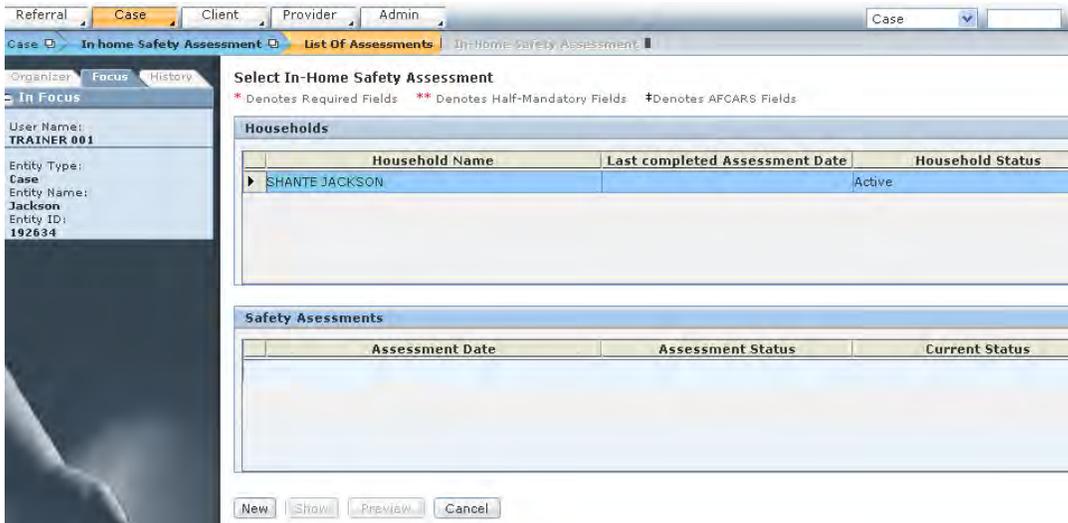


Figure 8.5.2

Step 4: Click **New**. This opens the *In-Home Safety Assessment* (see *Figure 8.5.3*).

Figure 8.5.3

Step 5: Enter the **Assessment Date**.

Step 6: Mark the checkbox next to any of the **Child Vulnerabilities** items that apply.



Note: Child Vulnerabilities items do not affect **Completion Status** or the assessment **Conclusion**.

Referral Case Client Provider Admin Case [Go]

Case In home Safety Assessment List Of Assessments In-Home Safety Assessment

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Select In-Home Safety Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

In-Home Safety Assessment Primary Caretaker: SHANTE JACKSON

Completion Status: []

Assessment Date: 09/01/2008 Household Structure: [] Conclusion: []

Child Vulnerabilities

(These are conditions which impact a child's ability to protect self.) These factors must be considered when assessing safety concerns and when identifying possible services to mitigate safety concerns. Mark all that apply to any child in the household.

Child is age zero to five years Child has serious illness, or physical disability, including medically fragile

Child has developmental disability Child is unable to communicate with caretaker and/ or service provider

Child has mental health/ behavior problem

SECTION 1: SAFETY CONCERNS

Assess household for each of the following safety concerns. Indicate whether currently available information results in reason to believe safety concern is present. Select "yes" for those safety concerns that are present. Select "no" for those safety concerns that are not present.

? 1. Yes No Serious physical harm or injury appears to be inflicted on the child, including injuries resulting from instruments (e.g. cigarettes, hot water, belts, sticks) or injuries due to dangerous acts (e.g. choking, shaking of an infant, cruelty).

? 2. Yes No Caretaker has given an inconsistent or insufficient explanation for the child's serious physical injury.

? 3. Yes No Caretaker appears unwilling or unable to meet the child's immediate special needs (physical, behavioral, or mental health), and failure to do so may result in the child being in immediate danger of serious harm.

? 4. Yes No Caretaker or other person with access to the child has made a credible threat or expresses a credible belief that caretaker's actions may result in serious harm to the child.

Figure 8.5.4

Step 7: Answer “Yes” or “No” to all 14 questions in the Safety Concerns section.

Step 8: Click the question mark (?) icon to display the definition of a question.

Step 9: Click **OK** to close the pop-up definition.



Note:

- As you complete each item, the Completion Status bar at the top will indicate your progression toward completing the assessment.
- For each question you answer, a blue box will appear in this status bar.
- *Figure 8.5.5* shows the completion bar when five of the 14 questions have been answered.

Referral Case Client Provider Admin Case

Case In home Safety Assessment List Of Assessments In-Home Safety Assessment

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Select In-Home Safety Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

In-Home Safety Assessment Primary Caretaker SHANTE JACKSON

Completion Status: [Progress Bar] Incomplete

Assessment Date: 09/01/2008 Household Structure: Household Conclusion:

Child is age zero to five years Child has serious illness, or physical disability, including medically fragile

Child has developmental disability Child is unable to communicate with caretaker and/ or service provider

Child has mental health/ behavior problem

SECTION 1: SAFETY CONCERNS

Assess household for each of the following safety concerns. Indicate whether currently available information results in reason to believe safety concern is present. Select "yes" for those safety concerns that are present. Select "no" for those safety concerns that are not present.

? 1. Yes No Serious physical harm or injury appears to be inflicted on the child, including injuries resulting from instruments (e.g. cigarettes, hot water, belts, sticks) or injuries due to dangerous acts (e.g. choking, shaking of an infant, cruelty).

? 2. Yes No Caretaker has given an inconsistent or insufficient explanation for the child's serious physical injury.

? 3. Yes No Caretaker appears unwilling or unable to meet the child's immediate special needs (physical, behavioral, or mental health), and failure to do so may result in the child being in immediate danger of serious harm.

? 4. Yes No Caretaker or other person with access to the child has made a credible threat or expresses a credible belief that caretaker's actions may result in serious harm to the child.

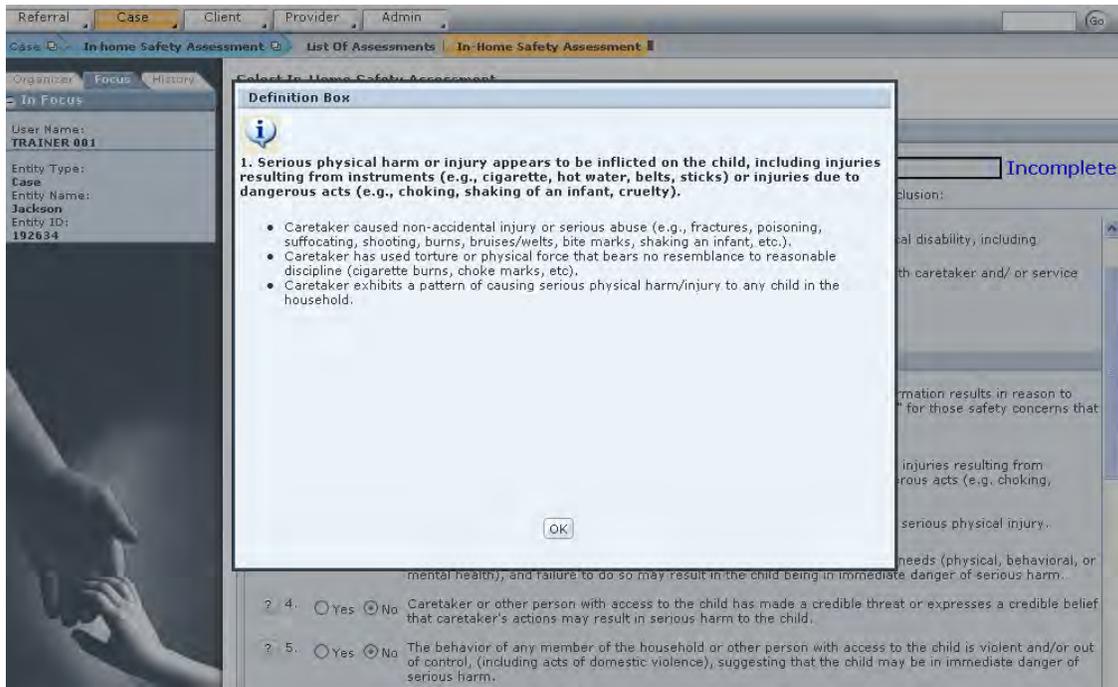
? 5. Yes No The behavior of any member of the household or other person with access to the child is violent and/or out of control, (including acts of domestic violence), suggesting that the child may be in immediate danger of serious harm.

Figure 8.5.5



Note:

- When you click the question mark (?) icon to the left of each question, a pop-up definition box will appear.
- This pop-up box contains the definition for that question from the Protocol Manual.
- *Figure 8.5.6* shows the pop-up definition box for question 1 of the In-Home Safety Assessment.



Note:

- If all 14 Safety Concerns questions are answered “No,” there is no need for safety interventions; therefore, Section 2: Safety Interventions is inactive (see *Figure 8.5.7*).
- In addition to the Safety Interventions section being inactive when there are no safety concerns, Section 3: Safety Documentation and Decision will automatically select “SAFE” as the safety decision (see *Figure 8.5.8*).
- The completion status will still show “Complete.”

Referral Case Client Provider Admin Case [v] [Go]

Case In home Safety Assessment List Of Assessments In-Home Safety Assessment

Organizer Focus History

In Focus

User Name: TRAINER 001
 Entity Type: Case
 Entity Name: Jackson
 Entity ID: 192634

Select In-Home Safety Assessment
 * Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

In-Home Safety Assessment Primary Caretaker: SHANTE JACKSON

Completion Status: [Progress Bar] Complete
 Assessment Date: 09/01/2008 Household Structure: [Icon] Conclusion:

SECTION 2: SAFETY INTERVENTIONS

If one or more safety concerns are present, consider whether safety interventions 1-8 will allow the child to remain in the home for the present time. Mark the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by marking item 9. The case plan must be updated to include the safety plan activities and monitoring.

? 1. Intervention or direct services by worker.
 ? 2. Use of family, neighbors, or other individuals in the community to mitigate safety concern and allow child to remain safely in the home.
 ? 3. Use of Collaboratives, community agencies, or services to mitigate safety concern and allow child to remain safely in the home.
 ? 4. Have the caretaker appropriately protect the child from the alleged maltreater.
 ? 5. Have the alleged maltreater leave the home, either voluntarily or in response to legal action.
 ? 6. Have the non-offending caretaker move to a safe environment with the child.
 ? 7. Legal action planned or initiated; child remains in the home.
 ? 8. Other (specify):

Figure 8.5.7

Entity ID: 192634

? 5. Have the alleged maltreater leave the home, either voluntarily or in response to legal action.
 ? 6. Have the non-offending caretaker move to a safe environment with the child.
 ? 7. Legal action planned or initiated; child remains in the home.
 ? 8. Other (specify):

? 9. Child placed in protective custody because interventions 1-8 do not adequately ensure the child's safety.

SECTION 3: SAFETY DOCUMENTATION AND DECISION

? A. SAFE. No safety concerns are present.
 House is safe. |

? B. IN-HOME SAFETY PLAN. One or more safety concerns are present. Briefly describe the specific safety plan and/or service interventions that will be incorporated into the case plan to address the safety concern(s). |

? C. UNSAFE. One or more safety concerns are present. If the only intervention to ensure safety is continued out-of-home placement, document why other interventions could not be implemented to maintain the child at home at the present time. |

Save Approval Cancel

Figure 8.5.8



Note:

- If at least one of the 14 Safety Concerns questions is answered “Yes,” Section 2: Safety Interventions is active, and must be completed (see *Figure 8.5.9*).
- The completion status will be “Incomplete.”

Referral Case Client Provider Admin Case

Case In home Safety Assessment List Of Assessments In-Home Safety Assessment

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Select In-Home Safety Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields #Denotes AFCARS Fields

In-Home Safety Assessment Primary Caretaker: SHANTE JACKSON

Completion Status: Incomplete

Assessment Date: 09/01/2008 Household Structure: Conclusion:

? 11. Yes No Child sexual abuse/sexual exploitation is suspected, and circumstances suggest that the child may be in immediate danger of serious harm.

? 12. Yes No There is reason to believe that the family will flee and/or the caretaker refuses access to the child in the home or cannot provide the whereabouts of the child.

? 13. Yes No Child is fearful of caretaker, other family members, or other persons living in or with access to the home, or is prone to inconsolable crying, suggesting the child may be in immediate danger of serious harm.

? 14. Yes No Other (describe):

SECTION 2: SAFETY INTERVENTIONS

If one or more safety concerns are present, consider whether safety interventions 1-8 will allow the child to remain in the home for the present time. Mark the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by marking item 9. The case plan must be updated to include the safety plan activities and monitoring.

? 1. Intervention or direct services by worker.

? 2. Use of family, neighbors, or other individuals in the community to mitigate safety concern and allow child to remain safely in the home.

? 3. Use of Collaboratives, community agencies, or services to mitigate safety concern and allow child to remain safely in the home.

? 4. Have the caretaker appropriately protect the child from the alleged maltreater.

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Figure 8.5.9

Step 10: If required, complete **Section 2: Safety Interventions** (see *Figure 8.5.10*).

Referral Case Client Provider Admin Case

Case In home Safety Assessment List Of Assessments In-Home Safety Assessment

Organizer Focus History

In Focus

User Name: TRAINER 001

Entity Type: Case

Entity Name: Jackson

Entity ID: 192634

Select In-Home Safety Assessment

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

In-Home Safety Assessment Primary Caretaker: SHANTE JACKSON

Completion Status: **Complete**

Assessment Date: 09/01/2008 Household Structure: Conclusion:

SECTION 2: SAFETY INTERVENTIONS

If one or more safety concerns are present, consider whether safety interventions 1-8 will allow the child to remain in the home for the present time. Mark the item number for all safety interventions that will be implemented. If there are no available safety interventions that would allow the child to remain in the home, indicate by marking item 9. The case plan must be updated to include the safety plan activities and monitoring.

? 1. Intervention or direct services by worker.

? 2. Use of family, neighbors, or other individuals in the community to mitigate safety concern and allow child to remain safely in the home.

? 3. Use of Collaboratives, community agencies, or services to mitigate safety concern and allow child to remain safely in the home.

? 4. Have the caretaker appropriately protect the child from the alleged maltreater.

? 5. Have the alleged maltreater leave the home, either voluntarily or in response to legal action.

? 6. Have the non-offending caretaker move to a safe environment with the child.

? 7. Legal action planned or initiated; child remains in the home.

? 8. Other (specify):

? 9. Child placed in protective custody because interventions 1-8 do not adequately ensure the child's safety.

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Figure 8.5.10



Note:

- Marking one or more Safety Interventions checkboxes will set the Completion Status to “Complete” (see *Figure 8.5.10*).
- If one or more checkboxes for Safety Interventions questions 1-8 are selected, Section 3: Safety Documentation and Decision will automatically select “IN-HOME SAFETY PLAN” as the safety decision (see *Figure 8.5.11*).

The screenshot shows a software interface for documenting safety interventions and decisions. On the left is a vertical sidebar with the text "Jackson Entity ID: 192634" at the top and "FACES.NET" at the bottom, accompanied by an image of hands. The main area contains a list of safety intervention questions (5-9) with checkboxes. Questions 5 and 7 are checked. Below this is a section titled "SECTION 3: SAFETY DOCUMENTATION AND DECISION" with three radio button options: A. SAFE, B. IN-HOME SAFETY PLAN (which is selected), and C. UNSAFE. Each option has a text area for documentation. At the bottom are "Save", "Approval", and "Cancel" buttons.

Jackson
Entity ID:
192634

FACES.NET

5. Have the alleged maltreater leave the home, either voluntarily or in response to legal action.

6. Have the non-offending caretaker move to a safe environment with the child.

7. Legal action planned or initiated; child remains in the home.

8. Other (specify):

9. Child placed in protective custody because interventions 1-8 do not adequately ensure the child's safety.

SECTION 3: SAFETY DOCUMENTATION AND DECISION

A. SAFE. No safety concerns are present.

B. IN-HOME SAFETY PLAN. One or more safety concerns are present. *Briefly describe the specific safety plan and/or service interventions that will be incorporated into the case plan to address the safety concern(s).*
Will contact community agencies.

C. UNSAFE. One or more safety concerns are present. *If the only intervention to ensure safety is continued out-of-home placement, document why other interventions could not be implemented to maintain the child at home at the present time.*

Save Approval Cancel

Figure 8.5.11



Note: If the checkbox for Safety Interventions question 9 is selected, **Section 3: Safety Documentation and Decision** will automatically select “UNSAFE” as the safety decision (see *Figure 8.5.12*).

Jackson
Entity ID:
192634

FACES.NET

? 5. Have the alleged maltreater leave the home, either voluntarily or in response to legal action.

? 6. Have the non-offending caretaker move to a safe environment with the child.

? 7. Legal action planned or initiated; child remains in the home.

? 8. Other (specify):

? 9. Child placed in protective custody because interventions 1-8 do not adequately ensure the child's safety.

SECTION 3: SAFETY DOCUMENTATION AND DECISION

? A. SAFE. No safety concerns are present.

? B. IN-HOME SAFETY PLAN. One or more safety concerns are present. Briefly describe the specific safety plan and/or service interventions that will be incorporated into the case plan to address the safety concern(s).

? C. UNSAFE. One or more safety concerns are present. If the only intervention to ensure safety is continued out-of-home placement, document why other interventions could not be implemented to maintain the child at home at the present time.

Save Approval Cancel

Figure 8.5.12

Step 11: A safety decision is automatically selected in **Section 3: Safety Documentation and Decision**. Enter narrative in the text box associated with the generated safety decision (see *Figure 8.5.8*, *Figure 8.5.11*, and *Figure 8.5.12*).

Step 12: Click **Save**.



Note: The Approval button becomes active once the completed In-Home Safety assessment has been saved (see *Figure 8.5.13*).

Jackson
Entity ID:
192634

(These are conditions which impact a child's ability to protect self.) These factors must be considered when assessing safety concerns and when identifying possible services to mitigate safety concerns. Mark all that apply to any child in the household.

Child is age zero to five years

Child has serious illness, or physical disability, including medically fragile

Child has developmental disability

Child is unable to communicate with caretaker and/ or service provider

Child has mental health/ behavior problem

SECTION 1: SAFETY CONCERNS

Assess household for each of the following safety concerns. Indicate whether currently available information results in reason to believe safety concern is present. Select "yes" for those safety concerns that are present. Select "no" for those safety concerns that are not present.

? 1. Yes No Serious physical harm or injury appears to be inflicted on the child, including injuries resulting from instruments (e.g. cigarettes, hot water, belts, sticks) or injuries due to dangerous acts (e.g. choking, shaking of an infant, cruelty).

? 2. Yes No Caretaker has given an inconsistent or insufficient explanation for the child's serious physical injury.

? 3. Yes No Caretaker appears unwilling or unable to meet the child's immediate special needs (physical, behavioral, or mental health), and failure to do so may result in the child being in immediate danger of serious harm.

? 4. Yes No Caretaker or other person with access to the child has made a credible threat or expresses a credible belief that caretaker's actions may result in serious harm to the child.

? 5. Yes No The behavior of any member of the household or other person with access to the child is violent and/or out of control, (including acts of domestic violence), suggesting that the child may be in immediate danger of serious harm.

? 6. Yes No Any member of the household or other person with access to the child describes or acts toward the child in predominantly or extremely negative terms and/or has extremely unrealistic expectations of the child that would suggest the child may be in immediate danger of serious harm.

? 7. Yes No Drug and/or alcohol use by any member of the household or other person with access to the child suggests that the child may be in immediate danger of serious harm.

? 8. Yes No Behavior(s) of any member of the household or any person with access to the child is symptomatic of mental or physical illness or disability and the child may be in immediate danger of serious harm.

Save Approval Cancel

Figure 8.5.13

- Step 13: Click **Approval** to submit the assessment for supervisor approval.
- Step 14: In the **Approval** pop-up window, select **Approving Worker** from the drop-down menu (see *Figure 8.5.14*).
- Step 15: Click **OK** at the bottom of the **Approval** pop-up window.

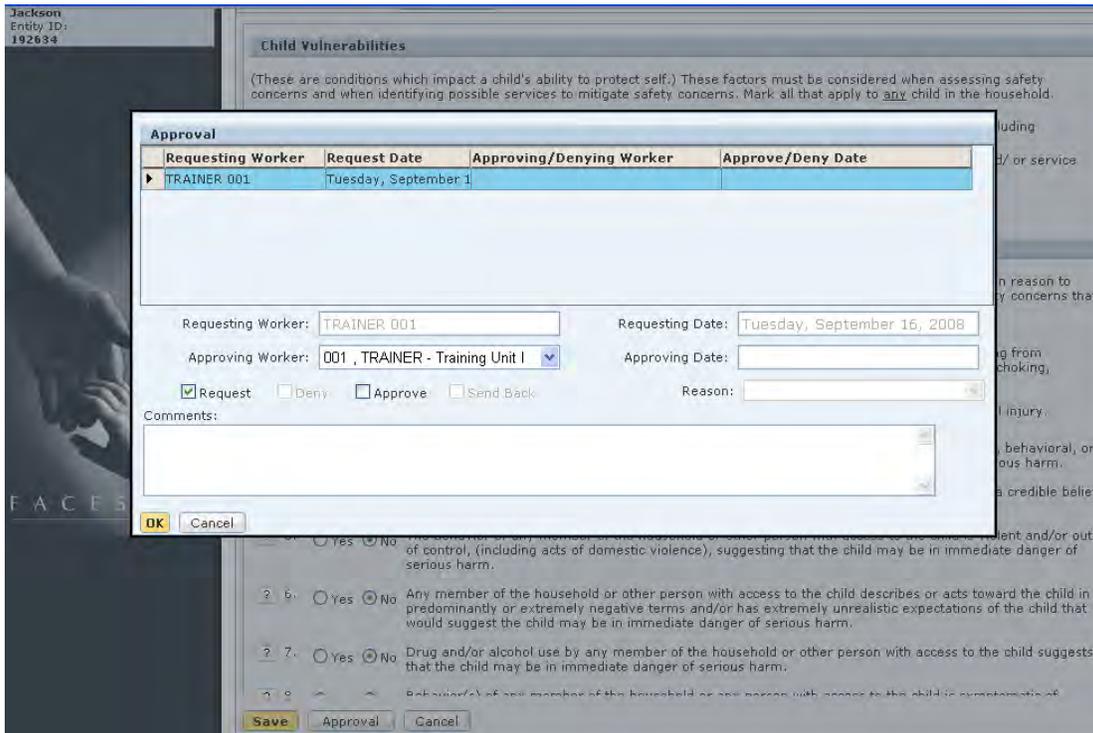


Figure 8.5.14



Note:

- If more than one household needs assessing, navigate back to the **Select In-Home Safety Assessment** screen.
- When you return to the **Select In-Home Safety Assessment** screen after assessing the household, the Assessment Status column will show “Complete.” As you complete the In-Home Safety Assessment for each household as needed, this “Complete” status will appear for each household with a completed assessment.
- The **Preview** button allows a document to be viewed and printed.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has been approved**, then the Current Status column will show “Non-Applicable.” Otherwise, the column will remain blank. Then you can create new assessment(s) for that amended household.
- If you add or remove a member(s) from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has not yet been approved**, then the assessment’s Current Status will show “Incomplete.” Then you can amend answers on the current assessment(s).
- If you end date the entire household from the **Household Manager** screen or remove a household member from **Client General Information** screen and the assessment(s) **has not yet been approved**, then the Assessment Status column will show “Invalid.” Then you can create a new household and new assessments.

Notes

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SECTION 9: CASE PLAN AND SERVICES

Performance Objectives

In this Section, you gain confidence in your ability to:

- Create a Service Plan.
- Create a Permanency Plan.
- Create a Case Plan.



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Practice Overview

Permanency, Case Plan and Services

Case plans serve as the essential roadmap to services and positive outcomes for both children and families. Case planning and permanency planning are interrelated, as case plans outline the actions required to achieve permanency goals. Comprehensive case planning focuses on the child's safety and permanence. When all those involved with the child have the opportunity to participate, a plan can be created that will match the needs of children and families and build on their strengths to support safety and help children achieve permanence.

There are five permanency goals in place for foster care children within CFSA to include:

- Reunification;
- Guardianship;
- Adoption;
- Alternative Planned Permanent Living Arrangement - APPLA (i.e. independent living);
or
- Legal Custody.

Permanency Goals

With input from family teams, you will determine appropriate permanency goals for all children in out-of-home care to support the safe movement of children to permanency. You shall present a recommendation that would be well supported by evidence to the Court. If the Court makes a decision you believe is contrary to the best interests of the child, including safety, permanence, and well being, then you should raise the issue to your supervisor and to the appropriate Agency legal staff. Appropriate permanency goals should always be chosen with the child's best interest as the guiding principle.

There are various types of permanency goals to include:

- **Reunification:** Intensive Reunification with birth/legal parents, within twelve (12) months for children who have been in out-of-home placement for less than six (6) months. When reunification is the goal, CFSA and its contracted agencies should work diligently to identify the obstacles to reunification, develop a strategy to resolve those issues, and maintain familial connections as appropriate. The case plan should give parents the opportunity to build on their strengths and learn needed skills to provide for safe, nurturing homes.

The goal of reunification is to be established when a child initially enters foster care, except under the following conditions:

1. The death(s) of the birth/legal parent(s);
2. The relinquishment of the child by the birth/legal parent(s);
3. The birth/legal parents have consented to another form of permanency (consent to a specific adoption/legal guardianship, etc.) for the child;

4. Birth/legal parents cannot be located after a diligent search, not to exceed three months initiated as soon as the child enters care; and
5. Birth/legal -parents have been found guilty of repeated serious abuse or neglect of the child or the child's siblings such that termination of parental rights is appropriate.

You must first ensure that reasonable efforts are made to prevent foster care placements.

- **Guardianship:** Kin may choose to adopt related children, but they may also have legitimate reasons for not adopting. In such cases, permanent guardianship—a judicially created relationship in which certain parental rights and responsibilities are placed in the permanent guardian, while the parent retains other parental rights and responsibilities—should be considered as a permanency goal. The agency may assign a permanency goal of legal custody or guardianship with a permanent caretaker to a child under the age of twelve (12) for whom it has not made adoption efforts if:
 1. The child is placed with a relative;
 2. The relative is willing to assume long-term responsibility for the child but the relative has legitimate reasons for not adopting the child; and
 3. It is in the child's best interest to remain in the home of the relative rather than be considered for adoption by another person(s).

The goal of legal guardianship with a permanent caretaker should be established only after the following steps have occurred:

- a) A permanency plan for the child has been formulated and documented.
- b) All services have been offered to the family to foster reunification, to no avail, and in the particular circumstances, it is certain that the child will never be returned home.
- c) A diligent search for any missing parent has been conducted.
- d) All known appropriate alternative relatives on both maternal and paternal sides of the child's family have been notified, interviewed and given first option to become legal guardians before an unrelated caretaker is considered.

- **Adoption (by Kin):** When reunification is not in a child's best interest, adoption by kin should be considered as a permanency goal. Permanency with kin is a means of facilitating positive familial connections for children. Adoption requires the termination of the existing parent and child relationship, and places parental rights and responsibilities with the adoptive parent;
 (Non-Kin Adoption): Adoption by non-kin is an alternative permanency option for when the above permanency goals are not in the child's best interests. When a non-kin adoption is a child's permanency goal, the child's foster family should be considered as an adoptive resource first.
- **Alternative Planned Permanent Living Arrangement:** APPLA is another permanency option when the child is being prepared for independence. Eligibility for this and other independent living programs is based on appropriate federal guidelines. CKL is responsible for conducting a battery of assessments and developing services regarding the youth's vocational, daily living, and academic skills and needs to better transition the child from child welfare to an adult service system.

- **Legal Custody:** The child's worker (supported by his/her supervisor) has an ongoing responsibility to assure that the child's permanency goal is appropriate or to initiate change if it is not; the child's services and placement are appropriate and are meeting the child's specific needs; the parents and other appropriate family members are receiving the specific services mandated by the family case plan and that they are progressing towards the specific objectives identified in the plan; and the provision of services is coordinated to ensure the delivery of the mandated services in those cases in which there are multiple service providers.

Case Plans

It is the practice of the Child and Family Services Agency that within thirty (30) days of the child's entry into foster care, and every 180 days thereafter, the initial case plan must be formulated. The purpose of the case plan is to foster mutuality, and it is your obligation to involve the family, child, and significant others in the planning process to the greatest extent possible. It is also your responsibility to document all efforts made to include the birth parents in the planning process when their signatures do not appear on the case plan.

You should consistently maintain the necessary documentation/evidence to assure that permanency plans are the best fit for the child(ren) and families in the care of the Agency.

Family Case Plan. The case plan must be fully implemented within 30 days from the date of report to CFSA for services. You will initiate a case plan for each child who is the subject of a maltreatment report. You will specify the services that address the needs of each member of the family. This is to be updated every six months thereafter. You and the child's parents will jointly develop a case plan that includes the following:

- Safety Assessment;
- Family Risk Assessment;
- Service Plan and;
- Permanency Plan.

Case plans require supervisory approval.

Child Case Plan. A child case plan is created for all clients in out-of-home care with a permanency goal of guardianship, adoption, APPLA, or legal custody. If the child has a permanency goal of Reunification, only a family case plan must be created.

For every child whose goal changes, including adoption, guardianship, legal custody, etc., the case plan shall be updated accordingly.

Because children deserve timely permanency, case plans should be reviewed and updated on a regular basis. Case plans document services offered and progress made toward the primary permanency goal. When the primary permanency goal is no longer appropriate, the case plan should be updated to reflect pursuit of the concurrent goal.

Services (Service Plan)

Appropriate services, including all services identified in a child or family's case plan will be offered and children/families will be assisted to use services, to support child safety, permanence and well-being. Services that are identified on the service plan will be documented in the Service Agreement section of the case plan upon printing.

You may initiate services on behalf of the children and families whom you serve. Below are a few examples:

Day Care Services. CFSA clients receive priority access to the day care services provided through the District of Columbia Day Care Services. This day care may be provided in a child development center, family day care home, or the child's own home. It also includes before-and-after-school programs as well as summer camp.

Day care services ensure direct care, supervision, and development guidance of a child between the ages of six (6) weeks and fourteen (14) years for various lengths of time throughout the day. These services are used to enable parents to obtain training or continuous employment, and they offer alternatives in other situations where day care is in the best interest of the child.

Homemaker Services. A homemaker may provide any of the following services to alleviate a family crisis:

- Auxiliary Service - a supportive in-home assistance to an adult family member with unusually heavy burden due to illness or disability;
- Supportive Service - the shared or total housekeeping and/or child care responsibilities;
- Teaching Service - services to help parents improve their ability regarding housekeeping, care of the ill or disabled, child-rearing, or basic child care;
- Family budgeting and nutrition assistance; and Evaluative and Protective Services-services with the goal of helping CFSA evaluate the level of care given to a child and assisting the family to remedy identified deficits; such services are offered to enable a child to remain at home while permanent plans are being made.

Adoption and Safe Families Act (ASFA) Timelines

Action	Date	Cite
Removal of child from the home	Day 1	NA
Entry into foster care	The earlier of-- (i) the date of the first judicial finding that the child is abused/neglected; or (ii) 60 days after the date the child is removed from the home	42 USC § 675(5)(F) D.C. Official Code § 4-1301.02(9)
Permanency hearing	Within 30 days after the determination that reasonable efforts to reunify the family are not required	42 USC §671(a)(15)(E)(i) D.C. Official Code §§ 4-1301.09a(e)(1), 16-2323(a)(3)
File TPR pleading	If, despite reasonable efforts, parent could not be located for the fact-finding hearing and during the period from child's removal from the home to the fact-finding hearing.	D.C. Official Code § 16-2354(b)(2)
File TPR pleading	If court determined child was abandoned, parent committed certain crimes, or child was subject of intentional and severe mental abuse	D.C. Official Code § 16-2354(b)(3)(B), (C) and (D)
Periodic review	At least once every 6 months	42 USC § 675(5)(B)
Periodic review	At least once every 6 months, while child is in an out-of-home placement, unless there was a permanency hearing in the past 6 months	D.C. Official Code § 16-2323(a)(1)
File TPR pleading	May be filed at least 6 months after the fact-finding when the child is in the court-ordered custody of a department, agency, institution, or person other than the parent	D.C. Official Code § 16-2354(b)(1)
Permanency hearing	No later than 12 months after the child entered foster care	42 USC § 675(5)(C) D.C. Official Code § 16-2323(a)(4)
Permanency hearing	At least every 6 months after the initial permanency hearing	D.C. Official Code § 16-2323(a)(4)
Periodic review	At least once every year if the child is not in an out-of-home placement	D.C. Official Code § 16-2323(a)(2)
Time-limited family reunification services	Provided during the 15 months after the child entered foster care	42 USC § 629a(a)(7)(A)
File TPR pleading	Child has been in foster care under the responsibility of the State for 15 of the most recent 22 months	42 USC § 675(5)(E))
File TPR	Child has been in court-ordered custody under the	D.C. Official Code §

Action	Date	Cite
pleading	responsibility of the District for 15 of the most recent 22 months	16-2354(b)(3)(A)
Permanency hearing	At least every 12 months after initial permanency hearing	42 USC § 675(5)(C)

For further reference to case and permanency plan requirements see the electronic form of the CFSA's Policy and Procedures through the [FACES.NET](#) link on the CFSA Internet/Intranet site.



FACES.NET Guide

The previous section focused on agency practice revolving around permanency, case plans and services. This section will guide you through the relevant FACES.NET screens.

The Service Plan screen is where the primary case planning activities take place. The Service Plan incorporates the needs identified on the Child and Caretaker Strengths and Needs Assessment as domain areas which are then assigned objectives, measures, client tasks, plan services and provider tasks. The service plan is made up of three screens:

- Service Plan List;
- Service Plan Tree View;
- Task View.

In addition to these primary screens the Service Plan Tree View screen is split into two sections. The left side of the screen will display a hierarchical view of the client service plan. You can modify objectives, measures, client tasks, plan services and plan service tasks on the right side of the screen when the appropriate element is selected.

The section on the left displays a list of all the clients in the household(s). There is a plus (+) next to each client and, upon clicking, will expand to show all the domains attached to that client. If you click on the plus (+) on a domain, it will expand to show all the objectives attached to the domain. If you click on the plus (+) next to an objective, it will expand to show all the measures, client tasks, and provider services attached to that objective.

The section on the right is initially blank with Save and Cancel buttons. When you expand the client and select a domain, that domain specific information will display in this section. Then you can modify the domain information and save it by clicking on the Save button. This section also displays information for objectives, client tasks, measures, and provider services whenever each of these items is selected by you on the left screen.

In order for a service plan to be approved, the following conditions need to be met;

- Each domain must have at least one objective;
- Each objective must have at least one client task and one measure attached to it.

Case Plan and Services

When a case is created in FACES.NET it is transferred to the appropriate ongoing unit for management. You and your supervisor are able to review all on-going case management activities and use FACES.NET to record, create/update case plans, and log services the family will receive.

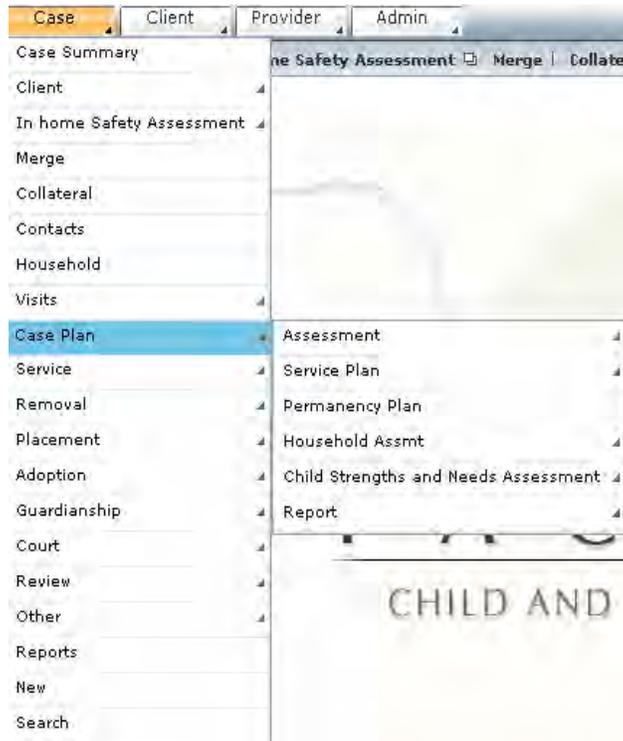


Figure 9.1

As mentioned previously in the section, there are three main components of the case plan: the Assessment, Service Plan, and Permanency Plan. All three must be completed before a case plan report can be compiled. The following FACES.NET Scenario describes this process in detail.

Current policy requires case plans to be completed within 30 days of the child entering into the Agency's care and then afterwards every 180 days (six months). Management reports track completion of case plans, and any plans older than six months are considered expired.

Service Plan – Treatment Plan

The Caretaker and relevant Child Strengths and Needs Assessments must be completed before creating a Service Plan. Service Plans must be completed every 90 days. Therefore, the next evaluation date defaults to 90 days from the creation date.

The List of Service Plans screen displays a list of service plans that have been previously completed or started. You can select one of these previously created plans in order to view or edit it. In addition, you are able to begin an entirely new service plan.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Case Plan**, click **Service Plan** and then **List of Service Plans**.
- Step 2: Click the **New** button on the Select Treatment Plan screen.
- Step 3: Select **Family Service Plan (or Child Service Plan)** and the **Service Plan Assessment Date**.
- Step 4: Click **Select** beneath the Service Plan Participants box.
A pop-up box of a list of households will appear.
- Step 5: Choose **Household: For example: SHANTE JACKSON**.
- Step 6: Click **OK**.
- Step 7: Click **Show**.

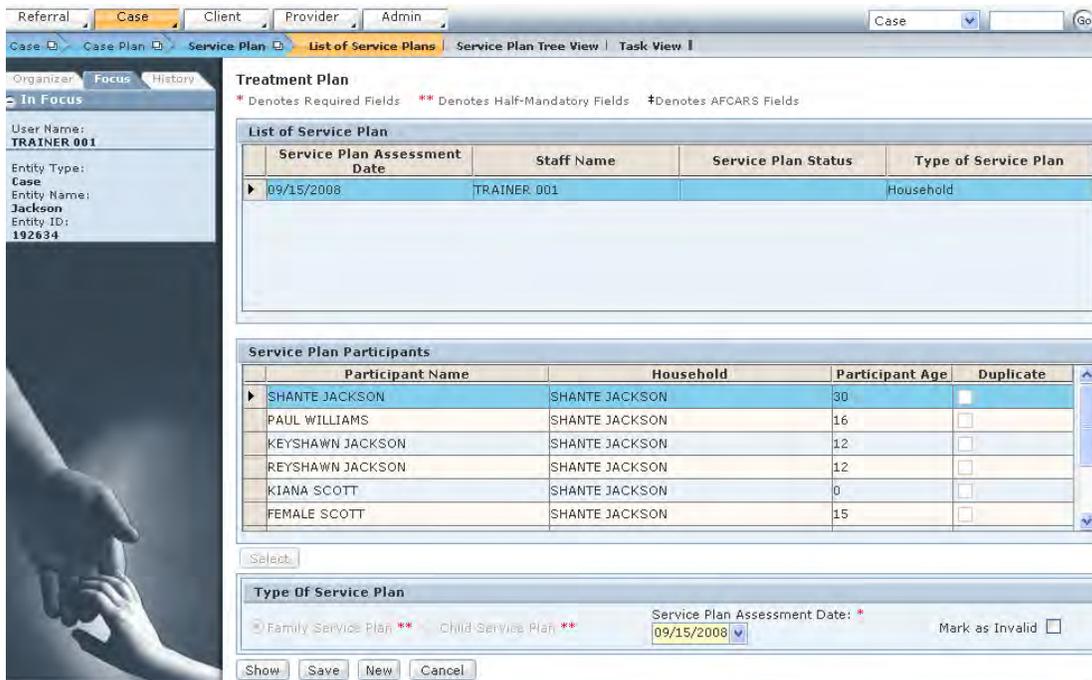


Figure 9.2

- Step 8: Click **Service Plan Tree View** breadcrumb.

