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DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES
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MTL # 0205 – 09272024

TO: Jill Marano, Director – Clark County Family Services
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FROM: Betsey Crumrine, Interim Deputy Administrator, Division of Child and Family Services

POLICY DISTRIBUTION

Enclosed find the following policy for distribution to all applicable staff within your organization:

0205 Caseworker Contact with Children, Parents, and Caregivers

This policy is/was effective: 09/27/2024

- This policy is new. Please review the policy in its entirety
- This policy replaces the following policy(s): MTL # _____ - _____ Policy Name: _____
- This policy has been revised. Please see below for the type of revision:
 - This is a significant policy revision. Please review this policy in its entirety.
 - This is a minor policy revision: (List page number & summary of change):
 - A policy form has been revised: (List form, page number and summary of change):
- This policy has been reviewed for statewide compliance.

NOTE:

- Please read the policy in its entirety and note any areas that are additionally required by your agency to be in compliance with the policy enclosed.
- This is an **ALL STAFF MEMO** and it is the responsibility of the person listed above to disseminate the policy enclosed to appropriate staff within his/her organization and to ensure compliance.
- The most current version of this policy is posted on the DCFS Website at the following address: <http://dcfs.nv.gov/Policies>
Please check the table of contents on this page for the link to the chapter you are interested in.

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0205 Caseworker Contact with Children, Parents and Caregivers

Policy Approval Clearance Record

<input checked="" type="checkbox"/> Statewide Policy <input type="checkbox"/> Administrative Policy <input type="checkbox"/> DCFS Rural Region Policy	<input type="checkbox"/> New Policy <input checked="" type="checkbox"/> Modified Policy <input type="checkbox"/> This policy supersedes:
Date Policy Effective:	03/26/2018
Attorney General Representative Review:	03/26/2018
DCFS Deputy Administrator Review:	09/27/2024
DMG Original Approval	06/20/2008
DMG Review:	07/24/2019

STATEMENT OF PURPOSE

Policy Statement and Purpose: The Child Welfare Agency is required to have a standard for the content, quality, and frequency of caseworker contacts with children, parents, and the foster parents/caregivers per federal and State standards. The guidelines developed for the Child Welfare Agency are to ensure the issues pertaining to the safety, permanency, and well-being are addressed and are sufficient to promote achievement of case goals. This policy establishes standards in accordance with the State and federal requirements for caseworker contacts with a biological parent, child/youth, and foster parent/caregiver.

AUTHORITY

Federal: [SSA Section 424 \(f\)](#) [SSA Title IV, 422\(c\)](#)
NRS: [NRS 432B.580](#)
NAC: [NAC 432B.405](#)
Other:

DEFINITIONS

Caregiver: (as defined by the child welfare agency) The person or persons providing foster, adoptive or relative care for a child, or a person who provides care in a treatment home or residential treatment facility in which a child is placed.

Caseworker: Worker 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.

Face-to-Face Contact: An in-person interaction between individuals that will allow for the caseworker to observe and assess the child, parents and/or caregivers.

Interstate Compact on the Placement of Children (ICPC): The ICPC is an interstate compact that has been enacted into law in all fifty states, the District of Columbia and the U.S. Virgin Islands. The Compact establishes procedures for the interstate placement of children and fixes responsibility for those involved in placing the child. It further provides a process through which children subject to this compact are placed in safe and suitable homes in a timely manner by facilitating ongoing supervision of a placement, the delivery of services, and communication between the states and providing operating procedures to further ensure that children are placed in safe and suitable homes in a timely manner.

Parent: The biological or adoptive parent whose parental right have not been terminated.

State: An alternate word for the Division of Child and Family Services (DCFS) or Family Programs Office (FPO).

Trial Home Visits: A trial home visit refers to when a child is returned to the home from which the child was removed for a limited period of no more than six (6) months for determining the appropriateness of permanent reunification.

UNITY: Unified Nevada Information Technology for Youth is Nevada's electronic Comprehensive Child Welfare Information System (CCWIS). This system is a mandatory tool for collecting data and reporting case management services provided to children and families.

STANDARDS/PROCEDURES

Benefits

1. **Caseworker Contacts:** Caseworker contacts 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. parent, relative, foster home, treatment home). Benefits of caseworker contact include:
 - a. Identification of children, family, and caregiver strengths and needs;
 - b. Parental engagement in the case planning process;
 - c. Full disclosure, in which all parties involved understand the importance of sharing pertinent information for the purposes of case planning and permanency options; and
 - d. Strong parent-worker alliance to achieve positive outcomes for children and placement support.

