

QUARTER 5 PIP 2.3.1 (A) WASHOE COUNTY

Report #2 Washoe County Department of Social Services

Strategy 1: Preserve connections and strengthen relationships. Objective 2.3.1(A) Provide caseworkers and supervisors with training and support in the application of the child and parent contact standards to enhance the level of caseworker engagement.

WCDSS is in a unique situation as a result of PII funding creating some level of caution by project consultants due to the research component of PII. Specifically, WCDSS must be careful not to influence usual permanency services by implementing aspects of the project identified in the original proposal as a gap in service, in this instance worker engagement with families. However, WCDSS recognizes that usual permanency service practice will continue to strengthen while research and intervention is completed. As such, WCDSS' consultant, ACTION for Child Protection (ACTION), incorporated significant time and focus in the Nevada Initial Assessment (NIA) and Conditions for Return (CFR) training related to philosophical approach to assessing families.

The NIA policy was submitted in the Quarter 4 report but will be referred to here. NIA Standards are attached (Attachment 3) that outline required beliefs and assumptions for successful implementation. The basic tenets of the NIA include: child safety as paramount; permanency as an integral part of child safety; rights of the family (parent and child); respect; family system and family centered; least intrusive; and diligence. These tenets are incorporated into 32 standards of the NIA, 13 of which are directly related to family engagement (#'s 2, 4, 5, 6, 10, 12, 13, 17, 20, 26, 27, 29, and 32).

Standard 2	The NIA worker communicates and behaves in ways that engage the
	children, caregivers, and relevant family members interpersonally in the
	information sharing and collection exchange.
Standard 4	The NIA worker demonstrates interpersonal skills that facilitate
	information collection.
Standard 5	
Standard 5	The NIA worker meets face to face with children and caregivers
	promptly when there are indications in the Intake Assessment that
	children may not be safe.
Standard 6	The NIA worker engages the caregiver and other family members in the
	information and assessment process.
Standard 10	When Present Danger is identified during the initial contact, the NIA
	worker performs reasonable efforts in order to prevent placement as the
	Present Danger Plan.
Standard 12	The NIA worker involves caregivers in planning the Present Danger Plan
	in so far as they are able and the context permits.
Standard 13	When Present Danger is identified during the initial contact, the NIA
	worker arranges and implements a Present Danger Plan the same day
	as the initial contact.
Standard 17	The NIA worker oversees the Present Danger Plan through weekly

	personal contacts with participants it the Danger Plan including at least one face-to-face contact with the child.
Standard 20	The NIA workers identifies immediate, emergency, unmet needs the family is experiencing and arranges for the provision of immediate emergency services.
Standard 26	The NIA worker oversees the safety plan through weekly personal contacts with participants in the safety plan including at least one face-to-face contact with children until the case is transferred to Ongoing CPS.
Standard 27	The NIA worker established conditions for return for safety plans that involve child placement with kin or foster care.

The family system and family centered philosophy incorporated by ACTION in the model pervades these standards focusing "awareness of the significance that relationship, interdependence, and connectedness among family members have in understanding and assessing child safety and in enhancing diminished caregiver protective practices. WCDSS staff were trained (100% of caseworkers) on the new NIA process with significant energy placed on model practice and adherence to the philosophical foundation of the model. ACTION trainers emphatically stressed the importance of meaningful contact to properly assess family functioning including parent-child relationship to develop appropriate safety plans and case plan goals.

Additionally, in a monthly Division meeting February 25, 2012, Statewide policy .0205.0, Caseworker Contact with Children, Parents and Caregivers was disseminated to caseworker staff. Discussion regarding the policy (see Meeting Agenda, Attachment #4) included review of key points: Benefit of Caseworker Visits; Caseworker Contact with Children; Caseworker Contact with Parents; Parents Right to Visitation with Children; and Documentation. The meeting attendance sheet is attached (attachment #5). é

.