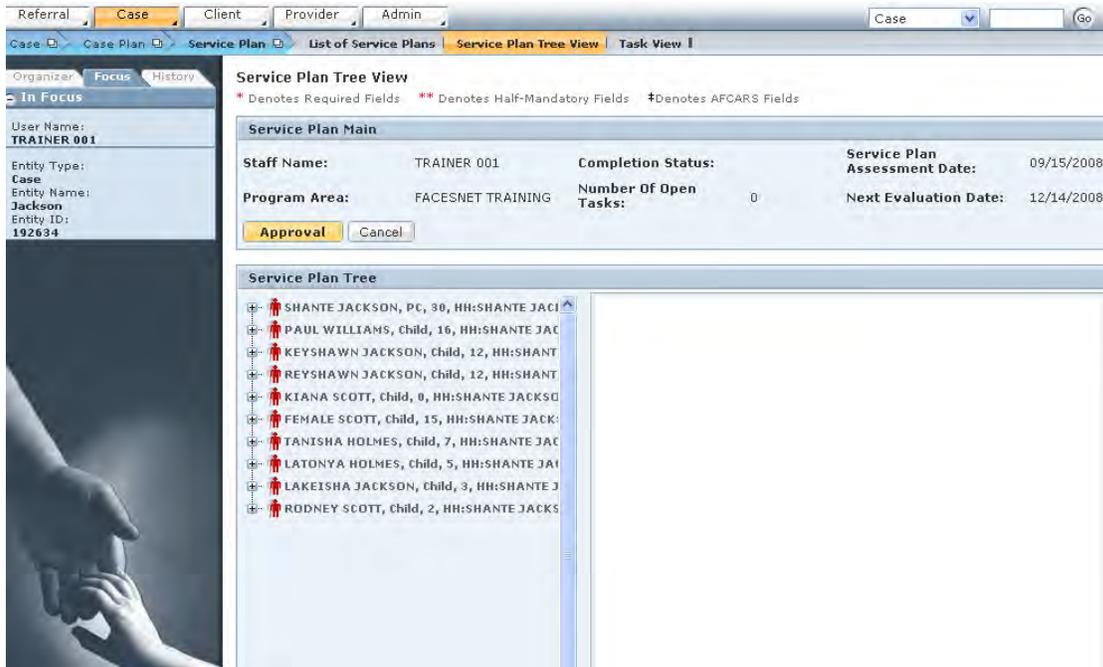


Figure 9.3



Note:

- You can create and have open only one service plan for each household.
- You can create multiple domains, objectives, and tasks.

Add/Modify Domain

The first sub-screen in the service plan hierarchy is the domain. This screen displays the domains for the selected client. You can navigate to this sub-screen by expanding client in the service plan view.

When you select one of the domains from this sub-screen, then that domain information is displayed in another split screen on the right. For a domain that comes from strengths and needs assessments, the source field displays “Strengths and Needs” and is inactive.

A domain called **New Domain** will also be visible. For a newly created domain, the source field is active but does not show “Strengths and Needs” as a dropdown option.

Steps Include:

- Step 1: Click a domain to modify or click **New Domain**. *This is located under the Service Plan Tree section.*
- Step 2: Choose the **Domain, Source, and Objective**. *This is located under the Objective Section on the sub-screen to the right.*
- Step 3: Enter the **Begin Date**.
- Step 4: Click **Save**.

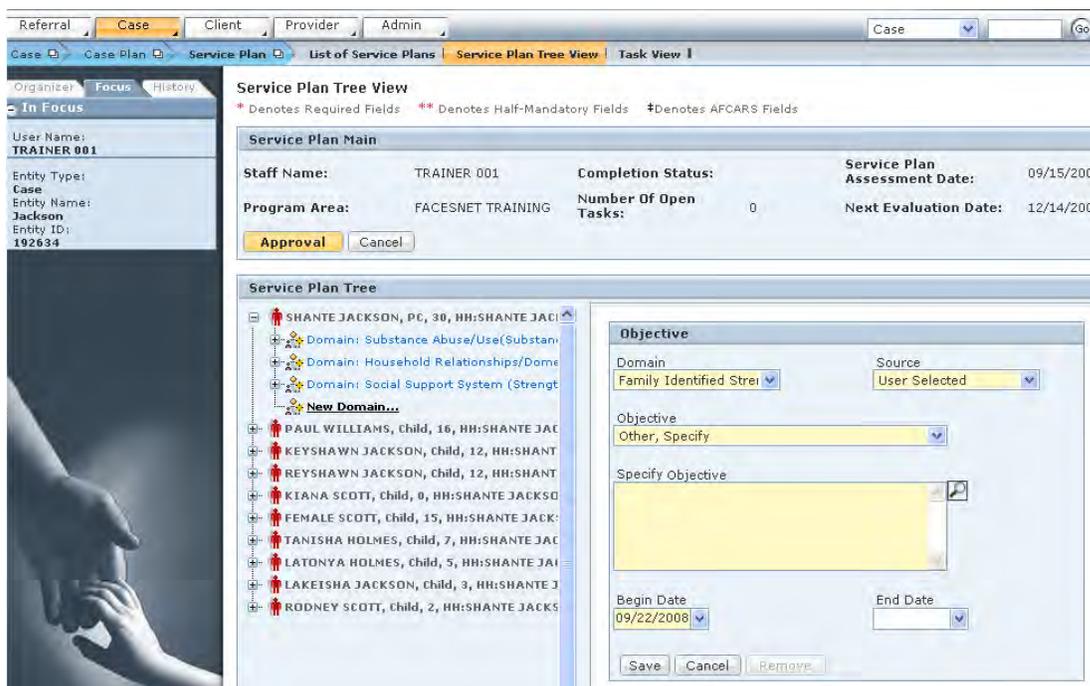


Figure 9.4

Add/Modify Objective

The second sub-screen found in the tree hierarchy is the objective. This sub-screen displays the objectives for the selected domain for the selected client. You can navigate to this sub-screen by first expanding client and then expanding domain in the service plan view.

An objective called **New Objective** will also be visible. When you select one of the objectives from this sub-screen, then that objective information is displayed in another split screen on the right. There must be at least one open objective for every open domain in order to send the service plan for approval.

Steps Include:

- Step 1: Click the plus (+) next to the selected **Domain**.
- Step 2: Click on an objective to modify or click **New Objective** for its sub-screen to appear on the right. Domain and Source will be auto-populated.
- Step 3: Select **Objective**.
- Step 4: Fill-in **Specify Objective** if “**Other, Specify**” was chosen for **Objective**. *This is located in the Objective section on the sub-screen to the right.*
- Step 5: Enter the **Begin Date**.
- Step 6: Click **Save**.

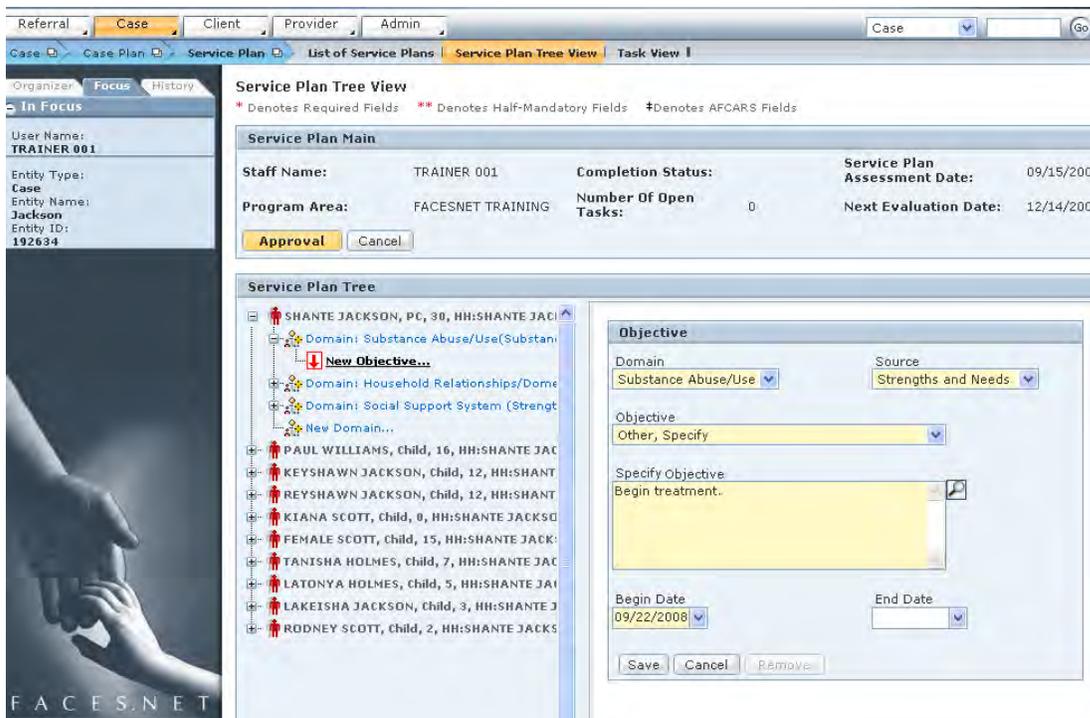


Figure 9.5



Note:

- The Plan Services screen does NOT generate payments to providers (the Service Log, Caretaker and Enter screens do.)
- Services listed are transferred over to the Service Log screen. However, to document enrollment and begin provider payments you must go to the Service log screen and activate the services. *See the segment on recording services later in this Section.*

Add/Modify Measure

The third sub-screen found in the tree hierarchy is measure. This sub-screen displays the measures for the selected objective for the selected client and domain. You can navigate to this sub-screen by first expanding client and then by expanding domain and objective respectively in the service plan view.

When you select one of the measures from this sub-screen, then that measure information is displayed in another split screen on the right. There must be at least one measure for every open objective in order to send the service plan for approval. You can change that measure and click on the “Save” button to save the information. If you select “Other” from the measure dropdown, then the specify measure text area becomes active.

A measure called **New Measure** will also be visible.

Steps Include:

- Step 1: Click the plus (+) next to **Objective**.
- Step 2: Click the plus (+) next to **Measure**.
- Step 3: Select **Measure** from sub-screen on the right.
- Step 4: Fill-in **Specify Measure** if “**Other, Specify**” was chosen for above Measure field.
- Step 5: Click **Save**.

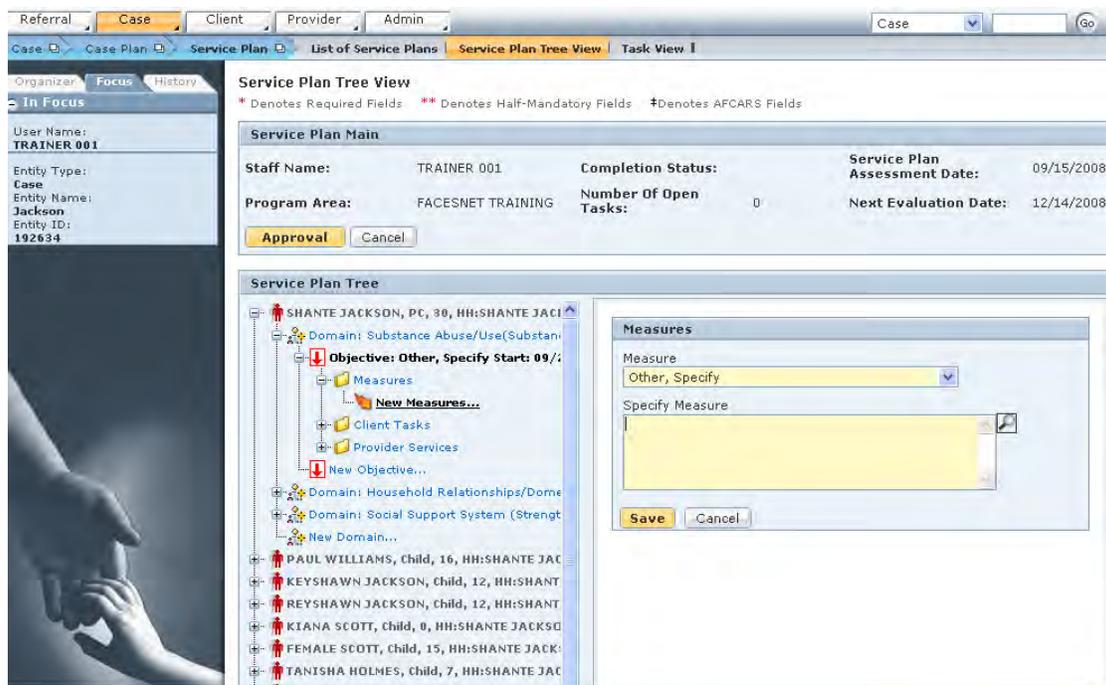


Figure 9.6

Add/Modify Client Task

The fourth sub-screen found in the tree hierarchy is client task. This sub-screen displays the client tasks for the selected objective for the selected client and domain. You can navigate to this sub-screen by first expanding client and then by expanding domain, objective, and client tasks respectively in the service plan view.

When you select one of the client tasks from this sub-screen, then that client task information is displayed in another split screen on the right. There must be at least one open client task for every open objective in order to send the service plan for approval. You can end date the task if it is completed. You can also write progress notes on the task and write the name of any other person responsible for completing the task. If you select the task “Other,” then the specify task area box becomes active.

A client task called **New Client Task** will also be visible.

Steps Include:

- Step 1: Click the plus (+) next to **Objective**.
- Step 2: Click the plus (+) next to **Client Tasks**.
- Step 3: Select one of the tasks to modify or select **New Client Tasks**.
- Step 4: Enter information in the **Specify Task text box**, if “Other, Specify” is selected.

Step 5: Click **Save**.

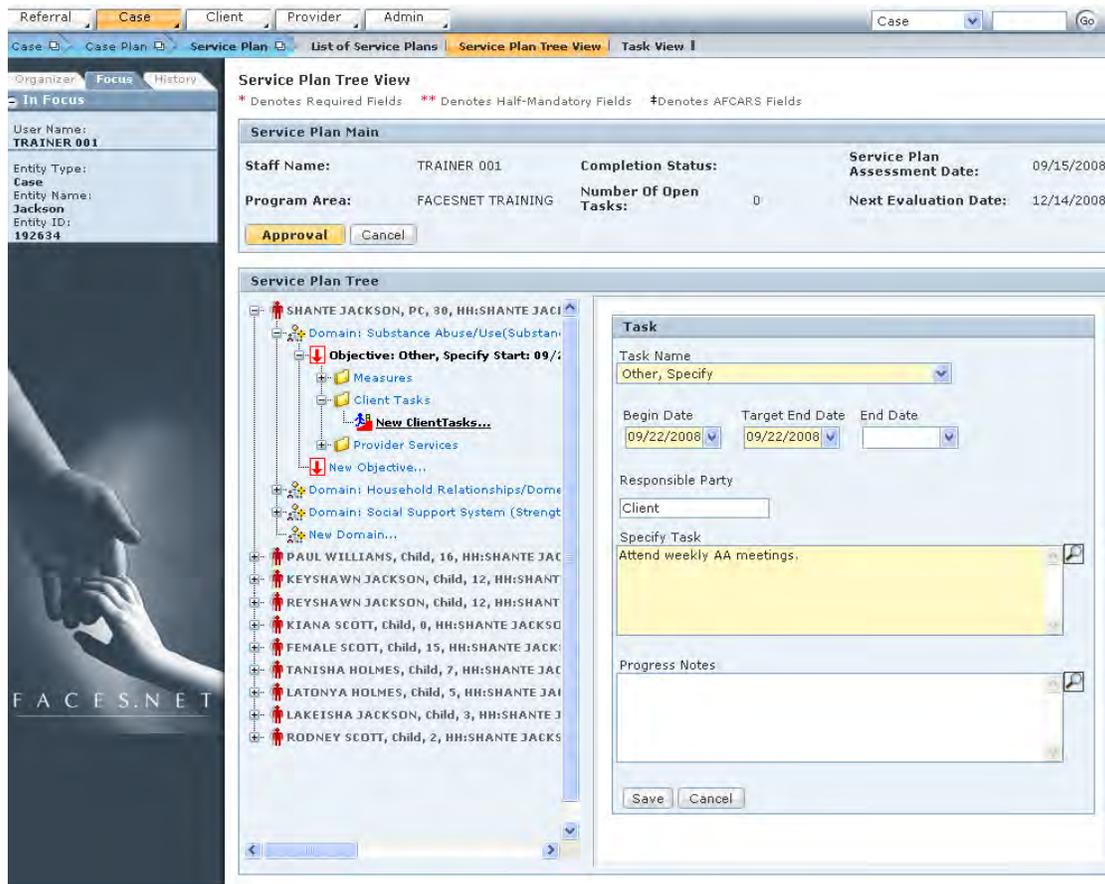


Figure 9.7

Add/Modify Provider Service

The fifth sub-screen found in the tree hierarchy is provider services. This sub-screen displays the provider service for the selected objective for the selected client and domain. You can navigate to this sub-screen by first expanding client and then by expanding domain and objective respectively in the service plan view.

When you select one of the provider services from this sub-screen, then that provider service information is displayed in another split screen on the right. The provider service screens have been incorporated into the tree view and are able to record, end date and add progress notes. End date is necessary for closing out a provider service that is no longer being offered to the client. Progress notes allow you to fill in narrative information about how a service is being fulfilled.

A provider service called **New Provider Service** will also be visible.

Steps Include:

- Step 1: Click the plus (+) next to **Objective**.
- Step 2: Click the plus (+) next to **Provider Services**.
- Step 3: Select one of the provider services to modify or select **New Provider Services**.
- Step 4: Select Type of Resource from the **Provider Services** tab. *This is located in the Provider Tasks Entry sub screen.*

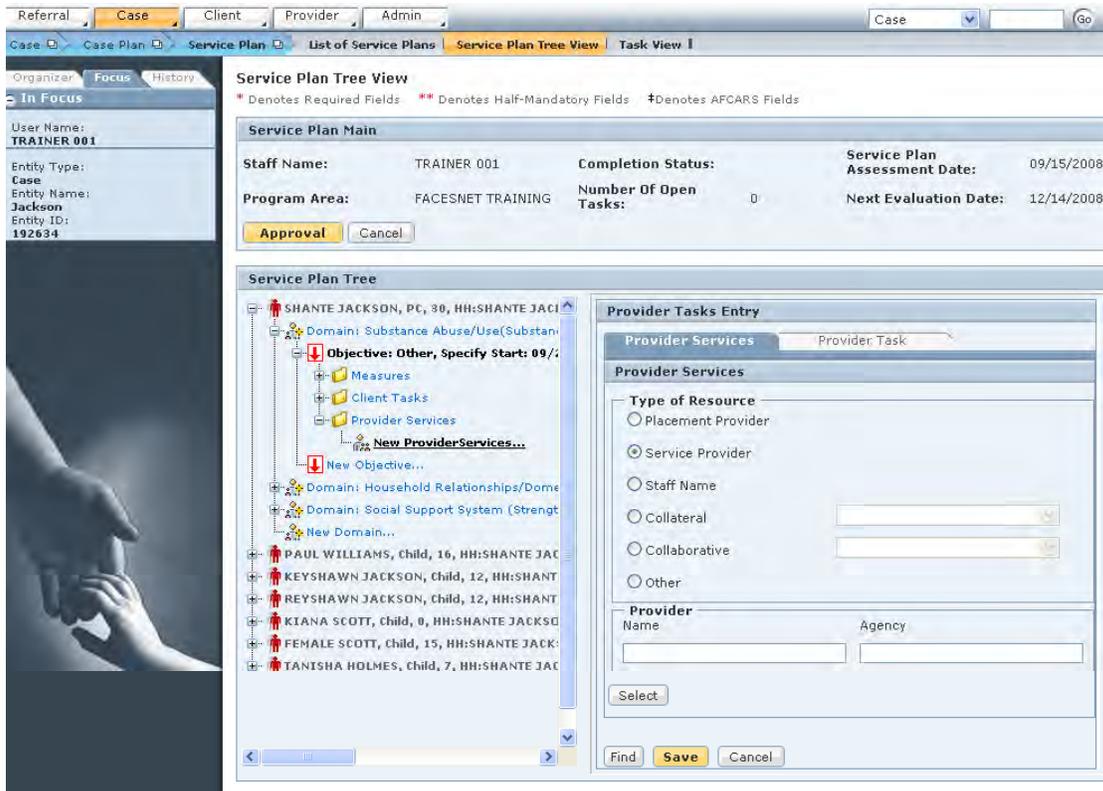


Figure 9.8



Note: You can type in the name of the provider after selecting a service.

Step 5: Click **Save**.

Step 6: Click on the **Provider Task tab** located in Provider Tasks Entry sub screen.

Step 7: Click **Select** to choose the Provider Task.

Step 8: Click **Save**.

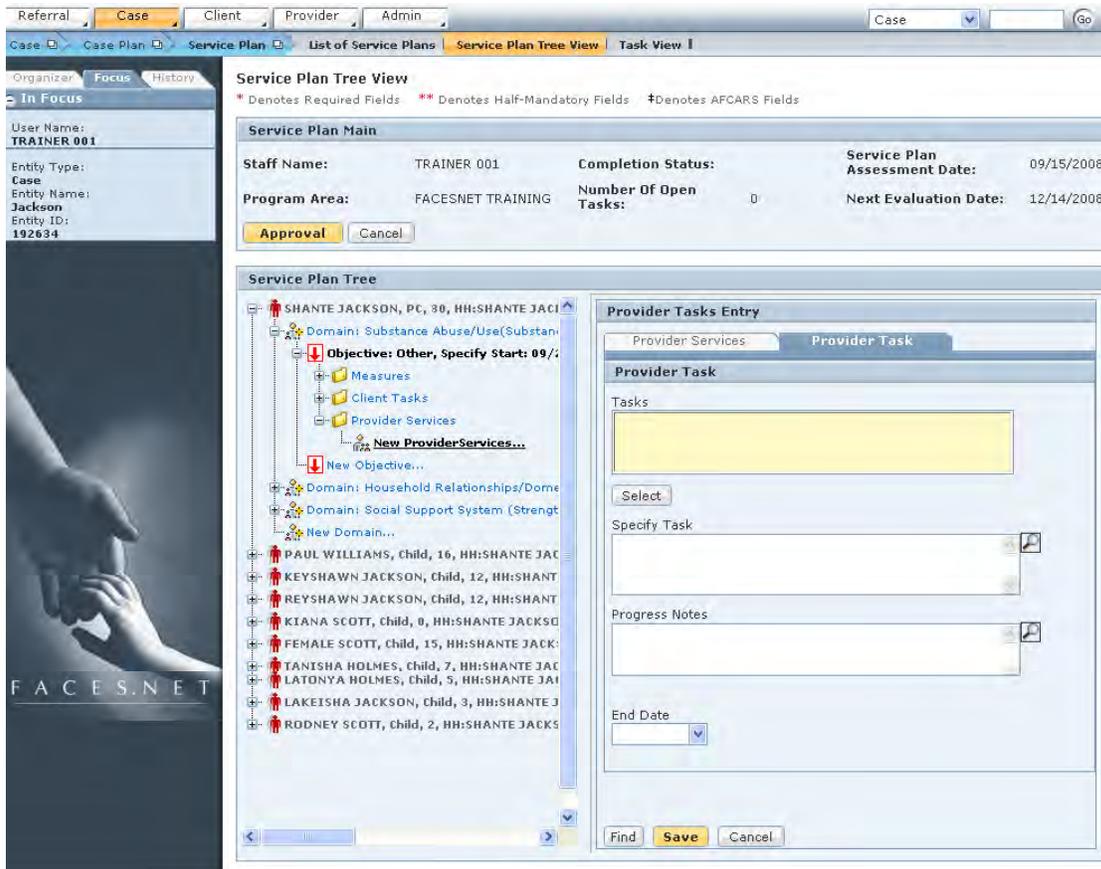


Figure 9.9

Task View

The Task View screen displays all client tasks for all clients in the service plan. You can also end date tasks and write progress notes for tasks in this screen. The header displays worker's name, program area, service plan date, number of open tasks, and next evaluation date. All these fields are display only fields. The remainder of the task view screen is split into three sections.

The client section displays a list of all the clients in the household(s). You can select a client and the Task View section shows all the client tasks attached to that client. Each client task has a plus (+) next to it. The Task View will also expand to show the domain, objective, start date, and end date of the client task.

In the Edit Task section, you can add progress notes and end-date a selected task.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Case Plan**, click **Service Plan** and then **Task View**.
- Step 2: Select **Task** to edit.
- Step 3: Enter **Progress Notes**.
- Step 4: Click **Save**.

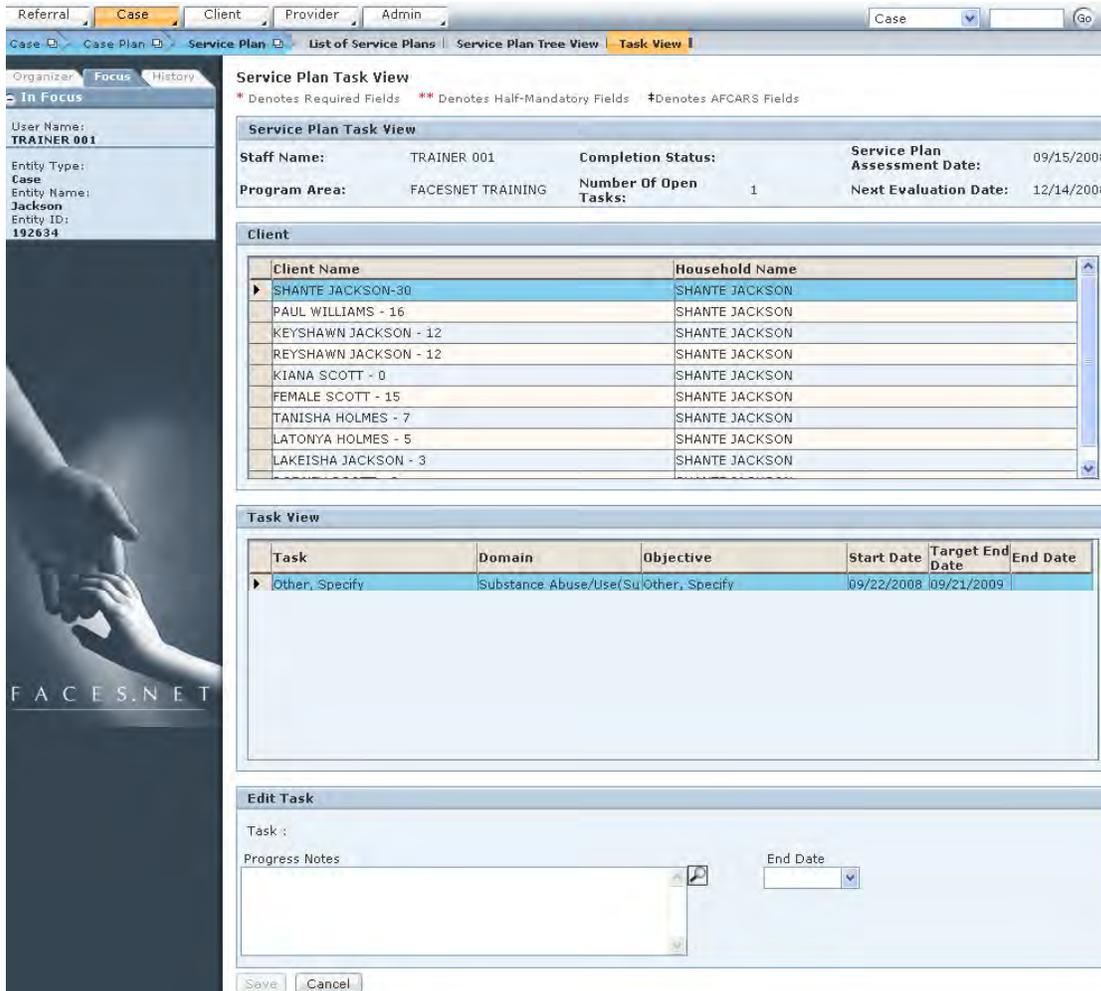


Figure 9.10

Record a Permanency Plan

Permanency plans are recorded separately from case plans; however, a child’s permanency goal will populate in the Permanency Goal field from the Child Case Plan if a Child Case Plan was completed. Use the following steps to record a new permanency plan.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Case Plan**, and click **Permanency Plan**.

Figure 9.11

- Step 2: Select the appropriate child, and then click the **New Plan** button on the **Permanency Plan Selection** window.
- Step 3: Select Permanency Goal.
- Step 4: Select Permanency Goal Origin.
- Step 5: Enter all other applicable information on each tab.
- Step 6: Click **Save**.



Note: The Recommended Permanency Goal field will populate with the same field from the SDM Reunification Assessment.

Case Plan Report

The Safety Plan, SDM Assessments, and Service Plan have now been completed. Let's tie the three elements together along with the Permanency Plan into a Case Plan report. The Case Plan Report is located under the **Case Plan** track.

After you first select the Service Plan, and depending upon the Service Plan you have selected, the other selection boxes will be active or inactive. The Service Plan selection box will group all service plans with common child(ren). You will only be able to select one service plan or one group of service plans for each case plan report.

Selection Box Criteria for pulling the assessments into Case Plan Report

Type of Household	Service Plan	Risk Reassessment	In-home safety assessment	Reunification assessment
All children in home	Enabled and Required	Enabled and Required	Enabled	Disabled
At least one child in Home	Enabled and Required	Disabled	Enabled	Disabled
At least one child out of home with goal other than Reunification	Enabled and Required	Disabled	Enabled	Disabled
At least one child out of home with goal of Reunification	Enabled and Required	Disabled	Enabled	Enabled and Required

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Case Plan**, and then click **Report**.

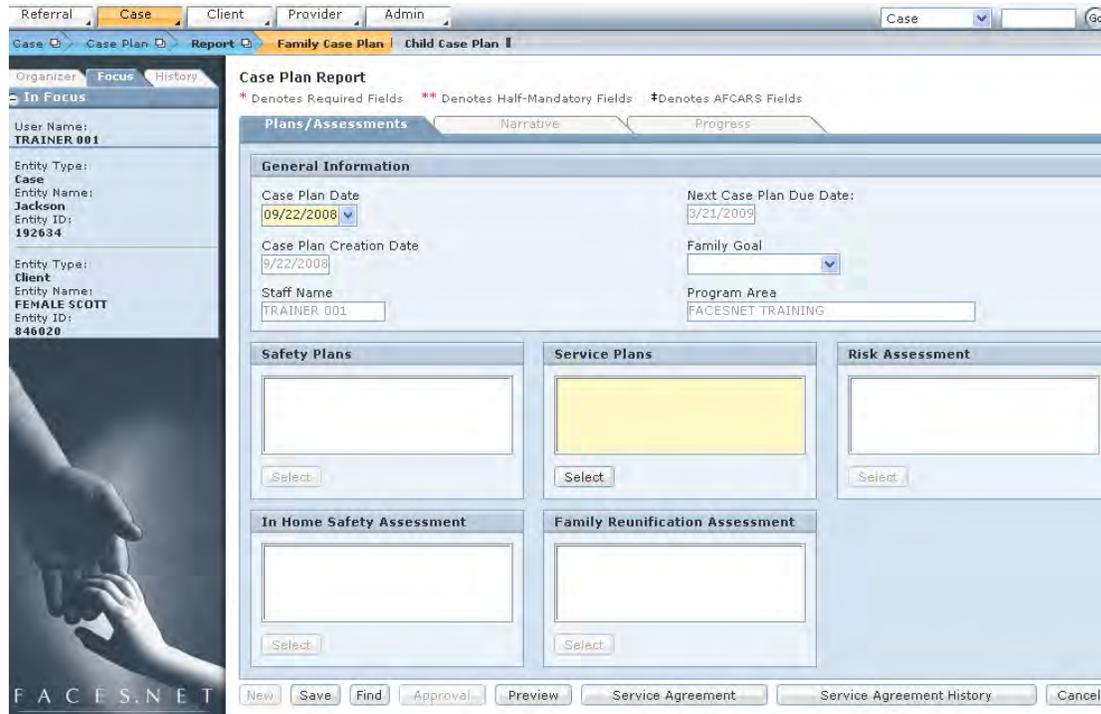


Figure 9.12

Step 2: Choose the Report Type (Family Case Plan or Child Case Plan).

Step 3: Click **New**.

Step 4: Choose the Service Plan(s), and Assessments you want to include in this Case Plan Report.

Step 5: If creating a Family Case Plan, pick the Family Goal.

Step 6: Click on the **Narrative** tab.

Step 7: Enter information in the Case Plan **Narrative** section.

Step 8: Click on the **Progress** tab.

Step 9: Enter information on the **Progress** screen.

Step 10: Click **Save**.

Step 11: Click **Approval** to send this to the supervisor for approval.



Note:

- The Service Agreement button will show all open tasks.
- The Service Agreement History button will show all closed tasks.



Child And Family Services
400 6th Street SW
Washington, DC 20024
FAMILY CASE PLAN

CASE INFORMATION

Case Name : Family # : Date Case Opened |

Date of Plan : Date Of Previous Plan :

Agency : Family Worker :

Family Worker's Supervisor

HOUSEHOLD INFORMATION: SHANTE JACKSON

Primary Caretaker: SHANTE JACKSON Client #: 646015 Date Of Birth: 01/01/1978
 Secondary Caretaker: Client #: Date Of Birth:
 Address : Home Phone: (-) Work Phone: (-)

Name	Role	Date Of Birth	Living Arrangement
PAUL, WILLIAMS	Child	02/01/1992	
PAUL, WILLIAMS	Child	02/01/1992	
KEYSHAWN, JACKSON	Child	04/01/1996	
KEYSHAWN, JACKSON	Child	04/01/1996	
REYSHAWN, JACKSON	Child	04/01/1996	
REYSHAWN, JACKSON	Child	04/01/1996	
REYSHAWN, JACKSON	Child	04/01/1996	
KIANA, SCOTT	Child	04/04/2008	
KIANA, SCOTT	Child	04/04/2008	
FEMALE, SCOTT	Child	03/01/1993	
FEMALE, SCOTT	Child	03/01/1993	
TANISHA, HOLMES	Child	05/01/2001	
TANISHA, HOLMES	Child	05/01/2001	
LATONYA, HOLMES	Child	06/01/2003	
LATONYA, HOLMES	Child	06/01/2003	
LAKESHIA, JACKSON	Child	07/01/2005	
LAKESHIA, JACKSON	Child	07/01/2005	
RODNEY, SCOTT	Child	08/01/2006	
RODNEY, SCOTT	Child	08/01/2006	
DANTE, HOLMES	Child	09/02/1975	

VISITATION PLAN WITH PARENT/GUARDIAN'S SCHEDULES

Participant	Supervision Type	Location	Frequency	Start Date	End Date

Page 1 9/22/2008

Figure 9.13



Note:

- Remember to make sure that the case plan date displayed on this screen is correct before submitting or approving a case plan. If the date is incorrect, you will not receive credit for the case plan.
- When you create a new service plan, all open tasks will populate the new service plan.



Point to Remember:
All Service Plans must be approved by a supervisor.

Notes

SECTION 10: ADMINISTRATIVE REVIEW

Performance Objectives

In this Section, you gain confidence in your ability to:

- Prepare for the Administrative Review
- Schedule and Re-Schedule the Administrative Review
- Notify Participants in an Administrative Review



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Practice Overview

Overview and Purpose of the Administrative Review

Federal and District Law mandate the Administrative Review Program. The Office of Administrative Review must hold administrative reviews for all children in CFSA's legal custody within 180 days of their entrance into CFSA custody and every 180 days thereafter. These reviews are necessary to ensure good casework practice and efficient permanency planning for each child, in compliance with federal funding regulations. Administrative reviews are open to the participation of significant parties related to the case. These expected participants are marked by the Social Worker on the Notify screen within the Administrative Review module of FACES.NET.

These persons include:

1. The child's parents, if parental rights have not been relinquished or terminated.
2. Parents may be accompanied by counsel or a personal representative.
3. A child age 14 or older.
4. Collaterals in the case.
5. Placement Provider
6. The child's Guardian ad Litem.
7. The child's foster parent, residential care provider, or other caregiver.
8. The child's Court Appointed Special Advocate (CASA) if applicable.
9. A representative from the Court's Social Services Division for "Special Dispositional Hearings" held on relinquished children.



Note:

- Younger children may attend if the Social Worker believes that the child's presence would be beneficial;
- If the child does not attend, the Social Worker is to communicate the review's issues or findings to the child in an age-appropriate manner, within five working days of the Review;
- A reviewer may specifically request the participation of a child who lives more than 50 miles away; and
- A child who is severely handicapped may attend the review, and if he/she is unable to sign the case plan, the parent, caregiver, Social Worker, or Guardian-ad-Litem will be asked to sign for the child.

Certain staff must attend reviews, including:

1. The Family Social Worker for the case;
2. The child's Social Worker, if different from the Family Worker;
3. The contract Social Worker, where applicable.

The attendance of other staff is optional. They include:

1. The Supervisor of the Child Social Worker;
2. Program Managers;
3. A representative of CFSA Court Liaison Office;
4. A representative of the Foster Parent Support or Contract Monitoring Programs;
5. The Adoption recruitment worker.

As a Social Worker, you will not be able to create the Administrative Reviews, but this will be handled by an OCP worker.

Information Pertinent to Review

During the course of the review, a variety of documents, including the case plan, will be examined to determine and assess the permanency goal and associated case activities. The primary tool used during the administrative review is the case plan. The case plan must be updated within 90 days of the scheduled review date. The case plan is to be signed by all appropriate parties, as listed on the Case Plan Report. In addition, other pertinent materials that may not be in FACES.NET must be submitted to the Office of Administrative Review at least five (5) working days prior to the review date.

Scope of the Review

The administrative review assesses a wide range of activity undertaken on behalf of the child and family. In particular, the administrative review will address:

1. The child's legal status.
2. The child's permanency goal.
3. The current case plans for the child and family.
4. The extent to which all parties have complied with the case plan in an effort to meet the goals described.
5. The involvement of parents and/or providers in developing the case plan and the case evaluation process.
6. The child's continuing placement in substitute care.
7. The adequacy of child's placement, and the kinds of services that are needed to support the caregiver and the child.
8. The progress made toward alleviating the circumstances that caused placement or CFSA involvement.
9. The adequacy of services provided to the child.
10. The adequacy of services provided to the child's parents when the goal is reunification.
11. The target date for the child's return home, adoption, legal guardianship or other permanency alternative.
12. The child's safety/risk factors and barriers toward goal achievement.

The administrative review will also assess the availability of supports and services that promote the well being of children exiting the child welfare system. Reviewers will also identify barriers that are preventing adequate services or goal achievement, and which require resolution by CFSA or another government entity.

For further reference to administrative review requirements see the electronic form of the CFSA's Policy and Procedures through the Help menu of the FACES.NET system.



FACES.NET Guide

The previous section reviewed agency policies around the Administrative Review information; this section will go through all the relevant FACES.NET screens.

