



QUARTER 7
PIP 4.1.2
Clark

CHILD PROTECTION SUPERVISORY EXPECTATIONS

CPS Supervisory Expectations

INVESTIGATIONS**1 Assignment of Investigation****REVIEW OF REPORT**

- Know the allegations in the report and a comprehensive understanding of the information provided.
- Considerations to prevent removal
- Does this report indicate a special assignment and or referral to proper administrator
- What is the response time?
 - Does it require a more immediate response?

HISTORY

- Is there prior history to be reviewed?
 - If yes, what needs to be done differently in response to this report?
 - Check History in and out of state (patterns, safety of worker, etc.)
 - Check Family Tracs, Microfilm, CANS interface, DFS reference, DFS reporting document.
- Is there current DFS involvement?
 - If yes, how will Permanency be involved?
 - Information to assist with Investigation?
 - Assistance with each child?

INITIAL STEPS

- What equipment is needed?
- Is Law Enforcement needed to assist in response?
- What is the plan to respond?
- What is the plan for initial contact?
 - With each children?
 - With the Caregivers?
- What collaterals will need to be interviewed?
- Considerations to prevent removal

2 Safety Decision**IMMEDIATE SAFETY / IMPENDING DANGER**

- Are Safety Threats identified?
 - What are the observations that are the basis of the safety threat(s)?
 - How is each child vulnerable to the identified safety threats? Such as Age, Functioning, Ability to Communicate Needs, Health, targeted child, and pattern of behavior against a child.
- What are the protective capacities for each caregiver in the home?
 - Is there support in the home that mitigates the safety threats identified?
 - What is the support available?
 - Based on the information gathered, is each child Safe or Unsafe?

IMMEDIATE SAFETY/IMPENDING DANGER CONT'D

- What are the observations regarding the presence or absence of impending danger safety threat(s)?
- What are the protective capacities of the caregiver that make each child safe?
 - If applicable, how are insufficient protective capacities compensated for?
- How is each child NOT vulnerable to the safety threats?
 - If applicable, how are any vulnerabilities compensated for?
- What are the supports that are utilized that make each child safe?
- What additional information and/or monitoring is needed for continued assessment of safety?

CHILD IS UNSAFE

- What would need to happen to keep each child in the home safe?
 - Is it feasible?
 - Can it be implemented immediately?
 - Questions to answer
 - What are safety threats identified?
 - Is the child vulnerable?
 - What are the protective capacity insufficiencies?
 - Can we do a safety plan?
- What alternatives are provided by the caregiver(s)?
 - How are they ruled in / out?
- What attempts were made to mitigate the safety threats?
- What are the barriers that make the safety threats unable to be mitigated?
 - Access to each child?
 - Unwillingness / inability of caregiver(s) to recognize the need for immediate action. Family does not see that a safety threat exists.
 - History?
 - Specific Diminished protective capacities of each caregiver(s)?
 - Other

SAFETY PLANNING

- Can a Safety Plan be implemented to keep each child in the home safely?

YES

- What must the home environment and situation look like?
- What actions will be taken to control the current environment? Is it feasible and realistic?
- What are the demonstrated protective capacities of identified supports and/or caregiver(s)?
- Who will be responsible for each part of the safety plan?
- How will it be monitored?
- *Safety plan must be time limited.*

NO**REMOVAL**

- Can additional information or resources be available in the near future?
- When will safety be reassessed?
- What needs to be different in order for each child to be safe or a safety plan to be implemented?

CPS Supervisory Expectations

- What efforts will continue to be made to resolve the safety threats?

3 **Placement**

RELATIVES

- Has a diligent search been done to identify all adult relatives within 5th degree of consanguinity and conduct background checks?
- What steps must be/were taken for the relative(s) to be considered/ approved for placement?
 - Has there been a home visit
- What are the protective capacities of the Relative caregivers?
 - How are they demonstrated?
 - How are they diminished?
 - Are they sufficient?
- What are the needs of each child?
 - i.e. siblings
 - What will the visitation plan be?

NON-RELATIVE PLACEMENT

- What are the needs of each child?
 - siblings
 - medical
 - behaviors, sleep patterns, and personality information that will inform foster parents and assist with placement
- What will the visitation plan be?
- Can relative placement continue to be explored?

4 **Findings**

ALLEGATION DISPOSITION / CONCLUSION

- What is the information collected by the Investigator to support the finding?
 - Photographs
 - Statements
 - Records
 - Other
 - Observations
 - Is/are the identified allegations correct based on the information gathered?
- How are inconsistencies in statements, observations and information reconciled?
- How was the alternative finding ruled out?
- How does the information meet the criteria for the finding?
- If there was a safety plan, was it completed and end dated?

DOCUMENTATION

- Does the documentation clearly communicate the information collected?
- Was information found that requires additional allegation(s) to be added?
- Is all documentation completed? (i.e., UNITY screens & fields)

CHILD PROTECTION DECISION

- Are there conditions affecting risk that is not captured within the Risk Assessment?
 - If so, what are they and how are they impacting the family or likely to impact the family
- Are there circumstances that require a policy override of the Risk Assessment score?
- Are there underlying issues affecting this family?
 - i.e., financial, marital, domestic violence, mental health

CPS Supervisory Expectations

- Is that risk communicated to the family?
- Has the family been engaged in discussion and problem-solving regarding mitigation of these risks?
- Is the family's willingness and ability to resolve the issues clear?

5 Transfers

IN-HOME SERVICES

- Describe any and all safety threats identified and how they are mitigated to the extent that each child can remain in the home?
- Describe the caregiver capacities? For those that are insufficient how will they be mitigated allowing the child to remain in the home safely?
- Describe any and all child vulnerabilities and how are they will be mitigated allowing the child to remain in the home safely?
- Is there a safety plan currently in place? Describe how it is controlling the immediate environment? When does it need to be re-viewed?

OUT OF HOME SERVICES

- What are the safety threats that require each child to be out of the home?
- What are the insufficient caregiver capacities that require each child to be out of the home?
- What are there child vulnerabilities that require each child to be out of the home?
- What needs to be different in order to consider reunification?

DOCUMENTATION & TRANSFER PROCESS

- What is the status of the transfer? (according to the transfer process established)
- What steps are in need of completion and what is the expected date of completion?

6 Closures

- Is the information that supports the finding, conclusions, and recommendations articulated in the documentation?
- Are all of the steps of the Investigative Protocol for the specific allegations completed?
- If any steps are waived, is the approval documented in UNITY?
- Are any additional investigative tasks required?
- What, if any, services were offered?
- Does documentation support the outcome of the case or finding?
- Is Unity information accurate and updated?
- Is all missing data completed?

CPS Supervisory Expectations

WEEKLY 1:1**1 Court**

- How many cases are court involved?
- What is the status of the transfer process for each?
- At PC, is the Investigator able to clearly articulate the safety decision and the actions taken based on the DFS Safety Model?
- Are the following items communicated to the court in a manner that is clear, consistent with the DFS Safety Model and specific to this family? (verbally and in writing)
 - Protective Capacities
 - Child Vulnerabilities
 - Severity
 - Imminence
 - Control / Out of Control Environment
- Is the Investigator able to articulate verbally and in writing to the court:
 - What is needed or needs to change for the child to return home?
 - Continued efforts made toward reunification
- Should a request to waive reasonable efforts be made?

2 Child Fatality

- Is there a criminal case?
 - If yes, what is the status?
- Are the autopsy results available?
 - If yes, what do they indicate?
- Have all CFTF and DFS protocol and policy requirements been met?
 - Each task completed
 - Tasks that to be completed
 - Next steps
 - UNITY information updated
 - Statewide policy compliance with child death review instrument
 - Child Fatalities windows completed
- Are all relevant collaterals contacted?
- Is all supporting information gathered to reach the CPS Investigative finding?

3 Open cases

- When was each child last seen in their placement location?
 - Is this documented?
- What are the continued efforts being made to resolve the safety issues?
- What is the status of open investigations and what are the steps to conclude the investigation within the required time frames?
- Is there a plan and documentation for any investigations that cannot be concluded within the required time frame?
- Are there any safety plans in place?
 - Are they still needed?
 - Are they being monitored effectively?
 - Are there any changes in the situation that would indicate modifications?

- Are there cases that require special attention, such as DV, Mental Health, Medically Fragile or Substance Abuse?
 - If yes, are the investigative steps being completed according to P & P protocol?
 - What is the family's understanding and/or compliance regarding the special circumstances?
 - How do the special circumstances impact planning for closure or transfer?
- Are UNITY case notes entered and up to date?
- Is report detail completed?
- Is there missing data?
- Other items as appropriate (ICWA, CFT, etc.)

4 **Overdue Investigations**

- What is the status of each?
 - Is the investigation complete?
 - If not, what are the barriers?
 - Do the barriers justify the open/overdue status?
 - What is the plan and estimated date of completion?
- Has child been seen per investigative policy and procedure?

5 **Staff Requiring Additional Attention**

- For staff who are on PIP or who have been identified as needing professional development in a specific area.
 - Supervisor is providing the agreed upon or established support and oversight
 - What is the status of progress by the Investigator?
 - Are modifications needed, such as additional or reduced structure?
 - Does the PIP need to be modified?

Performance/Development

Frequency

- Staff performance and staff development will be discussed no less than every other month.

Review of Performance

The formal 1:1 involves feedback and guidance according to information accumulated throughout Investigation oversight and Weekly 1:1's, as well as any additional communication or information that is applicable. A major focus of this review should be the development of staff.

- Review goals and tasks from previous 1:1
- Feedback regarding overall performance measurements in alignment with the current DFS expectations, such as:
 - All open cases

CPS Supervisory Expectations

- Response Times
- Child contacts
- Safety Assessments
- CFT's
- Does the Investigator understand and implement current DFS Policy, Procedures and Protocols?
- What are the Investigator's strengths and accomplishments?
- What are the identified growth areas?
 - Employee expressed goals
 - Training and Skill Development needs identified by Supervisor
- What is the progress of identified growth areas?
- Utilize examples of investigations and investigative tasks for feedback and reflection in order to refine and enhance skills.
- Assess the effectiveness of information gathering techniques and the application of information gathered to investigative planning, findings, and conclusions.
- Discuss reviewed documentation to enhance as needed.
- Discuss CFT facilitation skills, team collaboration and family engagement skills
- Provide clarification around expectations and performance

IN HOME SUPERVISORY EXPECTATIONS

IN HOME SUPERVISOR EXPECTATIONS

Review every case bi-weekly

- Case Assignment - Initial and ongoing
 - Have you held a supervisory conference with CPS?
 - ✓ What are the current safety threats and why?
 - ✓ What are the caregiver's protective capacities?
 - ✓ What are the specific child/ren vulnerabilities?
 - ✓ What are the child and parents current level of functioning?
 - ✓ What services has the family been referred for to address safety and risk factors? If so what services and are they engaged?
 - ✓ When was the last child and parent contact in the home?
 - ✓ Who is the assigned In Home worker?
 - ✓ Have you documented this contact with the CPS supervisor?
 - Has the supervisor staffed the case with the newly assigned In Home caseworker and do you and your worker know the history of the family?
 - ✓ Review prior CPS history in CANS and UNITY
 - ✓ Review case notes
 - ✓ Safety assessments, risk assessments, NIA, the CPS transfer summary.
 - ✓ Identify safety threats and/or risk.
 - ✓ Review of the four areas of protective capacity, diminished protective capacity, and child vulnerability.
 - ✓ Have you documented this contact with your worker?
 - Has the Transitional CFT been scheduled/held?
 - ✓ Has CPS contacted your worker to schedule the CFT and has all parties been invited to the CFT?
 - ✓ Has your worker and CPS developed an agenda prior to the Transitional CFT?
 - How is the family doing now/what progress have they made?
 - What are the safety concerns and/or risk factors, if any? Is a Safety Plan in place or is one needed?
 - What are the strengths of the family and are there any barriers to working with the family?
 - Does the family understand the reason for CPS involvement and the role of the In Home Worker?
 - Have all questions and concerns of the family been addressed?
 - Can your caseworker clearly articulate to the family the next steps after the TCFT i.e., NCFAS, case plan, and R&D etc?
 - When is the next scheduled court hearing and CFT?
 - Have you reviewed the NCFAS with your worker?
 - Did your worker contact the child and family in the home within 72 hours of the T-CFT?
 - Did your worker complete a case note and the Nevada Safety Assessment regarding their initial home visit?
 - Did your worker complete two home visits with the child/ren and parents in the home in each of the first two weeks following the T-CFT?