0205.0 Caseworker Contact with Children, Parents and Caregivers

0205.1 Policy Approval Clearance Record

Collaborative Policy Date Effective: 06/20/08	This policy supersedes: 200 Caseworker Contact with Children, Parents and Caregivers	Number of pages in Policy: 9
PART Review & Approval DMG Approval DCFS Administrator Approval Review by Representative from the Office of the Attorney General:	06/20/2008 06/20/2008 06/09/2008	Policy Lead: Chris Lovass-Nagy, LSW Policy Lead: Chris Lovass-Nagy, LSW Signature: On File

0205.2 Statement of Purpose

0205.2.1	Policy Statement: In accordance with 45 CFR 1355.20 °C or children under the placement and care responsibility of a are placed away from their parents or guardians" must be a caseworker every calendar month." This provision also ap cases.	the state agency who visited by their
0205.2.2	Purpose: Monthly caseworker visits must focus clearly or service delivery and be documented in case notes. The exoutlined monthly caseworker visitation is when there is safe child which requires more frequent visitation. If a child is use calendar month home visit (for example, child is on an extert their foster family) it is imperative that caseworkers enter the child's placement status into UNITY in that calendar month Federal requirements, children on runaway status will be caseworker contact report as requiring a visit. Do not char in UNITY.	xception to the above iety plan involving the unavailable for any ended vacation with he change in the h. Please Note: Per counted in the
0205.3 Authority	45 CFR 1355.20 NAC 432B.405	
0205.4 Definitions		
0205.4.1	Caregiver : refers to the persons providing foster, adoptive child or person who provides care in a treatment home/fac placed.	e or relative care for a cility in which a child is
0205.4.2	Caseworker: workers whom the State or local title IV-B/IV-E agency has assigned or contracted case management or visitation responsibilities (to include supervisors as appropriate). Service providers, such as therapists, will not be able to fulfill this caseworker visit role.	
0205.4.3	Contact: refers to a face-to-face contact, a visit to the home or facility, participation in a child and family team meeting, court hearings, telephone or electronic communication, written documents, or other means similarly defined.	
0205.4.4	Face-to-Face: refers to an in-person interaction between allow for the caseworker to observe the child, parents and	
Date: 06/20/08	CASE MANAGEMENT	Section 0205 Page 1 of 9

- 0205.4.5 Full Disclosure: means that the birth family, foster/resource family, child welfare and legal system are all informed and share pertinent information regarding the case, family history, case planning and permanency planning options.
- 0205.4.6 In-home case: Any case open for services following a determination of investigation finding i.e. substantiated, unsubstantiated, whether formal, court ordered custody or informal, where no child in the family was in out of home placement for 24 hours or more. Children on trial home visits are not In-home cases.
- 0205.4.7 Monthly: Refers to every calendar month.
- 0205.4.8 Parent: refers to the birth parent or legal guardian of a child.
- 0205.4.9 Safety Plan: A time limited, written plan that is put into place upon contact with the family when present and/or impending danger is manifested to ensure immediate protection of a child. The safety plan must be sufficient to manage and control safety threats, based on a high degree of confidence that it can be implemented and sustained.
- 0205.4.10 State: The Family Programs Office (FPO) at the Division of Child and Family Services (DCFS).
- 0205.4.11 UNITY: refers to the Statewide Automated Child Welfare Information System (SACWIS), in which all case information is documented.
- **Well-Being:** refers to promoting emotional, physical health and educational child well-being.

0205.5 Procedures

0205.5.1 Benefits of Caseworker Visits

- A. Caseworker visits with children, parents and caregivers are one of the most important ways to assess safety, plan for permanency and ensure that all of the child's needs are being met, regardless of placement, i.e., with parent, relative, foster home, treatment homes. Some of the benefits of purposeful caseworker visits with children, parents and caregivers include:
 - Identification of child and family strengths and needs.
 - Parental engagement in the case planning process;
 - Timely notification (within 48 hours) to parents, either in writing or verbally of any out of home placement changes and/or decisions to alter parental/child visitation schedule.
 - Full disclosure, in which all parties involved understand the importance of sharing pertinent information for the purposes of case planning and permanency options
 - Strong parent-worker alliance in order to achieve positive outcomes for children; and
 - Placement support.

- **B.** Minimum visitation requirements: A face-to-face visit must occur with the child(ren) and caregivers at least every calendar month.
 - For cases where the child is placed in foster care, the visit must take place in the foster home a majority (greater than 50%) of the time.
 - The majority (greater than 50%) of visits must take place in the child's residence.
 - During all types of visitation, the caseworker must spend at least a portion of each visit alone with the child; and
 - During all types of visitation, the caseworker must spend at least a
 portion of each visit alone with the caregiver/foster parent, if requested.

The purpose of all caseworker contacts is to review child safety, adjustment, well-being and case plan progress.

- C. Activities: During any type of contact between the caseworker, parents and child, the caseworker must:
 - Assess child safety and well-being;
 - Review case plan goals, services to parents and children.
 - Document case plan progress specifically related to services and goals in case notes.
 - Observe the parent and child in order to gather information regarding family functioning.