Schedule the Administrative Review

The Administrative Review Scheduling screen is used to track the reviews that are due, rescheduled and completed. Admin reviews must be scheduled every six months (180 days). This process helps the social worker to manage the reviews that are due, rescheduled and completed. Access the Administrative Review Scheduling screen through the **Case** → **Review** → **Admin Review** drop-down menu. Most functions in these screens are restricted to Administrative Review workers.

Initial Administrative Review Scheduled by FACES.NET

The initial Administrative Review is scheduled from the Custody screen. When a client is given the CFSA custody status of Administrative Hold, Commitment, Shelter Care, Relinquishment and Voluntary Placement an initial review is created and will appear as a scheduled review in the review select window. However, the review will not have a time or reviewer until an assignment has been made to a specific person.

The **Notify** screen is used to notify participants who will be in attendance at the Administrative Review. Some of the participants are automatically marked. To notify others the social worker can select to notify the individuals. Once all participants are marked to notify a letter is generated 30 days prior to the review to inform the individuals to attend the scheduled Administrative Review.

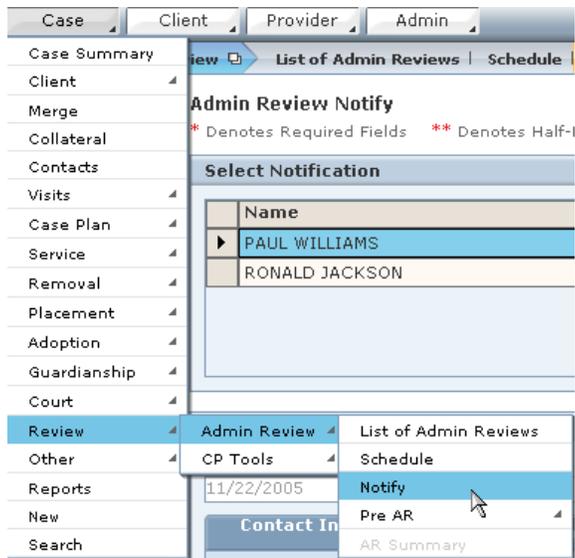


Figure 10.1



Note:

- Administrative Review staff can access all A/R Scheduling information. Social workers can only access A/R scheduling for cases that they have Family responsibility.
- FACES.NET will not let you schedule a review on a weekend or holiday.

Schedule Review

THIS SECTION IS FOR ADMINISTRATIVE REVIEW WORKERS ONLY.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Review, Admin Review**, and click **List of Reviews**.

Step 2: Click **New**.

Step 3: Select a client and click **Show**.

Step 4: Select whether or not it is a **Pre-AR** review and whom the **Reviewer** is.

Step 5: Enter the relevant times, locations and times.

Step 6: Click **Save**.

Admin Review Schedule

* Denotes Required Fields ** Denotes Half-Mandatory Fields #Denotes AFCARS Fields

Schedule Activity

Date	Start Time	Reviewer	Status	Reason
08/03/2007	9:00 AM	TRAIN 01	Scheduled	

Review Information

Pre - AR* Yes No

Type* Initial Review

Reviewer* TRAIN 01

Client* FEMALE SCOTT
KEYSHAWN JACKSON
TANISHA HOLMES

Date* 8/3/2007 Start Time* 9:00 AM End Time* 10:00 AM

Location* 400 6th Street, SW

Room No.* 2167

Status* Scheduled

Buttons: New Save Cancel

Figure 10.2

Rescheduling a Review

THIS SECTION IS FOR ADMINISTRATIVE REVIEW WORKERS ONLY.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Reviews, Admin Review**, and click **List of Admin Reviews** to display the list of reviews.
- Step 2: Select the Review to be rescheduled and click **Show**.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin PPW Case [Go]

Case Review Admin Review List of Admin Reviews Schedule Notify Pre AR AR Summary

Organizer Focus History
In Focus
User Name: ADMIN TRAINER
Entity Type: Case
Entity Name: JACKSON
Entity ID: 192557

Admin Review Schedule
* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Schedule Activity

Date	Start Time	Reviewer	Status	Reason
08/06/2007	9:00 AM	TRAIN 01	Scheduled	Reunification

Review Information

Pre - AR* Yes No Type* Initial Review Reviewer* TRAIN 01

Clients* FEMALE SCOTT
KEYSHAWN JACKSON
TANISHA HOLMES

Date* 8/6/2007 Start Time* 9:00 AM End Time* 10:00 AM

Location* 400 6th Street, SW

Room No.* 2167 If Other, Specify

Status* Rescheduled Reason* Reunification If Other, Specify

New Save Cancel

Figure 10.3

- Step 3: The **Status** drop-down should automatically read **Reschedule**.
- Step 4: Select the **Reason** from the pick list.
- Step 5: Enter alternative dates or times.
- Step 6: Click the **Save** button.

The reschedule or cancellation request is sent to the Supervisor for approval. After the supervisor has given approval, a second tier approval is sent to the AR supervisor. Two of the dates must be within 30 days before or after the original date the Administrative Review was scheduled. The newly scheduled date is then entered. The screen then becomes read-only and the new date replaced the previously scheduled date.



Note:

- Ensure that you have the correct address entered on the Client/Demo/Address screen so that the participants selected on the notification screen will receive their notification letters in a timely manner.
- As a Social Worker you will not be able to create an Administrative Review, but instead a worker in the Office of Clinical Practice will create this record.

Administrative Review Summary

This screen is used to record the results of an Administrative Review.



Points to Remember:
After completing a review, fill out the summary information and complete the review on the scheduling screen. Once the summary screen is approved by the supervisor the status of that review is changed to completed. The reviewer is responsible for rescheduling the next review 180 days out.

Steps Include:

- Step 1: Place the cursor over **Case, Reviews, Admin Review**, then click **List of Admin Reviews** to display the list of reviews.
- Step 2: Select the Review on which you will enter a summary.
- Step 3: Click the **AR Summary** button.
- Step 4: Select the client from the pick list.
- Step 5: Select the reviewer from the pick list.
- Step 6: Enter the **Review Date**.
- Step 7: Enter the **Review Details**.
- Step 8: Click **Save**.
- Step 9: Click the **Approval** button to send this to the supervisor for approval.



Note:

- Ensure that you have the correct address entered on the Client/Demo/Address screen so that the participants selected on the notification screen will receive their notification letters in a timely manner.
- As a Social Worker you will not be able to create an Administrative Review Summary, but instead a worker in the Office of Clinical Practice will create this record.

Notifying Participants

All participants of an Administrative Review must be notified of the review. This section will describe the steps to accomplish this process.

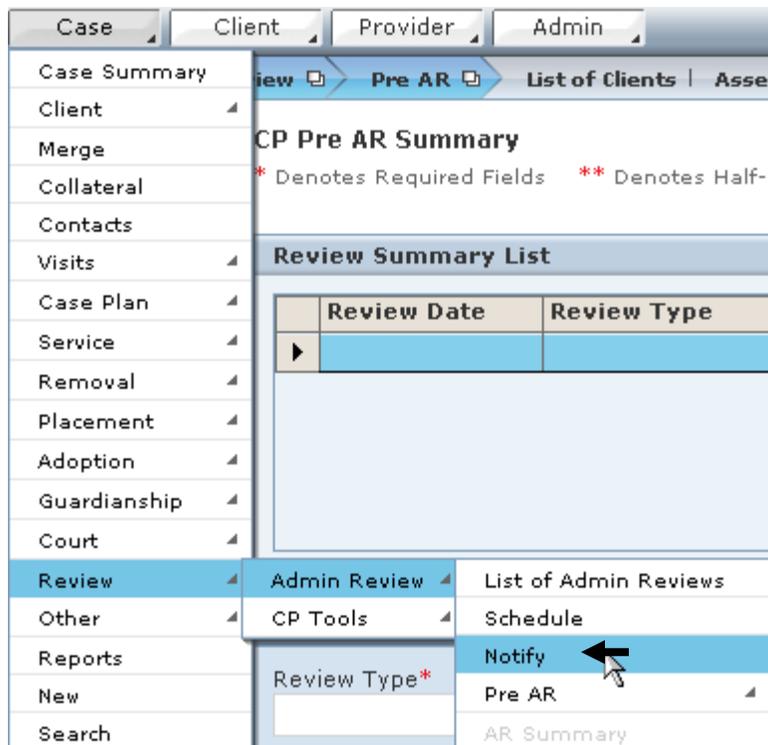


Figure 10.4

FACES.NET Scenario

The Administrative Review has been scheduled for both Keyshawn and Reyshawn Jackson. FACES.NET automatically mark some participants to notify, and the social worker will mark all others for notification. For those who are to be notified, FACES.NET will generate a letter to send to those participants 30 days prior to the review to inform the individuals to attend the Administrative Review session.

Admin Review Notify

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Review**, and click **Admin Review**.
- Step 2: Click **Notify** and enter all pertinent information on the Notify screen.
- Step 3: Select to **Notify** or **Do Not Notify** for a participant.

Admin Review Notify

* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Name	Role	Notification	Renotify	Notification Address
PAUL WILLIAMS	Client	Notify	<input type="checkbox"/>	Permanent Home
RONALD JACKSON	Provider		<input type="checkbox"/>	Address

Notification Details

Updated Date: 11/22/2005 Updated By: ASIMON Review Date: 04/10/2006

Contact Information

Notification Address Type: Permanent Home

Start Date: 11/8/2005 End Date:

Notification Address: 1254 EDGEFIELD Terrace NE
Apartment T105 Prince George's County MD
WASHINGTON, District of Columbia 20000-

Notification Status

Notify Do Not Notify

Renotify

Phone Type:

Phone Number: Extn.:

Buttons: Save Preview Cancel

Figure 10.5

- Step 4: Click **Save**.



Note:

Here are a few reminders to help you prepare for your administrative review:

- Make arrangements for children ages 10 & up to be present at the review.
- Remember to invite all relevant persons to the review including their biological parents, foster parent(s), therapists, school personnel, etc.
- Take advantage of our extended hours. We are available to conduct administrative reviews during day and evening hours.
- Consult with all involved parties first, then schedule your review for the time most convenient time. Contact your Administrative Review Specialist for further assistance.
- Double-check the names of all participants and their addresses to ensure accuracy in FACES.
- End date individuals in the collateral screen, if they are no longer involved in the case.
- Bring a signed case plan with you at the time of the review.

Notes

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SECTION 11: YOUTH SERVICES

Performance Objectives

In this Section, you gain confidence in your ability to:

- Locate Keys for Life Information
- Record Keys for Life Information



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Practice Overview

CFSA offers unique services to teenage wards in order to meet their special needs; to help them and their foster parents to consider adoption; to re-institute communication and/or reshape relationships with biological families; and to prepare them for independence, as appropriate.

For older youth who will be unable to return home and for whom adoptions is not a goal, an Alternative Planned Permanent Living Arrangement (APPLA) is needed. Services for teens with the goal of APPLA, focuses on assisting teens between the ages of 15 and 21 years old, achieve success in independent living. The Center of Keys for life (CKL) is a part of the Office of Youth Development (OYD) and work closely with teens in foster care to master the skills and knowledge necessary to achieve self-sufficiency and independence.

The social worker is to make a special effort to plan with and for teens as they move from childhood to adulthood. This is a transition that does not occur naturally or quickly. During this period of care, it is critical to help these young people to learn how to plan and accept responsibility for themselves, and it is the social worker's responsibility to develop steps that will enable the teenager to gradually work toward independence.

For teenagers, ages 15 ½ to 17, social workers must review and revise their case plans, to develop and update a youth ITILP to aggressively focus on preparing them for independent living, and case closure by age 21 (twenty-one). Accordingly, each social worker is required to meet with each teen upon turning fifteen and a half to develop a service contract. Under the service contract, the social worker shall assist the teen in developing personal goals, and implementing steps to achieve these goals. The teen shall also agree to fulfill the steps outlined by the social worker. The social worker shall inform the teen that continuing to receive Agency services is contingent upon the teen's adherence to the service contract.

For teens who are 18 years or older the social worker may consider seeking termination of the commitment, if it is in their best interest to seek termination of their commitment, unless they are either:

- Disabled; or
- in an educational program (including high school, college, or vocational training).

For further reference to youth service or office of youth development requirements see the electronic form of the CFSA's Policy and Procedures through the CFSA intranet.



FACES.NET Guide

The previous segment focused on agency practice revolving teen wards of the Agency and the responsibility of the social worker in preparing the teen for adulthood. Reference has been made to services that the teens would receive in working with CKL or the Office of Youth Development. This section will guide you through the relevant FACES.NET screens.

FACES.NET Scenario

In the Jackson case, Paul's goal becomes **APPLA** (Independence). Paul Williams is referred for teen services. He completes a Life Skills Assessment and attends a Life Skills Training session. Approximately 3 weeks after his training session, Paul runs away from his placement provider. He returns 10 days later.

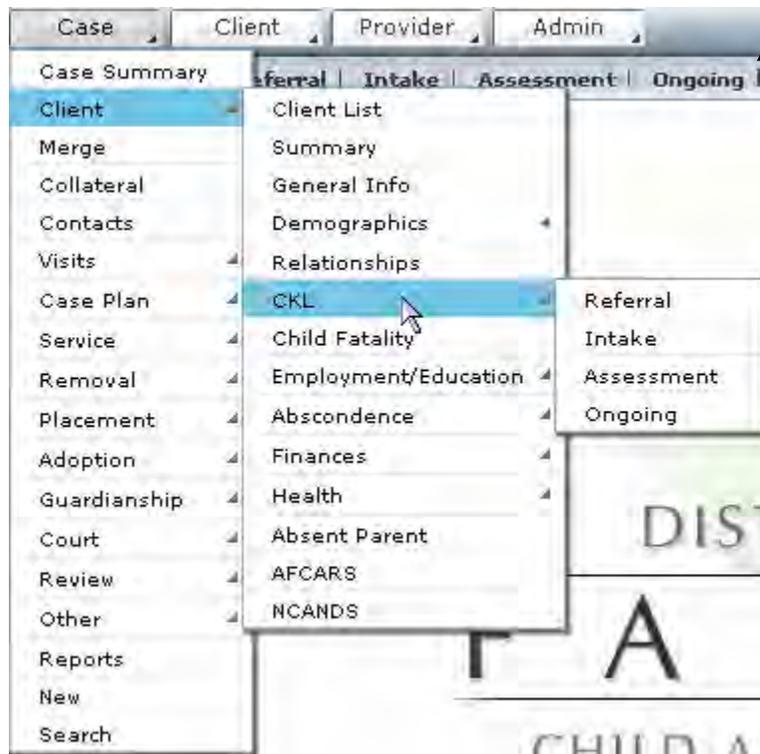


Figure 11.1

Keys for Life – Referral

The Center of Keys for Life is a unit at CFSA that focuses on assisting youth (15 years or older, in the care and custody of CFSA, and with permanency goal of independent living) with goals of independent living strategies.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Client**, and click **List of Clients**.

Step 2: Select Paul and click **Show**.

Step 3: Click the **CKL (Center of Keys for Life)** button.

Step 4: Click the **Referral** button.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin PPW Case [v] [Go]

Case Client CKL Referral Intake Assessment Ongoing

Organizer Focus History

In Focus

User Name:
ADMIN TRAINER

Entity Type:
Case

Entity Name:
JACKSON

Entity ID:
192557

Entity Type:
Client

Entity Name:
PAUL WILLIAMS

Entity ID:
845173

CKL Referral Forms

* Denotes Required Fields ** Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Referral Information

Referral Date* 3/19/2007 Social Worker ADMIN TRAINER Creation Date Supervisor ADMIN, T.

Last Updated Date Last Updated By

Demographics

Client ID 845173 Client Name PAUL WILLIAMS Gender Male SSN DOB 11/01/1989 Date of Commitment

School Current Grade Level Educational Status Educational Performance

Client is a Teen Mother No

Placement and Court Information

Placement Address Placement Type

Name of Foster Parent Name of Placement Manager Placement Manager Phone

Contract Agency Agency Phone

Last Court Date Judge Guardian ad Litem GAL Phone

Social History

Social History* Reason for Referral (Prioritize Service Needs)*

Save Find Approval Preview Cancel



Figure 11.2

Step 5: Enter the **Referral Date**, **Social History** and the **Reason for Referral**.

Step 6: Click **Save**.

Step 7: Send the request for Approval to your supervisor by clicking on the **Approval** button.



Points to Remember:

The social worker name on the referral will default to the name of the person logged into FACES.NET. To change the name of worker who actually referred the client to CKL, use the **Find** button on the bottom of the screen.



Note:

- You must have the Disposition order committing the child before referring the child to CKL.
- The child must be 15 years or older to be eligible for the program.
- Note that the remaining three buttons in Figure 9.2, i.e. **Intake**, **Assessment** and **Ongoing** are completed by the CKL workers and are Read-Only for social workers.

Notes

SECTION 12: ABSCONDENCE

Performance Objectives

In this Section, you gain confidence in your ability to:

- Locate Abscondence Information
- Record Abscondence Information



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Practice Overview

Children Who Have Absconded

It is the protocol of CFSA that custody orders must be completed for EACH child in CFSA's legal custody (e.g. committed children, voluntary care or shelter care, children) who has absconded from an agency facility (e.g. foster home, group home, etc.). Listed below are other factors when handling an abscondence:

- The foster parent or group home must call the Metropolitan Police Department (MPD) to file a missing person report for the runaway child(ren). A CCN number will be provided to the person/home filing the report.
- The child's absence MUST be reported immediately by the foster parent or group home to the child's worker or the worker's supervisor and provide the CCN number; (if the abscondence occurs on a non-holiday weekday between 8:15 am and 4:45 pm) or to the police (Metropolitan Youth Division) after working hours, on weekends and holidays.
- The foster parent or group home must call the CFSA Hotline to report the abscondence episode.
- On the next work day, the child's worker must complete an Affidavit and Request For Custody Order form, (J-939935), in FACES.NET. Failure to properly complete the form will result in unnecessary delays. This is sent to the worker's supervisor for approval. After approval it is sent to the Abscondence unit.
- The Worker should notify the Abscondence unit via email upon completion of the record of action.
- A hard copy of the Custody Order form is sent back to the child's worker and supervisor for signature(s).
- An Interim report should be prepared by the social worker to indicate that the child is in abscondence; if the child is still in abscondence at the due date of the Court Report then the child's whereabouts would be noted as unknown.
- Custody orders remain in effect for a period not to exceed one (1) year from the date they are filed.

Procedures for Abscondence

1) If a child absconds/goes missing, then the caretaker/group home should contact:

- MPD to file a missing persons report;
- The CFSA Intake Hotline;
- The CFSA Social Worker.

2) Social Worker completes a custody order request in FACES.NET within 24 hours, which must be approved by social worker's supervisor. Social Worker contacts coordinator upon completion of FACES.NET screens. It then becomes an assignment for the abscondence unit coordinator who will then assist the social worker in completing a written request for a custody order for court.

3) The Abscondence Unit Coordinator forwards the request to the Juvenile Clerk's Office and the Office of Attorney General. Then the Juvenile Clerk's Office forwards it to the Judge for signature.

4) The Court Order is returned to the clerk's office, entered into WALES¹, and faxed to the CFSA Abscondence Unit.

5) The Abscondence Unit Coordinator then does the following:

- Updates information in FACES.NET;
- Determines level of priority;
- Assigns case to an outreach worker.

6) The outreach worker takes steps to locate the child and counsel the child to return from abscondence. If located and returned to CFSA (sometimes with assistance of MPD) then the social worker is notified (or is to notify) that the child has been returned and paperwork is completed.

7) Abscondence Unit Coordinator faxes the request to quash custody order to the Juvenile Clerk's Office and it is then taken to the Judge for signature.

8) The signed order is returned to the clerk's office and CFSA. The clerk's office updates WALES and the Abscondence Unit Coordinator updates FACES.NET.

For further reference to abscondence requirements see the electronic form of the CFSA's Policy and Procedures through the FACES.NET link on the CFSA Internet/Intranet site.

¹ Washington Area Law Enforcement System.



FACES.NET Guide

The previous segment focused on agency protocols and procedures concerning the incident of a child absconding. The following segment will guide you through the relevant FACES.NET screens.

FACES.NET Scenario

You are the social worker for the Jackson case. You recently received a telephone call informing you that one of your clients in your case, Reyshawn has run away from the home of his foster parent.



NEW TERMS

Abscondence Fugitive concealment; the act of running away from the foster home or the legal custody of the responsible agency.

Record an Abscondence Episode

This screen is used to record Abscondence information for a case. You can access the Abscondence button through the **Case ► Client** track. This screen is also accessible through the **Client** track.

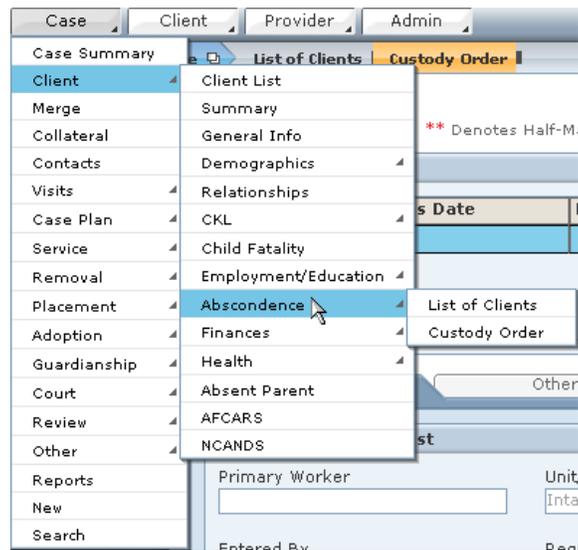


Figure 12.1

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Client, Abscondence**, and click **List of Clients**.
- Step 2: Select a client from the list and click **Show**.
- Step 3: Click in the **Custody Order** button.
- Step 4: Record the custody order details of the abscondence within the **Details** tab.

The screenshot displays the FACES.NET web application interface for the District of Columbia Child and Family Services Agency. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The breadcrumb trail shows 'Case > Client > Abscondence > List of Clients > Custody Order'. The left sidebar shows the user 'ADMIN TRAINER' and the selected client 'REYSHAWN JACKSON' with Entity ID 845178. The main content area is titled 'Abscondence Request' and contains an 'Abscondence Report' table with columns for Status, Status Date, Primary Case Worker, Abscondence Date, Returned Date, and Reabsc. Below this is the 'Details' tab, which is active and shows the 'Custody Order Request' form. This form includes fields for Primary Worker, Unit/Supervisor (Training ADMIN/14922), Entered By (TRAINER, ADMIN), and Requested By. It also has sections for 'Abscondence Details' with Date and Time fields, and 'Missing Person Report' with Report#, Date, Time, Reporter, and Specify fields. At the bottom, there is a checkbox for 'Pre Petition Custody Order' and buttons for 'NEW', 'Save', 'Approval', 'People\Places', 'Reabscond...', and 'Cancel'.

Figure 12.2

Step 5: Record a description of the client and other details of the absence within the **Other** tab.

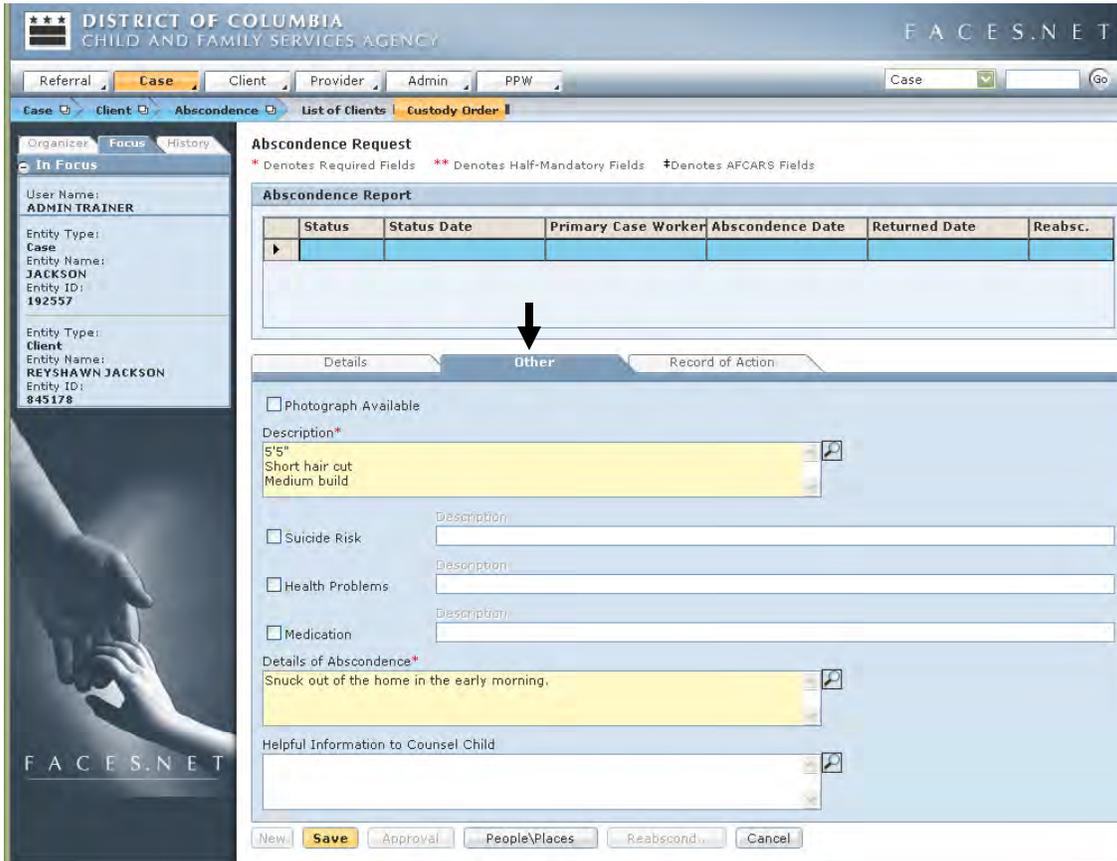


Figure 12.3



Note: The **Record of Action** tab is filled in by the Abscence Unit and is read-only to social workers.



The screenshot shows the 'Abscence Request' form in the FACES.NET system. The form is divided into several sections: 'Abscence Report' (a table with columns for Status, Status Date, Primary Case Worker, Abscence Date, Returned Date, and Reabsc.), 'Custody Order' (with fields for Sent, Returned, Signed, Status, and Sent to ORW), 'Client Returned' (with fields for Returned Date, By Whom, and Specify), 'Action Taken' (a text area), and 'Custody Order Withdrawal' (with checkboxes for Withdrawal Requested and Withdrawn, each with a Date field). The 'Record of Action' tab is selected and highlighted with a black arrow. At the bottom of the form, the 'People/Places' button is highlighted with a black arrow.

Figure 12.4

Step 6: Click the **People/Places** button and a new screen will appear.

Step 7: Enter or view people and/or places the client is known to frequent.



Note: The **People/Places** button is used to record information regarding places the child may frequent.



Step 8: Click **Save** button for the **People/Places** screen to save the information and click **Cancel** to leave the screen.

Step 9: Back on the main **Abscence Request** screen, click **Save** to save the information.

Step 10: Click the **Approval** button to send the Custody Order Request to your supervisor for approval.

Record an Abscondence Placement

Once the custody order is entered, it is necessary to record an abscondence placement in the placement screens.

Steps Include:

Step 1: Place the cursor over the **Case** menu, then **Placement**, and finally click **List of Clients**.

Step 2: Click Reyshawn Jackson and click **Show**.

The screenshot shows the 'Select Client' window in the FACES.NET system. The window title is 'Select Client' and it includes a legend: '* Denotes Required Fields', '** Denotes Half-Mandatory Fields', and '# Denotes AFCARS Fields'. Below the legend is a table titled 'Placement Clients' with the following data:

Client ID	Name	Removed?	CFSA Custody	Birth Date	Need Placement
845177	KETSHAWN JACKSON	Y	No		N
845176	KIANA SCOTT	N	No		N
845181	LAKEISHA JACKSON	N	No		N
845180	LATONYA HOLMES	N	No		N
845173	PAUL WILLIAMS	N	No	11/01/1989	N
845178	REYSHAWN JACKSON	Y	No		N

Below the table are sections for 'Client Type' (Active Clients selected), 'Current Address' (1625 Columbia Road NW, Washington, District of Columbia), and 'Additional Information' (Living Arrangement, Relationship, Caretaker Name). At the bottom are 'Show', 'Help', and 'Cancel' buttons.

Figure 12.5

Step 3: Click the **Place** button, and then click **New** to set up a new placement episode.



Note: The current placement must be end-dated before entering the new placement for abscondence.

Step 4: Click the **Non-Paid** button on the breadcrumbs toolbar.

Step 5: Click the **Find** button to select the provider. Click the **Service** button and select Abscondence as the service.

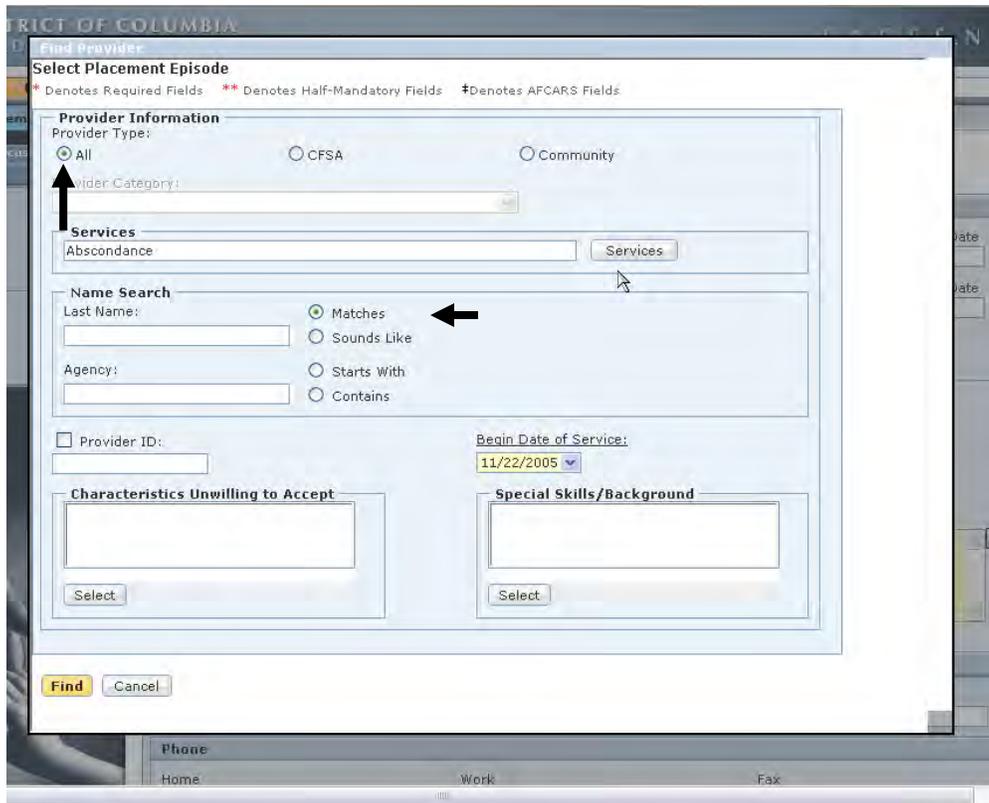


Figure 12.6

Step 6: Click **Search**, select the abscondance provider from the list displayed, and click **OK**.

Step 7: Enter the date and time of abscondance in the **Entry Date** fields.

Step 8: Click **Find**.

The abscondance placement episode is now completed.

Notes

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SECTION 13: FINANCE

Performance Objectives

In this Section, you gain confidence in your ability to:

- Initiate payment request for providers
- View payment history of clients



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Practice Overview

Payments are associated with paid placements and/or paid services. Each authorized “paid placement” or service generates a payment in association with a contract or non-contracted service line. When a social worker makes a recommendation to the Placement Unit and the Placement Unit authorizes and approves the placement, payments to the provider will begin.

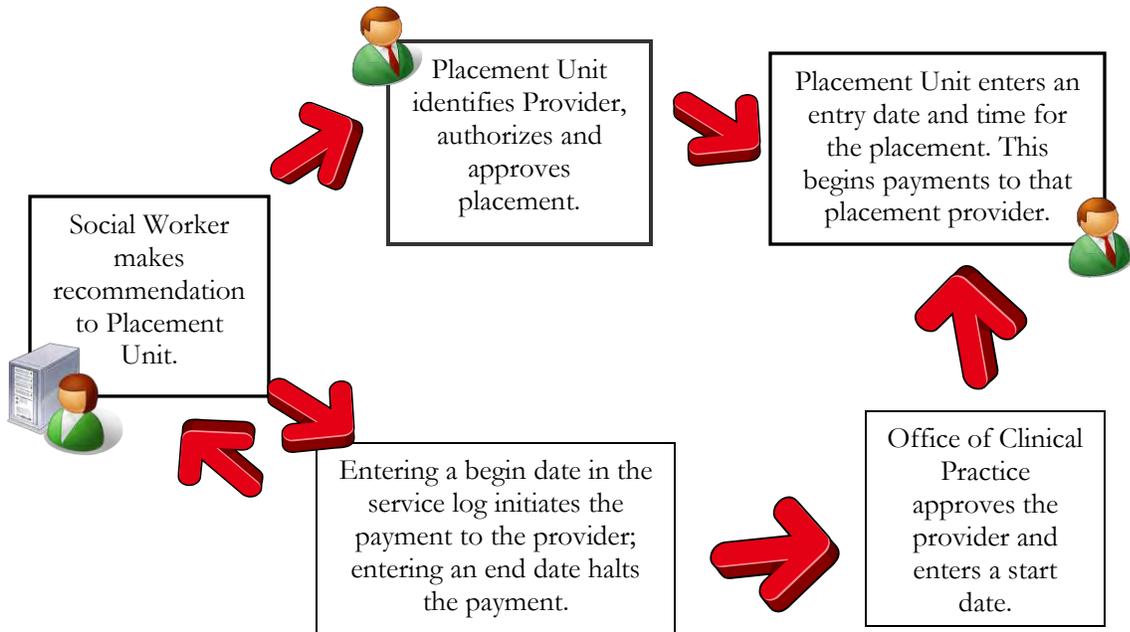


Figure 13.1

This Finance Section will help the social worker:

- Develop an understanding of how the Agency pays providers;
- Understand the social worker’s role in facilitating disputes with providers over invoices;
- Obtain payment information for a provider in order to answer a provider’s questions;
- View the available balance of a client’s individual bank account and request disbursements for the needs of the child;
- Develop an understanding of the way the activities of the Agency are financed and the role the financing plays in providing services;
- Guide you through the relevant FACES.NET screens.

For further reference to finance requirements see the electronic form of the CFSA’s Policy and Procedures through the FACES.NET link on the CFSA Internet/Intranet site.



FACES.NET Guide

Access the Finances screens by clicking the **Client** button and then the **Finances** selection in the drop-down menu.

FACES.NET Scenario

Role: You are a Family Services Worker. You would like to check the information related to Finance for a client in your care.

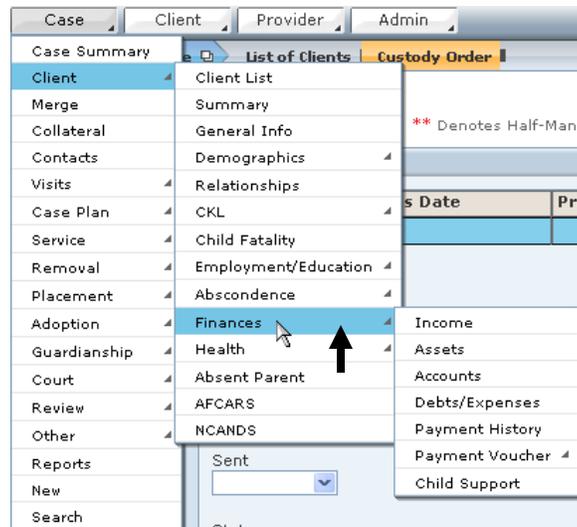


Figure 13.2

Steps Include:

- Step 1: Click the **My Assignments** button in the left navigation pane.
- Step 2: Select a case from your workload. This will put that case in focus.
- Step 3: Place the cursor over **Case** and then **Client**, and finally click **Finances**
- Step 4: The following are functions available on the Finances track:
 - Income;
 - Assets;
 - Client Account Statements;
 - Debts/Expenses;
 - Payment History (Status);
 - Payment Voucher; and
 - Child Support.

Income

The Income screen should be used to record all income for the client.

The screenshot shows the 'Client Income' screen in the FACES.NET system. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The 'Client' menu is expanded, showing 'Finances', 'Income', 'Assets', 'Accounts', 'Debts/Expenses', 'Payment History', 'Payment Voucher', 'Child Support', and 'More'. The sidebar on the left shows the user 'ADMIN TRAINER' and client information for 'JACKSON' (Entity ID: 192557) and 'FEMALE SCOTT' (Entity ID: 845174). The main content area is titled 'Client Income' and includes a table for 'Income Information' and a form for 'Income Details'. The 'Income Details' form has fields for 'Type*', 'Employer Name', 'Amount*', 'Frequency*', 'Monthly Income' (displaying '\$0.00'), 'Start Date*', 'End Date', and 'Verification*'. A black arrow points to the 'Employer Name' field. The form also includes a 'Source of Income/Income Maintenance Verification Comments' text area and 'New', 'Save', and 'Cancel' buttons at the bottom.

Figure 13.3



Note:

- The **Employer Name** field will be populated by any employers entered on the Employment screen for this client.
- The income for all family members in the case should be recorded per client on this screen.

Assets and Debts/Expenses

The Assets and the Debts/Expenses screen should be used to enter any available information on the client's assets or debts and expenses.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case **Client** Provider Admin PPW Case Go

Client Finances Income **Assets** Accounts Debts/Expenses Payment History Payment Voucher Child Support More

Organizer Focus History

In Focus

User Name:
ADMIN TRAINER

Entity Type:
Case

Entity Name:
JACKSON

Entity ID:
192557

Entity Type:
Client

Entity Name:
FEMALE SCOTT

Entity ID:
845174

Client Assets

* Denotes Required Fields ** Denotes Half-Mandatory Fields #Denotes AFCARS Fields

Date Entered	Asset Type	Balance Value	Cash Value	Location Name
4/2/2007		\$0.00	\$0.00	

Asset Information

Type* Date Entered* 4/2/2007 End Date

Make Model Year

Account

Location

Value

Balance \$0.00

Cash \$0.00

Face \$0.00

Address Detail

Edit

Beneficiary

Prefix First Middle Last Suffix

New Save Cancel

Figure 13.4

Payment Voucher

The **Payment Voucher** screen is used to request demand payments for a provider for services delivered. There are two primary situations in which a demand payment might be required:

- To pay a provider that CFSA does not have a contracted agreement for services or that has no prior relationship for services rendered on behalf of our client(s). This may be as a result of a court order;
- To pay a known provider for activities or services that do not relate to an individual child.

Steps Include:

Step 1: Place the cursor over the **Client** menu, then **Finances**, and then **Payment Voucher**.