- Did your worker complete the NCFAS within ten days of the T-CFT?
 - Did you review the NCFAS with your worker? Did you discuss the domain ratings with your worker and how they will apply to the case plan?
 - Did your worker review the NCFAS with the family? Did your discuss "underlying" issues/conditions with the family i.e., DV, mental health, sex abuse, financial stress, substance etc.
 - Did your worker complete a case note and the In Home Safety Check List following the review of the NCFAS with the family?
- How are you ensuring your workers are always assessing safety and impending danger throughout the life of a case?
 - Prior to your biweekly one to one meeting have you reviewed each case?
 - Did your worker have weekly visits with the child/ren and parents/s in the home during the third and four week following the T-CFT?
 - Has your worker maintained biweekly contact with the family beginning with the fifth week following the T-CFT?
 - Has your worker completed a Safety Assessment every 30 days since the initial Safety Assessment was completed?
 - How does your worker know the child/ren are safe? Has your worker interviewed each child away from the family? For physical abuse cases, has your worker conducted body checks during every home visit with child/ren? Has your worker documented where they interviewed the child/ren, what did they discussed, the child's verbal and non-verbal cues, and the parent/child interaction?
 - If a child is determined to be unsafe has your worker staffed this case with you? Has your worker completed a new safety assessment based current safety factors? Has your worker held and emergency CFT? Has it been determined if a Safety Plan can be utilized to maintain the children in their own home? If the safety factors/allegations are new did your worker make a report to the Hotline? For children that are not Wards does your worker understand they cannot remove the children from the home? If it has been determined the child/ren cannot safely remain in the home has your worker explored alternative relative/fictive kin placements for children that are Wards?
 - How has your worker assessed parental protective capacity? How has your worker documented any changes in behavior, child developmental and understanding, safety threats and functioning and parent/interaction?
 - Has your worker conducted collaborative CFT meetings every 30 days? Did your worker document what type of CFT was held, who was present, who was invited, location, all pertinent information discussed, and what was the disposition?
 - Has your worker maintained contact with all collaterals a minimum of every 30 days? Has your worker documented what

was discussed and the type and location of contacts with Collaterals?

- Has your worker reviewed the NCFAS every 30 days and documented their review in UNITY?
 - Has your worker updated the NCFAS every 90s days and have you reviewed the update with your worker and documented your review of the NCFAS with your worker?
 - Has your worker completed an In Home Safety Check List every thirty days since the initial In Home Safety Check List was completed?
 - Have you accompanied your worker in the field during the past quarter to observe and mentor their work?
- Is your worker prepared to attend all types of Court hearings?
- Have you asked your worker what is their plan for Court/recommendations and Why?
 - Does your worker have applicable collateral reports (police, medical, psychological, counseling/treatment, and school) to attach to the Court report?
 - Have you observed your worker in Court a minimum of one quarter annually?
 - Have you and your worker discussed issues of safty/risk, parental protective capacity, child vulnerability and are they prepared to discuss such in court?
 - Has your worker submitted the in home and NV safety assessments prior to the hearing for your review?
- How have you ensured a case is ready for closure?
- Have you reviewed the case in Unity and with your worker during one to one meetings?
 - Has your held a Closure CFT? Did your worker discuss case plan, lifting any no contact or supervised contact orders, and behavioral changes/Parental Protective Capacities? Did your worker document the CFT?
 - Did your worker update the NCFAS?
 - Is your worker able to articulate improvement in family functioning and children's safety?
 - Has your worker completed a home visit and safety assessment within ten days of case closure?
 - Have you and your worker discussed issues of safty/risk, parental protective capacity, child vulnerability?
 - Can your worker clearly articulate findings or above?

- Have your staff development and training needs been identified?
 - Have you held bi-weekly one to one meetings with your worker?
 - To discuss COGNOS reports, AFCARS, monthly parent and child contact logs.
 - To identify opportunities for coaching, mentoring, and competency skill building.
 - To identify opportunity to praise your worker.
 - To provide feedback regarding expectations.
 - To identify your workers professional goals.
 - Have you documented your one to one meetings with your worker?
 - In UNITY (non descript)?
 - Your review of each case assigned to your worker, including Safety concerns and tasks for your worker to complete.

RECEIVING SUPERVISORY EXPECTATIONS

RECEIVING EXPECTATIONS

Formal Supervision Every Three Weeks 1:1

- ✓ Ensuring staff are (adhering to established receiving policy and procedures)utilizing the placement process
 - making good matches - Discuss
 - Childs needs such as medical, emotional, visitation, special appointments and educational,
 - Concurrent placement planning for siblings
 - If siblings must be separated were proper protocols followed
 - Placement Resource Staffing
 - Coordinate with assigned worker
 - Potential Home – Have all needs been identified and can resource meet identified needs, where does family live? Is it appropriate level of care?
 - move before 24 hours - discuss
 - Did you get it done?
 - What are the barriers that prevented placement?
 - facilitate or coordinate the move - discuss
 - Did all required steps get done?
 - ensure resources are being utilized appropriately - Discuss
 - DFS home before agency treatment homes
 - Discuss resource issues in 1:1
 - Review reasonable efforts log
 - Ensure licensing changes are coordinated with licensing – prior to placement
- ✓ Ensuring documentation and notification requirements
 - unity information (is updated)
- ✓ Initial intake - Discuss
 - setting case on court calendar
 - Was it done and was it complete
 - Is log completed
 - Is PRD and "Efforts" sent to Planned Placement?
 - Child Interview
 - Did you get information necessary for placement, i.e. allergies
 - Did you allay their fears

- Did you assess any medical and emotional needs
- ✓ 6 and under protocols
 - Supervisor will review if children under the age of 6 are placed in Child Haven
 - Were protocols followed regarding the priority placement needs of the child?
 - Are needs of the child and delays for placement identification being communicated to CPS/Permanency staff?
- ✓ Release to Foster Home
 - all appropriate documents completed (assembled and passed on to the caregiver)
 - Release to foster parents is documented
 - Notify caseworker child has moved
- ✓ Safety through the life of a case
 - Pre Placement safety check list
- ✓ Maintaining good relationship with caseworkers
 - Review any feedback from caseworkers and supervisors in field – Positive and Negative
 - Discuss “customer service” issues – Positive and Negative
- ✓ Pattern, trends, and barriers to doing your job – Discuss
- ✓ Observation
 - Supervisor will observe/listen to staff contacting foster parents/agency staff regarding the placement needs of children to include disclosure of child history and other pertinent case information

PLANNED PLACEMENT SUPERVISORY EXPECTATIONS

PLANNED PLACEMENT EXPECTATIONS

Formal Supervision Monthly 1:1

- ✓ Ensuring staff are (adhering to established policy and procedures) utilizing the placement process
 - making good matches
 - Ensure children have complete social & medical history, records and psychological history and reports as needed for placement.
 - Ensure Higher Level children have appropriate clinical information for homes. If not available refer to get it.
 - Conduct searches for HLOC resources if needed
 - Conduct searches for sibling groups if needed
 - Conduct search for medically fragile children if needed
 - Initiate and facilitate staffing with caseworker and others to develop and secure an appropriate placement
 - Facilitate or coordinate the actions necessary for the move to the new home - Discuss
 - Did all required steps get done
 - Coordinate with foster parents time to meet at child haven to do exchange
 - Nurse looks over the child
 - Exchange of medical appointment info and any medication child is on
 - Placement and request disclosure is sent to receiving for the foster parent
 - All appropriate documents completed assembled and passed on to the caregiver, i.e. Medical Passport is given to Foster Parent
 - document release
 - notify caseworker child has moved
 - Updating unity
 - Documenting reasonable efforts (including 6 and under report and 30 day report)

- ✓ Six and under cases – Supervisor will review if children under the age of 6 were placed in Child Haven
 - Were protocols followed regarding the priority placement needs of the child?
 - Are the needs of the child and delays for placement identification being communicated to CPS/Permanency staff?
- ✓ Safety through the life of a case
 - Pre Placement safety check list
 - Discuss with worker any concerns regarding check list
 - Were additional supports necessary for placement
- ✓ Maintaining good Involvement with caseworkers
 - call supervisors and caseworkers regarding placement
 - go to CFT where placement specialists are dealing with hard to place children
- ✓ Ensure reasonable efforts logs are completed for every case
- ✓ Coordinating license change as needed
- ✓ Pattern, trends and barriers to doing your job
- ✓ Observation – Listen to phone call of staff
 - Supervisor will observe/listen to staff contacting foster parents/agency staff regarding the placement needs of children to include disclosure of child history and other pertinent case information.
- ✓ Administrative Staff – Will vary depending on staff role but will include:
 - Review of under/under payment for the month
 - Outstanding PAR's for children in Specialized Foster Care
 - Monthly census reports for shelter
 - Sibling and specialized foster care placement
 - Review of respite and placement requests
 - Review of PRD email process and any delays as well as missing placement and placement conversion process

Tie the information above into the evaluation

CAREGIVER SUPPORT SUPERVISORY EXPECTATIONS

PLACEMENT PRESERVATION SERVICES (FAMILY SERVICE SPECIALISTS)

Weekly 1:1

Pull assigned cases and case notes for the past week prior to 1:1

Discuss the following: (Look for/identify themes/trends and track them: report these to Assistant Manager on a monthly basis)

- ✓ Do you have an objective understanding of situation? Foster Parent and worker?
 - What is it
 - Can you articulate it at a CFT
- ✓ What are the identified needs by Foster Parent and worker?
 - Services needed by Foster Parent
 - Foster Parent meeting case plan responsibilities
- ✓ Are there any identified safety concerns
 - What are they and how are we going to address these needs
- ✓ Is a home visit required?
 - If 10 day notice a home visit must occur
 - Have you set up a visit
 - Did visit occur and what was outcome re: needs, safety, and other issues?
- ✓ CFT
 - Did you request CFT
 - How are you going to participate?
 - Based on the particulars of the case and issues brought up how should it be addressed at the CFT
- ✓ Ensure Foster Parents Needs are met
 - What was done to meet the needs
- ✓ Was placement preserved or disrupted?
 - Did you notify the case worker of all actions taken and the outcomes of the case within three days of the determination of the outcome
 - If Placement disrupts:
 - What could have been done different to help prevent disruption
 - analyze situation and identify corrective actions related to the disruptions
 - provide appropriate feedback to placement services, receiving team, CPS, Permanency, training unit, licensing and/or other units as required
 - Analyze case outcome and debrief with appropriate parties
- ✓ How are we ensuring that we are appropriately teaming with permanency workers and child protection workers in foster parent situations
 - How are we actually doing it?
- ✓ Communication

- Are you communicating identified needs specific to the case directly to the permanency caseworker, licensing staff, and other applicable staff?
- ✓ Documentation
 - Services
 - Progress Notes and case closings
 - Assignment log
- ✓ Observation
 - CSS will observe staff in the field at a minimum of one (1) time per twelve-month period (or more often as required).