0205.5.2 Caseworker Contact with Children:

A. The caseworker is a vital constant in the life of a child in the child welfare system representing stability, dependability and trust. It is the caseworkers' responsibility to ensure the child's continuing safety and to ensure that all of the needs of the child are being met in the family home or out-of-home placement.

In addition to casework activities for visitation, the caseworker must:

- Assess the child's adjustment to the placement;
- Observe the child and gather information from the child and when present, the child's parents, legal guardians or caregivers;
- Visit with the child in a comfortable and age appropriate setting;
- If appropriate, considering the child's age and level of maturity, discuss with the child the status of the current case plan, services involved, and any legal changes in the case; and
- Gather and maintain in the child case file information about the child's educational, medical/dental, mental health needs, case plan progress and/or any other pertinent information.

0205.5.3 Caseworker Contact with Emancipating Youth (ages 15 ½ to 18)

A. In addition to the other activities outlined for caseworker visitation/contact, during the emancipation phase of a case, it is critical that planning occurs in which the caseworker and youth have discussion regarding the following:

- Discussion regarding the youth's goals, to include educational, vocational and other goals that require planning efforts.
- Discussion and creation of a transition plan to include referrals for Independent Living services; and
- Discussion regarding positive relationships that the youth has with family and/or friends or the need for the youth to establish healthy relationships with others. This is critical for youth who have not achieved legal permanency and need life-long connections to adults in their life in order to support healthy adult living.

0205.5.4 Caseworker Contact with Children placed out-of-state

- A. The Caseworker must have monthly contact with the state the child has been placed in to address the following:
 - Determine if at least one contact was made for the month, including the date and location of contact.
 - Assess whether the case plan goals are continuing to be addressed and any progress made related to the case plan.
 - Ensure that all of the needs of the child are being met in the out-of-home placement.
 - Assess the child's adjustment to the placement and any information about the child's educational, medical, dental and mental health needs or any other pertinent information.
- B. The Caseworker must obtain some form of written confirmation (for example through email, letter or form) from the caseworker (in the state the child was placed) that the contact occurred and where the contact took place (jurisdictions can develop a standardized form that can be faxed to the state for signature and use as confirmation as well).
- C. The information gathered from the out of state caseworker's report must be documented and listed as a "Non-Nevada Worker" type of contact "with child" and with the location of visit into UNITY within 5 days of the contact.
- D. Children placed in out-of-state institutions are subject to the same requirements.

0205.5.5 Caseworker Contact with Parents

- A. Quality visits with parents are the foundation for engaging the family in an effective casework relationship. Visits between workers and parents should be focused on safety, strengths and needs of the child and family, case planning, family progress and identification of resources and services the family needs in order to achieve case plan goals. Visits provide an excellent opportunity for:
 - Parent engagement in the case planning process, to include participation in the Child and Family Team;
 - Developing and maintaining a good working relationship with the parent;
 - Assess changes in parental functioning; and
 - Discuss and review the progress of the current case plan, permanency goal, changes in the child's placement, and any legal changes in the case.

B. Visits should occur at a time and place that is favorable for the parents. In some cases, multiple staff and service providers are involved with families. The case plan may involve parents having face-to-face contacts with other staff or with providers with a contractual relationship to augment worker visits. However, these visits are not a substitute for worker visits with parents. Workers should make concerted efforts to conduct frequent face-to-face visits with both mothers and fathers who are involved in their children's lives, including non-custodial parents. In some cases this may require development of separate plans.

Caseworkers shall notify the parent(s) either orally or in writing of any changes in the visitation schedule with the child. Notification will be documented in the UNITY case notes.

0205.5.5 Contacts with Caregiver

- A. Visits between the caseworker and caregiver/relative should be focused on issues such as child's safety; well-being, adjustment, family visitation/contact and case plan goals. Visits provide a venue for caregiver participation in case planning and decision-making, based on the needs of the child and caregiver. The caseworker must collect information from the caregiver such as:
 - Discussion of the child strengths and needs;
 - Gather information about the child's educational, medical or dental, mental health needs or any other pertinent information;
 - Discussion regarding services required to support placement;
 - Discuss and review the progress of the current case plan, permanency goal and any legal changes in the case.
 - Discuss support services the caregiver may need such as respite care, assistance accessing services, additional training and or non-residential (wrap) services to the needs of the child(ren).