Step 2: Click on **Find Payment**.
The Find Payment screen displays

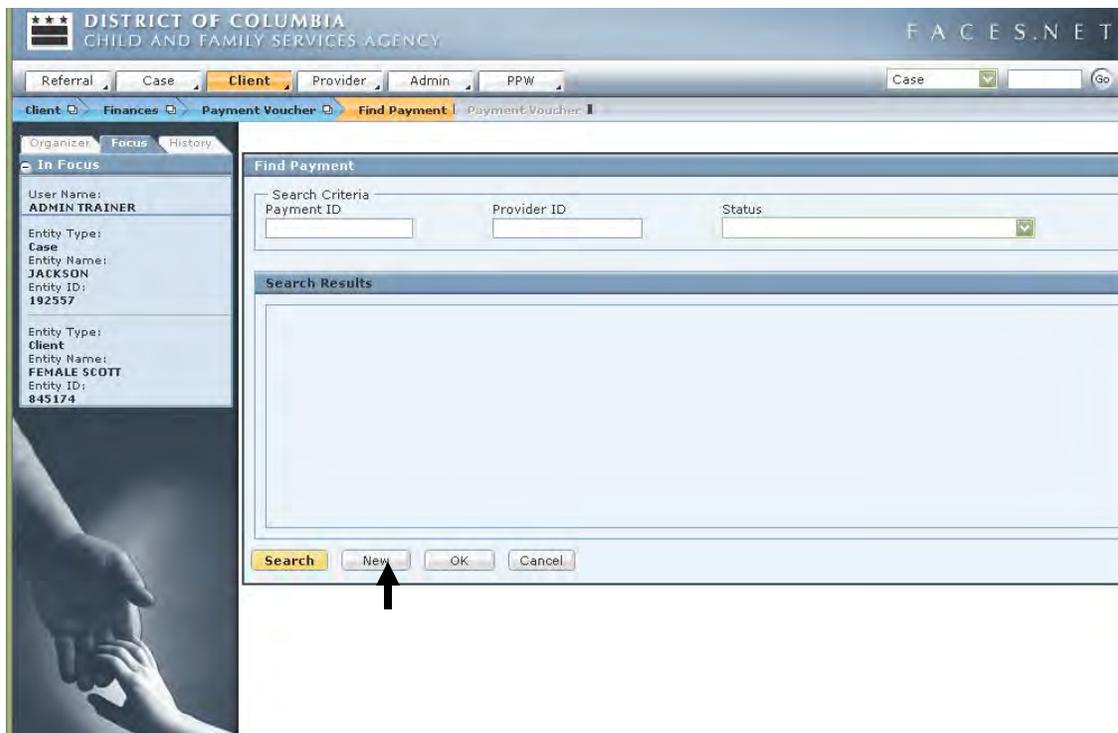


Figure 13.5

Step 3: Click the **New** button.

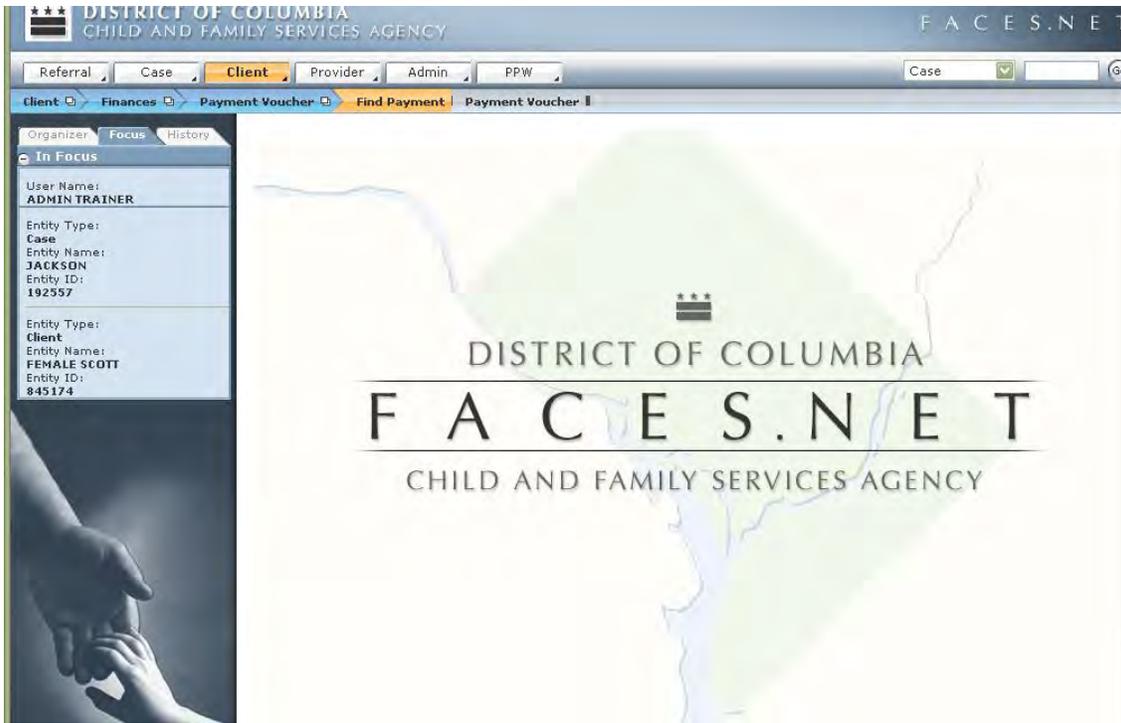


Figure 13.6

Step 4: Click the **Payment Voucher** button.
The Payment Voucher screen displays.

Figure 13.7



Note: The use of Demand Payments should be the exception to the rule.

Step 5: Click the **Find Provider** button on the **Payment** tab and conduct a search for the provider.

Step 6: Enter in “Classy Clothing” in the **Agency** textbox.

Step 7: Click **Search**.

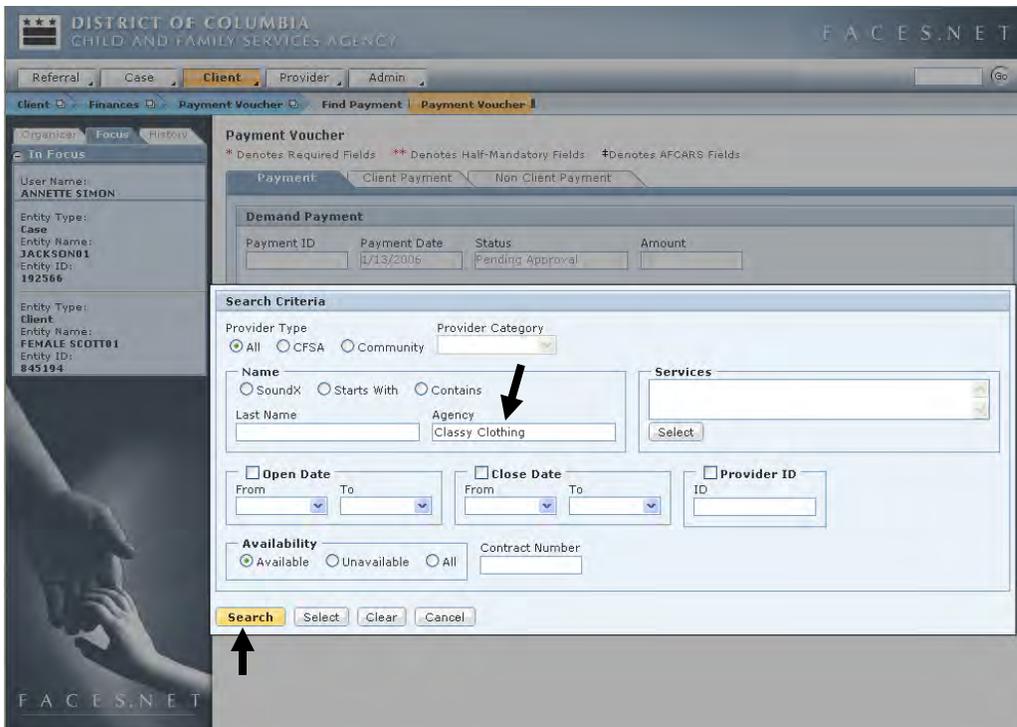


Figure 13.8

Step 8: Highlight the provider record and click the **Select** button.

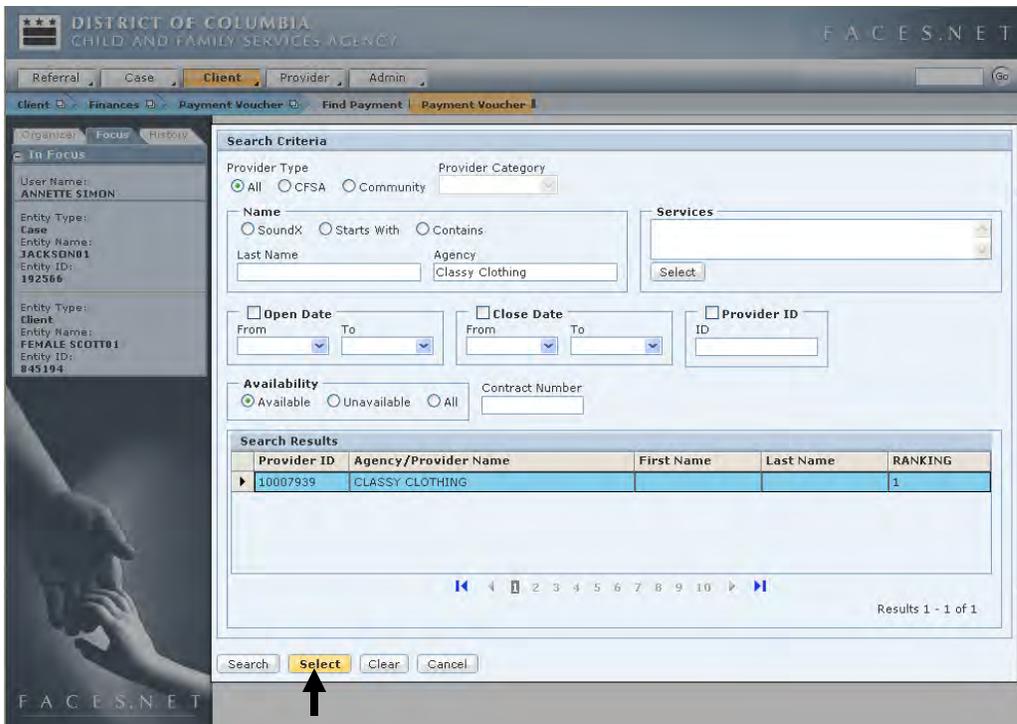


Figure 13.9

Step 9: Click the **Client Payment** tab.

Step 10: Click the **Find Service** button.

The screenshot shows the 'Payment Voucher' form in the FACES.NET system. The 'Client Payment' tab is selected, and a table lists a client named 'FEMALE SCOTT01'. The 'Client Payment Details' section contains fields for Client, Service, SSN, Service Start, Service End, Amount (0.00), and Reason. A 'Notes' field is also present. At the bottom, there are buttons for 'New', 'Save', 'Approval', 'Find', and 'Cancel'. A black arrow points to the 'Client Payment' tab, and another black arrow points to the 'Save' button.

Figure 13.10

Step 11: Select Clothing/Continuing from the drop-down menu.

Step 12: Click the **OK** button.

Step 13: Enter a dollar amount in the **Amount** field.

Step 14: Enter in the notes from the judge's orders.

Step 15: Click the **Save** button.

Step 16: Click the **Approval** button to send the request to your supervisor for approval.

Note:



- Payment Vouchers/Demand Payments require a two-tiered approval. Once it is approved by your supervisor, a second approval must be given by the Finance Administration;
- If the Provider is not registered with CFSA, the worker will then give the Provider's information to the Finance Unit;

- All finance payments must be both documented in FACES.NET and a hardcopy given to the Finance unit with the payment ID listed;
- Both, the hard copy and soft copy, documents require supervisory approval.

Payment History

Access the Payment History screen through the Finances screens. This screen will show all payments made on behalf of the client and can be used to track the status of a particular payment. This information is read-only. For training purposes this screen will remain blank because no actual transactions have occurred related to placements.

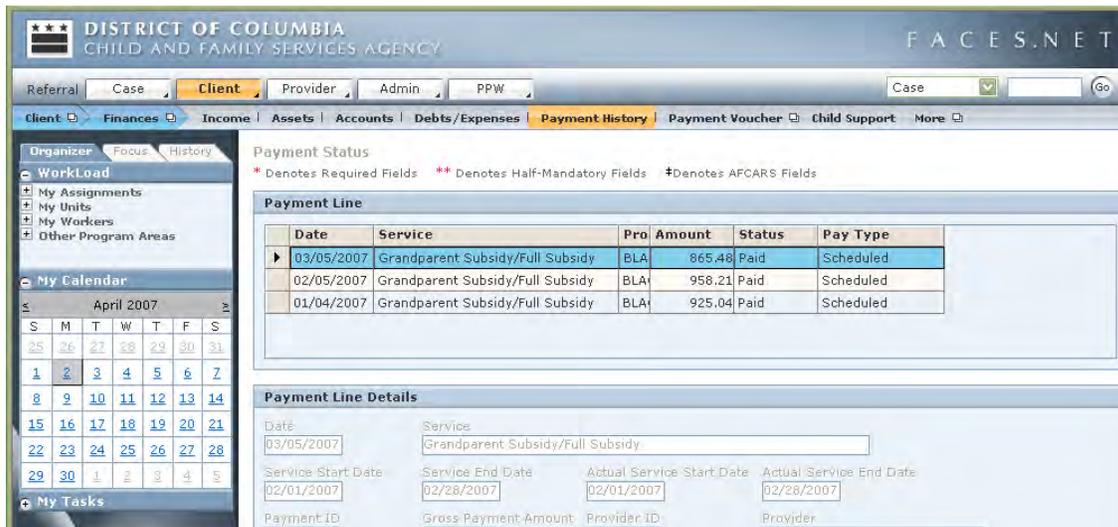


Figure 13.11

There are (4) statuses:

- Pending Approval—still needs to be approved;
- Held – payment is awaiting approval (for payment adjustments only);
- Ready—approved and ready to be interfaced with the District’s System of Accounting and Reporting (SOAR);
- Interfaced—interfaced with SOAR;
- Paid—interfaced with SOAR, and information is sent back to FACES.NET with check number.

Notes

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SECTION 14: CASE CLOSURE

Performance Objectives

In this Section, you gain confidence in your ability to:

- Return a Child to the Caretaker
- Update Custody Status
- End Date the Placement
- Close a Case



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Practice Overview

Case Closure Criteria

The decision to terminate CFSA services must be based on a thorough evaluation of the family situation. A case review should conclude one or more of the following factors to justify the termination of services:

1. The family has achieved the treatment goals and the risk has been sufficiently reduced or eliminated to warrant case closure.
2. The adoption goal has been achieved.
3. There has been no evidence of abuse or neglect in the past three (3) months, and the risk of future abuse or neglect has been appropriately lowered or eliminated.
4. The child turns twenty-one (21) years of age.
5. The family demonstrates the ability to function at a minimally acceptable level as defined in the CFSA risk assessment tool.
6. Services will be provided to the family by another resource, without CFSA intervention, and the family has agreed to use such resources.
7. The child is self-supporting.
8. There is no child under age eighteen (18) in the home, rather any child under eighteen (18) is in a safe and nurturing, and permanent out-of-home environment.
9. A child with a handicapping condition has reached his/her twenty-first (21st) birthday, a transitional plan has been developed and commenced for him/her, and the child has been connected to other appropriate support services.
10. The family has moved out-of-state; in such instances the social worker will confer with his/her supervisor to determine if a referral to the new state of residence is required or warranted. If out of state referral is required, the social worker will refer the family to the state protective services agency.
11. The family is no longer making progress, and both the family and social worker agree not only that services are ineffective and non-productive, but also that the risk factors are non-existent or minimal.
12. The family refuses to cooperate and either the Court refuses to intervene or OAG finds that there is insufficient cause for a court petition;
13. A protective custody order is set aside by the Court, relieving CFSA of its obligation to provide services; and
14. Reunification has been achieved, and the family has been stabilized for a period of at least three (3) months.
15. The death of child(ren) of a family, and there are no other child(ren) at risk or to be serviced
16. An SDM (Structured Decision Making) risk assessment must be completed prior to case closer.
17. Low to moderate SDM outcomes will be referred to a Collaborative.

For further reference to case closure requirements see the electronic form of the CFSA's Policy and Procedures through the [FACES.NET](#) link on the CFSA Internet/Intranet site.



FACES.NET Guide

The previous segment focused on agency practices revolving around reunification and case closure. This section will guide you through the relevant FACES.NET screens.

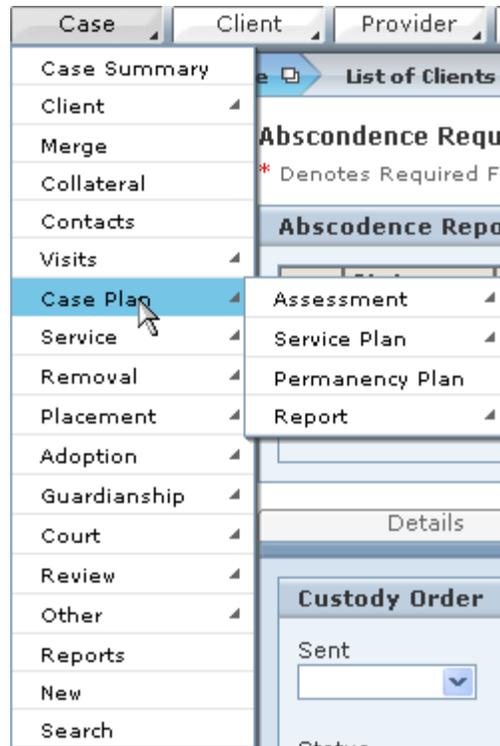


Figure 14.1

FACES.NET Scenario

The Jackson family has now been stabilized and has agreed to continue with services from an outside source (other than CFSA) to keep a positive relationship with each other.

Returning a Child to the Caretaker

When returning a child home, changes to the client's removal, placement, and legal status must be recorded. In most cases, not only must the removal be end dated, but also the client's legal custody status and placement. In fact, ending a placement with a permanency reason will automatically end date the removal and court status in most cases.



Note: If you end date a Placement for certain reasons, Removal, Legal Custody, and Administrative Reviews, FACES.NET will automatically be end dated. Those reasons are: Adoption, Death of Child, Emancipation, Guardianship, Independence Achieved, Living with Relatives (Non-CFSA custody), Reunification, or Service to be provided by another District agency.

Ending a Placement



Pointers to Remember:

1. **Home Removal vs. Change in Placement:** A home removal refers to the month, day and year that the child was removed from the care and supervision of his or her parent or parental substitutes (does not include foster parents), during or as a result of the CPS response. A change of placement occurs when a child moves from one foster care setting to another. For example, although the court may order that a child be “removed” from a provider, this is truly a change in placement, not a home removal by definition.
2. **Placement Exit Reasons:** The following Placement Exit Reasons in FACES.NET will end-date a Legal Status, Home Removal Episode and cancel an Administrative Review for a client: Placement/Custody to be provided by another District agency, Adoption, Death of Child, Emancipation, Guardianship, Independence Achieved, Living with Other Relatives (Non CFSA custody), and Reunification. Therefore, use caution when choosing a placement exit reason, and read all system messages before proceeding.
3. **Title IV-E:** Federal funding through Title IV-E is dependent upon home removal information. The accuracy of this home removal information affects Title IV-E claiming in many ways. A Title IV-E pending eligibility record is created for a child when a home removal is created/entered in FACES.NET. Erroneous/invalid home removal entries create unnecessary and ineligible IV-E determinations. When a home removal is end dated, this terminates claiming of federal funding for an eligible client. For these reasons, it is critical that when exiting a placement, utmost attention is paid to the exit reason. The exit reasons identified in Pointer #2 should not be selected unless a child has reached permanence and is no longer in CFSA custody.
4. **AFCARS:** AFCARS reporting is based on children with an open home removal and placement episode in foster care. It is important to ensure that home removal and placement information is entered in an accurate and timely manner. Each of the placement exit reasons identified in Pointer #2 generates an AFCARS measure regarding timeliness. If a child’s home removal is end dated, the placement exit must also be entered in the FACES.NET system within 60 days of the child’s placement exit date or the agency will fail that AFCARS measure.
5. **Invoice Discrepancy:** Contracts staff can exit a placement for invoice discrepancies, which stops payment to a provider. If a placement exit reason is identified as “Invoice Discrepancy” the social worker should change the exit reason to the appropriate reason (child requested change in placement, reunification, etc.). This is particularly important as related to AFCARS and the 60-day window for timeliness of recording placement exits. Periodic social worker review of placement and home removal information should reduce the number of errors for this AFCARS measure.

This section will focus on closing a case due to reunification, but it can be used for any of the before mentioned permanency outcomes.

Steps Include:

- Step 1: Place the cursor over the **Case** menu, then **Placement**, **Place**, and finally click **List of Placement Episodes**.
- Step 2: Click Paul Williams and click **Show** from the **List of Clients**.
- Step 3: Click **Place**, then the current placement episode in the **Select Placement Episode** dialog box. Finally, click **Show** to display the placement.

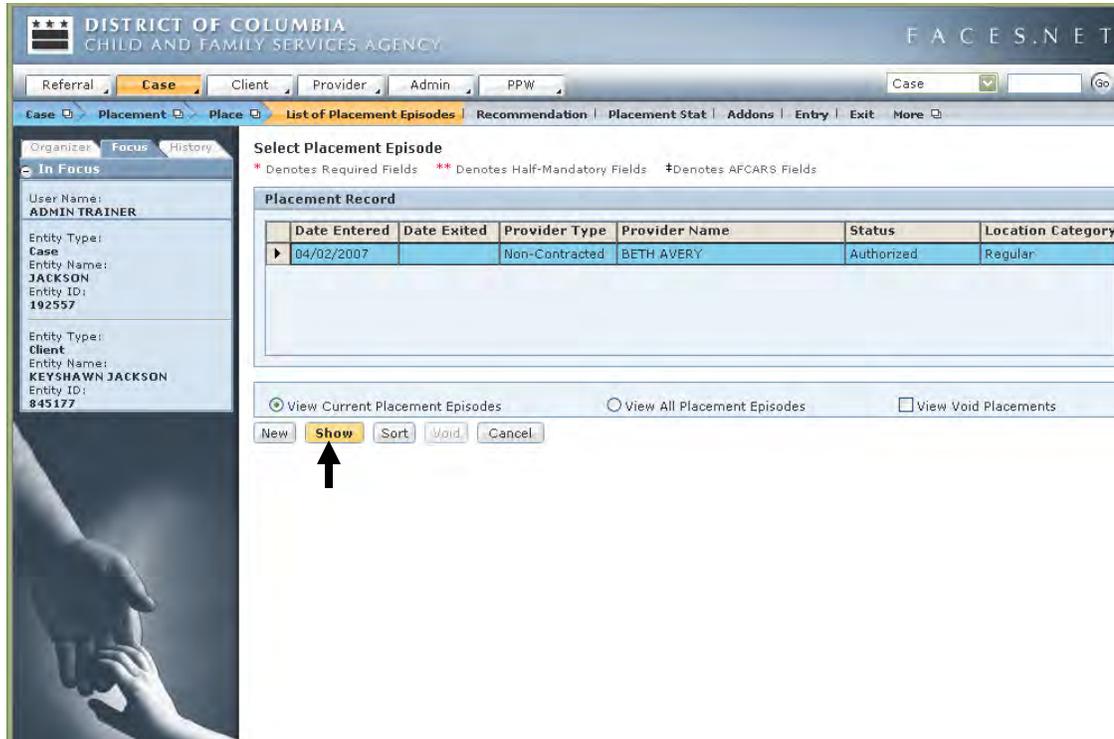


Figure 14.2

- Step 4: Click the **Exit** button within the **Placement** track within the drop-down menu. On this screen, enter a Date, Time, and Reason (in this case, Reunification), then click the **Save** button.

The screenshot shows the 'Exit Placement' form in the FACES.NET system. The form is divided into several sections: 'Exit Information', 'Social Worker', 'Provider', and 'Placement Unit'. Each section contains fields for 'Date', 'Time', 'AM/PM', 'Last Updated By', and 'Last Updated Date'. The 'Social Worker' section has a black arrow pointing to its 'Last Updated Date' field. The 'Exit Information' section shows 'Case ID#' as 192557. The left sidebar shows user information for 'ADMIN TRAINER' and 'KEYSHAWN JACKSON'. The bottom of the form has 'NEW', 'Save', and 'Cancel' buttons.

Figure 14.3

If you wish to confirm that the removal and court status have been correctly end dated, you can verify this on the **Removal** and **Legal Status** screens discussed in Sections 5 and 6, respectively.



Note:

- If end dating the placement for reasons of Adoption, Death of Child, Emancipation, Guardianship, Independence Achieved, Reunification, or Service to be provided by another District Agency will automatically end date the removal and custody statuses as of the placement end date. If there is a future Administrative Review concerning this child, it will be canceled. End dating a placement for reason of Living with Other Relatives (Non-CFSA Custody) will only automatically end date the removal, custody status and cancel the Admin review if that status is CFSA and not Court Ordered Exception.
- If you exit a child from a placement for either “Independence Achieved” or “Emancipation” reasons, the Status and Living Arrangement fields become mandatory.

Close a Case in FACES.NET

Closing a case does not delete any information or prevent the case from later being reopened if necessary, but the case will be removed from your workload. Before closing a case, review all client and service information in a case to make sure that it is up to date and that all activities have been recorded. Remember that entering an end date on the Service Log halts payments to the provider.



Note: Before a case can be closed, the following items must all be end dated before the closure date entered on the screen described above.

- All services;
- All placements;
- All removals;
- All administrative reviews;
- All clinical program areas; and
- All pending supervisory approvals.

FACES.NET Scenario

All clients in this case have been returned home after provision of services or placed in another permanent living situation. The CFSA involvement with a family has now ended. As the social worker you would like to close their case in FACES.NET.

The screenshot displays the FACES.NET Case Summary interface for the District of Columbia Child and Family Services Agency. The interface includes a navigation menu at the top with options like Referral, Case, Client, Provider, Admin, and PPW. The main content area is divided into several sections: Information, Assignment, Reason for Agency Involvement, and Case History. The Case History section contains a table with columns for Open Date, Close Date, and Reason. Below this table, there is a checkbox labeled 'Recommend Case Closure' which is currently unchecked. An arrow points to this checkbox. To the right of the checkbox are fields for 'Closure Reason' (a dropdown menu) and 'Date' (a date selector). Below these fields is a 'Closure Summary' text area. At the bottom of the form, there are buttons for 'Save', 'Reopen', 'Close Case', and 'Cancel'. The left sidebar shows the user's name as ADMIN TRAINER and provides details for the case and the client, KEYSHAWN JACKSON.

Referral ID	Referral Date
586297	11/08/2005

Open Date	Close Date	Reason
11/08/2005		

Recommend Case Closure

Closure Reason: Date:

Closure Summary:

Figure 14.4

Steps Include:

- Step 1: Cases can only be closed from the summary screen of the case. The summary screen can be accessed by placing the cursor over **Case** and clicking **Case Summary**.
- Step 2: Click the **Recommend Case Closure** checkbox and fill in the **Closure Reason**, **Date**, and **Closure Summary** to submit a request for approval of case closure to your supervisor.

Step 3: Click **Close Case** to submit the request to your supervisor for approval.

DISTRICT OF COLUMBIA
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin PPW Case

Case Case Summary Client Merge Collateral Contacts Visits Case Plan Service More

Organizer Focus History
In Focus

User Name: ADMIN TRAINER
Entity Type: Case
Entity Name: JACKSON
Entity ID: 192557

Entity Type: Client
Entity Name: KEYSAWN JACKSON
Entity ID: 845177

Case Summary
* Denotes Required Fields ** Denotes Half-Mandatory Fields † Denotes AFCARS Fields

Information

Case Name: JACKSON Family Case Type: CPS Case Number: 192557 Family Worker:

Assignment

Client	Program	Worker	Case Assignment

Reason for Agency Involvement

Referral ID	Referral Date
586297	11/08/2005

Children are in immediate danger

Case History

Open Date	Close Date	Reason
11/08/2005		

Recommend Case Closure

Closure Reason: Guardianship Date: 4/2/2007

Closure Summary: Guardianship placement

Save Reopen Close Case Cancel

Figure 14.5

Notes

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SECTION 15: CHILD FATALITY

Performance Objectives

In this Section, you gain confidence in your ability to:

- End-Date a Client from a Case with a Reason of Death
- Enter a Child Fatality Report



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Practice Overview

It is the practice of the CFSA that all deaths of children who are involved in foster care or protective cases as well as children who are known to the agency at any time within 4 years of the child's death shall be promptly and appropriately reviewed by the CFSA Child Fatality Review Team (CFRT). The team currently consists of direct service and management staff who are or were involved with the family, the City-Wide Child Fatality Review Committee Coordinator, the Center for Social Policy Representative, the CFSA Internal Child Fatality Review Team Coordinator, a Private Care Program Manager, the Training Program Manager, the Quality Assurance Program Manager and a CFSA General Counsel Representative.

The Child Fatality Review Team is responsible for developing a report of findings and recommendations on each case reviewed for the purpose of improving service delivery systems, ensuring full accountability of CFSA and contract staff involved with families and establishing a more responsive child welfare system in order to reduce the incidence of unexpected and preventable child deaths.

For further reference to child fatality requirements see the electronic form of the CFSA's Policy and Procedures through the [FACES.NET](#) link on the CFSA Internet/Intranet site.



FACES.NET Guide

When the death of a child occurs, it is necessary that certain information be recorded. A call will be placed to the hotline and an investigation will be initiated. This referral will be connected to the existing case.

FACES.NET Scenario

A call has been received at the Hotline reporting that Rodney Scott has died, and an investigation has been initiated. This information and a Child Fatality report must be recorded in FACES.NET.

Enter Child's Date of Death

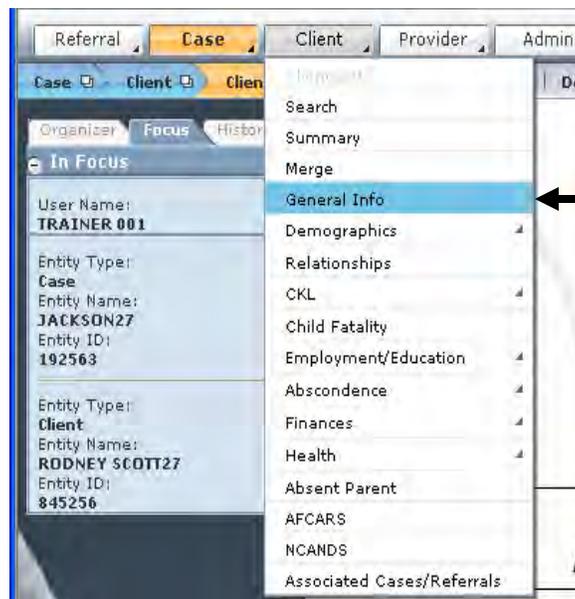


Figure 15.1

Steps Include:

- Step 1: Place the cursor over **Client** and click **List of Clients**.
- Step 2: Select Rodney Scott and click **Show**.
- Step 3: Click **General Info**.
- Step 4: Check the **Deceased** checkbox and enter a **Date of Death**.

The screenshot displays the FACES.NET interface for a client record. The main form is titled 'General Information' and contains several sections:

- Client Details:** Fields for Prefix, First Name (RODNEY), Middle, Last Name (SCOTT), Suffix, and Maiden Name. It also includes Gender (Male), Date of Birth, SSN, Medicaid#, and In Household# (Yes).
- Dates of Involvement in Case:** Start Date (11/8/2005), End Date (11/22/2005), and Reason For End Date (Death). It also has checkboxes for 'Deceased' (checked), 'Head of the Household', and 'Participating as a Child' (Yes).
- Citizenship/Religion:** Fields for Citizenship/Alienage (US Citizen), Alien Registration Number, Nationality, and Religion.
- Role in Case / Language:** Role In Case (Alligned Victim, Child) and Languages.

At the bottom of the form are buttons for 'Save', 'Cancel', and 'RFAI'. A sidebar on the left shows the user's name (ADMIN TRAINER) and the current case information (Entity Name: JACKSON, Entity ID: 192557).

Figure 15.2



Note: Clicking the **Deceased** checkbox will automatically end-date a client’s case involvement with a reason of “Death”.

Step 5: Click **Save**.



Points to Remember:
 Before social workers can end-date a client from a case, the following things must be end-dated on the appropriate screens;

- Placements;
- Services;
- Home Removals and Court Status.

Reviewing/Updating Child Fatality Information

From the Jackson case perform the following steps to update the Child Fatality screens.

Steps Include:

Step 1: Place the cursor over the **Client** drop down menu.



Figure 15.3

Step 2: Click **Child Fatality**.

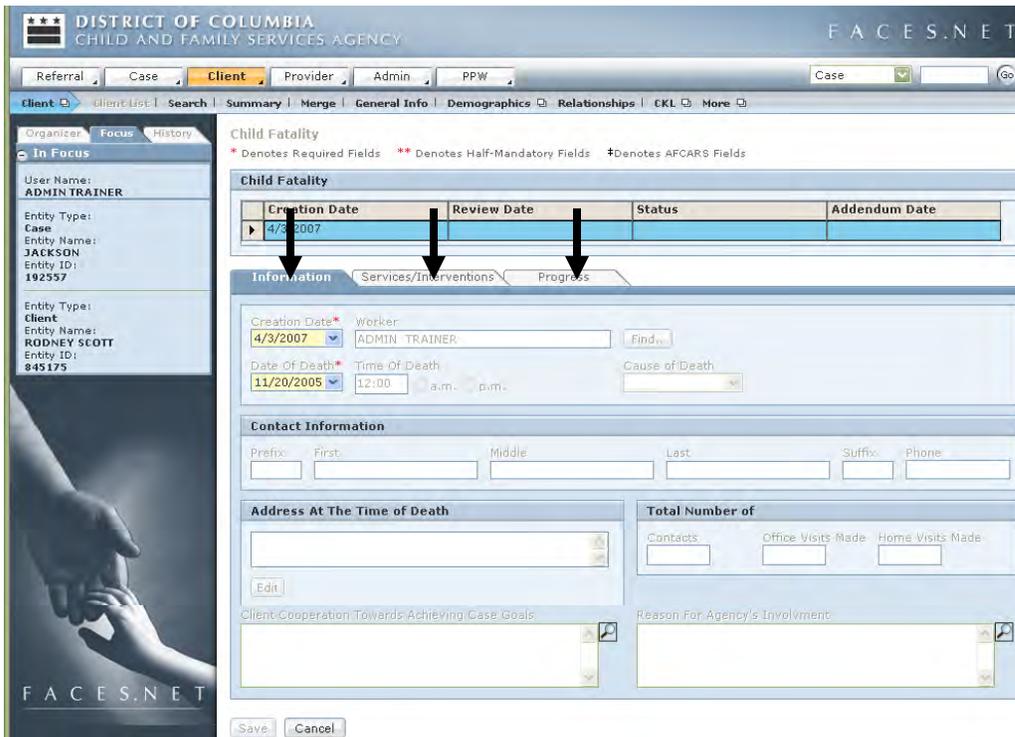


Figure 15.4

Step 3: Enter the information on all three tabs.

Step 4: Click **Save**.



Note:

- You must enter the date of death on the **General Information** screen before the Child Fatality screen will unlock.
- The Worker's name and Time of Death fields will be grayed out to assure that the documenting worker's name and the actual time of death can not be changed.

Notes

SECTION 16: FEDERAL REPORTING

Performance Objectives

In this Section, you gain confidence in your ability to:

- Verify Compliance with AFCARS Reporting Requirements
- Verify Compliance with NCANDS Reporting Requirements
- Verify Compliance with IV-E Reporting Requirements



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FACES.NET Guide

AFCARS Adoptions and Foster Care Analysis and Reporting System were developed by the Federal Government to collect case level information on all children in foster care and on children who are adopted under the auspices of CFSA.

The District of Columbia, along with the other 50 States, must submit child-specific data to the Federal Government semi-annually. The data that is submitted must reflect the data that is time-stamped in FACES.NET between the time periods of October 1 through March 31 (known as reporting period A) and April 1 through September 30 (known as reporting period B) of any given fiscal year.

Generally, a mock run of the AFCARS report is run 45 days prior to submission to the Federal Government to identify inconsistencies and non-compliance with AFCARS guidelines. Non-compliance includes missing or inconsistent (i.e., child is 100 years old and in foster care or mother is younger than the child). Non-compliance is 10% of the data on any one of the 66 data elements is missing or data has been entered into FACES.NET more than 60 days after its occurrence (i.e., child discharged from foster care and the date that the home return date or placement date is entered into FACES.NET is 60 days or greater after the event.). AFCARS reports are generated daily to assist with identifying non-compliant data elements for the current AFCARS reporting period.

Management reports allow supervisors, program managers and social workers to track various statistics and measures of case management performance. Management reports are now available for social workers via the Internet. They are non-modifiable but may be printed. Management Reports are a useful strategic tool for measuring compliance with Best Practice. As the saying goes, “If it’s not in FACES.NET, it DID NOT happen”. Management Reports are an excellent way to check if data is being appropriately entered in FACES.NET as set forth by BPIP.

1. Case carrying social workers as well as managers have access to the **Management Reports** in FACES.NET.
2. Both private agency and CFSA social workers access management reports via the designated online management reports website: <https://reports.faces.cfsa-dc.org>

How to Access Management Reports from within FACES.NET

CFSA Supervisors and Managers only

Steps Include:

- Step 1: Place your mouse over the **Admin** drop-down menu.
- Step 2: Click on **Management Reports**.

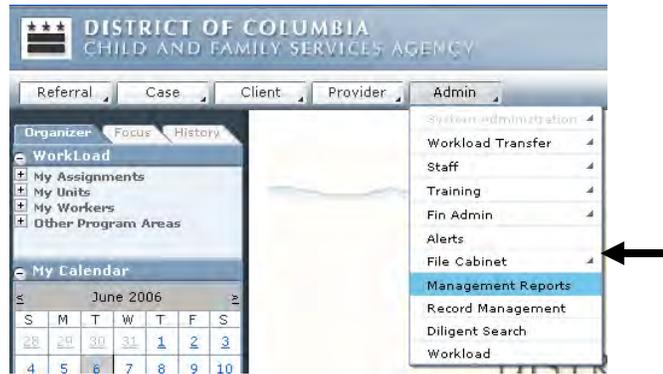


Figure 16.1

Step 3: Choose the **Report Category**. After a report category is chosen, the list of report titles will be filtered to show only those reports related to the category chosen.

CFSA and Private Agency Social Workers

Steps Include:

Step 1: Enter the Reports web site address - <https://reports.faces.cfsa-dc.org> in the browser.

Step 2: Enter your **User ID** and **Password**.

Step 3: Click the **Login** button.



Note: Social workers have specialized access to the management reports pertaining to their case load.



Figure 16.2



Figure 16.3

Step 4: Choose the **Report Category**. After a report category is chosen, the list of report titles will be filtered to show only those reports related to the category chosen.

Verifying AFCARS Compliance Reporting

This section will assist you in determining how to assure that your case data is AFCARS compliant.

The key tasks associated with improving and assuring that your foster care or potential adoptive child-specific data is accurate, you should:

1. Review the daily AFCARS online report (AFC002MS) “AFCARS ACF Compliance Data for Case Management” via the Web.
2. Review the AFCARS data entry screens at least quarterly.

FACES.NET Scenario

AFCARS – Foster Care Element 5 is found to be out of compliance when one of the following has not been done in FACES.NET for a child in foster care during the reporting period:

- Court hearing has not been held;
- Administrative review has not been held;
- Administrative review summary has not been completed.

The data cleanup for no hearings held should be minimal since the hearing schedule is interfaced via the DC Superior Court. The following report **AFC002MS**, consists of children that are out of compliance due to the lack of recorded court hearing and administrative review data during the AFCARS reporting period.

Steps include:

Step 1: Review the AFCARS inconsistency report.