FOSTER PARENT LIAISONS (PART-TIME PROGRAM ASSISTANTS)
Weekly 1:1

Pull assigned cases and case notes for the past week prior to 1:1

Discuss the following: (Look for/identify themes/trends and track them: report these to Assistant Manager on a monthly basis)

- ✓ Successful experiences with foster parents and case workers
 - List positive experiences
 - Ask what helped to make these experiences successful
- ✓ Issues/concerns reported by foster parent
 - List issues/concerns
 - Ask what happened that made these issues/concerns
 - Discuss creative and solution focused ways of addressing issues/concerns
- ✓ Issues/concerns reported by caseworker
 - List issues/concerns
 - Ask what happened that made these issues/concerns
 - Discuss creative and solution focused ways of addressing issues/concerns
- ✓ Synopsis of CFTs
 - Do you have any concerns about the case plan and have you expressed them to the caseworker?
- ✓ Synopsis of home visits
 - Did the home appear to be safe and free of potential dangers to the child(ren)?
- ✓ Child safety concerns
 - Discuss proper protocol for addressing safety concerns
 - How do you know the children are safe
 - How well do you understand the safety protocol
- ✓ Foster parent safety concerns
 - Discuss proper protocol for addressing safety concerns
 - Does the foster parent understand who to call if a foster child/youth poses a threat to foster parent or self?
- ✓ Case status

- Discuss cases to assess why still open and when they should be closed
- ✓ Potential for disruption
 - Discuss proper protocol for referring these to Preservation Services
- ✓ Review FPL versus Caseworker Role
 - Ensure clear understanding and address challenges that have been presented/observed
- ✓ Confidentiality and conflict of interest issues
 - Address as situations arise
- ✓ Conflicts in role as "advocate" vs. foster parent
 - Address as situations arise
- ✓ Boundary issue
 - Address as situations arise
- ✓ Communication
 - Are you communicating identified needs specific to the case directly to the permanency caseworker, licensing staff, other applicable staff?
- ✓ Documentation
 - Prior to 1:1 review assignment/service logs and progress notes to ensure appropriate and accurate documentation and reporting is occurring
 - Address discrepancies as needed
- ✓ Review training schedule ask how the training process is going
 - Identify needs/challenges and address appropriately
- ✓ Ask staff if there are particular trainings they would like to attend
 - Review ODC and DFS training schedules together and schedule trainings
- ✓ Review accomplishments of each staff member and express your appreciation for specific things they do for the families they serve, the unit and for the department.
- ✓ Observation
 - CSS will observe staff in the field at a minimum of one (1) time per twelve-month period (or more often as required).

KINSHIP CAREGIVER SUPPORT SERVICES

Weekly 1:1

Pull assigned cases and case notes for the past week prior to 1:1

Discuss the following: (Look for/identify themes/trends and track them: report these to Assistant Manager on a monthly basis)

- ✓ Successful experiences with caregiver, relative licensing workers and case workers
 - List positive experiences
 - Ask what helped to make these experiences successful
- ✓ Issues/concerns reported by caregiver, relative licensing workers and case workers
 - List issues/concerns
 - Ask what happened that made these issues/concerns

- Discuss creative and solution focused ways of addressing issues/concerns
- ✓ Synopsis of CFTs
 - Do you have any concerns about the case plan and have you expressed them to the caseworker?
- ✓ Synopsis of home visits
 - Did the home appear to be safe and free of potential dangers to the child(ren)?
- ✓ Child safety concerns
 - Discuss proper protocol for addressing safety concerns
 - How do you know the children are safe
 - How well do you understand the safety protocol
- ✓ Caregiver proper protocol for addressing safety concerns
 - Does the caregiver understand who to call if a foster child/youth poses a threat to foster parent or self?
- ✓ Relative Licensing and Resource Needs
 - Are licensing needs being addressed?
 - Do relative have resources necessary to maintain permanency of child(dren)
 - Identifying resources that are lacking and brainstorm how to meet these needs
- ✓ Case status
 - Discuss cases to assess why still open and when they should be closed
- ✓ Placement disruptions
 - Discuss placement disruptions to identify themes/trends
 - Track identified themes/trends and report these to Assistant Manager on a monthly basis
- ✓ Communication
 - Are you communicating identified needs specific to the case directly to the permanency caseworker, licensing staff, and other applicable staff?
- ✓ Review KS versus Caseworker Role
 - Ensure clear understanding and address challenges that have been presented/observed
- ✓ Confidentiality and conflict of interest issues
 - Address as situations arise
- ✓ Conflicts in role as "advocate" vs. caregiver
 - Address as situations arise
- ✓ Boundary issue
 - Address as situations arise
- ✓ Review training schedule ask how the training process is going
- ✓ Identify needs/challenges and address appropriately
- ✓ Review supply needs i.e. Kinship Guides, brochures, etc to determine if additional supplies are needed and order according to department protocol
- ✓ Documentation
 - Prior to 1:1 review assignment/service logs and progress notes to ensure appropriate and accurate documentation is occurring
 - Address discrepancies as needed

- ✓ Ask staff if there are particular trainings they would like to attend
 - Review ODC and DFS training schedules together and schedule trainings
- ✓ Review accomplishments of each staff member and express your appreciation for specific things they do for the families they serve, the unit and for the department.
- ✓ Observation
 - CSS will observe staff in the field at a minimum of one (1) time per twelve-month period (or more often as required).

Peggy's Attic Staff 1:1

- ✓ Ask staff to share positive experiences and challenges
 - Identify solutions to any of the challenges presented
- ✓ Review/clarify role and responsibilities
- ✓ Review customer service policy
- ✓ Review protocols
- ✓ Identify perceived issues staff member may be having
- ✓ General work environment conducive to achieving designated outcomes
- ✓ Solicit ideas that staff member believes may enhance operations
- ✓ Documentation and services being provided are accurately documented
- ✓ Observation
 - CSS will observe staff in the field at a minimum of one (1) time per twelve-month period (or more often as required).

PERMANENCY SUPERVISORY EXPECTATIONS

PERMANENCY SUPERVISOR EXPECTATIONS**1. First 30 – 45 days case is Assigned for Substitute Care****PRIOR TO TRANSITIONAL CFT**

- Do you and your case manager know the history of the family after reviewing previous and current case notes, safety assessments, risk assessment, the NIA's six questions and other pertinent documentation?
- Do you and your case manager know what has brought this family to the attention of DFS and why is there a need for ongoing services?
 - What are the current safety threats identified and why?
 - ♣ Can your case worker describe the safety threats, insufficient protective caregiver capacities and specific child vulnerability?
 - If there is previous history with DFS, what were the historical safety threats? Are they the same or different than the current reason the child(ren) are in care?
 - Describe the current and previous risk level?
 - What is the current child functioning? If applicable, has this changed from the previous intervention?
 - What is the parent functioning? If applicable, has this changed from the previous intervention?
 - What are general parenting techniques? If applicable, has this changed from the previous intervention?
 - Was the family referred to appropriate services to address risk and safety issues described? If so what services and are they engaged in the services?
- Special Considerations for NIA review with case worker:
 - Does documentation support what is documented in NIA?
 - Does it take into account prior history?
 - Does it cover all of the information we need to know?
 - What was the extent of the maltreatment i.e. duration, severity, frequency etc?
- Current Child and Family Needs Considerations:
 - When was the last time the family visited?
 - When was the child last seen in placement?
 - Where is the child placed?
 - Are there any outstanding placement needs?

- Is there any information still needed and what questions need to be asked of CPS?
- Is your case manager prepared to clarify outstanding or unclear issues at the TCFT?

PLANNING FOR THE TRANSITIONAL CFT – Needs to be the same for CPS

- Have you and your case manager planned for the Transitional CFT?
 - Has your case manager contacted the CPS investigator to determine if all parties have been identified and invited to the CFT.
 - Has your case manager contacted his/her CPS colleague to develop the agenda?
 - Has your case manager and his/her CPS colleague developed a plan to involve the family in the planning and facilitation of the meeting.
 - Has your case manager and his/her CPS colleague reviewed and have a complete understanding as to the child vulnerability and parental capacities preventing the child(ren) from being placed back into the home of origin?
 - Have your case manager and his/her CPS colleague discussed any potential for creating a safety plan with the family to place the children back into the home of origin?
 - Can your case manager clearly articulate to the family the next steps after the TCFT i.e. NCFAS, Case Plan R&D etc?

REVIEW OF THE NCFAS

- Did the case manager identify any underlying family functioning issues? If so how are they manifesting themselves in the family and how do they affect the safety of the child?
- What are the results within each domain? What is the information that supports the rating related to each domain? Can your case manager describe how he/she got to the rating with the information presented?
- Can your case manager describe how do areas of concern contribute to safety or risk to the child?
- Can your case manager describe the strengths of the family and how they will impact protective capacity (throughout the life of the case and beyond DFS's involvement).
- How have you encouraged engagement of the parents through worker discussion of the NCFAS with the family?

PLANNING FOR THE FORMAL CASE PLAN DEVELOPMENT

- Can your case manager identify what must be addressed in the case plan as indicated by safety assessment, NIA, and NCFAS i.e. safety threats, child and

adult functioning, maltreatment, and underlying issues?

- Have they identified all critical safety threats identified in all areas of concern?
- Does the case manager believe he/she needs to continue to engage family around issues? What strategies are they implementing?