0205.5.6 Additional Contact Procedure and Requirements

- A. Parents Right to Contact/ Visitation with Children in Out-of-Home Placement
 - The caseworker shall not limit visitation as a sanction for the parent's lack of compliance with court orders or as a method to encourage a child to improve his/her behaviors. Visitation is determined by the best interest, health, safety and well-being of the child. Visitation shall only be limited or terminated when the child's best interest, safety, health or wellbeing is compromised. Recommendations to limit or terminate visitation must be presented to the court and supported by any of the following;
 - Evidence that the child is at risk of physical or emotional abuse during the visit.
 - The fact that the visitation supervisor is threatened.
 - The parent appears intoxicated. The visit should be stopped that day, but may resume on another day, if safe for the child.
 - Therapist's recommendation to decrease or suspend visitation as it is harmful to the child.

- The court adopts a permanency plan other than return home and if the family visits continue it would not be in the best interest of the child.
- Any significant change in visitation shall be staffed with the caseworker, supervisor, Court and Child and Family Team when necessary. Shared decision making should be employed including meeting with parents and caregivers when visitation plans change.
- Termination of face-to-face contact may still allow for other communication such as monitored phone calls or letters. When a parent has demonstrated improved parenting skills and/or decrease in inappropriate behaviors, face-to-face visits may be restarted.
- In dependency cases, the court shall be informed of any significant changes in visitation. A court order is required prior to the change in visitation, unless the child's safety is jeopardized.
- Visits after the parental rights are terminated or relinquished are done to meet the child's needs. In many cases these types of visits are for goodbye, family information or re-connection to family members.

B. Scheduling Contact

Caseworkers should regularly schedule visits with children, parents, legal guardians and caregivers in accordance with rules set forth in this policy. However there may be a need to have unscheduled visits with the child, parents or caregiver in order to ensure the safety and well-being of the child. In these instances, the visit will occur in a manner that is consistent with the purpose if the visit and is respectful of the child and the parents or caregiver involved in the visit.

C. Caseworker Back-Up

On rare occasion it may be necessary to meet the caseworker contact requirements with someone other than the child's caseworker. A worker whom the State or local title IV-B/IV-E agency has assigned or contracted case management or visitation responsibilities with (to include supervisors as appropriate) can meet the visit requirements. Service providers will not be able to fulfill this caseworker visit role.

D. Exceptions

After reviewing the safety and service plan for the child, the caseworker's supervisor or manager may approve an exception, on an individual case basis, to the requirement for a child's caseworker to have face-to-face contact with the child, parents, legal guardians or caregivers. The decision to approve an exception to the face-to-face contact requirement must be consistent with meeting the needs and permanency goal of the child. The caseworker or supervisor will document in UNITY case notes the reason for the exception to the face-to-face contact, including the criteria for approving an exception and the length of time the exception will be in effect, is in the client's case file. Reasons for granting an exception to the face-to-face contact requirements may include, but are not limited to:

- 1. Unavailability of the child(ren). Examples include a child on vacation with the caregiver or a child on runaway status.
- 2. Parent not living in the same community as child. Examples include parent living in another state or are incarcerated.

0205.5.7 Timelines: None

Table 0205.1: Timelines for Caseworker Visitation

Requirement	Deadline	Starting Date	Responsible Party	Actions to be Taken
Caseworkers visit with children, parents and caregivers every calendar month	Every calendar month	At onset of placement and care responsibility of state/ county agency for children who are placed away from their familles and after completion of the NtA for all other on-going CWS cases.	CWS caseworker	Visit children and families on çaseload every calendar month

205.5.8 Forms: None

0205.6 Jurisdictional Action

- 0205.6.1 Development of Internal Policies: None needed. All three jurisdictions are expected to follow this statewide collaborative policy as written.
- 0205.6.2 Timelines: None
- 0205.6.3 Tools & Forms: None
- 0205.6.4 Documentation: Documentation of caseworker contact is mandatory to all parties as it provide a concrete method of reporting progress, child's adjustment, case plan progress and any other concerns. Any type of contact or visitation with a child or regarding a child must be documentation in UNITY case notes within five working days of said contact (per documentation policy).

Documentation should contain the following information:

- Date of caseworker contact/visit;
- Location of caseworker contact /visit;
- Who participated in the contact/visit;
- Other specific information to demonstrate quality of visits; and
- Purpose of contact;
- Review child's status in services (educational, mental health, physical health, dental health) and any unmet needs, pending or needed referrals.
- Outcome of visit (i.e., follow-up required).