Note: AFCARS fields are identified in **blue** in FACES.NET.

AFCARS Data Element	Data from AFCARS	Screen Location
5. Most Recent Periodic Review Date	Missing	Admin Review: Oversight/ARI/AR Sched, Court Hearing: Cou
6. Date of Birth	09/01/1991	Client/Info (Client tab)
7. Sex	Male	Client/Info (Client tab)
8 a. Race American Indian or Alaskan Native	Does Not Apply	Client/Info (Other tab)
8 b. Race Asian	Does Not Apply	Client/Info (Other tab)
8 c. Race Black or African American	Applies	Client/Info (Other tab)
8 d. Race Native Hawaiian or Pacific Islander	Does Not Apply	Client/Info (Other tab)
8 e. Race White	Does Not Apply	Client/Info (Other tab)
8 f. Race Unable to Determine	Does Not Apply	Client/Info (Other tab)
9. Hispanic Origin	No	Client/Info (Other tab)
10. Child Diagnosed with Disabilities	No	Client/Info (Other tab)
11. Mental Retardation	Does Not Apply	Client/Health/Appts (Detail tab)
12. Visually or Hearing Impaired	Does Not Apply	Client/Health/Appts (Detail tab)
13. Physically Disabled	Does Not Apply	Client/Health/Appts (Detail tab)
14. Emotionally Disturbed	Does Not Apply	Client/Health/Appts (Detail tab)
15. Other Diagnosed Conditions	Does Not Apply	Client/Health/Appts (Detail tab)
16. Child Ever Been Adopted	No	Placement/Place/Enter (Entry Details tab)
17. Age of Child When Adopted		Placement/Place/Enter (Entry Details tab)
18. Date of First Removal from Home	02/16/2001	Removal
19. Total No of Removals	11	Removal

Figure 16.4

After receiving the online reports, enter the missing information into FACES.NET. For example, if report AFC002MS indicates that a permanency goal is missing, a goal should be created in the **Perm Plan** (permanency plan) screen.

Step 1: Review the AFCARS data entry screen.

The **AFCARS** screen should be reviewed to ensure that AFCARS related information is entered. For example, the clients' sex, race, and ethnicity can easily be entered at the time of adding the client to the system.

After selecting a client, select the **AFCARS** button from the **Client** drop-down menu. (See Figure 14.5)

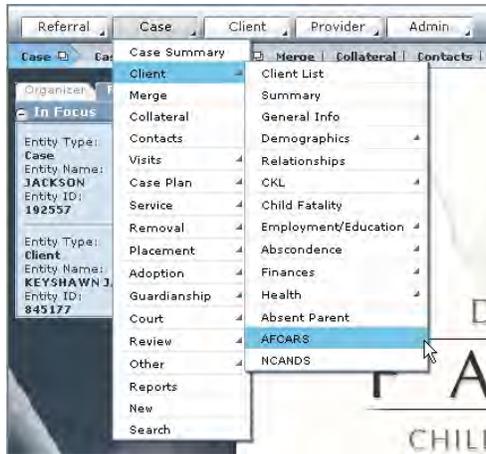


Figure 16.5

Review each tab to ensure that the social worker did not omit any information that could be provided. Click the **Missing Information** button to view a list of missing AFCARS related information. (See Figure 14.6)

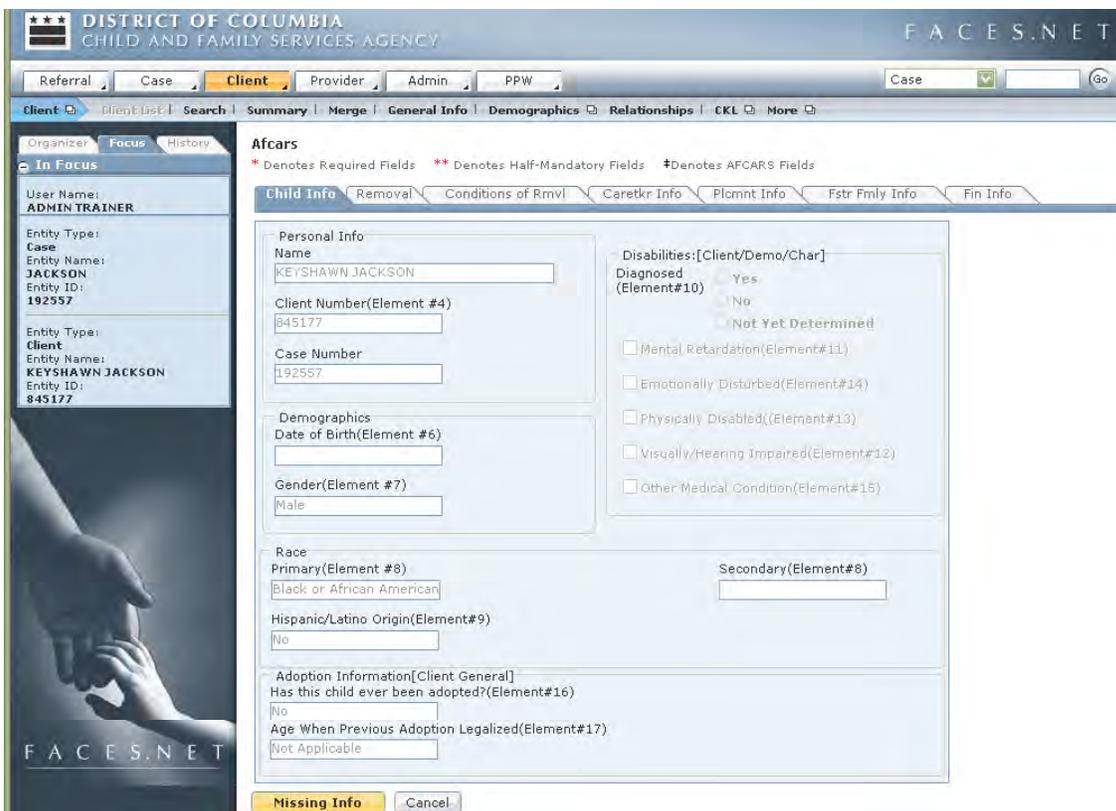


Figure 16.6

For more information about AFCARS please see: http://www.acf.hhs.gov/programs/cb/stats_research/afcars/aar/dc/report_background.htm and the CFSA Intranet website or the Office of Policy Planning and Program Support at (202) 724-7100.

NCANDS

The National Child Abuse and Neglect Data System (NCANDS) is the primary source of national information on abused and neglected children known to State child protective services agencies. This system is a voluntary national data collection and analysis program that was created as part of the Child Abuse Prevention and Treatment Act, and implemented by the U.S. Department of Health and Human Services (DHHS). By compiling relevant information about child abuse and neglect, NCANDS contributes to the creation of effective child protective services policy and programs.

Two Main NCANDS Components

The NCANDS collects data, aggregate data, and referral level data on children who are subjects of reports of alleged maltreatment.

CFSA must report the following:

- The number of children and families receiving preventive services;
- The number of reports and investigations of child abuse and neglect;
- The number of victims of maltreatment; and
- The number of child fatalities.

NCANDS submission consists of automated case records generated by FACES.NET. The case-level data submitted to NCANDS includes the age and sex of all children in a report, types of maltreatment, risk factors, services provided, and characteristics of perpetrators.

Reports

Each year, the Children's Bureau within DHHS publishes an annual report and analysis of the most recent NCANDS data. The most recent NCANDS report, *Child Maltreatment*, compares data from previous years.

NCANDS data is used in other nationwide child safety reports. The *Annual Child Welfare Outcomes Reports* contains data on each State's progress toward improving the safety, permanency, and well being of the nation's children. In that report, the NCANDS is used to measure State progress in reducing the recurrence of child abuse and neglect. In addition, NCANDS data is incorporated into State Child and Family Services Reviews. The purpose of these reviews is to ensure conformity with the State plan requirements in Titles IV-B and IV-E of the Social Security Act, and to help States improve child welfare services and outcomes for families and children who receive services.

Helpful Websites

Child Maltreatment

http://www.acf.hhs.gov/programs/cb/stats_research/index.htm or
<http://www.cwla.org/programs/childprotection/childprotectionfaq.htm>

Child Welfare Outcomes Annual Report

<http://www.acf.hhs.gov/programs/cb/systems/index.htm>
http://www.afterschool.ed.gov/programs/cb/stats_research/index.htm
http://cbexpress.acf.hhs.gov/articles.cfm?issue_id=2002-04&article_id=427

National Data Archive on Child Abuse and Neglect

<http://www.ndacan.cornell.edu>

For further reference to NCANDS requirements see the electronic form of the CFSA's Policy and Procedures through the CFSA Intranet website or the Office of Policy Planning and Program Support at (202) 724-7100.

FACES.NET Guide

This section reviews what needs to be done in FACES.NET to review whether proper NCANDS information has been entered in to FACES.NET.

Review the **NCANDS** screen(s).

Steps include:

Step 1: Place the cursor over **Client** and click **NCANDS**.

Step 2: Review the **NCANDS** screen.

Ensure that race, ethnicity, living arrangements, and family military background is entered if known. Click the **Missing Information** button to view a list of missing NCANDS related information. (See Figure 14.7)

The screenshot displays the FACES.NET interface for the NCANDS section. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', 'Admin', and 'PPW'. The 'Client' tab is active, showing a sidebar with 'In Focus' information for 'ADMIN TRAINER' and 'KEYSHAWN JACKSON'. The main content area is titled 'NCANDS' and contains a 'Child Info' tab. The form includes sections for 'Personal Information' (Name: KEYSHAWN JACKSON, Case Number: 192557, Client Number: 845177), 'Demo' (Gender: Male, Date of Birth: [empty]), 'Race' (Hispanic/Latino Origin: No, Primary: Black or African American, Secondary: [empty]), 'Living Arrangement' (Current Living Arrangement: [empty], Is Child From Military Family: No), and 'Disabilities' (checkboxes for Physical, Learning, Emotionally Disturbed, Alcohol Abuse, Drug Abuse, Visually/Hearing Impaired, Behaviour Problem, Other Medical Condition, and Mental Retardation). A 'Missing Information' button is located at the bottom of the form, with an arrow pointing to it from below the image.

Figure 16.7

Title IV-E Overview

Title IV-E is a subpart of Title IV of the federal Social Security Act to help States provide proper care for eligible children who need placement outside their homes, in a foster family home or an institution. This program provides funds to States to assist with:

1. the costs of foster care maintenance for eligible children;
2. administrative costs to manage the program; and
3. training for staff, for foster parents and for private agency staff.

Title IV-E benefits are an individual entitlement for qualified children who have been removed from their homes. Federal financial participation in State expenditures for foster care maintenance is provided at the Medicaid match rate for medical assistance payments. This rate varies among States from 50 percent to 78 percent. The District of Columbia's matching rate is 50 percent for monthly payments to families and institutions made on behalf of foster children. Federal financial reimbursement for administrative costs is made at a 50 percent match rate and at a 75 percent rate for State training expenditures. The District makes a quarterly report to the Federal Government to make claims for all three types of reimbursement. This quarterly report is an aggregate expenditure and claim reimbursement total.

There are two major concepts within the Title IV-E program that determines whether federal reimbursement can be claimed for a child: Eligibility and Reimbursability. When a foster care IV-E determination is completed, a child is determined to be ineligible, eligible but not reimbursable, or both eligible and reimbursable. A child must be eligible in order to be reimbursable. The determination of IV-E eligibility and reimbursability for the child allows the state to claim federal IV-E reimbursement for the child's maintenance costs. The Title IV-E eligibility also allows the state to obtain federal Title IV-E reimbursement for administrative and training costs associated with the child.

Title IV-E Eligibility: Initial IV-E eligibility is determined based on information regarding the child's initial removal from his or her home, and the child welfare agency obtains legal responsibility for the child. Once a child is determined initially eligible, IV-E eligibility is re-determined annually for the child over the duration of the out-of-home care episode.

If a child is determined not ineligible, then the child is TITLE IV-E not eligible for the duration of the out-of-home care episode. If a child returns home for more than 6 months or if the agency's legal responsibility ends while the child is home, a new episode begins when the child re-enters out-of-home care and a new TITLE IV-E eligibility determination must be conducted.

Title IV-E Reimbursability: The child must be determined TITLE IV-E eligible and reimbursable for the state to claim Title IV-E reimbursement for the maintenance costs of the child. The agency managing the child's case and the court must meet certain TITLE IV-E procedural requirements for the child to be reimbursable. For children who meet IVE eligibility and reimbursability requirements, the federal government shares in the cost of:

- **Maintenance:** Maintenance costs are for payments associated with maintaining the child who has been removed from his/her home, including the room and board, applicable child care costs, and other supervision costs for licensed foster care, treatment foster care, shelter care, group home care and residential care centers. The child's placement must be with a licensed provider or facility to claim Title IV-E reimbursement. For Title IV-E eligible children, the federal share of maintenance costs is based on the federal rate for Title XIX Medical Assistance program benefits, which is approximately 58%.
- **Administrative Services:** The public child welfare agency will incur administrative costs when working with the child, the child's family, and the care provider. The Title IV-E program reimburses administrative costs associated with case managing children who have been removed from their homes. The amount of reimbursable administrative costs is determined using a random moment time study or other methods. The federal share of administrative costs is 50%, with the administrative reimbursement rate pro-rated by the percentage of children in out-of-home care who are IV-E eligible. The percentage of children in out-of-home care who are IV-E eligible is determined based on the ratio of IV-E eligible children to the total number of children in out-of-home care. Frequently, the percentage of IV-E eligible children is referred to as the state's IV-E "penetration rate." Fluctuations in the penetration rate affect the net rate of federal IV-E reimbursement for administrative costs.
- **Training:** Training costs for public child welfare activities qualify for an enhanced IV-E reimbursement rate. Allowable training costs include training for Social Workers to manage child welfare activities for children and for foster parents and facility staff who work with children. The Child Welfare Training Partnerships provide most IV-E training in the state. The federal share of eligible training costs is 75%, with the training reimbursement rate also pro-rated by the IV-E penetration rate.

The CFSA Determination Process: At CFSA, the determinations are made by a separate eligibility Unit, who is responsible for making all IV-E determinations. When making each determination the eligibility specialist interFACES.NET with the IV-E module in FACES.NET. The module provides the specialist with appropriate information, such as client name, DOB, household family composition at the time of removal, and court order details recorded in the system by the social worker or other program staff. The specialist makes the determination by following the module's sequence of steps and entering the required data. While making the determination the specialist reviews both hard copy data and electronic data already recorded in the system. This review assures that information is accurately recorded in the system, as the specialist reviews hard copy documents such court orders and court reports. The specialist verifies household income by reviewing tax records and TANF receipts through an ACEDS interface, as well as reviewing hard copies of any income-related documents. The module also allows the specialist to record the SSI eligibility of the client, so that this information is included in the determination.

Once a determination is initiated, the system allows the specialist or other appropriate user to stop and pick-up where he/she left off at a later time. The system also keeps an on-line audit trail, which allows the specialist or other appropriate user to review any changes made to a determination. As the steps in the module are completed, the system makes calculations at each step to determine if the criterion for eligibility has been satisfied. Once the final determination has been made the client is classified as Ineligible, Eligible Reimbursable, or Eligible Not-Reimbursable. Claims for IV-E reimbursement are only made on clients that are classified as ER and placed in a licensed facility. All claims data is stored and owned by CFSA.

The IV-E unit keeps a hard copy file of all documents used to make each determination. These files are used by the specialists to keep track of all information used in making the initial determination and to provide supporting documentation for all re-determination. They are also used to resolve any data conflicts that may arise. Hard copy documents are also kept in the client's case file, which is held by the on-going social worker.

The IV-E unit also uses the module to make IV-E re-determinations. The re-determination is to be made either: annually; when there is an appropriate court order; or a change in the client's income to would call for a new determination to be made.

AFCARS

AFCARS (Adoption and Foster Care Analysis and Reporting System) is a system instituted by the Federal government for measuring performance outcomes related to safety and permanency of children in Foster Care.

All states and the District of Columbia are required to submit AFCARS data semi-annually to the Administration for Children and Families (ACF). AFCARS fields are identified in blue in FACES.NET. Section 16 of this manual is dedicated to Federal Reporting, however elements are interwoven throughout the manual as it is, in case practice. (See Section 16 for more information.)

This screen summarizes the AFCARS mandatory fields within the case in focus.

Steps Include:

- Step 1: Place the cursor over the **Client** menu and click **AFCARS**.
- Step 2: Click the **AFCARS** button.
- Step 3: Fill in all possible fields on the first tab.
- Step 4: View information on all tabs.
- Step 5: Click the **Missing Info** button.
- Step 6: View the missing information pop-up box and note what information is missing and where you can go within FACES.NET to enter it.



Note: You may need to switch the client in focus and check the AFCARS information by navigation to Case ► Client ► Client List ► Select Client ► Show; then repeat steps 1 through 6.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The main window shows the 'Afcars' form for a client named Keyshawn Jackson. The form is divided into several sections:

- Personal Info:** Name (KEYSHAWN JACKSON), Client Number (845177), Case Number (192557).
- Demographics:** Date of Birth, Gender (Male).
- Race:** Primary (Black or African American), Secondary (empty).
- Hispanic/Latino Origin:** No.
- Adoption Information:** Has this child ever been adopted? (No), Age When Previous Adoption Legalized (Not Applicable).
- Disabilities:** A section with checkboxes for various conditions: Mental Retardation, Emotionally Disturbed, Physically Disabled, Visually/Hearing Impaired, and Other Medical Condition. The 'Diagnosed' status is currently set to 'Not Yet Determined'.

At the bottom of the form, there are buttons for 'Missing Info' and 'Cancel'.

Figure 16.8

Federal Reimbursements of Title IV-E and the SSA

Title IV-E is a federal program that provides federal reimbursements for foster care, adoption assistance for special needs children, and related administrative costs. Title IV-E eligibility is determined on a one-time basis when the child enters foster care. The child does not automatically receive federal benefits; instead, certain criteria must be met in order for the child to be eligible.

FACES.NET shall notify the Title IV-E Eligibility specialist, within five (5) days after a child is placed. Title IV-E Eligibility specialist shall in turn notify the Income Maintenance Administration.

Criteria Necessary for Making an Eligible IV-E Determination

In order for a child to be determined eligible for an IV-E subsidy, the following factors must be met:

- Child must meet the criteria of the “Aid to Families with Dependent Children (AFDC) Relatedness Test” when the child is removed. The test considers the child’s date of birth, citizenship, deprivation of parental support, household income, and the relationship of the child to the caretaker during the previous six months of removal;

- The court order authorizing the child’s removal must contain language that states “reasonable efforts” were made to prevent removal of the child from his/her home and “continuation in the home would be contrary to the welfare of the child”. That initial and commitment order is scanned into FACES.NET;
- Child must be placed with a licensed provider while in the custody of the agency;
- Child must also have correct home removal information entered in FACES.NET.

In order to produce maximum IV-E reimbursement for CFSA, the Eligibility specialists require certain documentation in each child’s file to make IV-E determinations possible.

This documentation includes:

1. All pertinent court orders relating to each home removal, and
2. Copy of the birth certificate and Social Security card.

If these documents are not located in the child’s file, the Eligibility specialists must return the file to the social worker. This information must be obtained before the determination can be completed.

The information entered in FACES.NET has an enormous impact on the amount of funding the agency will receive for child and family services. If the information entered in FACES.NET meets all the necessary eligibility criteria mentioned above, the agency receives maximum reimbursement for services provided to children. An increase in reimbursement from the federal government allows the agency to provide more services to children and families.

The **IV-E Finance** screens depend on entry of case information in FACES.NET to make a determination in the system. Fields from the following screens are linked to the **IV-E** screens and are essential for determining a child’s eligibility:

- **Client Information** screen – Date of Birth, Citizenship, and Participating as Child;
- **Removal** screens – Date Removed from Caretaker, Type of Removal, Removed from, and Conditions of Removal;
- **Court Order** screens – Court Order Date, Associated Home Removal, Reasonable Efforts and Contrary to Welfare;
- **Placement** screens- CFSA can only obtain funding for children in paid placements.



Points to Remember:

Title IV-E reimbursement is another reason why it is so important for a social workers to carefully review removal and legal status information in the case. If caught early and fixed, mistakes can have little impact on the overall effect of federal reimbursement.

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Notes

SECTION 17: SUPPORT TOOLS

Performance Objectives

In this Section, you gain confidence in your ability to:

- How to Enroll in Training
- Accessing the Reports and File Cabinet
- Accessing the Help Functionalities in FACES.NET
- Create and View FACES.NET Alerts



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FACES.NET Guide

Training

The Training Section will teach you how to use the various Training screens in FACES.NET. Most of the screens within training will be used only by the training unit; however, social workers will be able to enroll in classes and view workshop information. New workers must complete the FACES.NET Pre-service training (this course) or the FACES.NET Overview training. Transferring workers and those wishing to expand or refresh their knowledge of a specific part of the FACES.NET system can take courses focusing on narrower topics, such as CPS, Providers, or Adoption. The schedule of FACES.NET training courses is available on the internet at www.cfsa.dc.gov (click on the FACES.NET/CISA link) or on the intranet at www.cfsa.in.dc.gov (click on the Child Information Systems (FACES) link). There you will find both a detailed and at-a-glance view of the monthly training calendar.

FACES.NET Scenario

Role: You are a social worker who wants to enroll in the FACES.NET Overview training class. First you decide to view the workshop information and then enroll into the course.

View Workshop

The Workshop screens allow staff to view descriptions of available workshops and to enter evaluations for workshops attended. Access the Workshops screens through the **Training** lower level toolbar.

Find a Workshop

Steps Include:

- Step 1: Place the cursor over the **Admin** menu, then **Training**, and finally **Search Workshop**.
- Step 2: Enter the search criteria for a workshop (i.e.: enter Workshop Title, or click the Workshop Dates checkbox and enter Start and End dates.) Do not fill out all fields – only fill out those necessary to find the workshop.
- Step 3: Click the **Find** button to display the Workshops Search Results inset grid.
- Step 4: Highlight a workshop from the search results.
- Step 5: Click the **OK** button.
- Step 6: View the workshop.

View workshop information

Steps Include:

- Step 1: Click the **Description** button and view the detailed information on each tab, including the workshop description, title, type of training, category, and location information.
- Step 2: Click the **Evals** button. This is where a worker can complete an evaluation for a specific workshop.
- Step 3: Click the **Eval Summ** button. A worker can view the average results of all the evaluations submitted for the workshop in focus.



Note: Social workers do not have the security to view a list of individuals who are registered for a workshop.

Enroll in Workshop

The Enrollment screen is used to enroll individuals in training workshops. There are two types of workshops to enroll in, CFSA and non-CFSA. Either type of workshop requires a supervisory approval, with the exception of Foster or Adoptive Parents training.

Steps Include:

- Step 1: Place the cursor over the **Admin** menu, then **Training, Enroll, CFSA,** and click **Find Workshop**.

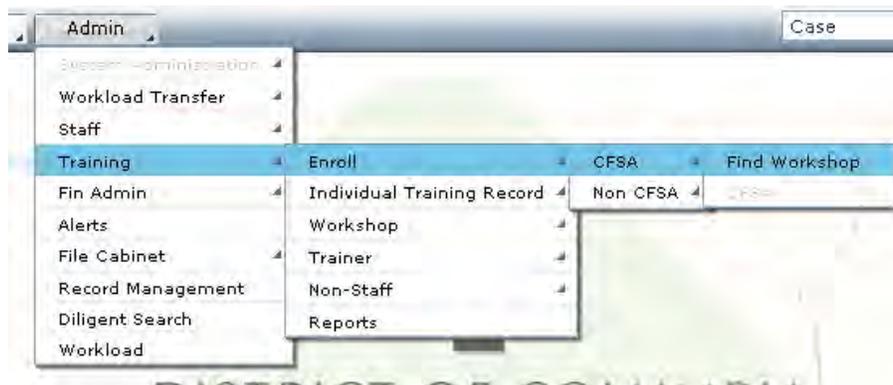


Figure 17.1

The Workshop search screen displays.

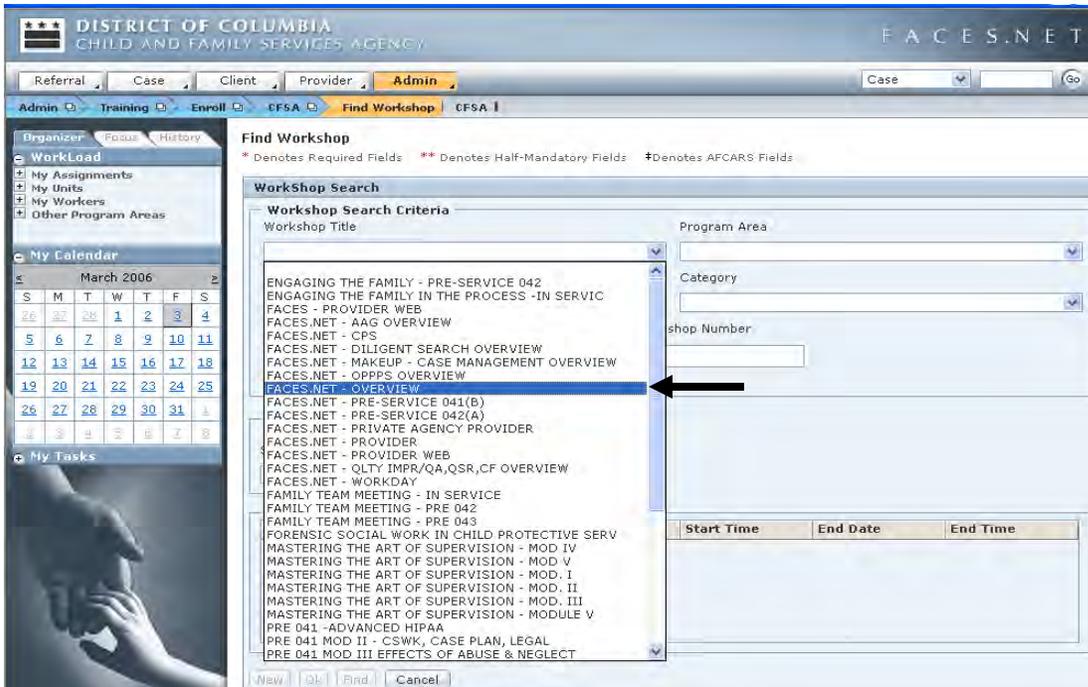


Figure 17.2

- Step 2: Select “FACES.NET Overview” from the **Workshop Title** drop-down list.
- Step 3: Click the **Find** button to display the **Workshop Search Results** list in the inset grid.

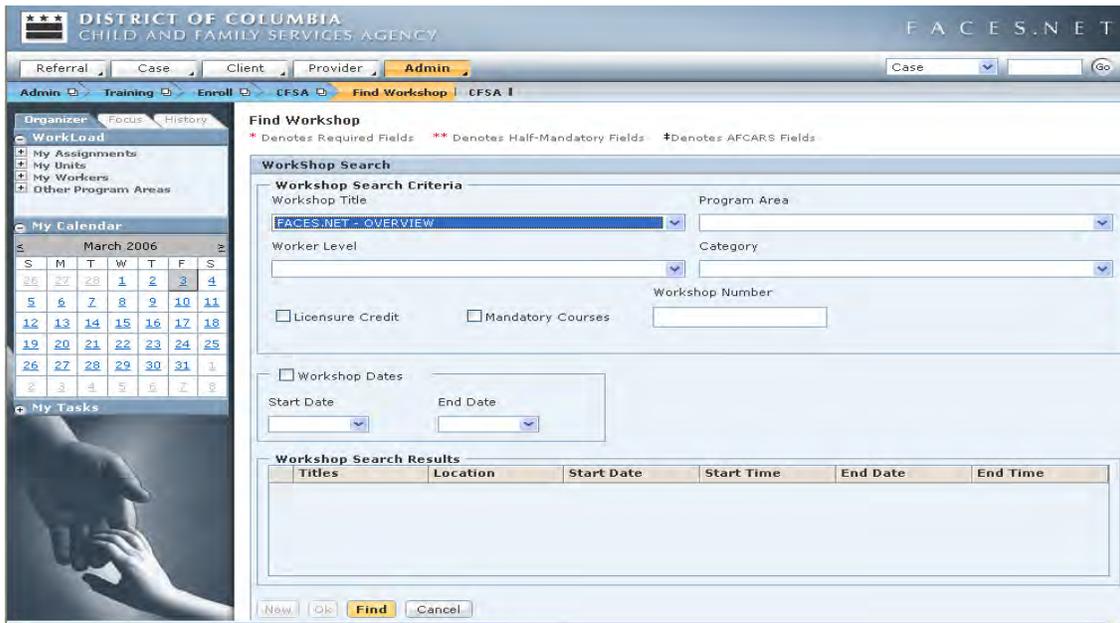


Figure 17.3

- Step 4: Select the workshop from the inset grid.

Step 5: Click the **Ok** button.
The Training breadcrumbs will refresh with a CFS A button.

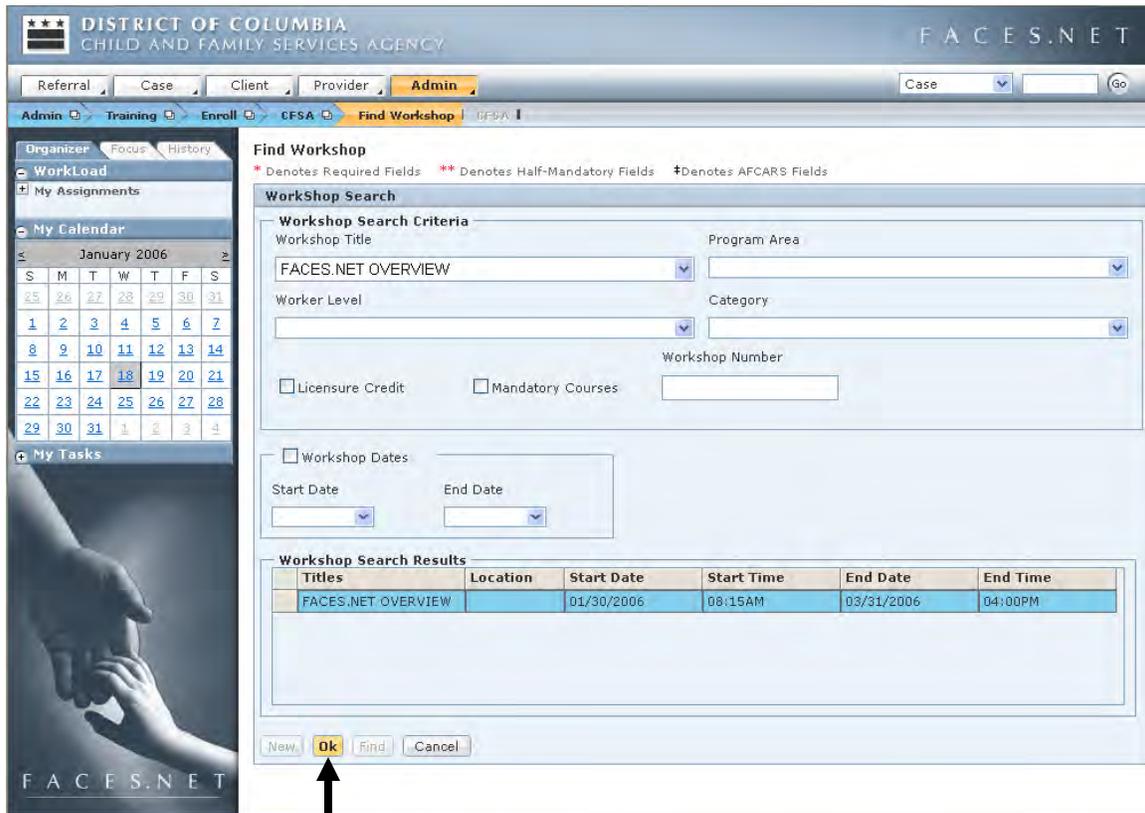


Figure 17.4

Step 6: Click the **CFS A** button.
The Training Enrollment CFS A screen displays.

Step 7: Click the **Find Persons** button to add yourself to the class.
The Search Person screen displays.

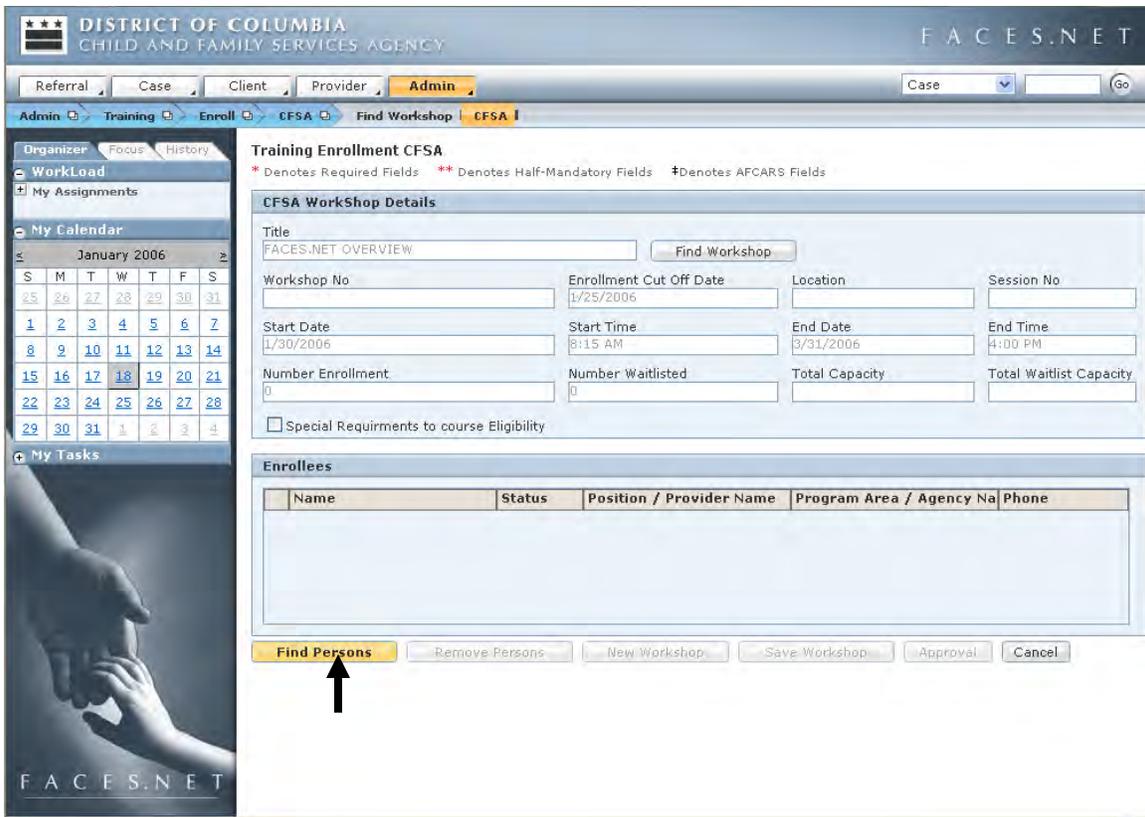


Figure 17.5

Step 8: Click the **Find** button.

Step 9: Select yourself from the search results and click the **Ok** button.
The Training Enrollment CFSA screen displays and previously selected person displays in inset grid.

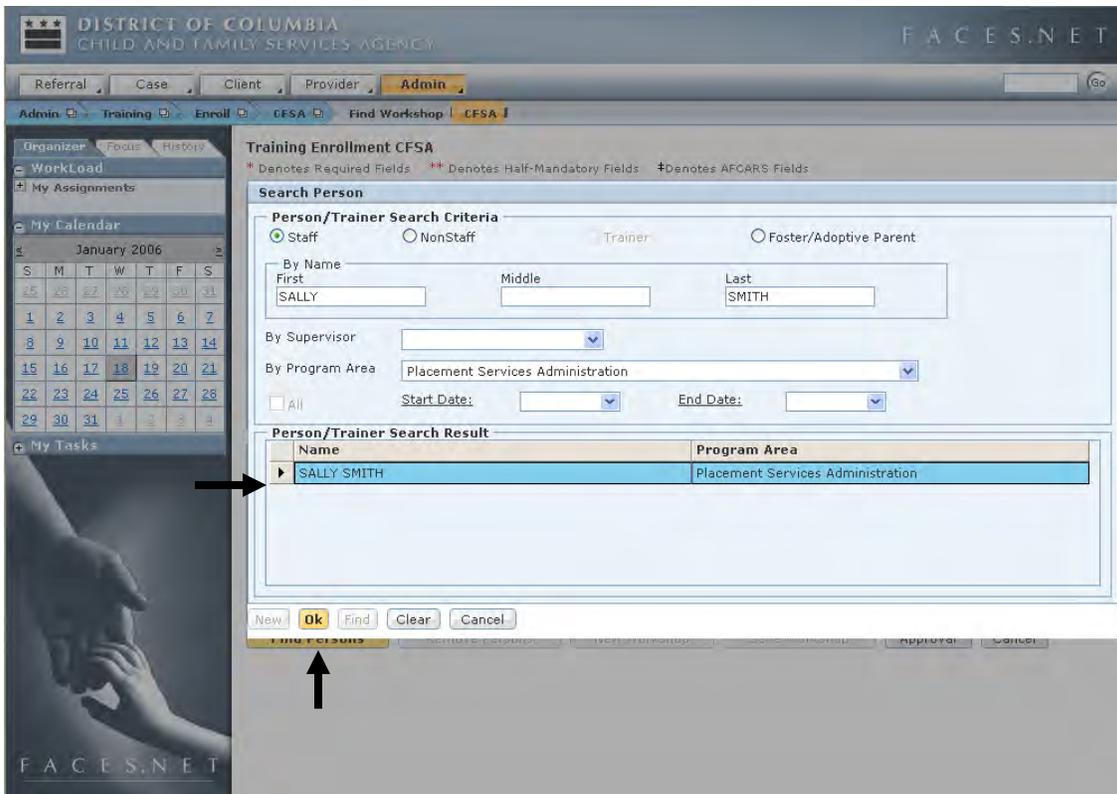


Figure 17.6

Step 10: Click the **Approval** button to create a request for approval to the supervisor.

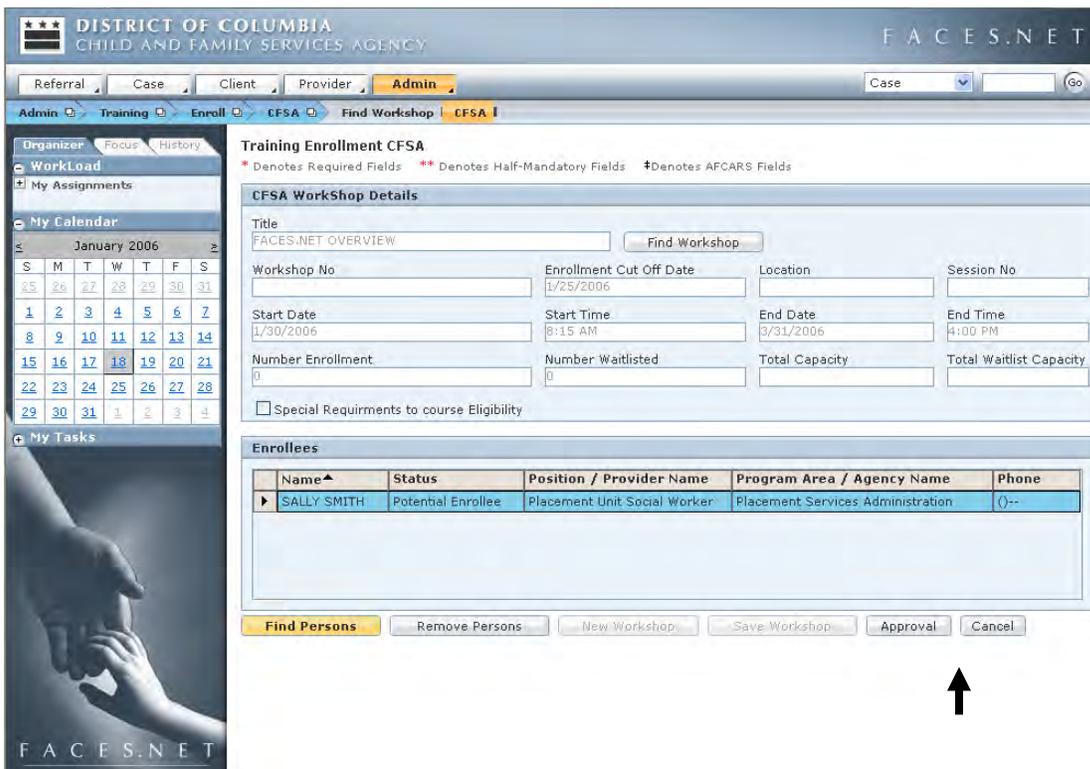


Figure 17.7

Step 11: Click the **Request** checkbox.