2. After the first 45 days of a case opening until case closure

ONGOING AND THROUGHOUT THE LIFE OF THE CASE

- Have you scheduled monthly reviews of all cases with your staff?
- Do you have a plan for more frequent supervision with new workers i.e. at least every two weeks for three months?
 - When you review the case plan updates:
 - Can your caseworker discuss what has happened and what has been observed in the case in the last three months that supports changes to the case plan?
 - Is progress clearly reported and behavioral changes articulated if related to the safety of the child?
 - Was NCFAS used in updating specifics of family needs in case plans?
 - Can your case worker articulate other issues that may have been identified that will require case plan changes?
 - How are the children's needs being addressed in the case plan?
 - When you review updates of social summaries
 - Does the summary reflect an accurate picture of the child and family history for the last six months?
 - Has all required and related documentation been obtained? Example: current medical records. Have you developed a plan with your case manager to ensure all related documentation is obtained to support the social summary?
 - When you review court reports/prepare for court presentation
 - Have all parties been notified?
 - Did the case manager report on parent's progress or lack thereof on the case plan?
 - Is the caseworker able to articulate behavioral changes made or not made by the parent in the case plan and the body of the report?
 - Has the permanency goal changed based on the parent's progress?

- Is the case worker's frequency of visits with parents and children and what they observed during those visits described in the report?
 - Is the visitation schedule and the observed interaction between the parents and children during the visitation described in the report?
 - Is the caseworker able to articulate information about the child's progress as to their case plan/youth plan goals?
 - Have the assessments been incorporated into the narrative of the court report to support DFS actions and recommendations?
 - Are reasonable efforts articulated throughout the court report as to DFS effort to achieve the approved primary permanency goal and concurrent permanency goal?
 - How are ASFA guidelines incorporated in the court report?
 - Based on DFS recommendations are there any barriers or conflicts that must be addressed described in the report?
 - Can you and/or your case manager verbally articulate the above in court?
 - Can they accurately present the plan in Court?
- When you monitor case worker visitation
 - Is your case manager current with the requirement to have face-to-face contact with the children as required every 30 days (or more frequent depending on circumstance i.e. trial home visit)?
 - Are we ensuring safety throughout the life of the case?
 - Is the child safe?
 - How do you know?
 - Did the caseworker do a safety assessment, OOH Checklist?
 - When reviewing these documents with your caseworker did you identify any follow up actions to ensure safety and placement stability? (i.e. services).
 - Have all parties in the home been cleared and are known by licensing?
 - Do other children placed in the home pose a risk?
 - Why the other parties are there and what is their involvement with any child placed in the home?

*****Is the information clearly articulated and documented in UNITY, if so where?*****

- Is your case manager current with the requirement to have face-to-face contact with parents as required every 30 days?

- Is your case manager engaging with the parents by reinforcing positive changes, current strengths, assisting with identification of barriers etc?
- Is your case manager reviewing case plan objectives ASFA and the permanency goal with the parents?
- Is your case manager assessing for changes in behavior and overall family functioning?
- Are there any concerns for worker safety when conducting visits with parents?
- Is your case manager current with the requirement to have face-to-face contact with the substitute care provider every 30 day?
 - Do any children in the home pose a risk to other children in the home?
 - Can the caregiver meet all the necessary requirements for all the children in the home i.e. visitation, medical appointments, mental health needs?
 - Is the caregiver experiencing stress in their life i.e. marital issues, finances, transportation issues that could pose a risk to the children placed with them?
 - How is the caregiver dealing with the stress?
 - Is the caseworker monitoring the Caregiver stress regularly?
 - Are workers seeing both caretakers in the home on visits?
 - Was there anything you saw that could lead to a disruption?
 - Is the child placed in the home causing the caregiver stress? If so please describe.
 - Does caretaker support the permanency plan? If no how are you dealing with this?

*****Is the information clearly articulated and documented in UNITY, if so where?*****

- When a new report comes in on a case
- Is the caseworker aware of the new report?
 - Has the caseworker made the supervisor aware of new reports of abuse and neglect on children in care?
 - Has worker made contact with CPS?
 - Is response time urgent enough?
 - Does permanency worker have additional information that might provide insight into event?
 - Is the case worker in agreement with the finding by CPS?

- Does your case manager know what is happening during parent and child visitation?
 - Is the case worker aware of and follows policy regarding visitation frequency and content?
 - What is the interaction between parent and child?
 - Why or why not does your case manager believe the parent has the ability to articulate and demonstrate *safe parenting*?
 - What does your case worker report regarding parent's participation? Have they missed visits and if so why?
 - Does your case manager understand the feedback from others who are monitoring visits?
- When you review the permanency goal with your case manager
 - Has your caseworker had regular conversations with the family regarding their permanency goal?
 - Does the caseworker believe the parents and children when appropriate understand the permanency goals and the time frames associated with the goals?
 - Is the permanency goal approved by the court?
 - Has your caseworker identified any barriers to the parents achieving the goals? Do they need assistance in helping the family develop a plan to overcome those barriers?
 - Does the caseworker believe the parents understand their progress toward their goals?
 - Is the 10-month staffing required?
- When you review the concurrent planning goal and activities
 - Has the caseworker reviewed with the parent the reason why concurrent planning occurs and what it may mean to them?
 - What steps is the case manager taking toward implementing the concurrent plan?
 - Does your case manager know how do you discuss concurrent planning with a child? Have they discussed concurrent planning with the child?
 - Does the caseworker understand the concept of concurrent planning?
- When you plan for reunification with your case manager
 - Can the case manager determine if the family is engaged in the process of reunification?
 - Is the Family aware of case plan goals?
 - Is making progress?

- Is aware of court dates?
 - Is visiting regularly?
 - Is participating in CFT's?
 - Appears at court hearings?
 - Is engaged in services and maintains contact with caseworker?
- Has the case manager developed a plan with the parent or child should safety become an issue?
- Did caseworker plan with the family to close the case?
- Can the case manager articulate how the NCFAS supports reunification?
- Can the case manager make a recommendation around Frequency of contact with family: once a week for the first month, twice a month for the second month, and once a month thereafter that is appropriate based on the family circumstances?
- Is Your Case Manager Addressing Education & Well Being issues of children
 - Does your case manager inquire about community activities? What is the child involved in or what would you like the child to be involved in?
 - Does your case manager assess for potential self-esteem issues?
 - What is the child's understanding of their history?
 - Who do you talk to when you are troubled? (question to the child)
 - Can children identify their own strengths?
 - Has worker talked with the child about their dreams?
 - Does the child have racial, cultural, and/or gender issues?
 - Is your case manager aware of the child's peer relationships?
 - Do they have friends?
 - What activities do they do with friends?
 - Is your case manager aware of educational performance and do they advocate for educational needs?
 - Do they have an IEP or other services in school; if not do they need any services?
 - Have you made contact with the school?
 - Are you aware of their attendance and academic record? How many credits do they have?
 - Have children 15 and over been referred to youth support workers?
 - Do you participate in the IEP?
 - Does the child have any educational surrogate?
 - Is your case manager aware of physical health and mental health issues and

do they advocate for their physical and mental health needs? How are they being addressed if there are physical and mental health needs?

- Are medical, dental, vision screenings and follow up services happening?
- Do you have names and addresses of medical providers? Are you getting reports?
- Do you know what medications including psychotropic that the child is receiving?
- Is the parent involved?
- If on medication are children getting services?
- Are additional services for child being provided?

Is the information clearly articulated and documented in UNITY, if so where?

3. Field Supervision of Case Work Activity.

- For each worker on the team a supervisor will observe one of the following three settings (child in foster home, home visit with parents, CFT) per quarter. In three quarters the supervisor will have observed the worker in each of the following three settings. Feedback will be given to worker and put in their performance file.
- Can your Case Worker Accurately Observe the following during home visits with parents (including trial home visits)?
 - How the family is functioning on a daily basis?
 - If there are any issues that would indicate that family stressors are escalating and effecting parent caregiver capacities?
 - If the parents have made behavioral changes and if so what is different i.e. employed, substance free, mental health issues, domestic violence not occurring etc?
 - How the child(ren) is functioning on a daily basis?
 - Is the caseworker practicing basic engagement skills with the family?
 - Are they conducting the body check per policy?
- Does your caseworker ensure the following when facilitating a Child and Family Team?
 - Are all parties present that need to be?
 - Are safety issues being addressed?
 - Are underlying issues being addressed?
 - Are parents engaged and actively participating in identifying their

needs?

- Are Parents feeling empowered to make changes?
 - Is the permanency goal explained and clearly explained to parents as well as the concurrent goal?
 - Are timelines clearly articulated and explained and the potential consequences for the parents if they fail to make progress?
 - Did they summarize any assessments completed or updated?
 - Is there evidence of the worker preparing for the CFT and staying on task during the CFT?
 - Was the child's progress discussed?
 - How did the worker perform with regard to facilitating skills? Did they keep the CFT to one hour, did they redirect members appropriately, did they summarize findings and next steps, did
 - How did the supervisor ensure they did not take over the CFT?
- When your caseworker visits with a child in out of home care, does your case manager cover?
- Identifying the child's needs and how they are being met i.e. educational, medical, mental health, physical and developmental?
 - The foster parents understanding the child's needs and clearly articulate how they are met?
 - The foster parents bonding or lack thereof to the child?
 - Are there any indications that the child is treated differently than other children that may be in the home?
 - Are the children having phone calls and visits with their parents?
 - Are there any issues around discipline that may need to be addressed by licensing?
 - Does the worker interview the child alone and did the worker demonstrate appropriate interviewing skills?
 - Did the caseworker observe whether the child acts differently when the foster parent is present?
 - Is the child having visits with siblings?
 - Did the worker discuss the permanency goal with the foster parent?
 - Did the worker follow the body check per policy?
 - Did the worker keep the foster parent informed?
 - Did the worker collect the medication logs for the child?
 - Did the caseworker actually see child in their living arrangement and observe for the following?
 - Does the child have a bedroom with a place for his/her own belongings or is their living space sparse?
 - Are there any identified environmental threats or any licensing violations?

- Are safety precautions in place i.e. pool fence?
- Are there picture in the room, toys?
- Have the foster parents identified the child's belongings?
- Does worker know about other children or adults in the home?