A. Case File Documentation (paper): None

B. UNITY Documentation (electronic):

Table 0205.2: UNITY Documentation for Caseworker Contact with Children, Parents and Caregivers Policy

Applicable UNITY Screen	Data Required
CFS 085 Case Notes	Document contact in UNITY case notes within five working days of said contact
CFS 086 Case Note Directory	Document contact in UNITY case notes within five working days of said contact
Child Contact Note	Document contact in UNITY case notes within five working days of said contact

0205.6.5 Supervisory Responsibility: None

0205.7 State Responsibilities

- 0205.7.1 Participants in Policy Development
 - A. FPO Staff: Foster Care Specialists
 - B. Jurisdictional Representatives: PART and DMG
 - C. External Stakeholders: None

0205.7.2 Technical Assistance

- A. Requesting Technical Assistance: None
- B. Relaying TA Information: None
- C. Evidenced Based Practice: None
- 0205.7.3 Clearance Process
 - A. Approved by DMG 06/20/08
- 0205.7.4 State Oversight
 - A. Compliance with this policy will be monitored via state agency's oversight methodology.

₹.,

.

0205.8 Policy Cross Reference

0205.8.1 0204 Case Planning Policy 0601 Documentation Policy

0205.9 Attachments: None

Date: 06/20/08

CASE MANAGEMENT



QUARTER 2 PIP 2.3.1 (A) RURAL REGION

STATE OF NEVADA

MICHAEL J. WILLDEN Director

AMBER HOWELL Acting Administrator



DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF CHILD AND FAMILY SERVICES

4126 Technology Way – 3rd Floor Carson City, Nevada 89706 (775) 684-4400

> QUARTER 5 PIP ITEM 2.3.1 (A)

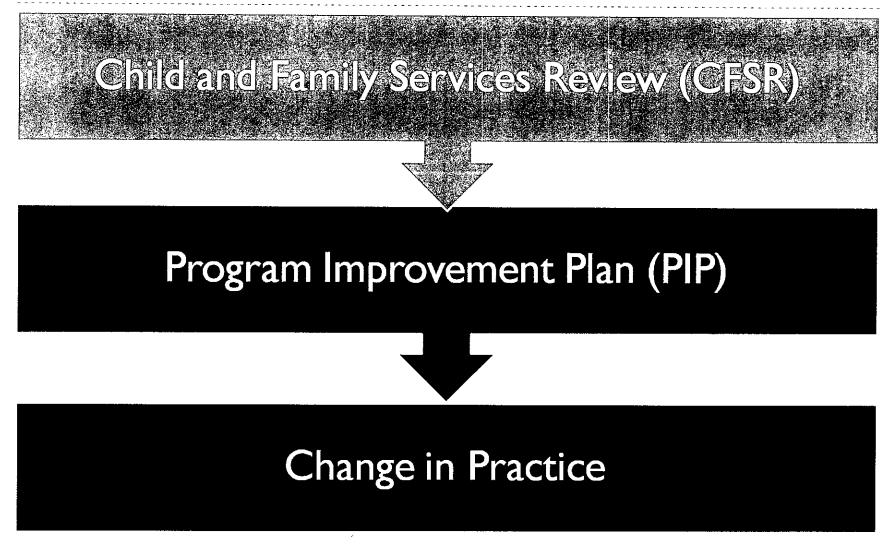
RURAL REGION schedule for the Mandatory training that will occur in March:

DATE	LOCATION
March 1, 2012	Fallon District Office
March 13, 2012	Elko District Office
March 20, 2012	Carson City District Office
March 22, 2012	Pahrump District Office

Case Worker Contacts and Effective Documentation Training 2012

DIVISION OF CHILD AND FAMILY SERVICES QUALITY ASSURANCE TRAINING UNIT

WHY OH WHY ???



2009 CFSR RATINGS

Outcomes	Percent Substantially Achieved 95% Required
Safety Outcome 1	RURAL REGION
Children are first and foremost protected from abuse and neglect	60%
Safety Outcome 2	
Children are safely maintained in their own home when possible and appropriate	39%
Permanency Outcome 1	
Children have permanency and stability in their living situations	40%
Permanency Outcome 2	
The continuity of family relationships and connections is preserved	80%
Well Being Outcome 1	
Families have enhanced capacity to provide for children's needs	22%
Well Being Outcome 2	
Children receive services to meet their educational needs	92%
Well Being Outcome 3	
Children receive services to meet their physical and	
meatal health needs	62.5%

CFSR Item 19

► ITEM 19. CASEWORKER VISITS WITH CHILD

Reviewers were to determine whether the frequency of visits between the caseworkers and children were sufficient to ensure adequate monitoring of the child's safety and well-being, and whether visit focused on issues pertinent to case planning, service delivery, and goal attainment.