Step 12: Click the **Ok** button to send the approval request to the supervisor.

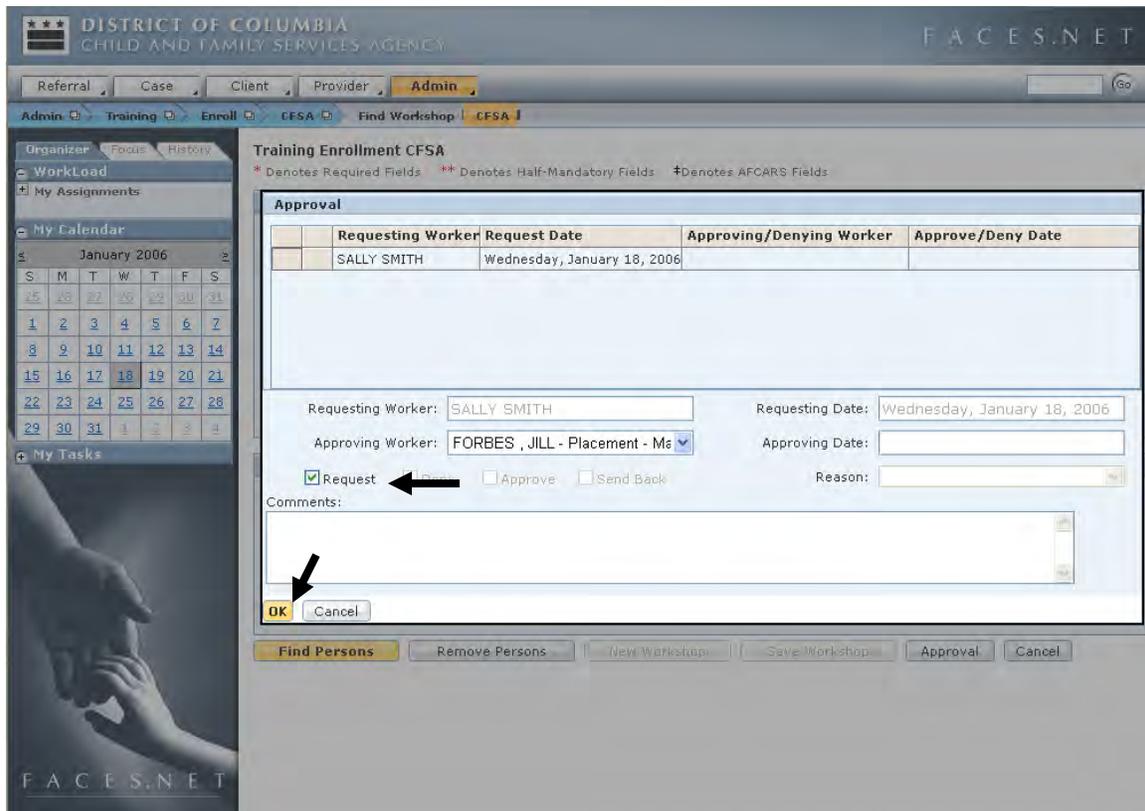


Figure 17.8



Note:

- Individuals requesting enrollment in training are **not** officially registered for a workshop until it is approved by the supervisor.

Alerts

Alerts are built-in FACES.NET reminders of scheduled events. This helps you to remember case related tasks and appointments. Alerts are automatically or manually generated reminders to workers to complete a task by a certain date. This segment will allow you to view Alerts and determine their priority and create alerts for new upcoming tasks.



Figure 17.9

FACES.NET Scenario

Role: As a social worker, you want to generate an alert to remind you of an upcoming event.

View Alerts

In the following exercises, you will check existing alert status, create a new alert, and display the court calendar.

Steps Include:

- Step 1: To check the status of alerts in a case, first click the **My Alerts** link in the left navigation window. Alerts are located under **My Tasks**.
- Step 2: Search for the alert by selecting the case/referral ID for the alerts for a specific case.



Figure 17.10

- Step 3: Or, click the **All** radio button to display all alerts, or click the radio button corresponding to the desired filter criteria and fill out the required fields to filter the displayed alerts.
- Step 4: Click **Search** to start searching.

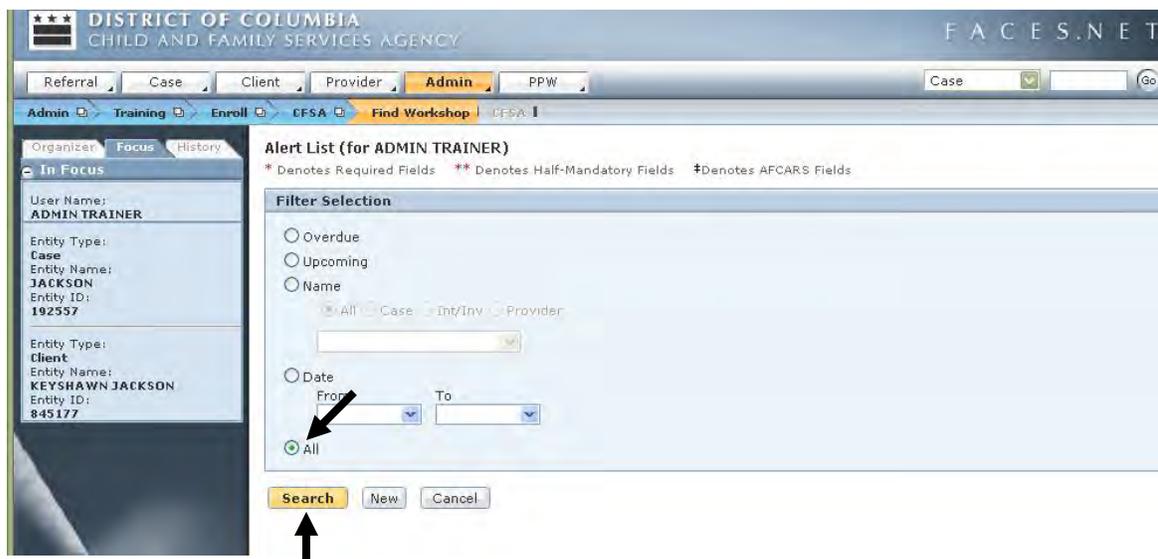


Figure 17.11

Step 5: The **Alert Search** screen displays all filtered alerts.

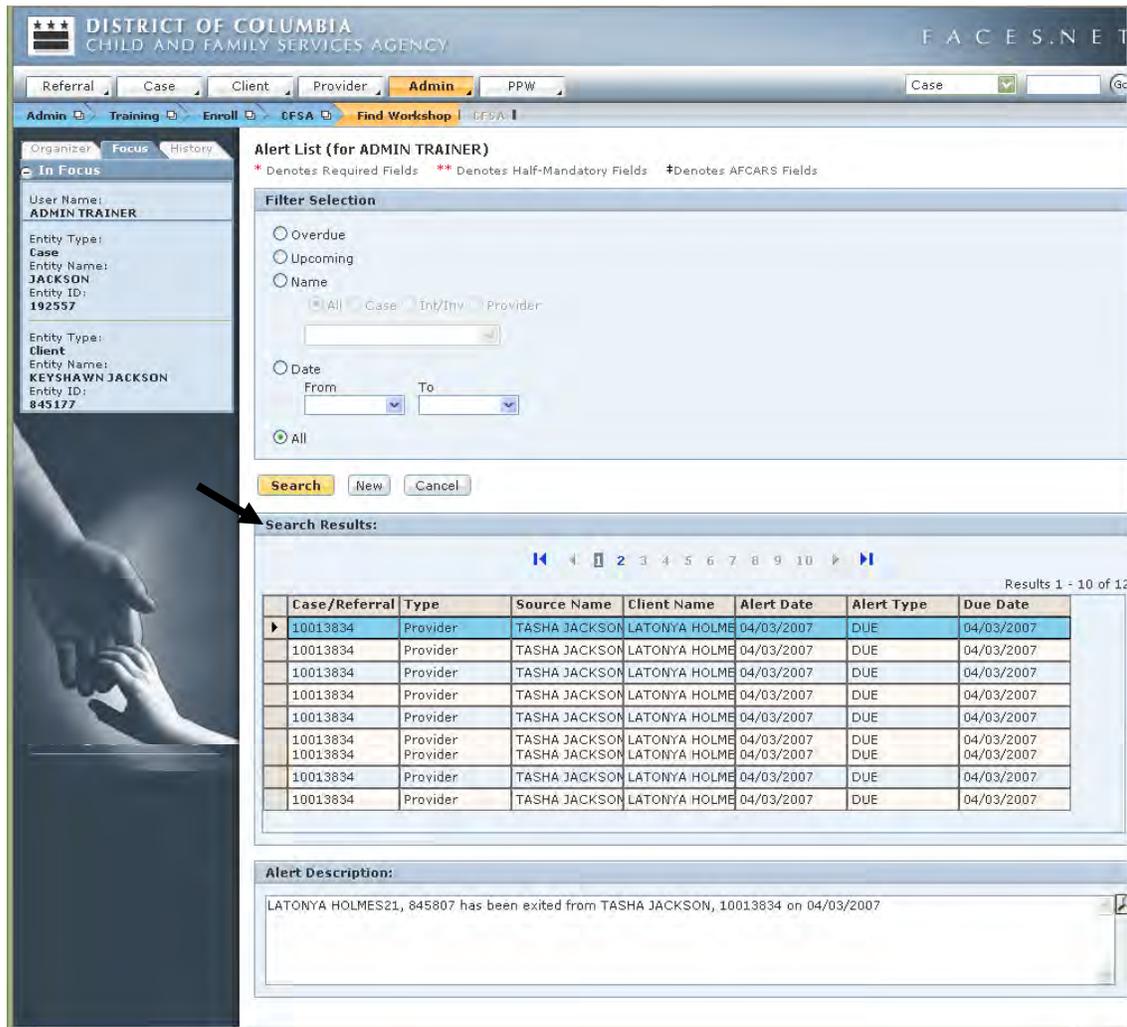


Figure 17.12

Create New Alert

Alerts can also be created to remind you of any upcoming event in a case or other record in FACES.NET.

Steps Include:

Step 1: Click on **My Alerts** from the left navigational window.

Step 2: To create a new Alert, first click the **New** button on the **Alert List** window.

Step 3: Choose the radio button corresponding to the type of record the new Alert will be associated with. Then, choose the desired information in the **Name**, **Client**, and **Due Date** fields.

Step 4: Enter a description and click **Save**.

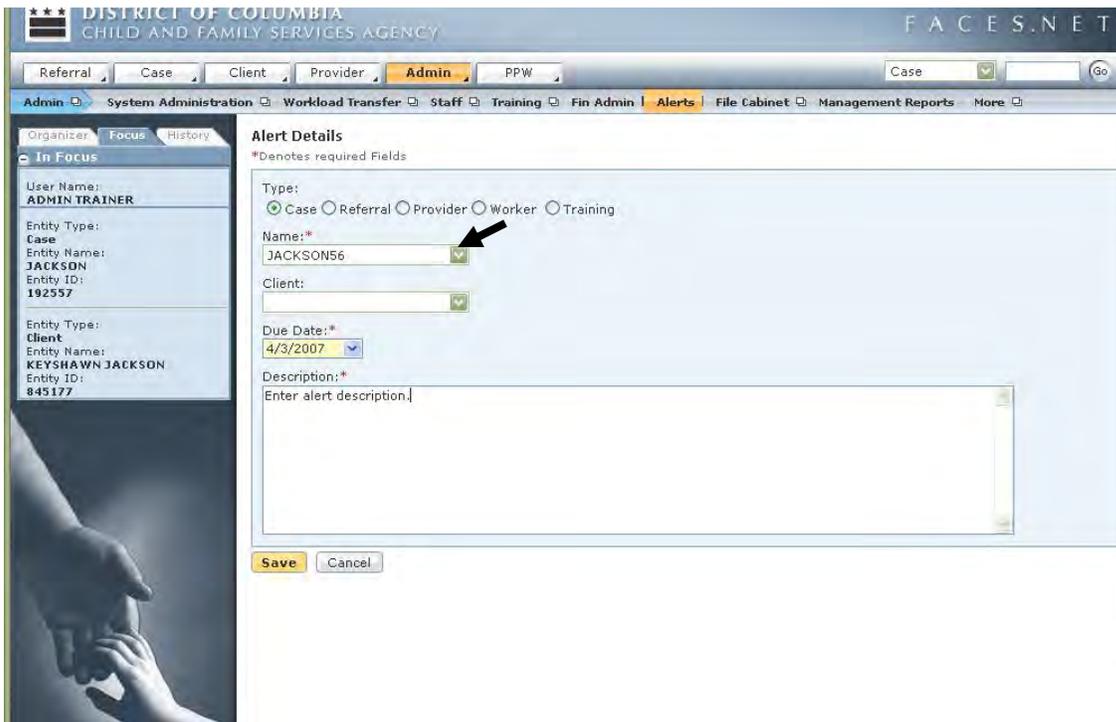


Figure 17.13



Note:

- **Due Date** and **Description** are required fields.
- The **Name** automatically comes up. If that is not the name, then you use the drop down box and select the name you want.
- Alerts appear in your calendar as a light blue background.

Reports and File Cabinet

This segment clarifies how to retrieve, view and print reports from FACES.NET. FACES.NET generates several types of reports: On-line, Dynamic Data Exchange (DDE) and Template. In addition, Management reports are generated from FACES.NET data.

In order for the information in the reports to be meaningful, information in the system must be accurate and up-to-date. It is the worker's responsibility to enter detailed, up-to-date, and complete information into the FACES.NET system. Most functions in FACES.NET, Intake/Investigation, Case, Provider/Directory, Training, and Personnel, involve entering data that can be summarized in reports.

The File Cabinet is a storage bin for documents that relate to FACES.NET case, referral, assessment, and resource or staff person. The File Cabinet can contain FACES.NET-generated documents as well as Microsoft Word documents. By linking documents electronically, all users who have access to the File Cabinet have access to documents that relate to cases, referrals, assessments, etc. without sending electronic copies or checking out the physical case file.

In this segment, you will learn how to navigate in the File Cabinet, to place files appropriately in the File Cabinet and to move files among File Cabinet folders. The File Cabinet is accessed through the File Cabinet button on the main level toolbar. However, it is necessary to begin by bringing cases into focus in order to access File Cabinets for a specific case.

In the Jackson case, we will view a contact report, listing all of the contacts made in the case, or how to use the file cabinet to store additional case notes, letters, or other documents relating to the case. In the following example FACES.NET Scenario, we will examine a copy of the Court Report.

On-line Reports

On-line reports are generated in FACES.NET and cannot be edited by workers. Staff should always “preview” an on-line report to review the report for accuracy before printing.

Steps Include:

Step 1: Bring a case into focus.



Figure 17.14



Figure 17.15

- Step 2: Click the **Reports** button.
- Step 3: Select the Contact On-line report. This report displays all contacts made between social workers and clients in the case that have been recorded in FACES.NET.
- Step 4: Click the **Preview** button to display a preview of the report.
- Step 5: Enter the date range, clients involved in the contact, staff members who performed the contact, or choose **All**.

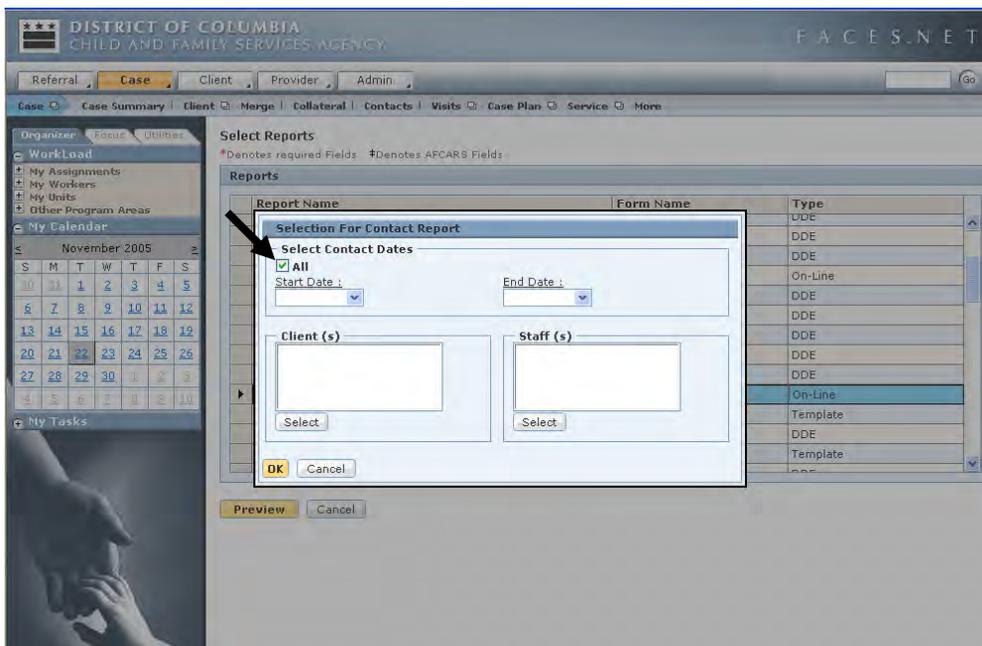


Figure 17.16

Step 6: Click **OK**.

Step 7: Review the report.



Note: As you page through the report, you see information that you entered in FACES.NET. Please do not print the report at this time.

DDE Reports

Dynamic Date Exchange (DDE) Reports are generated in FACES.NET, but are reviewed, saved, and printed from Microsoft Word. The report can be edited in Word. However, only when the worker returns to FACES.NET and corrects the information on FACES.NET screens and re-generates the report is the report truly accurate. Examples of DDE reports include transfer summaries and ICPC requests. In the example below, we will view the Medical Assistance form 30-A.

Steps Include:

- Step 1: Place the cursor over **Case** and click **Reports**.
- Step 2: Highlight the Medical Assistance (FORM – 30A) report and click **Preview**.
- Step 3: Select one or more clients from the list, and click **Preview**.
- Step 4: The report will be exported to Microsoft Word. If the Microsoft Word window does not appear, click the Word icon on the taskbar to display the window.
- Step 5: A copy of the report can be saved or printed. To save the report in Microsoft Word:
 - Click the **File** button;
 - Click **Save As**;
 - In the appropriate field on the Save As pop-up window, enter a meaningful file name;
 - Click **OK**.



Note: Review the report for accuracy. **CAUTION:** Do not correct information just on the report. Correct inaccuracies in FACES.NET screens and re-run the report. Only then is the information on the report and in FACES.NET the same.

Template Reports

A Template Report is very different from the other two reports just viewed. These are not reports generated with FACES.NET information. Rather, they are forms available to print and complete as necessary.

Steps Include:

- Step 1: Place the cursor over the **Case** menu and click **Reports**.
- Step 2: Select a Template report (choose Unusual Incident report).
- Step 3: Click the **Preview** button to display a preview of the report.
- Step 4: Wait until the report is completely generated.
- Step 5: The report will be exported to Microsoft Word. If the Microsoft Word window does not appear, click the Word icon on the taskbar to display the window.
- Step 6: Save the report in Microsoft Word.
 - Click the **File** button.
 - Click **Save As**.
 - In the appropriate field on the Save As popup window, enter a meaningful file name.
 - Click **OK**.



Note: After saving the report in Microsoft Word, you are able to retrieve it again to review or print the report. You can also enter information directly into the Template report. You can save the completed Template (form) so that you can place it into the Case's File Cabinet. Please do not print the report at this time.

Management Reports

Management reports allow supervisors, program managers and now social workers to track various statistics and measures of case management performance. For example, a management report can be generated that tracks which cases have current case plans. Management Reports are accessed through an icon on the Bread Crumbs tool bar that will only appear if you have the appropriate security level. Management reports are now available for social workers via the Internet. They are non-modifiable but may be printed.

The following is a sample of reports used by Social Workers:

Case Plan

- CMT163 - Case Plans for CFSA Children in Foster Care As of ... Best Practices # VII.1
- CMT164 - Case Plans for Family Cases As of ... Best Practices # VII.1
- CMT266 - Family and Child Case Plans Expiring in the Next Month As of...

Visits

- CMT012 - Parent-Child Visits to Foster Children with a Goal of Reunification Month of X, Best Practices # VII.3
- CMT165 - Social Worker Visits to Children in Foster Care
- CMT166 - Monthly Visits to Children in in-home settings - Best Practices # III.3

Steps Include:

Step 5: Click on the **Admin** drop down menu.

Step 6: Select the **Management Report** button.

Step 7: Pick the **Report Category**.

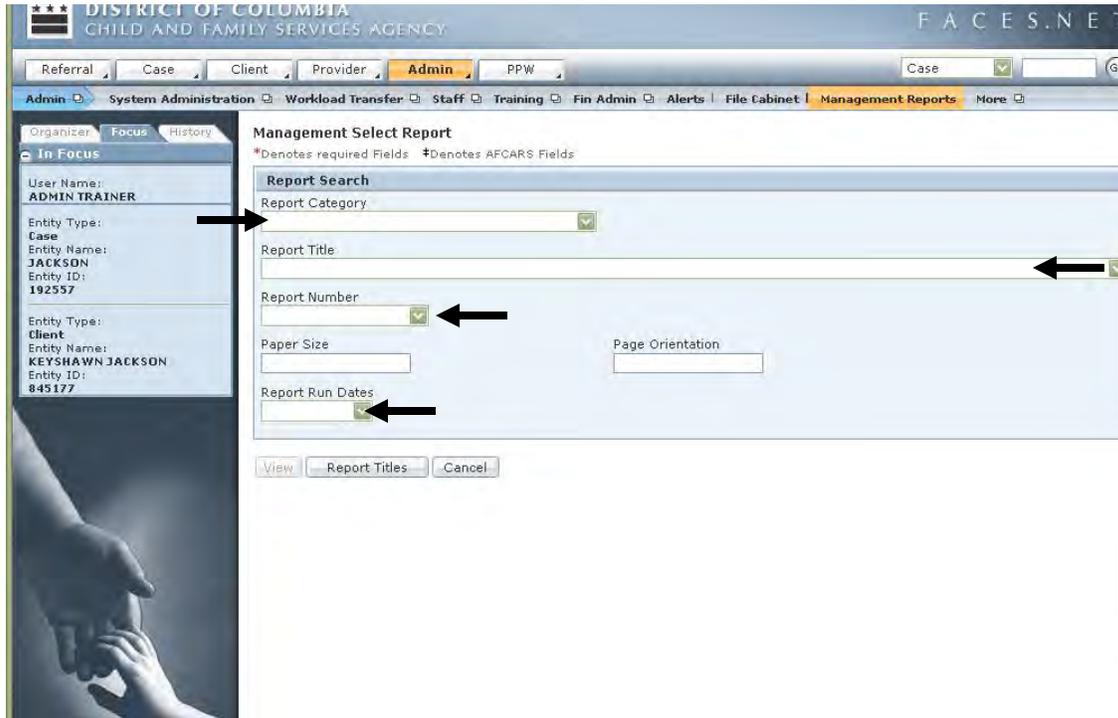


Figure 17.17

Step 8: Pick the **Report Title**.

Step 9: Pick the **Report Run Date**.

Step 10: Click **View**.



Note:

- You may choose the report by the report number;
- Click **Report Titles** to see a list of all available reports.

File Cabinet

There is also a file cabinet that stores reports that are not to be amended. For example, transfer summaries are automatically stored in this file cabinet upon approval.

Legend

The **Open** command button opens the document that is highlighted.

The **Import** command button imports documents from your hard drive.

The **Details** command button shows who imported the document and when.

The **Plus Signs** on the left expand the topic. The minus signs on the left condense the topic.

Steps Include:

Step 1: Place the cursor over the **Admin** menu, then **File Cabinet**, and click **File Cabinet**.

Step 2: File Cabinet is setup in a tree formatted layout. Click on the **plus signs** to the left of the folders to navigate to a particular document.

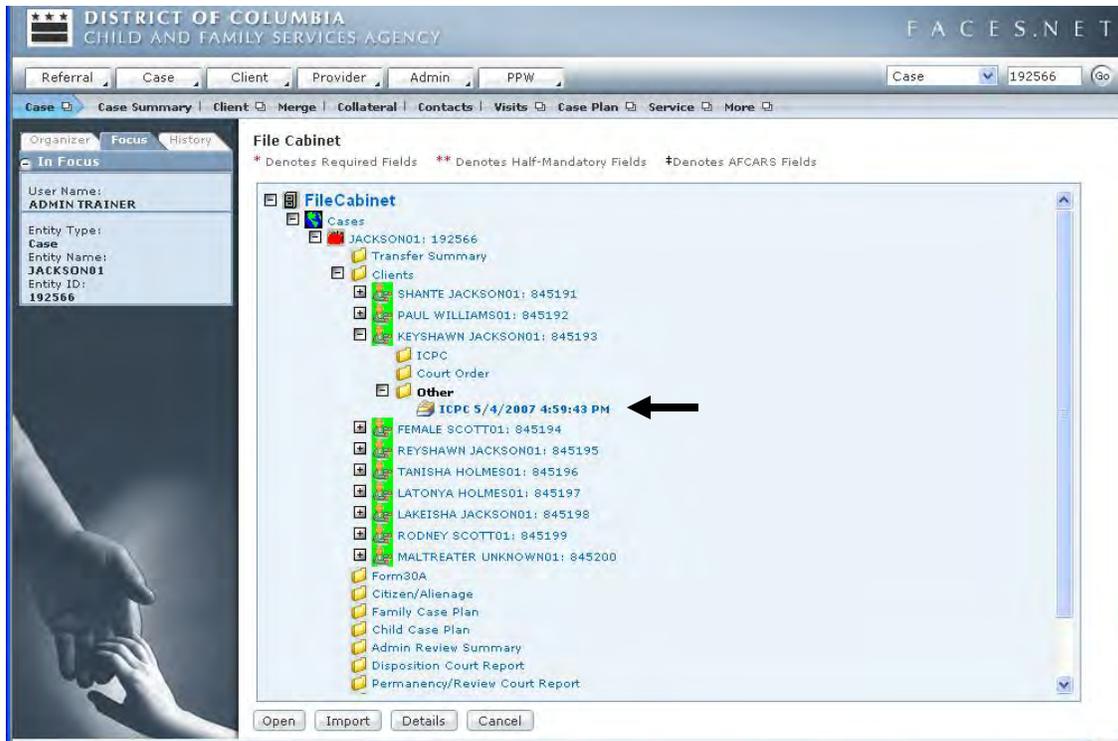


Figure 17.18

Step 3: Highlight the document and click **Open**.



Note: To learn how to import documents to the file cabinet, please view the online tip sheet “How to Import Documents to the File Cabinet” via the CFSA intranet and internet.

Notes

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SECTION 18: APPENDIX



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Glossary of Terms

This Glossary of Terms contains basic information pertaining to the laws, regulations and practice principles which guide the operation of the Child and Family Services Agency (CFSA) of the District of Columbia.

The primary sources for materials in the Glossary are:

1. D.C. and federal law and regulation including definitions in use in the Adoption and Foster Care Analysis and Reporting System (AFCARS);
2. Program Instruction ACYF-PI-CB-96-01 entitled Amendments; Public Law 103-432;
3. Definitions established under the federal National Child Abuse and Neglect Data System (NCANDS);
4. CFSA staff experienced in child welfare practice; and
5. The LaShawn Revised Implementation Plan, August 1, 1994.

Abandoned Child: A child who is neglected in that:

1. the child is a foundling whose parents have made no effort to maintain a parental relationship with the child and reasonable efforts have been made to identify the child and to locate the parents for a period of at least 4 weeks since the child was found;
2. the child's parent gave a false identity at the time of the child's birth, since then has made no effort to maintain a parental relationship with the child and reasonable efforts have been made to locate the parent for a period of at least 4 weeks since his or her disappearance;
3. the child's parent, guardian or custodian is known but has abandoned the child in that he or she has made no reasonable effort to maintain a parental relationship with the child for a period of at least 4 months; or
4. the child has resided in a D.C. hospital for at least 10 calendar days following birth of the child, despite a medical determination that the child was ready for discharge from the hospital, and the parent, guardian or custodian of the child did not undertake any action or make any effort to maintain a parental, guardianship, or custodial relationship or contact with the child. (D.C. Code § 16-2316(d)).

Abandonment: when a child is left alone or with others and the child's caretaker did not return or make his or her whereabouts known. (AFCARS, 45 CFR § 1355 App. A).

Abuse: When a parent, guardian or custodian inflicts or fails to make reasonable efforts to prevent the infliction of physical or mental injury upon a child, including excessive corporal punishment, an act of sexual abuse, molestation or exploitation, or an injury that results

from exposure to drug-related activity in the child's home environment. (D.C. Code § 16-2301 (23)).

Active: Status of a case in which an investigation is being conducted or services are being provided by Child and Family Services Agency (CFSA) and/or a contractual agency. See also, open

Adjudication: See fact-finding hearing.

Administrative Review: One of two types of periodic review that meet federal requirements pertaining to cases of children in foster care. The system of case reviews established by P.L. 96- 272 is intended to: 1) assure that the child has a case plan which meets federal requirements; 2) review the status of the child; and 3) assure that certain procedural safeguards are applied in the case with respect to the legal rights of the child and the parents. Federal law requires that an administrative review be open to the participation of the parents of the child and conducted by a panel of appropriate persons at least one of whom is not responsible for the case management of, or the delivery of services to, either the child or the parents who are the subject of the review. *See* also, periodic review and P.L. 96-272. (P.L. 96-272, the "Adoption Assistance and Child Welfare Act of 1980" section 475(5)(B)).

Adoption: The method provided by State law which establishes the legal relationship of parent and child between persons who are not so related by birth, with the same mutual rights and obligations that exist between children and their birth parents. This relationship can only be termed "adoption" after the legal process is complete. (AFCARS, 45 CFR § 1355 App. A).

Adoption Assistance: a program established by Title IV-E of the Social Security Act ("Title IV-E") and which provides resources for the placement of children, with special needs, in adoptive homes.

Adoption Assistance Agreement: a written document which states the understanding between a child's adoptive parents and CFSA regarding the funding that will be paid to the adopters to meet the child's special needs.

Adoption Decree: Under D.C. law, a final or interlocutory (interim) decree granted when the Court finds that the prospective adoptee is suitable for adoption, the adoptive parent(s) can provide for the adoptee and that the adoption will be in the best interests of the prospective adoptee. A final decree may not be granted until the prospective adoptee has lived with the prospective adoptive parent for at least 6 months. (D.C. Code § 16-309).

Adoption Finalization: The finalizing of the adoption process with the final adoption court decree.

Adoption Plan: The plan for recruiting and matching an adoptive family with the child to be adopted.

Adoption Services: Services or activities provided to assist in bringing about the adoption of a child. (AFCARS, 45 CFR § 1355 App. A).

Adoption Social Worker: Social worker who provides for the services needs of the adoptee and the adoptive family to assist in bringing about the adoption of a child. The adoption social worker is the case manager following placement.

Adoption Subsidy: Payments made *an* a short- or long- term basis pursuant to an agreement between D.C. and an adoptive family concluded prior to an adoption. The payments are made on behalf of a child with special needs when it appears that adoption could not take place without financial aid. Eligibility for a subsidy pertains to the child and continues until the child reaches 18 years of age, with reviews of continuing need annually. Subsidized adoptions may be funded under Title IV-E of the Social Security Act, by D.C. or through other public or private resources. (D.C. Code § 3-115) .*See* also, special needs.

Adoptive Home (Pre-finalization): The District of Columbia, in its regulations, includes families waiting to adopt when it defines an adoptive family as "a household, which has been approved by a child-placing agency to accept a child for adoption, which may be awaiting placement of a child or may have a child in the home" (29 DCMR § 1645.1). Federal law, on the other hand, distinguishes families waiting to adopt from those who have adopted a child by defining the former as "pre-adoptive" homes and the latter as "adoptive" homes (AFCARS, 45 CFR 1355, Apps. A and B) .*See* Pre-Adoptive Home.

Adoptive Home: A home in which a child is living following finalization of Court adoption proceedings which make the child legally a member of the family residing in the household. The family mayor may not be receiving an adoption subsidy on behalf of the child.

Adoptive Parent: A person with the legal relation of parent to a child not related by birth, with the same mutual rights and obligations that exist between children and their birth parents. (AFCARS, 45 CFR § 1355 App. A) .In Defining "adoptive parent", D.C. regulations include not only an individual "who has adopted a child", but also "a single or married person with whom a child has been placed for adoption" (29 DCMR 1645.1). Under D.C. law, "the term 'adoptive family' includes single persons". (D.C. Code § 3-115).

AFCARS: The Adoption and Foster Care -Analysis and Reporting System established under a federal mandate to provide for effective tracking, managing and reporting of information pertaining to children and families served by public foster care and adoption agencies in the United States. (In general, 45 CFR §§ 1355.40, 1355.53 and 1355 App. A-E).

AFCARS ID: This is the Record Number field value used in the AFCARS data submission or the value which would be assigned.

AFDC Relatedness: With the passage of TANF, the Title IV-E financial eligibility criteria was established as the former Aid to Families with Dependent Children (AFDC) financial eligibility criteria in place as of 7/14/96.

Affidavit of paternity: a document where a birth mother identifies who the birth father of the named child is, their last contact with the birth father and his last known whereabouts. This form need to be notarized.

Aftercare: A brief (typically, 90 days) period of time immediately following a child's return to his or her own home from out-of-home care during which services are provided to the child and family to promote reintegration.

Agency: District of Columbia, Child and Family Services Agency.

Aid to Families with Dependent Children (AFDC): A program, also known as welfare, established under Title IV-A of the Social Security Act to provide financial support for poor children and their families. An individual who cares for a closely related child who is conditionally released from shelter care, committed to the Agency, or in the home as the result of a third-party placement may apply to the Income Maintenance Administration (IMA) to receive AFDC benefits and Medical Assistance (MA) for the child. AFDC and MA benefits may continue after the relative has assumed guardianship of the child.

Alcohol: Alcohol is the most commonly used and widely abused drug in the country. It is found in beers, wines and hard liquors.

Allegation: See report.

Alleged Victim: A child about whom a report regarding maltreatment has been made to a CPS agency.

American Indian or Alaska Native: Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Annual Goal: Statement describing the anticipated growth of a student's skill and knowledge written into a student's yearly Individualized Education Program.

Anonymous Report Source: An individual who reports a suspected incident of child maltreatment without identifying himself or herself.

Annual Review: A meeting held at least once a year to look at, talk about, and study a student's Individualized Education Program (IEP). The purpose of the review is to make decisions about changes in the IEP, review the placement, and develop a new IEP for the year ahead.

Applicant: The person applying for a criminal records check or a person seeking application as a foster parent with the Child and Family Services Agency.

ARP: Adoption Resource Program.

Asian: Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian sub-continent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Assessment: Review of the facts by workers and social workers to determine the appropriateness of a foster parent or foster home.

Assessment/Investigation: A process by which CFSA is to gather sufficient information to determine the following:

1. if child maltreatment occurred;
2. if there is a risk of future maltreatment and the level of that risk;
3. if the child is safe in the home, and if not, what interventions will ensure the child's protection and maintain the family unit if at all possible; and
4. if continuing agency or community services are needed to reduce the risk of maltreatment occurring in the future.

Assistive Technology: Any item, piece of equipment, or product system that is used to increase, maintain, or improve the functional capabilities of children with disabilities; e.g., augmentative communication boards, computer input devices, special switches.

At-Risk: Condition whereby a child is, by virtue of his or her vulnerability, in danger or jeopardy of abuse or neglect.

Background Conference: a meeting where all parties involved with the child(ren) are invited to share information collectively. This conference is for the benefit of all parties to ensure that everyone is working from the same framework. This information is shared to assist the foster parent(s)/pre-adoptive parents in making an informed decision to adopt the child(ren).

Backlog: See [Intake Backlog](#).

Basic Services: the level of out-of-home care provided to children who need routine attention, require the professional intervention no more than once a week, and have a good prognosis for adaptive functioning. A child in this care level does not need intensive supervision or technical skills from his/her caregiver. Further, these children have no major mental health/emotional problems or medical needs.

Behavior Problem-Child: Behavior in the school or community that adversely affects socialization, learning, growth, and moral development. May include adjudicated or non-adjudicated behavior problems. Includes running away from home or a placement.

Biological Parent: The birth mother or father of the child rather than the adoptive or foster parent or the stepparent.

Black or African-American: Having origins in any of the black racial groups of Africa.

Birth Parents: The natural parent of the child(ren).

Board and Child Care Rate: is a rate paid for the care required by a child who is placed in foster care from a neglecting and/or abusing family. The board rate is based on the service needs of the child; therefore, the general policy is that a foster parent will be expected to provide transportation for medical or therapeutic appointments up to one per week within a normal board rate. There are four categories of board rates as follows:

1. Normal Rate
2. Special Board Rate
3. Handicapped Board Rate
4. Multiple-Handicapped Rate

Boarder Baby: Under D.C. law, a child who has resided in a hospital in D.C. for at least 10 calendar days following the birth of the child, despite a medical determination that the child is ready for discharge from the hospital, and the parent, guardian or custodian of the child has not taken any action or made any effort to maintain a parental, guardianship or custodial relationship or contact with the child. (D.C. Code § 16-2301 (9) (G)).

Business Day: Monday through Friday, excluding legal holidays.

Caretaker: Under D.C. law, an adult person in whose care a minor has been entrusted by written authorization of the child's parent, guardian or legal custodian. (D.C. Code § 16-2301 (27)).

Case: A documented instance of Agency activity or series of activities undertaken on behalf of a parent, family or individual child occurring in response to a report of abuse or neglect, a relinquishment or a request for voluntary care. Agency activities undertaken on behalf of a parent or family may include an investigation (generally at intake), family preservation services, child protective services, foster care services or adoption services. Agency activities undertaken on behalf of an individual child may include foster care services or adoption services. See also, child's case and family case.

Caseload: The total number of family and/or child cases serviced by a social worker.

Case Management: Case Management is the coordination of the multiplicity of services required by a child abuse and neglect client. Some of these services may be purchased from an agency other than the mandated agency. In general, the role of the case manager is not primarily the provision of direct services but the monitoring of those services to assure that they are relevant to the client, delivered in a useful way, and appropriately used by the client. To do this, a case manager assumes the following responsibilities:

1. ascertains that all mandated reports have been properly filed;
2. informs all professionals involved with the family that reports of suspected child abuse or neglect have been made;
3. keeps all involved social workers apprised of new information;
4. calls and chairs the initial and ongoing case conferences for assessment, disposition and treatment plans;

5. coordinates interagency follow-up; and
6. calls further case conferences as needed.