*****Is the information clearly articulated and documented in UNITY, if so where?*****

4. Critical Decision Points Requiring Supervisory Approval

FIRST 30 - 45 DAYS

- Discuss and review NCFAS Findings
- Approve case plan which includes Permanency Goal, Concurrent Goal and Visitation (both sibs and family)
- Report and Dispositional to court
- Any placement changes

ON GOING THROUGHOUT THE LIFE OF A CASE

- Safety Assessment
- Placement Change
- Changes in Visitation
- Changes in Permanency Goal
- Reunification
- Case Plan change
- Staffing with District Attorney
- Court Report
- Referring for Termination of Parental Rights
- 10 month Permanency staffing
- Changes in worker contact with
 - child
 - parent
 - service providers
- Case closure
- Out of home safety check list
- 9 month permanency staffing
- Status of concurrent plan
- Social summary check

ADOPTION SUPERVISORY EXPECTATIONS

ADOPTION SUPERVISORY EXPECTATIONS

Consultation Phase

- Identify potential adoption cases
 - Concurrent plan is identified as Adoption at formal case planning CFT approx 45 days from the home removal.
 - Adoption worker consults with permanency worker to assist in the following areas: Adoption Supervisor staffs the case with adoption worker to review and discuss the following:
 - Counseling parent regarding relinquishment. Clinical Issues
 - Addressing mental capacity
 - Do they require legal representation
 - Rational for deciding to relinquish
 - Legal ramifications
 - Participate in case staffing when requested regarding permanency planning
 - Review and provide consultation to any post adoption agreements prior to assisting with relinquishment or TPR
 - Verify who is the legal or putative parent(s) and identify what is necessary to legally free child (ren).
 - Review and verify ICWA status.
 - Review potential relinquishments for appropriateness and completeness.
 - Prepare relinquishment or TPR documents to ensure accuracy
 - Assist in reviewing social summary to ensure accurate information is included and identify missing information on family history especially social and medical.
 - Track ASFA timelines on cases they are consulting on and ensure permanency worker is aware of timelines
 - Staff potential adoptive resource to determine if they are appropriate for adoption and why.
 - Review information in MAPP home study to determine if home is appropriate for adoption.
 - Review any previous adoption history
 - Is the placement in the child's best interest for the long term?
 - Assess the motivation of the potential adoptive resource.

- Review information in NCFAS to assist in identifying an appropriate match and needs of the child
- Discuss history of child and adoptive resource with permanency staff
- Identify any barriers
 - If unlicensed are there barriers to adoption that cannot be resolved?
 - Is there a need to begin identification of an adoption resource as an alternative to the current placement?
 - Selection of adoptive resource through CFT if identified
 - Next court date

PERMANENCY GOAL – ADOPTION

Assign to Adoption worker as Secondary when the Permanency Goal is changed to Adoption by the court at the first permanency review, approximately 12 months from home removal.

- Referral goes to the Adoption Supervisor
 - Within 48 hours of the court decision the permanency supervisor will notify the adoption supervisor of the court decision
 - The adoption supervisor reviews the case in UNITY to determine current status of legal status and permanency planning toward adoption
 - The adoption supervisor assigns the case to the adoption worker as secondary in UNITY within 2 business days from notification by the permanency supervisor
 - At the time of assignment, the adoption supervisor will review the case with the adoption worker.
 - Within 1 week of assignment the permanency worker, permanency supervisor, adoption worker, and adoption supervisor will have a case staffing to develop a plan on how permanency and adoption will team to complete adoption related tasks
 - Review and provide feedback on Permanency Plan of Adoption Report including a review of the following specific tasks to be completed by adoption worker and provide Permanency Plan of Adoption Report to permanency staff.
 - Review case with supervisor to determine status and the steps needed to complete an adoption

- Attend case staffing with permanency worker, permanency supervisor, and adoption supervisor to develop a plan for how permanency and adoption will team to complete adoption related tasks. The permanency worker will add these tasks to the case plan.
 - Verify current legal status within 7 business days of assignment
 - Update Social summary within 5 business days of assignment to ensure it is current, complete and comprehensive. Also to ascertain when the update will be due. If anything is currently missing, inform the permanency worker. Once both permanency and adoption agree the current social summary is complete the adoption worker assumes responsibility for updates
 - Complete Permanency Plan of Adoption Report 3 weeks prior to all court hearings addressing permanency plan progress
 - Review of Unity case notes
 - Verify ICWA Status
 - Review of Social Summaries update
 - Review with Perm Supervisor as to status of case as needed(phone/IP)
- Development of Adoption related tasks to be added to the case plan within 1 week of assignment to the adoption worker.
- Adoption supervisor support and actions at this stage are as follows:
 - Supervisors will participate in planning meeting.
 - Assist with prioritizing and/or planning for any of the developed tasks
 - Review and approve social summary updates
 - Review and discuss Child Readiness for Adoption Assessment and ensure it is shared with all
 - Review and approve and/or discuss recruitment packet if applicable
 - Adoption worker tasks and actions to be reviewed by adoption supervisor follows:
 - If applicable, review and provide consultation for post adoption agreements

- Develop tasks for next steps to relinquishment and/or TPR if child is not legally free
 - Develop any tasks required for the social summary and who will complete those tasks
 - Develop a task for who will obtain or create a life book for the child
 - Within 14 days of assignment the permanency worker and adoption worker will meet with the current related or unrelated caregiver regarding their interest in adoption.
 - Develop any task related to searching for any potential adoptive resources such as family, fictive kin, past foster parents etc.
 - Schedule a Adoption Resource CFT within 4 weeks from assignment to confirm or identify an adoptive resource
 - Determine how Child Readiness Assessment will be conducted. Ensure Child Readiness Assessment is completed within 7 days after the Adoption Resource CFT
 - Determine if recruitment efforts should begin and determine who will complete recruitment packet.
- Consult with Assistant Manager on legal issues that require DA consult
 - On ICWA cases review and approve that all requirements were met
 - Review and complete cover sheet
 - Attend scheduled court hearing
 - Child Preparation for Adoption. Must be developed within 7 days after the Adoption Resource CFT
 - Adoption worker tasks and actions to be reviewed by adoption supervisor are as follows:
 - Develop Child Preparation Plan with CFT to work with the child in completing the 3 stages of adoption readiness and arrange services as needed

- Present information to the child with the permanency worker regarding the potential adoptive resource once identified
 - Develop a Transition Plan at a Change of Placement CFT for the child to be placed with adoptive resource if the child is not already placed
 - Assist the child in understanding the Transition Plan and supporting them through the placement process in partnership with the permanency worker
 - Review and update the child's life book
- Adoption Supervisor Support and Actions at this stage are as follow:
 - Review and approve Child Preparation Plan and ensure it is shared with all team members
 - Review and approve Transition Plan and ensure it is shared with all team members
 - Ensure all plans are developed with CFT
 - Ensure life book is reviewed and updated
 - Ensure Permanency worker and supervisor have been included at each step of the process
- Selection of the Adoption Resource. Selection of an adoptive resource begins from the moment a child is removed from the home, however, the adoption worker will begin to develop a plan to select an adoptive resource within 1 week of assignment through the development of the Adoption plan developed with the permanency worker
 - Adoption worker tasks and actions to be reviewed by supervisor
 - Hold Adoption Resource CFT to evaluate any potential resources
 - Determine if recruitment is necessary and complete recruitment referral packet as determined by teaming
 - If applicable, permanency worker will get recruitment order from the court

- Mine the case file, meet with the child and talk with permanency worker to identify all potential adoptive resources
 - Assess the caregiver and their ability and willingness to make a permanency commitment to the child/ren
 - Educate the family regarding the subsidy process, any post adoption agreements or sibling visitation orders, if applicable
 - Attend HART to present on the assessment of the adoption resource and the child's strengths and needs
 - Facilitate the child presentation meeting with the permanency worker that is to take place no later than 10 business days from the selection of the adoption resource
 - Allow the family time to make a decision about their commitment to the child. Families will be given 30 days from the date of selection
 - Develop a Family Preparation Plan with the CFT
 - Review adoption case history
 - Review any licensing investigations
 - Review any previous licensing and/or adoption studies and provider notes
 - Review criminal background information and CANS history and any related action
 - Review MAPP home study, if completed with permanency worker
- Adoption Supervisor Support and Actions at this stage are as follow:
 - Discuss assessment and MAPP Home study of potential adoptive resource with adoption worker
 - If necessary meet with permanency supervisor and worker and adoption worker to discuss any concerns
 - Attend HART if necessary
 - Track required time frames during one to one staffing
 - Review and approve family preparation plan and ensure the plan is shared with all team members

- Preparation of the Adoption Resource. Preparation with the family towards placement must begin within 7 days of the family's agreement to adopt
 - Adoption worker tasks and actions to be reviewed by supervisor
 - Assist the family in completing a family photo book to present to the child
 - Host Change in Placement CFT to develop Family Preparation Plan and/or Transition Plan within 7 days of the families decision to adopt
 - Adoptive Parent must sign the Adoptive Parent Agreement Form at this Change in Placement CFT
 - Assist the adoptive parents in identifying any services or additional training
 - Educate the family regarding subsidy
 - Implement, Assess and Review the Family Preparation Plans and Transition Plan and adjust as necessary during CFT meetings
 - If necessary, partner with licensing to assist the family in becoming licensed and approved for adoption
 - If necessary, explain how foster care or relative care is different from adoption.
 - Explain roles and responsibilities of an adoptive parent
 - Review and update life book
 - Adoption Supervisor Support and Actions at this stage are as follow:
 - Review and approve any Family Preparation Plans or Transition Plans and ensure that team members have received these plans
 - Assist staff in identifying resources for families
 - Review timeframes and updates to the plans during one to one staffing
 - Provide guidance to staff re: subsidy issues and questions
 - If necessary meet with permanency supervisor and worker and adoption worker to discuss any concerns
- Adoption Placement Begins Upon the date the child is placed in the Adoptive Resources Home
 - Adoption worker tasks and actions to be reviewed by supervisor

- Ensure family has received all placement documents upon placement
- Make weekly home visits for the 1st thirty days
- Make monthly home visits after the first 30 days until the adoption is finalized
- Assess the family and child's adjustment, attachment, and bonding during placement and share this information with Permanency staff
- Educate the family regarding the adoption subsidy
- Provide the subsidy application to the adoptive resource
- Within 14 days of receiving the complete adoption subsidy request, meet with the family to complete the subsidy negotiation
- Prepare subsidy packet for review by subsidy specialist
- Review subsidy agreements with adoptive parents and obtain signatures
- Advise the family to retain an attorney to complete the legal paperwork for the adoption finalization
- Assist family in completing the Report of Adoption
- Provide the attorney with any Post Adoption Contracts or sibling visitation orders
- Inform permanency staff of the hearing state for the finalization
- Write the Confidential Report and file it with the court
- Attend Adoption Finalization Hearing
- Ensure that permanency staff is aware of adoption finalizing so they can terminate Wardship
- Obtain certified revised birth certificate and provide to the family and place a copy in the adoption file
- Update the family preparation plan during CFT as needed
- Review and update child's life book
- Obtain consent to adopt for subsidy specialist
- If subsidy is not approved staff with the adoption supervisor and subsidy specialist
- Create closed adoption summary
- Complete all required unity windows
- Obtain birth file from permanency worker and secure or rebind files
- Complete case closure sheet
- Provide file to supervisor

- Adoption Supervisor Support and Actions at this stage are as follow:
 - Track all timeframe requirements during one to one staffing
 - Review subsidy application with adoption social worker and discuss negotiation strategies
 - Review and approve Confidential Report
 - Ensure life book is updated and complete
 - Complete all required unity windows
 - Review entire case file to ensure all documentation is complete
 - End date adoption staff assignment and program in birth case at adoption finalization
 - Sign subsidy agreement if adoptive parent is an employee and request signature from Director
 - Provide guidance to worker when subsidy is denied
 - Submit file to business center
 - If necessary meet with permanency supervisor and worker and adoption worker to discuss any concerns