Division of Child and Family Services Rural Region rating was 33%

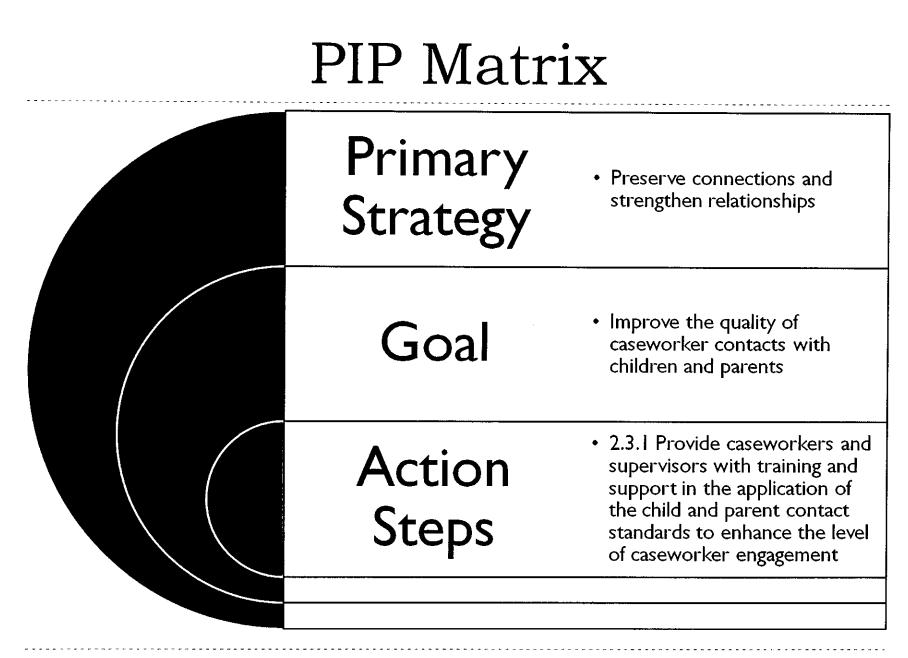
- Item 19 was rated as an Area Needing Improvement when reviewers determined the following:
 - The frequency of caseworker visits was not sufficient to meet the needs of the child and they did not focus on issues pertinent to case planning, service delivery, and goal attainment. (16 cases)
 - The frequency of caseworker visits with children were not sufficient to meet the needs of the child, although when visits did occur, they focused on issues pertinent to case planning, service deliver, and goal attainment. (4 cases)
 - The frequency of caseworker visits was sufficient, but the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment. (8 cases)

> 4

CFSR ITEM 20

► ITEM 20: CASEWORKER VISITS WITH PARENTS

- Reviewers were to assess whether the caseworker's face-to-face contact with the children's mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and ensure the children's safety and well-being.
- Division of Child and Family Services Rural Region rating was 50%
- Item 20 was rated as an Area Needing Improvement when reviewers determined the following:
 - Visits with the mother were not of sufficient frequency
 - Visits with the mother were not of sufficient quality
 - Visits with the father were not of sufficient frequency
 - Visits with the father were not of sufficient quality



Caseworker Visits --Children, Parents, Caregivers

- The purpose of caseworker visits are multifaceted
 - They directly improve the safety, well-being and permanency outcomes for children
 - They determine the child's current & overall safety, well-being and case progress towards case goals and permanency.
 - They are an **opportunity** for the social worker to observe, discuss and assess information gather during visits.
 - Assess the needs of the child, parents and caregivers
 - Provide necessary support and services to families in-home cases and out-of-home cases
 - Significant relationship was found with caseworker contact and the prevention of removals and successful reunification
 - Build on-going relationships and rapport
 - Engages the parents, children and caregivers in case planning process

Caseworker Visits

What they are NOT --

- They are not just a friendly visit or a time to <u>chat</u> about the youth—
- They are not just to meet a Federal requirement.

Preparation for Caseworker Visit

- 1. Review the case record and notes
- 2. Contact Service Providers including teachers, care providers, therapist to have most up to date information
- 3. Identify concerns/barriers to case progress
- 4. Consider care provider, child and parent schedule prior to setting times for visits

The caseworker visits must be well-planned and focused on issues pertinent to case planning and service delivery to ensure the safety, permanency, and well-being of the children.