Case Management Services: Services or activities for the arrangement, coordination and monitoring of services to meet the needs of children and their families. (AFCARS, 45 CFR § 1355 App. A).

Case Plan: A written document that serves to guide the provision of services to a family and/or to a specific child. The case plan, developed with members of the family and/or the child, clearly identifies goals and objectives to be achieved and spells out tasks to be performed by the worker, adult family members and/or child. Time frames for completion of tasks must be included in a case plan, which is signed by those directly involved as well as by a CFSA or Consortium agency supervisor or responsible for approving the plan. For the case plan of a child in foster care, P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" requires at least:

1. a description of the type of home or institution in which the child is, or will be, placed;
2. a discussion of the appropriateness of the child's placement;
3. a discussion of how the Agency plans to carry out the court's determination that continuation in the home would be contrary to the child's welfare and that, where not precluded, reasonable efforts have been made to prevent removal of the child from the home and/or to facilitate the return of the child to the home;
4. a plan for assuring that the child receives proper care and that services are provided to the parents, child and foster parents in order to improve the conditions in the parents' home, facilitate the return of the child to his own home or to a permanent placement and for addressing the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided to the child under the plan.

P.L. 96-272 also requires that each foster child's case plan be "designed to achieve placement in the least restrictive (most family like) and most appropriate setting available and in close proximity to the parents' home consistent with the best interest: and special needs of the child." Furthermore, the case plan of any child placed in a foster family home or child-care institution a substantial distance from the home of the parents, or in a different State, must "set forth the reasons why the placement is in the best interests of the child".

In addition to addressing the issue of distance from the home of the parents in the child's case plan, when a child is placed outside of the State in which the child's parents are located, an Agency social worker or a social worker from the State where the child is placed must visit at least *every* 12 months. A report on the visit must be submitted to the State agency where the parents reside. (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(1) and (5) (A)).

Case Record: The physical folder in which case information is maintained and electronic data pertaining to individuals in reference to the case, including information in the Child Protection Register (CPR). D.C. regulations pertaining to child- placing agencies define "record" as "the individual file(s) kept by an agency concerning a child who has been

accepted for care or adoptive placement, the child's family, adoptive applicant or family, foster family and agency employees" (29 DCMR 1645.1).

CFSA: District of Columbia, Child and Family Services Agency.

CFSA Temporary Hold: a means of placing a child in the temporary custody of CFSA when a child has been left alone or with inadequate supervision, this is the means by which a social worker may place the child in the temporary care of CFSA. A neglect petition must be filed within five (5) days, if the parent has not claimed the child. The social worker is to notify the Office of the Attorney General immediately upon placing this child in this temporary hold status, so that the process of drafting the petition can begin.

Change in Placement: Any change in the placement of a child who is in the legal/physical custody of the Child and Family Services Agency is considered to be a formal change in placement. This term refers specifically to situations in which the child's removal from the home is not immediately necessary. Such placements should occur, whenever possible, with the involvement of the parent, as a part of the overall service agreement and case planning process for the family. A change of placement should be made only after a home evaluation and assessment of the potential kinship caregiver has been completed.

Child: The D.C. statute pertaining to children who come before the court defines "child" as a person under 18 years of age except for the purposes of criminal justice cases in which those 16 or over are charged with certain crimes and/or offenses). (D.C. Code § 16-2301(3)). The federal AFCARS definition of the term "child" includes both a person under 18 years of age and also a person under 21 years of age considered under State law to be a minor (AFCARS, 45 CFR § 1355 App. A) .A minor under applicable D.C. law is a person 21 years of age or younger. See also, minor.

Child Abuse and Neglect Prevention Children's Trust Fund: A prevention program in the District of Columbia, including a community-based program, that focuses on child abuse and neglect, public awareness and issues including prenatal care, parental bonding, child development, basic child care, care of children with special needs or coping with family stress.

Under this program, child abuse is defined as "harm or threatened harm to a child's health or welfare by a person responsible for the child's health or welfare, which occurs through the intentional infliction of physical or emotional injury or an act of sexual abuse which includes a violation of any provision of the Prevention of Child Abuse and Neglect Act of 1977 (D.C. Law 2-22) ". Child neglect is defined as "harm to a child's health or welfare, which occurs through the failure to provide adequate food, clothing, shelter, education, or medical care".

The Child Abuse and Neglect Prevention Children's Trust Fund program provides counseling, support groups and early identification services for at-risk parents and children and supports prevention programs in the D.C. public schools. (D.C. Code § 6-2131).

Child Age At Report: Age, calculated in years, as of the date of the report of alleged maltreatment.

Child Custodian: means a person or agency, other than a parent or legal guardian, to whom the legal custody of a child has been granted by the order of a court or who is acting loco parentis.

Child Date of Birth: The month, day and year of the child's birth.

Child Daycare Provider: A person with a temporary caregiver responsibility for the child who is not related to the child, such as a daycare center staff member, a family daycare provider, or a baby-sitter. Does not include persons with legal custody or guardianship of the child.

Child Demographics: Statistical characteristics of the child, such as age and race.

Child Ethnicity: See **Hispanic or Latino**.

Child Fatality Review: A formal review by an interdisciplinary, interagency committee of any child fatality known to CFSA with the past ten years.

Child File: The data file submitted to NCANDS on a periodic basis that contains detailed case data about children who are the subject of an investigation or assessment.

Child ID: See **Child Identifier**.

Child Identifier: A unique identification assigned to each child. This identification is not the State child identification but is an encrypted identification assigned by the State for the purposes of the NCANDS data collection.

Child Maltreatment: Harm or risk of harm to a child's physical or mental health or welfare. As defined, provides a basis for State intervention on behalf of the child.

Child-Placing Agency: Under D.C. law, any person, firm, corporation, association, or public agency that receives or accepts children under 16 years of age and places or offers to place them for temporary or permanent care in a family home other than that of a relative within the third degree of kinship. (29 DCMR 1645.1)

Child Protection Register (CPR): A confidential index of case information concerning reports of abused and neglected children maintained by the Agency. (D.C. Code § 6-2111).

Child Protection Register Clearance: Means obtaining a clearance from the Agency's Child Protection Register, which is a confidential index of case information concerning reports/referrals of, abused and neglected children. The Child Protection Register is maintained by the Intake Administration, and clearances can only be obtained by submitting a request from an agency employee who is authorized to obtain such information.

Child Protective Services (CPS): An official agency of a State having the responsibility for child protective services and activities.

Child Protective Services (CPS) Supervisor: The supervisor of the social worker assigned to a report of child maltreatment at the time of the report disposition.

Child Protective Services (CPS) Worker: The worker assigned to a report of child maltreatment at the time of the report disposition.

Child Protective Services (CPS) Workforce: The CPS supervisors and workers assigned to handle a child maltreatment report. May include other administrative staff as defined by the State Agency table of organization.

Child Record: A case-level record in the Child File containing the data associated with one child in one given report.

Child Risk Factor: A child's characteristic, disability, problem, or environment, which would tend to increase the risk of his becoming a maltreatment victim.

Child Sex: The gender of the child.

Child-Specific Recruitment: is the practice of finding a foster or adoptive family for a particular child, as opposed to recruiting families in general and later matching the family and child. This approach focuses on individual waiting children, both to attract specific families as placement resources, and to provide more detailed and specific insights about the types of children needing placement.

Child Victim: A child for whom an incident of abuse or neglect has been substantiated or indicated by an investigation or assessment. A State may include children with alternative dispositions as victims.

Client: A person requesting or receiving services.

Closed: Status of a case when:

1. an investigation or delivery of services has been completed;
2. CFSA and/or a contractual agency have terminated contact with a client or family; and
3. appropriate closing paperwork has been prepared and processed.

Cocaine: Cocaine is a white powder that is derived from the south American coca plant Crack is a chemically altered smokeable form of cocaine in the form of pellets or crystalline rocks.

Collaboratives: The Collaboratives in the District of Columbia are comprised of non-profit service providers, schools, faith communities, civic and resident associations, community

leaders and neighborhood residents. These individuals and organizations have come together in each neighborhood to form a coordinated network of services and supports for children and families. CFSA staff work in partnership with the Collaboratives and other community partners to provide a wide range of community-based services designed to insure the safety of children and their families to include short-term and long-term case management. The CFSA Ferebee Hope Community Service Center and the Collaboratives offer an array of supportive services to children and their families within their own communities. Such services can include mentoring, tutoring, educational/job training, housing assistance, advocacy and legal assistance and emergency funds.

Commitment: is a legal status based on a court order following an adjudication of neglect, which places a child into the ongoing custody of CFSA. The commitment orders are for a term not to exceed two (2) years.

Committed Child: A child adjudicated neglected and placed by, the Court in the legal custody or under the guardianship of the Agency. Under D.C. law, a child who is adjudicated neglected may be either an abused and/or a neglected child.

Community-Based Group Homes: are facilities that house up to (8) children or youth in a community setting. They offer the full range of community resource, including employment, health care, educational, and recreational opportunities. They are staffed on a rotating shift basis by live-in house persons, a teaching family, or some combination of the two. No child under age twelve (12) shall be placed in a group care setting, unless the child has special treatment needs that cannot be met in a home-like setting and the selected group home has a program to treat the child's specific needs. Adolescent mothers are an example of this category.

Community-Based Services: An approach to service delivery which seeks to create partnerships among public and private child and family serving agencies, clients, neighborhood groups and local institutions for the provision of culturally appropriate services within communities.

Complaint: See report.

Concurrent Case: A process that promotes the child's health and safety by developing family reunification plans and assessing the availability of extended family resources while simultaneously assessing and facilitating the identification of the family who will commit to the child's legal permanency.

Conditional Release: Court-ordered diversion or release of a child from shelter care pending a fact finding or dispositional hearing when a judge determines that the child may be adequately safeguarded by placement with a parent, relative or other person or agency able to provide supervision or care for the child. The judge may impose upon the placement whatever conditions he or she considers necessary to protect the child from harm and to ensure the child's appearance at the fact-finding hearing. (D.C. Code § 16-2312 (d)).

Confidential Information: Information acquired by a CFSA or contract agency staff member pertaining to a child reported or found to be abused or neglected, the child's family or other

individuals associated with the case. Confidential information may be disclosed only for purposes relating to investigating abuse or neglect or obtaining services for the child or family (D.C. Code § 6-2126). Unauthorized disclosure of confidential information is a misdemeanor with a fine not to exceed \$1000. (D.C. Code § 6-2127).

Consent to Adoption: A written statement agreeing to a proposed adoption of a child. A consent to the specific adoption of the child must be filed along with an adoption petition unless a judge has determined that consent has been withheld contrary to the best interest of the child. To be valid, such a consent must be signed and acknowledged in the presence of:

1. a person authorized by law to accept acknowledgements, for example, a notary public;
2. a representative of a child-placing agency, for example, a CFSA social worker; or
3. The Mayor.

A consent to adoption must be voluntarily given and can only be rescinded or revoked if it can be shown that the consent was improperly obtained, or involuntary.

Consent to an adoption of a child must be obtained from:

The child, if the child is 14 years of age or older; and

1. *both parents, if they are both alive, or the living parent if one is dead; or*
2. *the court-appointed guardian of the child; or*
3. *a licensed child-placing agency or the Mayor when there has been termination of parental rights (TPR) or a relinquishment to the agency or the Mayor; or*
4. *the Mayor in all other situations.*

A minor parent may consent to the adoption of his or her child. Consent is not required from a parent who, after notice, cannot be located or one who has abandoned the child and voluntarily failed to contribute to the child's support for a period of at least six months prior to the filing of the adoption petition. (D.C. Code § 16-304).

Contact: Any type of communication that comes through the Hotline. The types of communication is as follows:

1. Report or Compliant-document call and refer for Intake assessment/investigation.
2. Information and Referral-document call and refer to a community resource for services.
3. Receive Services-Caller is inquiring about a service and not a complaint or report-document call and refer to appropriate service.
4. Provider of Services Request-Caller wants to provide a service to agency-document name, telephone number, and type of services to be provided for persons wanting to provide services and refer to the appropriate resource component in CFSA for further assessment.
5. Out of Town Inquiries(OTTI)-Caller wants assessment or monitoring of out of state children who are not in CFSA care-document receipt of request and send to appropriate CFSA service unit for assignment.

6. Interstate Compact- Caller wants Interstate Compact service provided by CFSA- document the call and forwarded to CFSA Interstate Coordinator.
7. Court Social Services-Caller is referring a Court Social Service case for placement services in CFSA-document call, create or re-open case, receive packet of information, request placement and forward to the appropriate CFSA service unit for assignment when related to reporting or investigating alleged child abuse or neglect, a child means a person under 18 years of age.

Conviction: Means a plea or verdict of guilty or plea of *noto contendere*.

Counseling Services: Services or activities that apply therapeutic processes to personal, family, situational or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances. (NCANDS) .

Court: Family Division of the District of Columbia Superior Court.

Court-Appointed Representative: A person appointed by the court to represent or advocate for a child in a neglect or abuse proceeding. May be an attorney or a Court-appointed Special Advocate (or both) and is often referred to as a Guardian ad Litem. Makes recommendations to the court concerning the best interests of the child.

Court Review: One of two types of periodic review that meet federal requirements pertaining to cases of children in foster care. The system of case reviews established by P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" is intended to: 1) assure that the child has a case plan which meets federal requirements; 2) review the status of the child; and 3) assure that certain procedural safeguards are applied in the case with respect to the legal rights of the child and the parents. P.L. 96-272 requires that a dispositional hearing be held to determine the future status of each foster child within 18 months of placement. Amendments to the Social Security Act passed in 1994 specify that a review or "subsequent dispositional hearing" be held "not less frequently than every 12 months". (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" section 475(5) (C)) .In D.C., the case of any committed child under the age of 6 or not committed longer than 2 years must, by law, be reviewed every 6 months. The cases of all other children under the Court's jurisdiction must be reviewed at least every year. (D.C. Code §§ 16-2323) .See also, **dispositional hearing, periodic review** and **P.L. 96-272**. (P.L. 96-272, the "Adoption Assistance and Child Welfare Act of 1980" section 475(5) (C)) .

Criminal Records Check: A search of criminal records (local MPD and federal FBI) to determine whether an individual has a criminal conviction. The Federal Bureau of Investigation, the Metropolitan Police Department, or the state's law enforcement agency if the individual resides outside of the District of Columbia performs the search.

Criminal Records Check Offense: Means a conviction of one of the following offenses by the kinship caregiver applicant and any adult age 18 or older residing in the caregiver's home.

1. Child Abuse;

2. Child Neglect;
3. Spousal Abuse;
4. A crime against children, including child pornography; or
5. A crime involving violence, including, but not limited to,
6. Rape, sexual assault, homicide, assault or battery.

This definition also pertains to an individual who has a felony conviction for any of the following offenses or their equivalents committed within the past 5 years:

1. Fraud; or
2. A drug-related offense.

Custodian: Under D.C. law, a person or agency, other than a parent or legal guardian, to whom the legal custody of a child has been granted by the order of a court, who is acting in loco parentis (in place of a parent) , or who is a day care provider or an employee of a residential facility, in the case of the placement of an abused or neglected child. (D.C. Code § 16-2301 (12) .

Custody: A legal status pertaining to the day-to-day, ordinary care of a child. See also, legal custody.

D.C. Kids: The integrated health care system operated by CFSA to provide medical services to foster children.

Daycare Services: Activities provided to a child or children in a setting that meets applicable standards of State and local law, in a center or in a home, for a portion of a 24-hour day.

Denial of paternity: a document where the alleged (putative) birth father, denies that he is the birth father of the named child. This form needs to be notarized.

Diligent Search: a search done by investigators to locate a person. This is done at the Agency primarily to locate a birth mother and/or father to progress with the goal of adoption and to ascertain there intentions with regards to there child(ren).

Disability: Physical or mental impairment that may decrease a person's ability to do certain actions.

Disposition: A finding based upon credible evidence gathered in an investigation that a child reported to be abused or neglected is or has been an abused or neglected child.

Dispositional Hearing: In D.C. law, a hearing, after a finding of fact, in which the Court determines what disposition should be made in the case of an abused or neglected child

(D.C. Code § 16-2301 (17)) .A predisposition study and report is furnished to the Court by the Agency or Court Social Services addressing the following issues:

1. harm that has occurred to the child and how it will be alleviated;
2. plans and timeframes for intervention, parental activities and specific services recommended, as well as criteria for determining when intervention may no longer be needed; and
3. when it is recommended that the child be removed from his or her home, the reasons that the child cannot be protected in the home, the type of placement that is recommended, the steps that will be taken to address any identified harm that is likely to occur to the child as a result of removal and plans for visitation, consistent with the child's well- being. (D.C. Code § 16-2319)

A dispositional order vesting legal custody of an abused or neglected child in a department, agency or institution or in an individual other than a parent is limited in duration to 2 years; however, such an order may be extended for additional periods of one year when a judge determines that it is necessary to do so in order to safeguard the well-being of the child or to protect the child's interest. (D.C. Code § 16-2322) .

Federal law currently requires that when a child is placed out- of-state, the initial and all subsequent dispositional (review) hearings specifically address the issue of whether an out-of- state placement is, at the time of the hearing, appropriate and in the best interests of the child. (P.L. 96-272, section 475(5)) .

Under federal law, when a child is in foster care, a dispositional hearing to address the future status of the child must be held within 18 months of the original foster care placement and not less frequently than every 12 months thereafter except when the child is residing with a specific caregiver in a permanent foster care placement. (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(5) (C)) .

Domestic Violence: Incidents of inter-spousal physical or emotional abuse perpetrated by one of the spouses or parent figures upon the other spouse or parent figure in the child's home environment.

Due Process Hearing: A formal session conducted by an impartial hearing officer to resolve special education disagreements between parents and school systems.

Early Intervention: Providing services and programs to infants and toddlers (under age three) with disabilities in order to minimize or eliminate the disability as they mature.

Ecstasy: Ecstasy is derived from speed and Methamphetamine. It can be found in capsule, tablet, powder or liquid forms.

Educational Advocate: An individual who speaks or acts knowledgeably for the educational needs of another.

Educational Diagnostician: A professional who is certified to conduct educational assessments and to design instructional programs for students.

Education and Training Services: Activities provided to improve knowledge of daily living skills and to enhance cultural opportunities.

Emergency Care: a short-term, urgent need for an initial placement in, or a replacement from, one family home, group home, or other facility to another. Emergency care is designed to be for thirty (30) days or less and to allow the social worker an opportunity to assess a child's newly identified needs as well as the propriety of continued placement.

Emergency Care Foster Homes: a short term, urgent need for an initial placement in, or a replacement from, one family home, group home or other facility to another. Emergency care is designed to be for thirty (30) days or less and to allow the social worker an opportunity to assess a child's newly-identified needs as well as the propriety of continued placement.

Emergency Placement: A placement precipitated by an imminent danger to the child (ren) or by abandonment. The placement may only be made after appropriate Child Protection Register and criminal background checks have been obtained for the potential relative/kinship caregiver; and, the worker has completed an on site interview and home assessment all of which must meet agency requirements for approval. The placement may be made prior to the completion of the full caregiver assessment and home evaluation, provided the conclusion of a preliminary assessment meets required safety standards. Emergency placements are designed to be for a period of thirty (30) days or less, this is to allow the social worker time to assess the child as well as to determine the needs of the triad (child, birth parent(s), and kinship caregiver) while determining the appropriateness of continued out-of-home placement. The decision to make any emergency placement must be made by the worker in conjunction with consultation and approval from his or her supervisor.

Emotionally Disturbed: A clinically diagnosed condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree: an inability to build or maintain satisfactory interpersonal relationships; inappropriate types of behavior or feelings under normal circumstances; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal problems. The diagnosis is based on the Diagnostic and Statistical Manual of Mental Disorders (the most recent edition of DSM). The term includes schizophrenia and autism.

Employment Services: Activities provided to assist individuals in securing employment or the acquiring of skills that promote opportunities for employment.

Ethnicity: See **Hispanic or Latino**.

Expungement: The process by which the Agency erases all identifying information in a report from the Child Protection Register (CPR) .Information is expunged either upon the 18th birthday of a child found to have been abused or neglected (unless there is a younger sibling in the home who is known or suspected to be abused or neglected) ; 5 years after services provided to the family as a result of the abuse or neglect have been terminated, whichever occurs first; or when CPR material is successfully challenged. (D.C. Code § 6-2117).

Extended School Year: Special education provided during summer months to students found to require year-round services to receive an appropriate education.

FACES.NET: FACES.NET is a child welfare information system use to collect information about clients and providers. It is also used as a tool to organize that information to enhance CFSA operations and service to families in the community.

Facility: a foster home where children reside 24 hours a day. Facilities specifically include those on contract, those in which the court has ordered children placed, those operated by the city or another government entity and those where CFSA has family or child care responsibility.

Fact-finding Hearing: A hearing to determine whether the allegations in a neglect petition are true, also known as adjudication, adjudicatory hearing or trial. (D.C. Code 16-2301(16)).

Families Together: is a family preservation program that provides intensive three-month home-based services to families, for whom the removal of a child is imminent due to risk of abuse or neglect. This program is operated by CFSA.

Family: Means one or more parents and children related by blood, marriage, or adoption residing in the same household; or a parent substitute, such as a related caregiver or legal guardian who has responsibility for the 24-hour care and supervision of a child.

Family Case: A documented instance of Agency activity or series of activities undertaken on behalf of a parent or family occurring in response to a report of abuse or neglect or a request for voluntary care. A family case is opened during an investigation and during the delivery of family preservation services, child protective services, foster care services or adoption services.

Family-Centered Services: An approach to working with families and children that focuses upon the families rather than upon individuals. Services are based upon an assessment of the entire family and a negotiated family plan designed to strengthen and maintain the family while protecting children and promoting their healthy, positive development.

Family Counseling: Under D.C. law, any psychological or psychiatric or other social service offered by a provider to the parent and one or more members of the extended family of a child who has been adjudicated neglected or to the child's guardian or other caretaker. (D.C. Code § 16-2301 (27)).

Family Planning Services: Educational, comprehensive medical or social services or activities which enable individuals, including minors, to determine freely the number and spacing of their children and to select the means by which this may be achieved. (NCANDS).

Family Preservation Services: Typically, strengths-based interventions designed to help families alleviate crises that might lead to out of home placement of children, maintain the safety of children in their own homes, support families reunifying or adopting, and assist families in obtaining skills, services, including respite care, and other supports necessary to address their multiple needs in a culturally sensitive manner. Family preservation services are not appropriate when a child cannot be protected from harm without placement or when a family has insufficient strengths upon which to build. (Title IV-B, Social Security Act, Subpart 2 and NCANDS).

Family Responsibility: The duty of the CFSA worker assigned to the family case to provide coordination when two or more CFSA and/or Consortium agency social workers are providing services to members of a family.

Family Services: The general term use to refer to those CFSA intervention services that are offered to stabilize intact birth, foster, or adoptive families.

Family Support Services: Primarily community-based preventative activities designed to increase the strength and stability of families, alleviate stress and promote parental competencies and behaviors that will increase the ability of families to successfully nurture their children. Family support services are available to all families to facilitate use of resources and opportunities available in the community, promote healthy child development and create supportive networks to enhance child-rearing abilities of parents and help compensate for the increased social isolation and vulnerability of families" (Title IV-B, Social Security Act, Subpart 2 and NCANDS). Family support services should be offered in a manner which is sensitive to the culture of the individuals served.

Fatality: See **Maltreatment Death**

Fatality Review: Formal review by an interdisciplinary, interagency committee of cases in which child abuse or neglect may have caused or be related to the death of a child.

Final Decree: establishes the legal parent-child relationship between the adopters and the child. This legal relationship assures that there are mutual rights of inheritance and succession, as if the child had been born to the adopters.

Final Report: This report includes a follow up of all recommendations from the internal and citywide Child Fatality Review Team meeting, and in these instances the required follow up shall be reported as an addendum to the initial report by the social worker. This information should be completed in accordance with the time frame set up by the CFSA Internal CFRT Coordinator, between one (1) to three (3) months. The supervisor will insure that two (2) copies of the final Child Fatality Review report are forwarded to the CFSA Internal Child Fatality Coordinator.

Financial Problem: A risk factor related to the family's inability to provide sufficient financial resources to meet minimum needs.

Formal Kinship Care: Refers to situations where the Child and Family Services Agency and/or the Superior Court of the District of Columbia make or are directly involved in the decision to remove a child from his or her parent(s) or other legal guardian and place him or her with a family member.

Foster Care: 24 hour substitute care for all children placed away from their parents or guardians and for whom the Agency has placement and care responsibility. (45 CFR § 1355.20).

The term "foster care" specifically refers to the status of a child who:

1. is in shelter care (pre-trial); or
2. has been committed to the Agency by the court and placed outside his or her own home (Post-trial) ;
3. is under the permanent care and guardianship of the Agency which may consent to the child's adoption following relinquishment of parental rights;
4. is removed from his or her home pursuant to a voluntary placement agreement; or
5. is on conditional release from shelter care or has run away or absconded from care or is at home on a trial basis while in care.

A child is not in foster care:

1. when the child residing at home is not under the jurisdiction of the court and his or her family is receiving family preservation or continuing child protective services;
2. when a judge has ordered protective supervision of the child;
3. when the child is in a third-party placement, whether or not the placement has been ordered by the court; or
4. when a child has been relinquished by his or her parent(s) and is under the jurisdiction of the D.C. Superior Court but is not committed to the Agency.

Foster Care Drift: The languishing of children in foster care due to the lack of permanency planning.

Foster Care Family: is a planned, goal-oriented care of a child in the home of a family, which is licensed to provide 24 our temporary, substitute care by the District’s Department of Public Health, or the comparable authority in another jurisdiction. Foster families are committed, prepared, and trained to provide a welcoming, nurturing, and supportive home for a child who is undergoing the trauma of separation from her/his biological family. Foster families also help maintain bonds between the children and their birth parents. If the family foster home is located in a jurisdiction outside of the District, the child’s placement must be approved by the Interstate Compact Office of that jurisdiction.

Foster Family Home (Relative): See relative foster care.

Foster Parent: An individual who is licensed or approved to provide a home for one or more related or non-related children who are orphaned, abused, neglected, delinquent, or disabled.

Foster Care Social Worker: Social worker who provides for the services needs of the child in the foster home and participates in the transitioning of the child to the adoptive home if different from the foster home. The foster care social worker is the case manager prior to placement.

Foster Care Treatment: is the service also known as “specialized” or “therapeutic foster care”. It is temporary out-of-home care offered to a child with “special needs”, by foster parents who are trained to provide specific treatment and who are both supervised and supported by agency staff as they do so.

Foster Parent Services Unit: The unit within CFSA that has responsibility for reassessing the foster parents on-going ability to continue in the role of a foster parent.

Foster Parent Services Worker: Workers who have responsibility for assessing and reassessing foster parent’s ability to continue as a foster parent; and ensure the foster home is in compliance with regulations and guidelines established by the Department of Health.

Free Appropriate Public Education (FAPE): The words used in the federal law, the Individuals with Disabilities Education Act (IDEA), to describe a student’s right to a special education program that will meet his or her individual special learning needs, at no cost to the family.

General Assistance for Children (GC): A program under the Income Maintenance Administration (IMA) in the District of Columbia which provides benefits that are the same as those a child would receive under Aid to Families with Dependent Children (AFDC) . Benefits may be provided when a child is residing with a caretaker who is not a close relative

of the child as defined in federal AFDC regulations or who cannot prove close relationship. (D.C. Code § 3-205.5a.)

Generic recruitment: involves presenting to the public general information about the needs of waiting children.

Goals: See permanency goals.

Group Homes (Community Based): are facilities that house up to eight (8) children in a community setting. They offer the full range of community resources, including employment, health care, educational, and recreational opportunities. They are staffed on a rotating shift basis by live-in house persons, a teaching family, or some combination of the two. No child under age twelve (12) shall be placed in a group care setting, unless the child has special treatment needs that cannot be met in a home-like setting and the selected group home has a program to treat the child's specific needs.

Guardian Ad Litem (GAL) : An attorney appointed by the Superior Court of the District of Columbia Family Division to represent an abused or neglected child in Court proceedings, including termination of parental rights. It is the responsibility of the guardian ad litem to represent the child's best interests. (D.C. Code §§ 6--2101 (4) and 16-2304 (a).

Guardianship: "Guardianship of the person of a minor" involves concern with the general welfare of the minor and the right to make important decisions in matters having a permanent effect on the minor's life and development. It includes, but is not limited to:

the authority to consent to marriage, enlistment in the armed forces and major medical, surgical or psychiatric treatment;

1. the authority to represent the minor in legal actions and to make decisions of substantive legal significance concerning the minor;
2. the authority and duty of reasonable visitation (except as limited by court order);
3. the rights and responsibilities of legal custody when guardianship of the person is exercised by the child's birth or adoptive parent (except when legal custody has been vested in another person, agency or institution) ; and
4. the authority to exercise residual parental rights and responsibilities when the rights of the child's parents or only living parent have been judicially terminated or when both parents are dead. (D.C. Code § 16-2301 (20)).

Handicapped Board Rate: is a rate paid for a child who needs foster parent intervention because he/she can not accomplish normal age appropriate life processes i.e.: eating, bathing, toileting, dressing, ambulating, emotional and or social control without adult intervention. Children who require foster parents who have special training to participate in the treatment plan and daily care of the child are classified as handicapped.

A request for the handicapped board rate must be accompanied by a professional diagnosis and a service plan, which will elaborate, on the need and type of required intervention.

Health-Related and Home Health Services: Activities provided to attain and maintain a favorable condition of health.

Hispanic Or Latino: A person from Cuba, Mexico, Puerto Rico, South or Central America, or other Spanish language culture, regardless of race.

Home-Based Services: In general, services provided to families in their homes, rather than in the Agency or other institutional settings. A narrower standard is found in the federal AFCARS definitions which state that home-based services include "services or activities provided to individuals or families to assist with household or personal care in order to improve or maintain adequate family well-being including homemaker services, chore services, home maintenance services and household management services". (AFCARS,45 CFR § 1355 App. A).

Homestudy: a counseling and assessment process with the primary goal of providing secure nurturing and permanent families for children. The home study involves completion of MAPP training and extensive background checks on the applicants and their household members.

Household: A home and all individuals residing within the home.

Housing Services: Activities designed to assist individuals or families in locating, obtaining or retaining suitable housing.

Heroin: Heroin, a white-to-brownish tar-like substance or powder is a highly addictive drug derived from morphine.

Impartial Hearing Officer: Individual presiding over a due process hearing, appointed by the state education agency, and not connected in any way with either party in a dispute.

Inactive: Status of an open case in which no services are being provided. An inactive case is most likely to be a family case in which services are not being provided although a related child's case is being actively served. For example, when a foster child has a permanency plan of Independent Living and the child's parent is not receiving any services, the family case is considered to be inactive.

Inadequate Housing: A risk factor related to substandard, overcrowded, or unsafe housing conditions, including homelessness.

Incident Date: The month, day, and year of the most recent known incident of alleged child maltreatment.

Independent And Transitional Living Services: Activities designed to help older youth in foster care or homeless youth make the transition to independent living.

Indicated Or Reason To Suspect: An investigation disposition that concludes that maltreatment cannot be substantiated under State law or policy, but there is reason to suspect that the child may have been maltreated or was at risk of maltreatment. This is applicable only to States that distinguish between substantiated and indicated dispositions

Income Maintenance Administration: (IMA)- a DHS office, charged with the determination of eligibility under the Medicaid, TANF, and General Public Assistance for Children (GC).

Individual and Institutional Reports: If the mandated reporter is a staff member of a hospital, school, agency or similar institution, they must immediately notify the person in charge of the institution or that person's designated agent who shall then be required to make the report. The fact this notification does not relieve the person who was originally required to report of the responsibility to report.

Individualized Education Program (IEP): A written plan for each student in special education describing the student's present levels of performance, annual goals including short-term objectives, specific special education and related services, dates for beginning and duration of services, and how the IEP will be evaluated.

Individualized Family Service Plan (IFSP): A written statement for each infant or toddler receiving early intervention services that includes goals and outcomes for the child and family. It also includes a plan for making the transition to services for children over age 2.

Individuals with Disabilities Education Act (IDEA): The authorizing federal legislation, which mandates a free, appropriate public education for all children with disabilities. Formerly known as the Education for All Handicapped Children Act. Part B one. Part H refers to the early intervention program for infants and toddlers with disabilities from birth through age two and their families.

Information and Referral Services: Services or activities designed to provide information about services provided by public and private service providers and a brief assessment of client needs (but not a diagnosis and evaluation) to facilitate an appropriate referral to these community resources. (NCANDS).

Inhalants: Inhalants include, typewriter correction fluid, felt tip markers, spray paint, air freshener, butane and cooking spray (there over 1,000 products).

Initial Child Fatality Review Summary Report: This summary includes a discussion of all information available regarding the circumstances of the child's death, a thorough report of the history of and reasons for CFSA involvement with the deceased child and his/her family and a description of service delivery and safety plans for the children remaining in the deceased child's home or foster care placement. The supervisor will ensure that two copies of the Initial Child Fatality Review Summary Report are forwarded to the CFSA Internal Child Fatality Review Team Coordinator.

Initial Investigation: A mandated process in which CFSA and/or the police gather, evaluate and act upon information received in a report of alleged child abuse or neglect. The purpose of an investigation is to determine, to the extent possible:

1. The nature, extent, and cause of any reported abuse or neglect;
2. The identify of the person responsible for the abuse or neglect;

3. The name, age, sex and condition of the abused or neglected child and of all other children in the home;
4. The conditions in the home at the time of the investigation;
5. Whether there is any child in the home whose health, safety or welfare is in jeopardy because of his or her treatment in the home or his or her home environment; and
6. Whether any child who is in jeopardy because of treatment in the home or his or her home environment should be removed from the home or can be protected by the provision of resources or services available in the community.

Institution: A child care facility operated by a public or private agency which provides 24-hour-care and/or treatment for children who require separation from their own homes and group living experience. These facilities may include: child care institutions, residential treatment facilities, maternity homes, etc. (AFCARS, 45 CFR § 1355 App. A) D.C. law specifies that private institutions are those which provide care and maintenance for neglected and/or dependent children on a contractual basis with the City (D.C. Code § 3-203.1(3)) .D.C. children may be placed in child care institutions outside of the City so long as they are licensed or approved by the state in which they are located. (D.C. Code § 3-217.2)

Intake: A 24-hour, 7-day-a-week system to receive and screen information from the public about suspected child abuse and neglect. The function, located in CFSA's Child protective Services Administration, is the agency's single point of entry to receive all inquiries and request for services from the public.

By calling 202-671-SAFE, anyone can reach trained social workers to report suspected child abuse or neglect.

Intake Backlog: An Agency term describing a group of cases in which an intake investigation has not been completed more than 30 days after the receipt of a report. Any case that has not been investigated within the 30-day timeframe is described as "backlogged" or "in the backlog". This backlog is to be eliminated under the LaShawn Implementation Plan. (LaShawn Revised Implementation Plan, Section A., August 1, 1994) .The 30 day timeframe begins at the time the report is received and ends when the supervisor of the worker conducting the investigation signs off on the completed investigative report and any accompanying casework materials.

Intensive Family Services: also known as Families Together, provides intensive counseling, education, and supportive services to families (including extended, foster, and adoptive families) in serious crisis, with the goal of protecting the child, strengthening and preserving the family, and preventing what would be an unnecessary out-of-home placement of children; or promoting the return home of children.

Intensive Services: is the level of out-of-home care provided to children who have mental health/emotional problems or medical conditions. This level of care requires professional intervention, behavior management skills, and close supervision from the caregiver.

Interlocutory Decree: an interim decree of adoption. It has the same legal effect as a final decree while it is in effect. An interlocutory decree is generally entered when the Court or a party has some reservations about the adoption and wishes to give the pre-adoptive placement more time before a final decree is entered. An interlocutory decree will state that the adoption is to become a final decree on a specific date, usually between six months and one year from that date unless the decree is set aside for cause in the interim.

Interstate Compact on the Placement of Children (ICPC): A uniform law, which permits states to cooperate in the placement of children across jurisdictional lines. D.C. is a party to the Interstate Compact and all children placed in foster care and/or for adoption in another jurisdiction must be processed through the Agency Office of the Compact Administrator. (D.C. Code, Chapter 10A.) . As a party to the ICPC, the District and its employees are responsible for full compliance with its terms. The purpose of the ICPC is to ensure that:

1. each child who requires placement will receive the maximum opportunity to be placed in a suitable environment with qualified individual or institutional caregiver;
2. the appropriate authority, in a state where a child is to be placed, will have full opportunity to ascertain the circumstances of the proposed placement in order to promote full compliance with applicable child protection requirements;
3. the appropriate authority in the original state has access to the most complete information to evaluate a projected placement before it is made; and
4. appropriate jurisdictional arrangements for the care of the child are promoted.

Investigation: A mandated process in which CFSA and/or the police gather, evaluate and act upon information received in a report of alleged' child abuse or neglect. The purpose of an investigation is to determine, to the extent possible:

1. the nature, extent and cause of any reported abuse or neglect;
2. the identity of the person responsible for the abuse or neglect;
3. the name, age, sex and condition of the abused or neglected child and of all other children in the home;
4. the conditions in the home at the time of the investigation;
5. whether there is any child in the home whose health, safety or welfare is in jeopardy because of his or her treatment in the home or his or her home environment; and
6. whether any child-who is in jeopardy because of treatment in the home or his or her home environment should be removed from the home or can be protected by the provision of resources or services available in the community (*D.C. Code* § 6-2104 (b) (1)-(6)) .Such services include, but are not limited to:
 - a. emergency financial aid;
 - b. temporary third-party placement with responsible neighbors or relatives;

- c. emergency in-home caretaker(s); .homemaker services;
- d. daycare for any abused or neglected child and his or her siblings;
- e. counseling services, and
- f. medical evaluation and or treatment of any abused or neglected child by a physician.

(D .C .Code § 6 -2124 (a) (1) -(8)) .

Investigation Date: See **Investigation Start Date**.

Investigation Disposition: See **Maltreatment Disposition Level**

Investigation Disposition Date: See **Maltreatment Disposition Date**

Investigation Start Date: The date when CPS first had face-to-face contact with the alleged victim of child maltreatment or attempted to have face-to-face contact.

Juvenile Court Petition: A legal document requesting that the court take action regarding the child's status as a result of the CPS response; usually a petition requesting the child be declared a dependent and placed in an out-of-home setting.

Kin: Means an individual who is related by blood, marriage or adoption.

Kinship Adoption: an adoption where the petitioner is a relative and /or long-time family friend of a child.

Kinship Care: is full time parenting and protection by a person related by blood, marriage or adoption. For a person to be considered a kinship caregiver, he/she must be related within the 5th degree to the dependent child (i.e. the equivalent of a great-great-great grandmother or a first cousin once removed). Kinship is to be the first placement option considered when a child must be separated from his/her parents due to abuse, neglect, or special needs. Kinship care may be an option when the child's legal custody remains with the family or when it has been transferred to CFSA. See also, Third Party Placement and Relative Foster Care.

Kinship Caregiver: is an individual who meets the following criteria:

1. is approved by CFSA to provide kinship care services;
2. is at least 21 years of age;
3. is providing or willing to provide for the day-to-day care of a child; and
4. is a relative of the child by blood, marriage, or adoption.