ICPC SUPERVISORY EXPECTATIONS

ICPC SUPERVISOR EXPECTATIONS

FORMAL SUPERVISION – MONTHLY 1:1 MUST REVIEW ALL CASES

- **HOME STUDY PROCESS – Discuss with Worker**
 - ✓ Ensure good match between child and resource through a quality home study
 - Waiver approval process
 - Ensure that the home requested can meet the child's needs and safety
 - ✓ Ensure safety through life of a case using out of home care safety check list
 - Complete on a monthly basis at monthly home visit
 - ✓ Intrastate home study
 - Complete home study and if approved transfer to permanency unit
 - If home requires licensure send licensing packet
 - ✓ Home studies done timely
 - 2-3 days after the case is assigned a certified letter is mailed to the resource , a follow-up phone call is also made
 - 10-12 days after application is mailed a final notice is sent, if there is no response from the resource final notice allows 7 days for a response before recommendation to close is made
 - 60 days for regular request
 - Regulation 7 – 30 days
 - If home requires licensure send packet to licensing
 - A copy of the license is made for the ICPC file and a copy is sent to Carson City
 - ✓ Parent home studies
 - Must complete majority of case plan before child can be returned
- **CASE RELATED INFORMATION – Discuss with Worker**
 - ✓ Drive cases toward permanency
 - What is the long term plan for child
 - What is the goal now
 - Discuss pros and cons regarding permanency options
 - What are the issues that might cause a disruption
 - Ensure family has all of the information prior to accepting child

- Adoption issues including home study and preparation of child and family
- Guardianship – explain how to get guardianship in Nevada
- Ensure family is aware of their obligation under ICPC
- ✓ Quarterly reports
 - Medical
 - children seen once a year for a physical and every six months for dental
 - Any surgery must be approved by sending state
 - Signature for mental health issues from sending state (inpatient admissions)
 - Schools
 - Attend IEP
 - Mental health issues
 - Workers attend counseling sessions as needed
 - Problems in home
 - What is going on with family
 - Are they still working
 - What services do they need
 - Goals – make recommendations
 - Support family as need
 - transporting to medical, dental, counseling
 - Attend court hearings if necessary
 - What is recommendation
- ✓ Children must be seen at least monthly
 - At least two times in the home
 - And one time at school
- ✓ Must make monthly contact with Caretaker either in person or by phone
- ✓ See child's living arrangement – implement policy
 - Know what to look for in the home
 - Visit with birth parents if child is placed in their home
 - Observe who is in the home on visits
 - What does "safety" look like in the home
- ✓ Caregiver Issues
 - Other children in the home
 - Caregiver stress
- ✓ Supervisor should know of new reports on kids in care

- ✓ Parent child visitation
 - ✓ Permanency Goals – this is determined by sending state with input from ICPC worker
 - ✓ Concurrent Planning- this is determined by the sending state
 - ✓ Education and Well Being issues
 - Community activities
 - Self esteem
 - Peer relationships
 - Educational performance
 - Health and Mental Health issues
 - Are services for child being provided
 - ✓ Conference call on cases for problems and issues to be resolved
 - ✓ Maintain contact and collaborative relationship with Nevada ICPC Administrator
 - Ensure staff coordinate communication with supervisor
 - Via e-mail
 - Quarterly phone conference with Carson City staff
 - ✓ Critical Decision Points Requiring Supervisory Approval – On going throughout the Life of a Case
 - Safety Assessments
 - Placement Change
 - Changes in Visitation
 - Changes in Permanency Goal
 - Reunification
 - Case Plan Change
 - Changes in worker contact with
 - Child
 - Parent
 - Service Provider
 - Case Closure
- **QUALITY DOCUMENTATION – Child Welfare Performance – Discuss with worker**
- ✓ New workers should have more frequent supervision. At least every two weeks for three months
 - ✓ Document in unity
 - immediately if necessary
 - same as permanency – within 5 days

- ✓ Return phone calls within twenty four hours
- ✓ Supervisor observes caseworker activity in the field – per worker/per quarter
 - one visit per worker per quarter
 - CFT (if necessary – includes the sending state)
- ✓ Documentation on what worker actually observed and analyze observations
- ✓ Worker must know cases and supervisor must reinforce



QUARTER 7

PIP 4.1.2

Washoe

Washoe County Department of Social Services
Performance Improvement Plan
Action Item 4.1.2

WCDSS management staff utilizes several management reports to measure performance and guide outcomes. Reports used are generated through the State of Nevada Information Management division while others were created by WCDSS UNITY staff to help focus certain performance concerns or areas we believed needed focus and attention.

A brief description of the reports generated by WCDSS is provided:

Report Name	Description
Children in full Custody and Placement Location	Selects all children with Washoe Custody or Washoe Voluntary legal status with an end date greater than the 1 st day of the next month. Selects all placements of last day of month for children included in report. Includes assigned primary worker. Used to review children in legal custody and where they are placed.
Age of Children in Custody	Selects all Children in Washoe Custody or Washoe Voluntary with a legal end date greater than or equal to the last date of the month. Includes age, calculated on report date. Provides a snapshot of the age of children in care.
Children in Higher Levels of Care	Selects all children in Washoe Custody (Protective, Custody, Voluntary) with custody end date greater than or equal to the last date of current month. Selects treatment or high level placements on last date of current month. Used to track and monitor children in higher level of care (not regular foster care or relative care) placements.
Average Number of Days in Care	Selects all children in Washoe Custody or Washoe Voluntary with custody begin date between dates defined (1 calendar year at a time). Selects legal end date and reason when legal status has an end date prior to current date.
Children in Washoe County Custody, Age 14 or Older	Lists any child in Washoe County custody as of requested date, aged 14 or older. Includes permanency goals, current placement, and current staff assignments. Used to track Independent Living eligible (or soon to be eligible) youth to ensure appropriate case planning activities.
Over 45 Day Open Investigation Report	Identifies any investigation open over 45 days and out of compliance with State policy. Report tracks status of the investigation and including if the investigation is complete

	by the assigned worker and waiting approval by the supervisor.
TCM Contact Report	Created for eligibility staff, this report is used by management to track eligible contact by caseworker and to manage case contact.

In addition to the WCDSS reports reviewed monthly during management meetings, WCDSS leadership uses many State reports including the Open Investigations Report (CFS 713). This report is critical to tracking status of investigations including date assigned, concluded, how many days open, investigation closure reason, allegation, safety, risk, NIA (Nevada Initial Assessment), and investigation closure justification status. The monthly AFCARS report (CFS 712) is utilized to track compliance with adoption indicators, placement identification, permanency goals, and court hearing documentation. The Reports Received report tracks the response type for an investigation and is used to measure supervisor unit compliance with ensuring the initial response type meets department objectives.

There are reports reviewed by some members of management but not others. Such reports are for specific program areas, for example a monthly report is generated to identify all school-aged youth in out-of-home placements to coordinate with the Washoe County School District identification of foster youth to ensure appropriate services are received including free and reduced lunch, priority transportation scheduling, and counselor notification.

WCDSS management staff was recently re-trained on Chapin Hall data information system to promote more sophisticated analysis of local child welfare outcomes in comparison to State and National indicators.

STAFFING WITH _____:

PLAN: (what plan is currently in place and info re: possible plan change at next hearing)

PLACEMENT: (where are they placed, how are they doing in placement and what placement planning is being done if applicable to include efforts to place with relatives)

PARENT/SIBLING VISITATION: (what is the visitation with each parent and siblings if separated; how are visits going; are there things impacting visitation such as substance use/untreated mental health issues; what needs to happen to expand visits; is there a current visitation plan part C)

PRESERVING FOSTERING CONNECTIONS: (relatives ruled in/out – if ruled out has letter been sent by supervisor to that relative; are FC letters sent to known relatives with responses received; if ruled out in the past have we looked at the relatives again on kids in care for more than 12 months if no other permanent placement to see if circumstances have changed; if APPLA what is being done to find supports for the children outside of their team)

EDUCATION: (if applicable, what school do they attend; grade; IEP; educational needs; tutoring – if school change made indicate reasons for that decision and staffing date with Coordinator)

MEDICAL/DENTAL: (list children's doctors/dentists/specialists/optometrist/NEIS; what special needs do children have; are parents attending appts with children; if home are parents meeting these needs; if needs not being met by Agency or parents, explain what is being done to get those needs met)

BASIC NEEDS: (parent's ability to meet child's needs i.e. housing; employment/income)

MENTAL HEALTH: (if applicable for either parent or child; what is the diagnosis/services being referred; compliance with treatment; medication for children including parent's informed consent and has initial and updated psychotropic medication form been completed and sent to 6th floor – is worker attending appts with child, if not why; who is the person deemed responsible by court)

SUBSTANCE ABUSE: (if applicable for either parent or child; testing; services referred; compliance with treatment; how is substance use impacting reunification or visitation)

DOMESTIC VIOLENCE: (if applicable, services referred and compliance)

IL SKILLS/CPSA: (*only applicable if 15 or over*) what is being done to ensure 15 or older children receive the IL services including but not limited to: Ansel Casey/IL case plan/discussion with IL specialist/IL services offered and IL screens done in UNITY)

IMPENDING DANGER THREATS: list impending danger threats from NIA

BARRIERS TO REUNIFICATION: (why is child not reunified; what needs to be done for reunification – IF PLAN IS NOT REUNIFICATION THIS HEADING SHOULD BE PERMANENCY PLANNING)

CASE PLAN PROGRESS TO DIMINISH IMPENDING DANGER THREATS/INCREASE PARENTAL PROTECTIVE CAPACITIES: (what behaviors have parent changed to improve protective capacities including case plan progress or lack thereof)

TEAM MEMBERS: (CASA, child's atty, WIN worker, etc)

NEEDS: (guidance by supervisor of workers responsibilities until next staffing – to do list)



QUARTER 7

PIP 4.1.2

Rural

DCFS PIP Item 4.1.2 Develop and Format supervisory and management tools, guidance and expectation regarding data reports to monitor and improve performance on permanency outcomes.

DCFS has developed the following supervisory and QA tools and identified who those will be used by and the frequency of their use.