> 9

During the Visit--

- Caseworker should interact in a professional, but empathetic manner, providing encouragement and guidance, communicating updates and pertinent case information and when required setting necessary limits
- Use active listening, paraphrasing and summarizing to assure clear communication
- Use honest and open dialogue to establish the necessary trust required within the helping relationship
- The caseworker must spend time talking alone with the child during the required monthly visits
- It is equally important to have private time with the care provider or parent

Documentation of Caseworker Contact

• 0205.6.4

Documentation of caseworker contact is mandatory to all parties
Any type of contact or visitation with a child or regarding a child must be documented in UNITY within 5 working days Quality Contact Documentation

- Summarize the events of the home visit
- **Placement** observations and information obtained in regards to the child's adjustment to the placement and relationship with providers
- Confirming Safe Environments
- Review of child's status in services, i.e. education, emotional/behavioral health, physical or dental health
- Education
- Extracurricular Activities
- Visitation
- Assessment
- Follow Up pending or needed referrals



Policy

| | |

Why is documentation so important?

It is a legal record that can be viewed in your absence that reflects case history including progress/barriers in a case towards meeting safety, well-being and permanency for the families we are serving or have served.

Provides Accountability

Supports Case Management Decisions

Validates the Delivery of Services

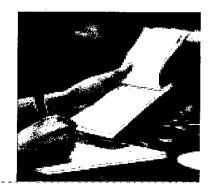
Well – written case notes make it easier for social workers to write court reports.

It is the Social Worker's assessment of child's safety, well-being and permanency needs – consistently.

"If it is not documented, it did not happen."

What EVERY Case Note Should Contain?

- ► DATE, TIME, AND LOCATION OF CONTACT
- LENGTH OF CONTACT (i.e. minutes or hours) and TRAVEL TIME (coming soon)
- TYPE OF CONTACT (i.e. in-person, phone, letter, etc)
- PERSON OR PERSONS INVOLVED IN CONTACT
- RESULTS OF THE CONTACT (including any follow-up activities to be done - by whom and by when e.g., safety planning, case planning)



Investigative Case Notes

- Initial Face-to-Face contact with child victim needs to be a brief case note that includes – identifying the victim, where interview took place and who was present – all the details of the interview are to be written in the NIA
- All investigative case notes are going to go into the NIA
 - Nature Section will contain investigative contacts (date, location and who), then a brief summary of information gained in relation to investigation
- Case note briefly ancillary information collected/completed during an investigation – i.e. completed housing referral, provided 5 bus passes to mother to attend appointment with case worker

Collateral Contacts

- Make your collateral contact count
 - Medical Neglect contact the Pediatrician
 - School age child contact teacher
 - Toddler in day care contact that day care provider
- Documenting these contacts in the NIA under Nature section for investigation purposes
 - Indicate their relationship to the client/family
 - Indicate length of time the person has known the family
- Information gathered by collateral that is relevant to child functioning would be documented in that section
- Have specific questions to ask your collaterals get specific information such as functioning, discipline which relates to present or impending danger

Caseworker/ Parent Contact

- If child(ren) are in the home, describe interactions between child and parent(s)
- Document parents' specific case plan activity progress/barriers
- Describe the physical condition of the home at the time of the visit
- Describe the parents' current health (i.e. physical, emotional/behavioral, substance dependency, etc.)
- Include parents' engagement/participation in developing case plan

Visitation of any type

- Participants of the visitation
- Describe the interactions between the child in care and their parent(s), sibling(s), relative(s) etc. (attachment/bonding)
- Describe the parent/child interactions, parenting practice / discipline observed
- Parents perception of the visit
- Childs perception of the visit

Court Hearings

- List those in attendance (i.e. case participants, CASA's, therapist, etc.)
- Document any requests by the court for specific follow-up action
- Document court findings and orders
- Next Court hearing date and time



- Name of provider, function they serve
- Document which case plan and/or service contract goal service provider addresses
- Summarize treatment progress Client
 Engagement What are they learning? Internalizing?
 Interacting? Whether it has been observed? I
- Follow-up from service provider
- Future appointments for case participant, if applicable

Documenting Caseworker Contact Children, Parents, Caregivers

- Summarize type of contact, where it occurred, who was there
- Did some of the interview occur in private? How? If not, why?
- Placement Information specifically how the child is adjusting to the placement, care providers and observations by the worker
- Confirming Safe Environments
- Medical, Behavioral and Emotional Health review of child's status in services
- Education
- Extracurricular Activities
- Visitation
- Parents progress/barriers towards case plan activities –
- Assessment
- Follow Up pending or needed referrals

GOOD EXAMPLE OF CASE NOTE AFTER CHILD VISIT IN CARE PROVIDER HOME



GOOD CASE NOTES

- Clear and Brief
- Concise, Precise
- Accurate and Complete
- Acceptable Grammar
- Spell Check

- Describe Behaviors Reported to Worker
- Record Statements Made by Client
- Record Your
 Observations
- Easy to Understand by the Reader

WHAT <u>NOT</u> TO INCLUDE IN CASE NOTES

- Diagnoses
- Clichés
- Jargon
- Slang
- Abbreviations (SM, NF, BF, PGM, CH)
- Curse words (unless directly quoting the client)

- Prejudices
- Opinions or Judgments
 Rooted in Personal Biases
- Stereotypes

WHY OH WHY are we talking about Documentation?