Kinship Care Foster Home: is a relative family home licensed by the District of Columbia or a state to provide 24 hour substitute care for a child in foster care status. Relative foster care setting includes:

1. Licensed Relative Foster Family Home
2. Emergency Care Foster Homes

Kinship Foster Care: Means a situation in which a kin provides full time care to any child(ren) who is committed to CFSA custody as a result of an abuse or neglect procedure, voluntary placement, police hold, or the relinquishment of parental rights. Kinship foster homes shall be licensed in accordance with the requirements outlined in the Section of the Policy entitled Assessment Process of Kinship Foster Homes.

Kinship Foster Home Study: A kinship foster home study is a process that takes place following the placement of the child(ren) in the care of a potential kinship caregiver who has elected to become a kinship foster care provider for their kin and agrees to undergo the licensing requirements of a non-relative foster care provider.

Kinship Home Approval Process: The assessment process which takes place once a child(ren) has been placed with the kinship caregiver in order to determine the potential caregiver's ongoing appropriateness to care for their kin placed in their home by CFSA. This approval process applies to all kinship caregivers regardless of the source of financial support received for the child(ren) placed with the caregiver.

Kinship Triad: The kinship triad refers to those parties involved in the kinship care process/planning including the child, the child's birth parent, and the kinship caregiver(s).

Learning Disability: A disorder in one or more of the individual's basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or use mathematical calculations. The term includes conditions such as perceptual disability, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. (NCANDS).

Least Restrictive Environment (LRE): Placement of a student with disabilities in a setting that allows maximum contact with students who do not have disabilities, while appropriately meeting the student's special education needs.

Left-Alone: A colloquial Agency term describing a child found unaccompanied or in the care of someone unable or unwilling to supervise- the child properly. An Agency social worker encountering a left alone child is authorized to make a third- party placement. If a third-party placement cannot be made, the worker may temporarily take the child into custody and place the child. (D.C. code § 6-2124(b)). See also, temporary custodial placement.

Legal Custody: A court-ordered legal status pertaining to the day-to-day, ordinary care, discipline and protection of a child. An order of legal custody entitles the custodian to determine: " where and with whom the child lives .The legal custodian is responsible for providing the child with food, clothing, shelter, education and routine medical care. When legal custody has been granted to the Agency or to an individual who is not the child's parent, the child's parents retain guardianship rights and the right to make major decisions affecting their child. Such rights include determination of the child's religious affiliation, the

right to consent to adoption and the right to visit the child. The parents remain obligated to provide financial support for the child even when the child is in the legal custody of another person or institution. (D.C. Code § 16-2301 (21) and (22)).

Legal Father: a man who is married to the birth mother at the time of conception, regardless of whether he actually fathered the child.

Legal Guardianship: A court-ordered legal status in which a relative or relative custodian is responsible for the general welfare a minor child placed in his/here care. The Guardian has the right to make important decisions in matters having a permanent effect on the minor's life and development. It includes, but is not limited to:

1. The authority to consent to marriage, enlistment in the armed forces and major medical, surgical or psychiatric treatment;
2. The authority to represent the minor in legal actions and to make decisions of substantive legal significance concerning the minor;
3. The authority and duty of reasonable visitation (except as limited by court order);
4. The rights and responsibilities of legal custody when Guardianship of the person is exercised by the child's birth or adoptive parent (except when legal custody has been vested in another person, agency or institution); and
5. The authority to exercise residual parental rights and responsibilities when the rights of the child's parents or only living parent have been judicially terminated or when both parents are dead.

Legal, Law Enforcement, Or Criminal Justice Personnel: People employed by a local, State, tribal, or Federal justice agency including law enforcement, courts, district attorney's office, probation or other community corrections agency, and correctional facilities.

Legal Services: Activities provided by a lawyer, or other person(s) under the supervision of a lawyer, to assist individuals in seeking or obtaining legal help in civil matters such as housing, divorce, child support, guardianship, paternity and legal separation.

License: Issued by the Department of Health to foster home located in the District of Columbia who have met the licensing standards for foster homes.

License Approval: Issued by CFSA to foster homes in Maryland who have met the licensing requirements governing the District of Columbia and the residing jurisdiction to operate foster homes.

Licensed Relative Foster Family Home: A home licensed or approved by D.C. or a state in which a relative of a child in foster care status is authorized to provide 24 hour substitute care for the child. In general, foster care maintenance payments are available for the support of foster children residing in currently licensed or approved relative foster family homes.

Living Arrangement: The type of home or placement situation in which a child resides.

LSD: LSD also called acid. It is a hallucinogen-a potent mood-changing drug, which is found in tablets, capsules or liquid form.

Mainstreaming: The concept that students with disabilities should be educated with nondisabled students to the maximum extent possible.

Maintenance: is a per diem payment that is what the child would have received but not greater than CFSA board and care payments.

Maltreatment: In general usage, this term often refers to any type of child abuse or neglect. Under District of Columbia law, the word "maltreatment" is specifically defined as "failure to provide adequate food, clothing, shelter, or medical care, which includes medical neglect, and the deprivation is not due to the lack of financial means of the child's parent, guardian or other custodian". (D.C. Code § 16-2301) (24). See also, negligent treatment.

Maltreatment Death: The child died as a result of abuse or neglect. The conclusion may be that the abuse or neglect was the cause of the death or that abuse or neglect was a contributing factor to the death.

Maltreatment Disposition Date: The point in time at the end of the CPS response when a worker determines a disposition to a report of child maltreatment.

Maltreatment Disposition Level: The determination resulting from the CPS response to a report of alleged child maltreatment.

Mandated Reporter: A person working in certain occupational categories who learns or suspects that a child known to him or her in his or her professional or official capacity has been, or is in danger of being, abused or neglected must report to CFSA or the police. Those who must report are:

1. physicians
2. psychologists
3. medical examiners
4. dentists
5. chiropractors
6. registered and licensed practical nurses
7. healthcare workers
8. law-enforcement officers
9. teachers and school officials
10. social service workers

11. day care workers
12. mental health professionals

When an individual is required as an employee of an agency or institution to make a report, he or she must immediately notify the person in charge of the agency or institution (or his or her designee). The person in charge is then required to make the report; however, the fact that the mandated reporter has notified the person in charge of the agency or institution does not relieve the mandated reporter of his or her responsibility to report. (D.C. Code §§ 2-1352, 2-1353).

Mandated Reports: In the District of Columbia, mandated reporters of suspected child abuse and neglect include any person who knows or has reasonable cause to suspect that a child known to them in their professional or official capacity has been or is in immediate danger of being a physically or mentally abused or neglected child. According to the law, they must immediately report or have a report made of their knowledge or suspicions either to the Metropolitan Police Department (MPD) for abuse reports or the Child and Family Services Agency of the District of Columbia for neglect reports.

Marijuana: Marijuana is the most frequently used illegal drug in the United States. Marijuana is a green, brown or grayish mixture of dried, shredded leaves, stems, seeds and flowers of the hemp plant.

Mediation: A formal intervention between parents and personnel of early intervention or school systems to achieve reconciliation, settlement, or compromise.

Medicaid: a program established by Title XIX of the Social Security Act (“Title XIX”) and which provides medical services to needy persons, including families with children, the elderly, or the disabled; applicants must meet certain eligibility requirements.

Medical: is a continuation of Medicaid eligibility

Medical Neglect: A type of maltreatment caused by failure by the caregiver to provide for the appropriate health care of the child although financially able to do so, or offered financial or other means to do so.

Medical Personnel: People employed by a medical facility or practice, including physicians, physician assistants, nurses, emergency medical technicians, dentists, dental assistants and technicians, chiropractors and coroners.

Mental Health Personnel: People employed by a mental health facility or practice, including psychologists, psychiatrists, therapists, etc.

Mental Health Services: Activities which aim to overcome issues involving emotional disturbance or maladaptive behavior adversely affecting socialization, learning, or development. Usually provided by public or private mental health agencies and includes both residential and non-residential activities.

Mental Injury: A conduct, cognitive, affective or other mental disorder caused by the acts or omissions of a parent, guardian or custodian. (NCANDS)

Mental Retardation: As clinically diagnosed, significantly sub-average general cognitive and motor functioning existing concurrently with deficits in adaptive behavior manifested during the developmental period that adversely affect socialization and learning. (AFCARS, CFR 45 § 1355 Apps.)

Methamphetamine: Methamphetamine, also known as “meth,” “speed” or “crank” is a stimulant drug that affects the central nervous system.

Military Family Member: A legal dependent of a person on active duty in the Armed Services of the United States such as the Army, Navy, Air Force, Marine Corps, or Coast Guard.

Military Member: A person on active duty in the Armed Services of the United States such as the Army, Navy, Air Force, Marine Corps, or Coast Guard.

Minor: An individual under the age of 21 (D.C. Code § 16- 2301(4)).

Multidisciplinary Evaluation: The testing of a child by a group of professionals, including psychologists, teachers, social workers, speech therapists, nurses, etc.

Multiple-Handicapped Rate: is the rate paid for children who require adult intervention in more than one age appropriate daily living process i.e. eating, bathing, toileting, dressing, ambulating, emotional and/or social control. The multiple-handicapped rate is reserved for the most severely handicapped children. Extensive training may be needed for a foster parent to provide an adequate level of care for the multiple-handicapped child.

A request for a multiple-handicapped rate must be accompanied by a professional diagnosis and treatment plan. There will be a complete discussion of the intervention to be provided by the foster parent.

Native Hawaiian or Other Pacific Islander: Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

NCANDS: National Child Abuse and Neglect Data System. NCANDS is a national, voluntary system for collecting and analyzing data about child abuse and neglect established by the National Center for Child Abuse and Neglect (NCCAN) under the Child Abuse Prevention, Adoption and Family Services Act of 1988.

NCANDS Mapping Forms: The functional specification of transferring State data to NCANDS fields and values. This process is used for both Child and Agency data.

Neglect: Under D.C. law, a neglected child is one who:

1. has been abandoned or abused by his or her parent, guardian, or other custodian;

2. is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his or her physical, mental or emotional health, and the deprivation is not due to the lack of financial means of his or her parent, guardian or other custodian;
3. has a parent, guardian or other custodian who is unable to discharge his or her responsibilities to and for the child because of incarceration, hospitalization or other physical or mental incapacity;
4. has a parent, guardian or custodian who refuses or is unable to assume responsibility for the child's care, control or subsistence and the person or institution which is providing for the child states an intention to discontinue such care ;
5. is in imminent danger of being abused and whose sibling has been abused;
6. has received negligent treatment or maltreatment from his or her parent, guardian or other custodian; or
7. has resided in a hospital located in the District of Columbia for at least 10 calendar days following birth, despite a medical determination that he or she is ready for discharge, and the parent, guardian or custodian of the child has not taken any action or made any effort to maintain a relationship with the child or to contact him or I her. (D. C. Code § 16-2301 (9) (A) -(G) .

In federal regulation, neglect is defined as "alleged or substantiated negligent treatment or maltreatment, including failure to provide adequate food, clothing, shelter or care". (AFCARS 45 CFR § 1355 App. A)

Neglect Petition: A legal document based upon a neglect complaint filed with the Superior Court of the District of Columbia Family Division by the Office of the Corporation Counsel (OCC) .The petition alleges that a child is an (abused or) neglected child. (D.C. Code § 16-2305).

Negligent Treatment: Failure to provide adequate food, clothing, shelter, or medical care, which includes medical neglect, and the deprivation, is not due to the lack of financial means of the child's parent, guardian or other custodian. (D.C. Code §16- 2301(24). See also, maltreatment and neglect.

Neighbor: A person living in close geographical proximity to the child or family.

Non-Caregiver: A person who is not responsible for the care and supervision of the child, including school personnel, friends, neighbors, etc.

Non-Recurring Cost: legal fees as dictated by policy and other one time costs related to a child's special need which is not funded by other eligibility programs, e.g. van conversion.

Normal Rate: is paid for the basic and routine care required by a child who comes from a neglecting or abusing family. It is expected that basic care will include bringing the child into the regular, daily life of the foster family, providing 24 hour/day adult supervision, and facilitating weekly visits with the natural parents by providing transportation to the agency or by permitting parental visitation in the foster parents are expected to participate in parent-teacher conferences and other school related activities; they are to provide routine recreational opportunities.

Not Substantiated: See Unsubstantiated.

Notifications: Mandated or courtesy contacting of other agencies with overlapping or potentially overlapping jurisdiction concerning a report of child maltreatment.

Objective: An objective is a short-term step taken to reach an annual goal. IEP objectives are the steps between a student's present level of performance and an annual goal.

Office of the Corporation Counsel (OCC): The Office which represents the interests of the City in legal matters pertaining to cases of abused and neglected children before the Superior Court of the District of Columbia. A staff attorney in the OCC is known as an Assistant Corporation Counsel (ACC).

One-Time Rental Assistance: financial assistance provided in order to assist families with payment of back rent due or current rent due but which families are not financially able to provide.

Open: Status of a case when an investigation is being conducted or services are being provided by CFSA and/or a contractual agency to a family or to any individual in a family. When an investigation or delivery of services has been concluded, a case remains in an open status) until appropriate closing paperwork has been prepared and processed.

Order of Reference: an order from the Court directing the Agency to make a report and recommendation regarding the petition to adopt a child.

Other Medical Condition: A medical condition other than mental retardation, visual or hearing impairment, physical disability, or being emotionally disturbed that significantly affects functioning or development or requires special medical care such as chronic illnesses. Included are children or caregivers diagnosed as HIV positive or with AIDS.

Other Services: Activities that have been provided to the child and/or family, but which are not included in the services listed in the Child File record layout.

Out-Of-Court Contact: Contact, which is not part of the actual judicial hearing, between the court-appointed representative and the child victim. Such contacts enable the court-

appointed representative to obtain a first-hand understanding of the situation and needs of the child victim, and to make recommendations to the court concerning the best interests of the child.

Papering a Case: a colloquial term denoting the collaborative process which occurs between CFSA staff and staff of the Office of the Corporation Council (OCC) and between Metropolitan Police Department Staff and The OCC in determining whether to file a neglect petition in a case and drafting the petition.

Parent: The birth mother/father, adoptive mother/father or step mother/father of a child. (NCANDS).

Periodic Review: The administrative or court review of a foster care case required by P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980". P.L. 96-272 set up a case review system for assuring that the status of each child is reviewed periodically but no less frequently than once every six months by either a court or by administrative review in order to:

1. determine the continuing necessity for and appropriateness of the placement;
2. determine the extent of compliance with the case-plan;
3. determine the extent of progress made toward alleviating or mitigating the causes necessitating placement in foster care; and
4. project a likely date by which the child may be returned home or placed for adoption or legal guardianship.

(P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(5)(B)) .

Permanent Freeze: A foster home where a determination has been made not to place additional children in the home. The foster children currently residing in the home are not in any kind of danger and it would be in their best interest to remain in the home, once the last child is removed the foster home is officially closed.

Permanency Goals: Permanency goals for children in foster care in D.C. are based upon federal requirements found in P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980". They are:

1. Reunification with a parent (or legal guardian) ;
2. Reunification with a relative;
3. Adoption;
4. Long-Term Foster Care; and
5. Independent Living.

(P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" § 475(5) (C). See also, **permanency planning**.)

Permanency Planning: The process established under P.L. 96-272, the "Child Welfare and Adoption Assistance Act of 1980", through which a child in foster care benefits from case planning, periodic reviews and other procedural safeguards to ensure that the child enters care only when necessary and is appropriately placed and is returned home or to a permanent living situation in a timely fashion.

Perpetrator: An individual who is determined to have abused or neglected a child. Under the child abuse and neglect definitions in D.C. law, a parent, guardian or custodian are those who may be found to have abused or neglected a child. (D.C. Code § 2301 (9) and (23)).

Petition/Petitioner: a petitioner is one who had decided to request through the legal system permanent care of a child(ren) through adoption. This request is known as the petition.

Petition Date: The month, day, and year that a juvenile court petition was filed.

Physical Abuse: Type of maltreatment that refers to physical acts that caused or could have caused physical injury to the child.

Physically Disabled: A clinically diagnosed physical condition that adversely affects day-to-day motor functioning, such as cerebral palsy, spina bifida, multiple sclerosis, orthopedic impairments, and other physical disabilities.

P.L. 96-272: The "Adoption Assistance and Child Welfare Act of 1980" which established current standards for federal financial participation in the maintenance of children in foster care and adoptive placements in the United States.

Placement Conference: a meeting to discuss the transition plan of a child(ren) into a home of a foster/adoptive parent.

Police or Prosecutor: Police refers to the department of government charged with prevention, detection, and prosecution of public nuisances and crimes such as child maltreatment. Prosecutor refers to a legally trained person with responsibility to represent the State in court proceedings.

Post-Adoptive Services: Services provided to meet the ongoing needs of the family once an adoption has been finalized. (29 DCMR 1645.1) .

Pre-Adoptive Home: A home in which the family intends to adopt a child residing in the household. The family may or may not be receiving a foster care payment or an adoption subsidy on behalf of the child. (AFCARS, 45 CFR § 1355 App. A).

Pregnancy and Parenting Services for Young Parents: Activities for married or unmarried adolescent parents and their families to assist them in coping with social, emotional, and economic problems related to pregnancy and to plan for the future.

Prevention Services/Services to Families with Children: are services designed to support and improve the functioning of the family. Such services can include mentoring, tutoring, educational/job training, housing assistance, advocacy and legal assistance. The law requires the agency to either provide for, or contract for, any of several child abuse and neglect prevention services. Prevention services shall be provided and funded through the use of local and federal funds. Preventive services are provided directly to children and their families through a network of public and private partnerships including community-based services.

Primary Prevention: Provision of information and/or services designed to reduce the likelihood that abuse or neglect of children will occur.

Prior Abuser: A person with a previous determination of substantiated, indicated, or alternative response – victim in the State information system.

Prior Victim: A child with a previous determination of substantiated, indicated, or alternative response – victim in the State information system.

Promoting Safe And Stable Families Program: Program that provides grants to the States under Section 430, Title IV-B, subpart 2 of the Social Security Act, as amended, to develop and expand four types of services: 1) community-based family support services; 2) Innovative child welfare services, including family preservation services; 3) time-limited reunification services; and 4) adoption promotion and support services.

Private Kinship Care Provider: A relative providing full time care for a child (ren) when custody remains within the family. For purposes of this policy, this includes only those formal kinship care arrangements that require protective services involvement.

Private Placement: See Third-Party Placement and **Private Kinship Care Provider**.

Protective Supervision: A legal status in which a judge orders that a child who has been adjudicated neglected by the Superior Court of the District of Columbia Family Division remain in his or her home. (D.C. Code § 16-2320) .Such an order may remain in effect for up to one year; however, the Agency may terminate supervision earlier if it appears that the purpose of the order has been achieved. An order of protective supervision can be extended by the court for additional periods of one year. (D.C. Code §§ 16-2301(19) and 16-2322) .

During a period of protective supervision, parents retain all legal rights and responsibilities including guardianship, legal-custody and physical custody. When protective supervision is ordered, the Agency must continue to assess the safety of the child and provide services as appropriate to reduce or eliminate risk of future harm. A judge may require that the child return to court at any time during the period of protective supervision, which may only be terminated by a rescindment order.

Public Assistance: Participation in any of the following social service programs such as TANF, General Assistance, Medicaid, SSI, Food Stamps, etc.

Public Law: Public Law 96-272 (The Adoption Assistance and Child Welfare Act of 1980) which established current standards for federal financial participation in the maintenance of children in foster care and adoptive placements in the United States.

Putative Father: a man who is assumed to be a child's biological father. A man that was not married to the birth mother at the time of conception is considered to be the **putative father** until a paternity test confirms or disputes his paternity or until he signs an affidavit of paternity or a denial of paternity.

Quality Assurance: The process for identifying gaps in services, evaluating and tracking the completeness and accuracy of service delivery based on compliance with statutory and regulatory requirements, and examining and monitoring the performance of staff.

Race: The primary racial group with which an individual identifies or is identified by others. In the case of a young child, parents determine the child's race. (AFCARS 45 CF'R § 1355 Apps.

RACE - Unable To Determine: See **Unable To Determine (Race)**.

Reasonable Accommodation: The modification of programs in ways that permit students with disabilities to participate in educational programs that receive federal funding. The concept also applies to the modification of job requirements and equipment for workers with disabilities.

Reasonable Efforts: P.L. 96-272 "The Adoption Assistance and Child Welfare Act of 1980" requires that "reasonable efforts" be made to prevent the placement of children in foster care and/or to reunify them with their families. To meet this requirement, services must be available to children and families, which may include:

1. 24-hour emergency caretaker;
2. homemaker services;
3. day care;
4. crisis counseling;
5. counseling, including mental health and substance abuse counseling, vocational counseling or vocational rehabilitation;
6. emergency shelters;
7. emergency financial assistance;
8. respite care;
9. home-based family services;
10. self-help groups;
11. services to unmarried parents; and
12. post-adoption services.

When a child is in foster care, the child's case plan must describe reasonable efforts made to prevent placement and/or to reunify the child with his or her family. (45 CFR §§ 1356 .21 (d) (4) and 1357 .15 (e) (2)).

Receipt Of Report: The log-in of a call to the agency from a reporter alleging child maltreatment.

Referral: The direction of a person by a CFSA staff member or other professional to aid, information or services.

Related Services: Those services a student must receive to benefit from special education; for example, transportation, counseling, speech therapy, crisis intervention, etc.

Relative: A person connected to the child by blood, such as parents, siblings, grandparents, etc.

Relative Foster Care: 24 hour substitute care by a relative for a child in foster care status. Third-party placement of a child with a relative does not constitute relative foster care. Relative shelter care settings includes:

1. **Licensed or Approved Relative Foster Family Home:** A home licensed or approved by D.C. or a state in which a relative of a child in foster care status is authorized to provide 24 hour substitute care for the child. (AFCARS, 45 CFR § 1355 App. A) .In general, foster care maintenance payments are available for the support of foster children residing in currently licensed or approved relative foster family homes. *See also, Foster Care.*
2. **Unlicensed Relative Foster Family Home:** A home in which a closely related caregiver not licensed or approved as a foster parent by D.C. or a state is providing 24 hour substitute care for a child in foster care status. *See also, foster care.* (AFCARS, 45 CFR § 1355 App. A) .In general, AFDC payments are available for the support of foster children residing in unlicensed relative foster family homes.

Relative Placement: Any placement of a child within the child's extended; family system rather than with a parent. *See also, **Third-Party Placement** and **Relative Foster Care**.*

Religious Exemption: According to current D.C. law, "no child who in good faith is under treatment solely by spiritual means through prayer in accordance with the tenets and practices of a recognized church or religious denomination by a duly accredited practitioner thereof shall for that reason alone be considered a neglected child". (D.C. Code § 16-2301).

Relinquishment: When a child's parent, executes a written document assigning physical and legal custody of the child to the Agency for the purpose of having the child adopted. (AFCARS, 45 CFR § 1355 App. A).

Under D.C. law, parental rights may be not be relinquished for 72 hours following the birth of a child. Prior to accepting a relinquishment, the Agency must provide counseling by a professional social worker to the parent regarding alternative services available and, to both the parent and, if appropriate, the child, regarding psychological and emotional issues. A relinquishment is executed voluntarily in writing by the parent in the presence of an Agency representative and a witness. A parent may automatically revoke a relinquishment in writing within 10 days of executing it. If the 10th day falls on a week- end or holiday, the time allowed for revocation is extended to the next working day. After exercising an automatic revocation, a parent may not execute a second relinquishment until 30 days have elapsed. A second relinquishment is irrevocable unless a court finds that it was not voluntary. (D.C. Code § 32-1007).

Removal Date: The month, day, and year that the child was removed from the care and supervision of his or her parents or parental substitutes, during or as a result of the CPS response. If a child has been removed more than once, the removal date is the first removal resulting from the CPS response.

Removal from the Home: An action taken when an investigation indicates that a child is abused or neglected and cannot be adequately protected by services offered in the home, or pursuant to a voluntary placement agreement, or when a child is relinquished. CFSA may remove a child only in the case of a boarder baby or with consent of the child's parent, guardian or custodian. Under D.C. law, in all other situations, a court order must be obtained or the removal must be effected by a law enforcement officer when the officer believes that removal is necessary because:

1. the officer has reasonable grounds to believe that the child is in immediate danger from his or her surroundings; or
2. after consultation with an authorized individual at CFSA, he or she has reasonable grounds to believe that the child is suffering from illness or injury; or
3. is otherwise endangered and cannot be protected by the provision of services or resources.

When a child removed from the home is placed in shelter care, a shelter care hearing must be held in the Superior Court of the District of Columbia no later than the next day, excluding Sundays, after the child has been taken into custody. (D.C. Code §§ 6-2105, 6-2124, 16-2310 and 16-2312).

Report: An allegation that a child is known or suspected to have been abused or neglected and/or is in immediate danger of abuse or neglect. A report is investigated in order to determine whether it is supported or unsupported by credible evidence. Any individual may report child abuse or neglect to the police or to CFSA (generally via the Intake Hotline at (202) 223-2255) .Those employed in certain occupations are mandated to make an immediate report, which should include the following information:

1. the name, age, sex and address of the child who is the subject of the report and each of the child's siblings, parents or other persons responsible for the care of the child;

2. the nature and extent of any current and/or, if known, past abuse or neglect;
3. all other information, which the reporter believes, may be helpful in establishing the cause of any abuse or neglect and the identity of the perpetrator(s) .
4. name, occupation and means of contacting the report as well as information regarding any actions the reporter has taken with respect to the child.

Anyone making a report in good faith is immune from civil or criminal liability pertaining to the report (D.C. Code §§ 2- 1352,2-1353,2-1354,6-2101(6)-(9)). See also, mandated reporter.

Report Date: The month, day, and year that the responsible agency was notified of the suspected child maltreatment.

Report Disposition: The determination that results from the CPS response pertaining to a report of child maltreatment.

Report Disposition Date: The month, day, and year that a decision was made by CPS or by a court regarding the disposition of a CPS response.

Report ID: See **Report Identifier**.

Report Identifier: A unique identification assigned to each report of child maltreatment.

Report Source: The category or role of the person who makes a report of alleged maltreatment.

Residential Facility Staff: Employees of a public or private group residential facility, including emergency shelters, group homes, and institutions.

Respite Care: Temporary care of a child to provide relief to the caretaker. May involve care of the child outside o-f his or her own home for a brief period of time, such as overnight or for a weekend. Respite care is not considered to be foster care or other type of placement. (AFCARS, 45 CFR § 1355 App. A).

Response Time With Respect To The Initial CPS Response: The time between the log-in of a call to the State Agency from a reporter alleging child maltreatment and the face-to-face contact with the alleged victim, where this is appropriate, or to contact with another person who can provide information.

Response Time With Respect To The Provision Of Services: The time from the log-in of a call to the agency from a reporter alleging child maltreatment to the provision of post-investigative services, often requiring the opening of a case for ongoing services.

RFP: Request for Proposal

SACWIS: See **Statewide Automated Child Welfare Information Systems**.

Scope of Services: This policy is intended for all CFSA and contract agency staff with responsibility for children who have been removed from their home due to abuse or neglect.

Screened-In Referrals: Reports of child maltreatment that met the State's standards for acceptance and were referred for CPS investigation or assessment.

Screened-Out Referrals: Reports of child maltreatment that did not meet the State's standards for acceptance and were screened out prior to CPS investigation or assessment.

Screening: is the preliminary evaluation process for prospective caregivers.

Self-Sufficiency: the family is no longer in need of financial assistance from CFSA.

Service Date: The date activities began as a result of needs discovered during the CPS response.

Services: Non-investigative public or private non-profit activities provided or continued as a result of a CPS response. In general, only activities that occur within 90 days of the report are included in NCANDS.

Services, Opened: Services for which an individual or family has been formally enrolled.

Services, Planned: Services for which an individual or family is intended to be enrolled.

Sexual Abuse: A type of maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities.

Sexual Exploitation: When a parent, guardian or other custodian allows a child to engage in prostitution as defined by law, or allows a child to engage in obscene or pornographic photography, filming or other forms of illustrating or promoting sexual conduct as defined by law. (D.C. Code § 16-2301 (25)) .

Shelter Care: Temporary care of a child in physically unrestricting facilities, designated by the Court, pending a final disposition of a neglect petition. (D.C. Code § 16- 2301(14)).

Short-Term Rental Subsidy: short-term, up to one year, financial assistance from CFSA.

Social Services Block Grant: Funds provided by title XX of the Social Security Act that are used for services to the States that may include child care, child protection, child and foster care services, and daycare.

Social Services Personnel: Employees of a public or private social service or social welfare agency, or other social worker or counselor who provides similar services.

Social Worker: Worker assigned to the child(ren) and who has responsibility for the safety and well being of a child.

Special Board Rate: is paid for a child who has a regularly reoccurring special need that requires extra ordinary time or expense on the part of a foster parent. A special need would be a reoccurring or ongoing professionally diagnosed medical, psychiatric, educational or social need, which can not be met by normal levels of parent involvement.

A request for a special board rate must be accompanied by a diagnosis and treatment plan. The foster parent must be able to provide a verifiable account of that need for expenditure of time and money.

Special Needs: A categorization which pertains to the eligibility of a child for an adoption subsidy under Title IV-E of the Social Security Act as specifically defined under State law. D.C. law defines a child with special needs as "any child who is difficult to place in adoption because of age, race, or ethnic background, physical or mental condition, or membership in a sibling group which should be placed together. A child for whom an adoptive placement has not been made within 6 months after he [or she] is legally available for adoptive placement shall be considered a child with special needs within the meaning of [the statute] ". (AFCARS, 45 CFR § 1355 App. A and D.C. Code § 3-115 (2) (A)).

Special services: are specific, time-limited services based on a child's specific special needs.

Special Services-Disabled: Activities for persons with developmental, physical, emotional, visual or auditory impairments that are intended to help maximize their potential, alleviate the effects of their disabilities, and to enable these persons to live in the least restrictive environment possible.

Special Services-Juvenile Delinquent: Activities for youth (and their families) who are, or who may become, involved with the juvenile justice system.

Standardized Tests: In a vocational assessment, standardized tests are used to predict how a student is likely to perform in jobs calling for certain interests and skills.

State Agency: The agency in a State that is responsible for child protection and child welfare.

State Child Welfare Programmatic Staff: Personnel whose focus is the definition and operation of the State's child welfare program.

State Data System: Any number of State computer systems which are focused on supporting the child welfare efforts of the State.

State/Territory: The primary geopolitical unit from which child maltreatment data are collected. Washington, DC and U.S. territories have the same status as States.

Statewide Automated Child Welfare Information Systems (SACWIS): Any of a variety of automated systems designed to process child welfare information on a state-wide basis.

Stepparent: The husband or wife, by a subsequent marriage, of the child's mother or father.

Steroids: Steroids are synthetic compounds related to the male sex hormone testosterone. They come in tablets or liquid forms.

Subsidy: See Adoption Subsidy.

Substance Abuse Services: Activities designed to deter, reduce, or eliminate substance abuse or chemical dependency.

Substantiated: Disposition of reported child abuse or neglect which concludes by a preponderance of credible evidence gathered that the report is supported, founded or validated according to the law of the District of Columbia. See also, **Supported Report**.

Supervisor: Staff person assigned to supervise a social worker at the time of the report disposition.

Supervisor ID: See **Supervisor Identifier**.

Supervisor Identifier: A unique identification of a supervisor who is assigned to the child at the time of the report disposition.

Supplemental Security Income (SSI): A program established by Title XVI of the Social Security Act (Title XVI) that provides federal assistance to the elderly, the disabled, children, and the poor who meet certain eligibility requirements; these payments are supplemental to any funding received from the District and are calculated on that basis.

Supported: Defined in statute as a report made by a mandated reporter which is supported by credible evidence (D. C. Code § 6-2101(8)) .See **substantiated**.

Temporary Assistance to Needy Families (TANF): The Block Grant program that replaced Aid to Families with Dependent Children (AFDC) in providing financial assistance to families to meet the needs of the child, living with a parent or relative, and meeting certain eligibility standards.

Temporary Custodial Placement: Under D.C. law, placement by CFSA in an Agency facility for a period up to 5 days when a child has been left alone or with inadequate supervision and a third-party placement cannot be made, provided that :

1. notice is left for the child's parent or custodian explaining the procedure for reclaiming the child;
2. efforts continue to locate the child's parent;
3. the child is returned forthwith upon the request of the parent or custodian, unless there is additional evidence of immediate danger to the child.

If CFS&A finds that a child would be in immediate danger if returned to the home, the Agency contacts the police who may legally "remove" the child. A complaint is filed with the Superior Court of the District of Columbia if the police remove the child or if, at the end of 5 days, the parent or custodian fails to claim the child. (D.C. Code § 6-2124).

Termination of Parental Rights (TPR): Under D.C. law, a judicial proceeding in which a motion is filed by the Office of the Corporation Counsel (OCC) or by the guardian ad litem (GAL) for the child. This motion seeks to have the parent's parental rights terminated, so that the child is free for adoption. If the child has been adjudicated neglected due to abandonment (D.C. Code 16-2301(9) (A)) or as a boarder baby (16-2301(9) (G)), the TPR motion may be filed immediately after the adjudication. If the child was adjudicated neglected under any of the other provisions of 16-2301(9), such as abuse, lack of care, etc., the TPR may not be filed until 6 months after the adjudication of neglect. A TPR motion must contain at least the following information, if it is known, or a statement declaring that it is not known, if that is the case:

1. identifying information about the child and his or her current placement;
2. name and title of the petitioner;
3. name and address of the child's parent;
4. a plain and concise statement of the facts and opinions on which the termination is sought;
5. a specification as to the health of the child;
6. a statement as to the general prospects for, or barriers, if any, to the adoption of the child; and
7. a statement pertaining to efforts to locate any absent parent of the child.

An order terminating parental rights divests the parent and the child of all legal rights, powers, privileges, immunities, duties and obligations with respect to each other, except the right of the child to inherit from his or her parent. The child's right of inheritance is only terminated by a final order of adoption. (D.C. Code §§ 16-2354 and 16-2361).

Title IV-E: a reference to Title IV- E of the Social Security Act and the program established thereunder that provides a mechanism for the jurisdiction to receive federal funding for foster care maintenance costs, traditional independent living programs, and adoption assistance for children within the foster care system who meet certain eligibility requirements.

Tobacco: Tobacco can be found in cigarettes, cigars, pipes tobacco and smokeless tobacco.

Third-Party Placement: A term which describes temporary or long term placement of a child with responsible neighbors, relatives or another individual who is found to be qualified to receive and care for the child. This type of placement may occur with or without involvement of the Court. For example, CFSA may effect a third-party placement as a service when an investigation indicates that an abused or neglected child is in need of services, or the Court may place a child with a third-party when it finds that the child cannot be protected in his or her own home and the placement selected is likely to be less damaging to the child than the child's own home. (D.C. Code §§ 6-2124(a) (2) and 16-2320(a) (3) (c)). When in a third-party placement, a child is not in foster care.

Three-Seventy-Nine (379): The complaint form used by the Metropolitan Police Department to initiate court proceedings in cases of abused or neglected children.

Time-limited Family Reunification Services: Services and activities for a child and the child's parent(s), guardian or custodian in order to facilitate the safe, appropriate, reunification within 12 months of a child out-of-home placement.

Transition Plan: Plan of action detailing individualized procedures to facilitate and expedite placing a child in an adoptive home placement. Steps include pre-placement visits and consultation and incorporation of the foster family in the transitioning planning. The foster care and adoption social workers jointly develop this plan.

Transition Services: A coordinated set of activities for a student that promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment, continuing and adult education, adult services, independent living, or community participation.

Transportation Services: Activities that provide or arrange for travel, including travel costs of individuals, in order to access services, or obtain medical care or employment.

Three-Seventy-Nine (379): The complaint form used by the Metropolitan Police Department to initiate court proceedings in cases of abused or neglected children.

Title IV-A: The federal program under which Aid to Families with Dependent Children (AFDC), also known as welfare, is provided to certain needy families. AFDC is available for the support of children living with closely related family members as well as with parents.

Title IV-D: The federal program under which a parent receiving child support assigns those benefits to the Agency when a child is residing in foster care. Title IV-D also regulates the establishment and enforcement of child support orders in cases where the custodial parent is receiving AFDC and where there is no foster care involvement.

Title IV-E: The federal program under which maintenance payments may be made on behalf of low income, eligible and reimbursable children placed in foster care or with adoption subsidies.

Title XIX: The federal program under which medical assistance is provided for eligible low income children in foster care or adoptive placements.

Trial: see, fact-finding hearing.

Triennial Review: Every three years, a student in special education must be given a completely new evaluation/assessment to determine the student's progress and to make a new determination of eligibility for continued special education services.

Unable to Determine (Race): The inability to determine race because a child is very young or severely disabled and no one is available to identify the child's race.

Unborn: The child abuse victim was not yet born.

Under One Year: The child abuse victim was under one year old.

Uniform Crime Report: A descriptive summary of crimes committed in the United States compiled by the Federal Bureau of Investigation.

Unknown: The State collects data on this variable, but the data for this particular report or child were not captured or are missing.

Unknown Father: either the birth mother has indicated that she does not know the identity of the birth father or she refuses to name the father. The father is also unknown if the birth mother's whereabouts are unknown or if the birth mother is deceased and she never named a father.

Unsubstantiated: Disposition of reported child abuse or neglect which concludes by a preponderance of evidence gathered that the report is not supported, founded or validated according to the law of the District of Columbia. See also, **unsupported report**.

Unsupported Report: Defined in statute as a report made by a mandated reporter which is not supported by credible evidence. (D.C. Code § 6-2101). See **unsubstantiated**.

Unusual Incident Report: These reports refer to incidents that occur that require special attention, such as accidents or physical or mental health problems that result in the child needing medical attention, reports of abuse and/or neglect, abscondence, etc.

Victim: A child having a maltreatment disposition of "substantiated," "indicated," or "alternative response victim."

Visitation: In general, visits between a child in placement and a family member or other individual close to the child. Under D.C. law, when a child is in shelter care, weekly visitation with the child's parent, guardian or custodian occur unless a Judge prescribes a schedule of visitation or orders that visitation not be allowed. (D.C. Code § 16-2310(d)).

Visually Or Hearing Impaired: A clinically diagnosed condition related to a visual impairment or permanent or fluctuating hearing or speech impairment that may significantly affect functioning or development.

Voluntary Placement Agreement: A written agreement between a child's caretaker and the agency under which the child is removed from his or her home and placed in foster care for

a limited time. Under *LaShawn*, a voluntary placement may not exceed 21 days unless it is extended to 42 days with appropriate, official permission. (LaShawn Revised Implementation Plan Section A. August 1, 1994) .

In order to receive federal funds for a voluntary placement, P.L. 96-272 protections must be provided to the child. If the placement lasts more than 180 days, a court must make a determination that continued voluntary placement is in the best interests of the child. The placement is still considered voluntary even if a subsequent court order is issued to keep the child in care. (AFCARS, 45 CFR § 1356.30).

Ward: See committed child.

Waiver of Parental Rights: The power that the Court can exercise to waive the rights of the birth parents when all efforts to locate the birth parents have been exhausted.

White: Having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Worker: The worker assigned to the foster parent and has responsibility for assessing the on-going ability of the foster parent to provide a safe, loving and nurturing home environment for foster children.

Worker ID: See **Worker Identifier**.

Worker Identifier: A unique identification of the worker who is assigned to the child at the time of the report disposition.