DATA MANAGEMENT TOOLS

Tool	Completed By	Frequency
NIA Sufficiency QA Tool	Supervisors	Use prior to approving each NIA
Supervisory Safety Management Tool	Supervisors	As Needed
Supervisor Checklist for NIA Closure of Case Transfer	Supervisors	Use prior to NIA closure or transfer
Permanency Review Checklist	Supervisors	Every four months
Initial Assessment and Policy Implementation Tool	QA-Training Unit	Use for QA reviews as directed

NIA SUFFICIENCY/QA TOOL

A. Name of Reviewer:
B. Date of Review:
C. Case number & name:

SECTION I: SAFETY-RELATED INFORMATION COLLECTION INTERVIEWING PROTOCOL			
	YES	NO	NA
D. Alleged child victim(s) interviewed/observed			
E. Other children in the home interviewed/observed <i>(includes siblings, step-siblings, non-related children in the home)</i>			
F. Non-maltreating caregiver interviewed <i>(includes bio-parent, paramour, grandmother acting as parent, and so forth)</i>			
G. Maltreating caregiver(s) interviewed <i>(includes bio-parent, paramour, grandmother acting as parent, and so forth)</i>			
H. Other household members interviewed <i>(includes boyfriend, relatives in home, roommates, boarders, and so forth)</i>			
I. Relatives (not in household) interviewed <i>(includes grandparents, adult siblings, adult children, and so forth when relevant)</i>			
J. Collaterals interviewed <i>(includes doctors, school, neighbors, and so forth when relevant)</i>			
Comments regarding protocol:			

SECTION II: SIX QUESTIONS		
	YES	NO
1. Sufficient information regarding extent of maltreatment? (What is the extent of the maltreatment?) <i>Sufficient refers to identification of type(s) of maltreatment, details about symptoms details about severity, identification of maltreater.</i>		
Comments:		
2. Sufficient information regarding nature of maltreatment? (What surrounding circumstances accompany the maltreatment?) <i>Sufficient refers to circumstances and events associated with maltreatment; includes duration, progress or pattern, response of non-maltreating caregiver, explanation for maltreatment, attitudes of caregivers respective of maltreatment. Even when no maltreatment exists, caregiver explanation should be included.</i>		

	YES	NO
Comments:		
3. Sufficient information regarding child functioning? (How does the child function on a daily basis? Include pervasive behaviors, feelings, intellect, physical capacity, and temperament.) <i>Sufficient refers to physical, emotional, and social development; predominant behavior; peer and school behavior; mood and temperament; speech and communication; vulnerability; general behavior; daily routines and habits; ability to self-protect. Child functioning refers to information regarding all children in the home.</i>		
Comments:		
4. Sufficient information re: general parenting? <i>Any CPC marked "no" need to be articulated in narrative section of the NIA.</i>		
Comments:		
5. Sufficient information re: disciplinary practices? (What are the overall, typical, pervasive parenting practices used by the parent? What are the disciplinary approaches used by the parent, including the typical context?) <i>Sufficient refers to parenting style and approach, knowledge of child development and parenting, parenting skill, parenting satisfaction, sensitivity to child's limits, realistic expectations. Sufficient refers to intent, attitudes, and expectations about discipline; purposes for discipline; creativity and versatility; age appropriateness; varied methods.</i>		
Comments:		
6. Sufficient information regarding adult functioning? (How does the adult function in respect to daily life management and general adaptation?) <i>Sufficient refers to general behavior, daily routine and habits, communication, emotional control and presentation, social relationships, problem solving, stress management, mental health, substance use. Any CPC marked "no" need to be articulated in narrative section of the NIA.</i>		

	YES	NO
Comments:		
7. Sufficient information to determine impending danger?		
Comments:		
8. Sufficient information to determine case decision? (i.e. open for ongoing services/closed to DCFS)		
Comments:		

SECTION III: JUDGING LEVEL OF EFFORT		
	YES	NO
A. Evidence of reasonable worker diligence and effort to collect information in all areas? <i>Reasonable diligence and effort refers to behavior that demonstrates thoroughness, conscientiousness, specific care to seeking detail, repetitive attempts and exertion to get information, and to include relevant people in the information gathering process. Think of it as going the extra step, clarifying up confusion, filling in the gaps, reconciling differences, qualifying facts and data. Reasonable is a subjective standard but can be qualified by what seems sensible and logical, the level headed thing to do; influenced by what is known, what is not known, what is important to know, what good practice and decision making depends on.</i>		
Comments:		
B. Reviewer judgment: the information collected is adequate and reflects good quality? <i>Quality and adequacy refer to enough depth and breadth in all information collection (a) to provide a reasonable understanding of family members and their functioning and (b) to support and justify decision making. Information is specific, behaviorally stated, precise, relevant, and comprehensive.</i>		

	YES	NO
Comments:		
C. Family members interviewed face to face, separately and privately?		
Comments:		

Division of Child and Family Services
Supervisory Safety Management Tool
How do I judge if a Safety Plan is sufficient?

This paper provides Consultative Supervisors and ongoing CPS staff a way to evaluate the sufficiency of safety plans. Addressing the question of sufficiency of safety plans is something that should occur when a case is transferred to ongoing CPS, routinely as a part of ongoing safety management, at any time changes occur within a family where safety issues may be raised, during official case evaluations, and reunification.

Four main evaluation questions can be posed to judge the sufficiency of safety plans. Those questions are identified here and are elaborated upon by a number of sub-questions.

First Evaluation Question:

How did safety threats occur in the family?

Sub Questions:

1. How long have conditions in the family posed a safety threat?
 2. How frequent or often has the family condition posed a safety threat?
 3. How predictable is the safety threat? Were there occasions when the safety threat was more likely to be an active influence?
 4. Were there specific times during the day, evening, night, etc. that required "special attention" due to the way in which the safety threat was occurring?
 5. Have safety threats prevented a caregiver from adequately functioning in primary roles (i.e., individual life management and parenting)?
- ☐ In order to evaluate whether a safety plan is sufficient, it is very helpful to have some knowledge and understanding about how family conditions or threats that resulted in the safety plan were occurring.
- ☐ If indications are that safety threats were constantly and totally overwhelming a caregiver and that continues to be true, then an out-of-home safety plan would be justified.

Second Evaluation Question:

Can the family adequately manage and control for the child's safety without direct assistance from CPS?

Sub Questions

1. Since the safety plan was established, is there now a non-maltreating caregiver in the home that has sufficient protective capacities (strengths) and demonstrates a willingness to protect?
 - ☐ Has demonstrated ability to protect in the past?
 - ☐ Has a specific plan for protection?
 - ☐ Physically and emotionally able to intervene and protect?
 - ☐ Clearly understands specific threats to safety?
 - ☐ Properly attached?
 - ☐ Empathetic and believes the child?
 - ☐ Cooperating and properly aligned with CPS?
 2. Since the safety plan was established, will the maltreating/threatening caregiver leave the home and remain absent from the home while ongoing CPS continues?
 - ☐ Who initiated this option?
 - ☐ How reasonable and practical is this option?
 - ☐ Where will the maltreating caregiver reside?
 - ☐ How manipulative and/or impulsive is the person?
 - ☐ Are legal safeguards necessary?
 - ☐ How can the plan be formalized with sufficient oversight?
- ☐ If it is determined that the maltreating caregiver will leave the home, it is necessary to consider the capacity and willingness of the non-maltreating caregiver to keep the maltreating caregiver out of the home. Has the non maltreating caregiver achieved sufficient progress regarding enhanced protective capacities?
- ☐ If it is determined that the non-maltreating caregiver can and will protect the child without the need of CPS safety intervention, then a safety plan is not needed at this point.
- ☐ If it is determined that the non-maltreating caregiver cannot or will not protect the child, then consider continuing or modifying the current safety plan. Continue the evaluation.

Third Evaluation Question:

If the established safety plan is primarily an out-of-home safety plan, can consideration be given to increasing in-home options or modifying to an in-home safety plan? If not, proceed to the 4th Evaluation Question.

Sub Questions

1. Are caregivers residing in the home?
2. Is the home environment calm and consistent enough at a minimal level in order to assure that a sufficient CPS managed safety response can be provided in the home?
3. Are the caregiver(s) willing to accept and cooperate with an in-home safety plan response?
4. Can an in-home safety intervention be put into place without the results of any scheduled professional evaluations (mental health, substances)?
5. Have conditions for return been adequately met?

- ☐ If the answer to any of the questions listed above is NO: Continue with an out-of-home safety plan.
- ☐ If the answer to all of the questions above is YES: Proceed to the next safety evaluation question.

Fourth Evaluation Question:

If the established safety plan is primarily an in-home safety plan or if an in-home safety plan is being considered, what safety responses; services; actions; and providers are necessary to control and manage safety threats?

Sub Questions

1. Considering how safety threats were and are occurring, what specific safety responses/ services are necessary (an effective match) for controlling threats?
2. How are the selected in-home safety actions intended to control the identified safety threats? How are safety responses/ services going to work? Have they been working?
3. What's the level of effort needed now from safety service providers to adequately control and manage safety threats?
 - a. How much of a response seems reasonable in order to assure child safety?
 - b. How often during the week will the family require assistance and supervision in order to assure child safety?
 - c. How long and in what intervals seem necessary?
 - d. Are there special periods of time that require specific attention?
4. Who can and will assure effective implementation of the in-home safety plan?
 - a. What natural supports and/or community resources has the family identified as being able to potentially assist in the safety response?
 - b. What community/service oriented resources are known to the agency that could potentially be used as an in-home safety response?
5. Are current providers suitable to participate in the in-home safety plan?
 - a. Protective Capacities
 - b. Trustworthy
 - c. Committed
 - d. Properly aligned with CPS
 - e. Supportive and Encouraging
 - f. Flexible access
 - g. Promptly available
6. Have necessary safety planning resources been, and continue to be, available and accessible to the family at the level of effort, frequency and amount required to assure child protection? If not, consider an out-of-home safety plan if one does not exist or modify the current in-home safety plan to emphasize out-of-home protection.

SUPERVISOR CHECKLIST FOR NIA CASE CLOSURE OR TRANSFER

Case Name: _____
Intake Date: _____
Investigator's Name: _____

Report Number: _____
Supervisor's Name: _____

- Supervisory case notes in UNITY ☐ Yes ☐ No
- Conducted UNITY/Legacy search of previous history (Part 2, Nature) ☐ Yes ☐ No
- Conducted criminal history check of adults in the home if warranted ☐ Yes ☐ No
- Completed Present Danger Assessment within 24 hours of contact with the victim(s) ☐ Yes ☐ No
- Completed Present Danger Plan, if needed ☐ Yes ☐ No
- Completed NIA Sufficiency QA Tool ☐ Yes ☐ No
- NIA completed within 30 days ☒ Yes ☐ No
- If impending dangers identified in NIA, adequate safety plan in place completed prior to transfer/move to ongoing services ☐ Yes ☐ No
- If Placement:
- Removal windows & placement type entered ☐ Yes ☐ No
 - Service Authorization ☐ Yes ☐ No
 - Paperwork sent to Eligibility ☐ Yes ☐ No
 - Child windows completed ☐ Yes ☐ No
 - Legal status window completed ☐ Yes ☐ No
- Completed demographic screens in UNITY:
- All household members added as case participants ☐ Yes ☐ No
 - Detail screen & demographic information updated ☐ Yes ☐ No
- Rationale supports the final disposition and addresses the items listed in the referral narrative ☐ Yes ☐ No

Findings: _____

Supervisor's signature: _____ Date: _____

CASE STAFFING PERMANENCY REVIEW CHECKLIST

Case Name: _____
 Case Number: _____
 Placement Type: _____
 Concurrent Goal*: _____

Child(ren) Name(s): _____
 Date of Removal: _____
 Case Plan Goal*: _____
 Date of Initial Review: _____

*please specify if goal is different for a child in a sibling group

Case Record:

	Yes	No	N/A	Date	Next Steps	Date	Next Steps
• All known information regarding the educational (IEP, report cards/attendance records), medical, dental and psychological conditions/needs of the child(ren)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Psychotropic medication consents (Person Legally Responsible Order)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• UNITY updated with current placement, court hearings and case plan goal(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• ICWA certified & registered when petition for custody	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Evidence of Confirming Safe Environments (CSE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Quality monthly case worker documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• When petition for custody – all known relatives notified in writing within first 30 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Concurrent Planning:

	Yes	No	N/A	Date	Next Steps	Date	Next Steps
• Concurrent Planning Guide completed (See attachment to 0204: Case Planning) :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Concurrent Planning Indicated in this case?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
If yes, continue below:							
• Full disclosure of parents' rights and responsibilities, the problems that have been identified that led to their child's placement in foster care, the changes needed/the expectations of the agency and the court, alternative permanency plans, and possible consequences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Youth (as age appropriate) engaged in discussion of permanency; including alternatives to reunification and identification of important connections:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• CFT engaged in discussion of permanency; including identification of relatives/potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

resources:							
• Diligent search for absent or uninvolved parent and relatives/potential resources documented:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Case mining (review files to identify overlooked family members and other significant adults):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Efforts to contact absent or uninvolved parent (Must be done ASAP):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Relatives located who agree to be a resource for the child(ren):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• ICPC packet completed and submitted:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Foster parents or relative caretakers willing and able to adopt if reunification is ruled out:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Reunification:

	Yes	No	N/A	Date	Next Steps	Date	Next Steps
• At least monthly contacts w/ removal caretakers:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Ongoing efforts to contact absent or uninvolved parent:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• At least monthly case worker visits face to face contact w/child (note type and frequency below; 7 out of 12 visits a year need to be in placement):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• At least monthly contact w/placement provider:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Case Plan progress documented:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Efforts to include parent in child's appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Sibling visitation if children are not placed together (note type and frequency below):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Parental visitation with case worker (note type and frequency below):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

• Trial home visit (note beginning date):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Supervision reports after return home (note date(s) and any issues below):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Visitations between parent and child arranged: (note frequency and whether supervised / unsupervised)							
• Barriers to Permanency:							

Relative/Fictive Kinship Placement:

(if applicable)

Yes No N/A

Date

Next Steps

Date

Next Steps

• Is fictive kin agreeable to become foster care licensed? If child placed with fictive kin they must be licensed within 90 days of placement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• FC Licensure wanted/needed: If yes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Fingerprints submitted:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Criminal History background:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Legacy (CA/NS) check:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Training hours completed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Licensing study approved:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Home inspection completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Is relative or Fictive Kin willing to be a permanent placement option if needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Guardianship:

(if applicable)

Yes No N/A

Date

Next Steps

Date

Next Steps

• Rule out reunification and adoption goals:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Relative guardian identified:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• The proposed guardian has consented to serve as guardian and will accept the rights and responsibilities of guardianship:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• 6 months in home:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Guardianship petition filed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Hearing scheduled:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Guardianship petition granted:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Adoption:

(if applicable)

Yes

No

N/A

Date

Next Steps

Date

Next Steps

• Relinquishment(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
➤ Mother:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

➤ Father:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• TPR packet to Legal (DAG) w/in within 30 calendar days from the date adoption is approved as the permanency goal by the court, or the agency determines filing for TPR is in the child's best interest:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• TPR petition filed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• TPR hearing set:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• TPR granted:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Reason for not seeking TPR documented in UNITY/case file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Referred to Adoption Recruiter within 30 days of child becoming legally free or by Order of the Court:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Child in pre-adoptive placement:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Child listed on the appropriate recruitment site(s) w/in 30 days of being legally free, or upon order of the court (if not in a pre-adoptive home):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Case presented to HART:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• HART approval to separate siblings if applicable:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Family selected:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Transition plan implemented:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Adoptive placement (note date):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Case worker face to face weekly visits for first month in placement & then monthly w/child and adoptive parents until finalization of adoption:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Completed Eligibility (IV-E) form and sent to Eligibility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Subsidy negotiation in progress (date):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Signed subsidy agreement between the agency and adoptive parents prior to entry of final decree:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Adoption Petition filed (date):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Adoption Petition granted (date):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

APPLA/OPPLA: (if applicable)	Yes	No	N/A	Date	Next Steps	Date	Next Steps
• Referral for IL services w/in 45 days of 15 birthday (or 45 days from adjudication if 15 or over at removal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Casey Life Skills Assessment completed w/in 45 days of referral for IL services:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Independent living plan completed within 30 days of completion of Casey Life Skills Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

• Caregiver committed to provide care for child until age 18:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Permanency discussion with youth (including identifying important people in the youth's life):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Case mining for placement options and/or positive adult relationships:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Re-visit options for adoption or guardianship:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Identify caring/supportive adult with whom the youth has a connection:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Transition Plan for youth within 90 days of exiting FC:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Court Jurisdiction (use list of steps for court jurisdiction):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Next Steps:

Date	Next Steps	Date	Next Steps

Worker Signature: _____

Supervisor Signature: _____

INITIAL ASSESSMENT AND POLICY IMPLEMENTATION TOOL
Child Protective Services & CAPTA

SECTION 1. CASE INFORMATION	
1.1 Date of Review:	1.6 UNITY Case Number / Name:
1.2 Case Reviewer:	1.7 Type of Case: In Home <input type="checkbox"/> Out of Home <input type="checkbox"/> DR <input type="checkbox"/>
1.3 Allegation Priority Level: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	1.8 Protective Custody: Y <input type="checkbox"/> N <input type="checkbox"/>
1.4 Allegation:	1.9 Jurisdiction: DCFS <input type="checkbox"/> Region:
1.5 Decision on maltreatment:	1.10 Report Number:
	1.11 Date of Report:

SECTION 2. TIMELINESS OF INVESTIGATION					
POLICY NO./ Statute	STANDARD ELEMENTS OF A CPS INVESTIGATION & ACTIVITIES DURING INITIAL CONTACT	YES	NO	N/A	COMMENTS/EXPLANATIONS
	2.1. If appropriate, did the agency contact/interview the reporter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.2 Did the agency make face to face contact with the alleged victim(s) within assigned priority response time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.3 If not, was the reason for the delay in contact documented in UNITY? Please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.4 Did the agency make face to face contact with all children living in the household before NIA completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.5 If not, was the reason for not interviewing all children in the household documented in UNITY? Please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0508.16.E. 5	2.6 If documentation of inability to contact the alleged victim and/or family members, is there evidence of the agencies persistent efforts to locate? Please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NRS 432B.260.3	2.7 If the report/referral did not warrant immediate contact, did the agency make the decision to disposition to investigation/assessment - within three (3) days of receipt of report?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NRS.432B. 300	2.8 Is there documentation in UNITY of contact with all household members? If not, please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.9 Is there documentation in UNITY of contact with the non-maltreating caregiver? If not, please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2.10 Is there documentation in UNITY of contact with the alleged maltreating caregiver? If not, please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0508.16.E. 4	2.11 Is there documentation of in UNITY of contact with 2 collaterals? If not, please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0508.16.E. 4	2.12 How many collateral contacts? 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 or more <input type="checkbox"/>				
	2.13 Type of collateral contacts (i.e. teachers, relatives):				

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SECTION 3. PRESENT DANGER ASSESSMENT					
POLICY NO. / STATUE		YES	NO	N/A	COMMENTS/EXPLANATIONS
	The Present Danger assessment should provide a complete assessment of safety (for all children) in the home.				
508.14 NAC 432B 180.185	3.1 Was the Present Danger assessment completed and documented in UNITY within 24 hours after initial contact with the child/children and family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	3.2 Was present danger identified? If not, should there have been (based on Present Danger Assessment / supervisory consultation case notes in UNITY)? Please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	3.3 If yes to 3.2, was a Present Danger plan implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
508.15 G	3.4 If Present Danger plan implemented, documentation of NIA worker having weekly contact with identified care provider (i.e. face to face, telephone or electronically). If not, please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 4. NEVADA INITIAL ASSESSEMENT (NIA)					
POLICY NO. / STATUE		YES	NO	N/A	COMMENTS/EXPLANATIONS
	The NIA evaluates the information gathered and reaches a conclusion about the safety of the child based on impending danger threats, if any.				
	4.1 Does the NIA have sufficient information to support identified impending dangers? Should other impending danger threats have been identified or not identified? Please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.2 Does the NIA have sufficient information to support identified protective capacities by the worker? Should other protective capacities have been chosen or not chosen? Please explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
0508.18.B	4.3 Was the NIA completed in UNITY within 30 days or if there was Present Danger identified within 10 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.4 Does NIA narrative correlate with worker's assessment of child(ren) safe or unsafe marked on the NIA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.5 If child is unsafe is there a Safety Plan Determination: Process & Conclusions completed in UNITY?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.6 If impending danger identified was a safety plan determination meeting held?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.7 Was there a Safety Plan implemented to address the identified impending dangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.8 If so, does it address the impending dangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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	4.9 Was it updated and documented in UNITY within 24 hours of this meeting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.10 If relative or fictive kin utilized in Safety Plan, did the agency conduct appropriate background clearances (i.e. home safety inspection (informal), criminal background checks, and UNITY & Legacy checks) for all adult members involved in safety planning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.11 Was Conditions for Return (CFR) completed if safety planning involved out of home placement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4.12 Was the CFR updated and documented in UNITY?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 5. RISK ASSESSMENT					
POLICY NO. / STATUE		YES	NO	N/A	
0511	5.1 Was the Risk Assessment completed and document in UNITY within 45 days? (CFS343)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	5.2 Is there evidence of the agency assessing risk throughout the investigation? i.e. Child and Family Team meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NAC 432B.180	5.3 Is the risk rating consistent with the policy and information documented in UNITY? Please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 6. SUPERVISORY OVERSIGHT						
POLICY	Is there documentation in UNITY-case notes and screens, of supervisory oversight at the following milestones:	YES	NO	N/A	COMMENTS	
508.22	6.1 Present Danger Assessment If so, please explain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	6.2 Was supervisor consulted immediately if present danger is assessed or suspected where the child is deemed to be unsafe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	6.3 Was the Present Danger Plan (PDP) documented in UNITY as a Supervisor Case Note?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
508.15 H.4	6.4 Did the Supervision Case Note for PDP include all required information per policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
508.13 H & I	6.5 Was supervisory consultation completed within 3 business days (72 hrs) of initial contact for a child deemed safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
508.22	6.6 Was there any UNITY documentation of supervisory consult during NIA process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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	6.7 Has NIA been approved? If not, date worker completed & how long NIA has been waiting for approval?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.8 Safety Plan Determination: Process & Conclusions (analysis) – supervisor approved?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.9 Safety Plan Determination Meeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.10 Conditions for Return Supervisory Consultation & development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.11 Conditions for Return Plan approved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.12 At time of case closure, transfer, new allegations, new (pertinent) case information, safety plan changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6.13 Were investigation windows completed in UNITY?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CAPTA	6.14 Is there documentation that written notification was provided to the family of the right to appeal the finding of substantiation by the agency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COMMENTS:					