Visited with Mary at care treatment home. She was her usual unpleasant self. In all fairness, she had not been feeling well and was being treated with over-the-counter medication. She was informed that this worker had been informed that she would possibly be moved next week. Hopefully this could be accomplished by Tuesday. Our office needs a copy of the license. Worker will call licensing to secure a copy of the license. Perhaps Michael has a copy. It appears that there are still problems with Medicaid re Mary. Worker will check on this again. She has not been on medication for several months now. Of course she feels that she does not need this. Mary states that she does not want to go to Generic HS but rather to another school. We will check into this--possible variance. She states that she is looking forward to getting out of treatment home. Worker will check with to see if they can begin paperwork on transition.

BAD CASE NOTE EXAMPLE

> 22

Bad Case Note Example

 HART meeting, fax all legal documents to AG. Call DA to amended the petition. Look for contacts for the parents.
 F/P will be informed of the legal risk.

- What is this note in reference to?
- What does this note tell you about safety, well-being or permanency?

Bad Case Note Example

 HART meeting, fax all legal documents to AG. Call DA to amended the petition. Look for contacts for the parents. F/P will be informed of the legal risk.

Good Case Note Example

This worker had a telephone conversation with Shannon Richards, Deputy Attorney General, in regards to moving forward on the termination of parental rights on both parents. This worker discussed that a adoptive family had been identified at the HART meeting on February 23, 2012.

Follow-Up -- Shannon asked that this worker discuss with the prospective adoptive family the legal risk and that the Division will be moving forward with Petition for Termination of Parental Rights. This worker will contact the District Attorney's Office to have the petition amended from parental substance abuse to physical neglect. This worker will fax all legal documents to Shannon. This worker needs to look for all previous contact information regarding both parents and provide that along with most current contact information to Shannon. Shannon will start preparing the Petition.

Who Reads Case Notes

- Supervisors
- Managers, Deputy Administrators and Administrators
- CASA
- Judges
- The Client
- Quality Assurance Federal, State and Agency
- Legislative Counsel Bureau (LCB)
- Other Agencies Family Resource Center (Differential Response)
- Intensive Family Services
- Juvenile Justice
- District Attorney
- Parent and Child Attorney
- Systems Advocate
- Other Workers

UNITY Case Note Types

- Important to use the correct case note type
 - Case notes can be sorted and looked up by their type and with whom
 - There may be more than one type per contact and more than one participant – choose all that apply

Review Handout --

Monthly Child Contact by Caseworker

Caseworker Contact Case Note in UNITY

When entering monthly child contact in UNITY note the following:

- Use "child" contact and "care provider" note type
- Select "in-person" as the contact type
- Select only the children you saw at the placement location in the "contact with" box
- Select only the participants that were discussed in the "contact about"
- Mark"saw child in placement location" check box only if you saw the child in placement
- Notes must be entered within 5 days following the contact per policy

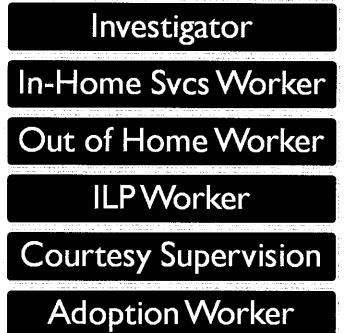
ICPC Contact CASE Note in UNITY

When you enter ICPC contacts between the ICPC worker and the child, make sure you:

- Use the date the ICPC worker saw the child not the date you are talking to worker
- Select "NON-NV worker" and "child contact" case note type
- Select "in-person" contact type
- Mark"saw child in placement location" checkbox if the ICPC worker saw child in placement location
- Select the children that the ICPC worker saw in contact about and with boxes

SUPERVISORS

Make sure that you have assigned the worker as one of the following types in case assignment:



When documenting in UNITY I:I supervision with worker, that you include documentation confirming monthly home visits completed and information discussed.

Children are more resilient when they have multiple healthy connections or attachments. Resiliency is the key to surviving trauma.

QUESTIONS/THOUGHTS