Minimum Requirements

Child Contact:

1. **Frequency:** It is the caseworker's responsibility to visit the children (in the family home or out-of-home) frequently enough to adequately assess their safety, promote timely achievement of case goals, and support their well-being.
 - a. A face-to-face (in person) contact must occur with each child being served by the Child Welfare Agency, regardless of placement location, at least once every calendar month;
 - b. The Child Welfare Agency must consider if additional child contact is necessary to ensure the safety, permanency, and well-being of the child and promote achievement of case goals. The method of additional contact is determined by the Child Welfare Agency and must be considered when a child transitions into a new home setting, during trial home visits, and when new people have access to the home;
 - c. At least six (6) of the twelve (12) monthly contacts, during the federal fiscal year (October 1st – September 30th), must occur in the child's place of residence. The remaining contacts may occur at other locations (i.e. therapist office, the Agency, school, playground, etc.);
 - d. Within a two (2) calendar month period, at least one (1) of the monthly contacts must occur in the child's place of residence. For example, a caseworker conducts a child contact in March, at the therapist office. Since this is not the child's residence the next caseworker contact must occur in April at the child's current place of residence (home); and
 - e. The following individuals DO NOT qualify as a caseworker for monthly face-to-face contacts: facility staff, Juvenile Probation Officers (JPO), and service providers. These individuals may be participants in safety planning and deferred to for gathering information for case planning and/or determining achievement of goals.
2. **Quality:** The visits must be of good quality, with discussions focusing on the children's needs, services, and case plan goals. The length and location of visits are conducive to open, honest, and thorough conversations.
 - a. The Child Welfare Agency is to determine which contacts must be unannounced.
 - b. Unannounced contacts are to be considered upon a Child Protective Services (CPS) investigation when there is a safety plan and/or concerns with safety providers.
 - c. During face-to-face contact with verbal children, a portion of the contact must be held privately between the caseworker and the child.
 - d. During face-to-face contact with nonverbal children, a portion of the contact must be held observing the child's interactions with caregivers.

- e. During all types of visits, the caseworker must assess safety and retain documentation of the observations.

Additional Child Contact:

1. **Child placed on an Independent Living Agreement (ILA):** The Child Welfare Agency is responsible for ensuring that a child placed on an ILA is contacted per [Statewide Policy 0801 Youth Independent Living Program Independent Living Program](#), which provides the frequency a youth needs to be seen. If an IL worker is not assigned, the caseworker must complete the regular contacts with the youth required by policy 0801. When an IL worker is assigned, the caseworker must contact the child face-to-face no less than once a month.
 - a. Caseworker to collaborate with the IL worker or the IL Agency to determine if additional contact is necessary for the safety, permanency, and well-being of the child, and to be informed of the youth's overall progress.
2. **Child placed in emergency or temporary shelters:** The Child Welfare Agency must evaluate if the child requires additional caseworker contact to assist with transitions, to adequately assess safety, promote timely achievement of case goals, and support well-being. It is recommended that a child be seen face-to-face at least one time per week for the first month of placement in a shelter.
3. **Person Legally Responsible (PLR):** Refer to statewide policy [0209 Psychiatric Care and Treatment](#) to determine frequency and quality of caseworker contact when a caseworker is designated as the person legally responsible (PLR).
4. **Runaway and missing children:** Refer to statewide policy [0210 Missing and Exploited Child](#).
5. **Non-Nevada child placed on ICPC in Nevada:** Non-Nevada placements begin with an ICPC request from another state, which are sent to Nevada's Central Office ICPC unit, and then assigned to the Jurisdiction where the child(ren) will be placed. The Child Welfare Agency must assign a caseworker and follow the statewide policy [0701 ICPC](#), including the completion of a home study that will approve or deny the placement of a child.
6. **Children placed out-of-state:** When children are placed out-of-state through ICPC (ICPC Regulation 24) into a familial setting (i.e. parental placement, relative placement, foster/adoptive placement), the receiving state assigns an out-of-state worker for the purpose of child contact. When children are placed out-of-state in a Residential Treatment Facility (RTC) (ICPC Regulation 4) the receiving state does not assign a caseworker for the purposes of child contact. Out-of-state hospital and nursing home placements do not require an ICPC.
 - a. The Child Welfare Agency will engage in communication monthly with the RTC (i.e. therapist, caseworker) regarding the child's progress.
 - b. When applicable, the Child Welfare Agency is responsible for submitting an ICPC for caseworker contact supervision. Refer to the statewide policy [0701 ICPC](#) to determine which facilities are not a RTC placement and require an ICPC.
 - c. Nevada's Child Welfare Agency must ensure the monthly face-to-face contacts are conducted, either by visiting the child monthly or delegating the monthly caseworker contact responsibility to a contractor.
 - d. When there are delays in establishing an out-of-state ICPC worker or when an out-of-state ICPC worker is not assigned, the Child Welfare Agency remains responsible for ensuring that the face-to-face contact with the child occurs.
 - e. The caseworker will not wait on quarterly supervision notes to ensure the safety of a child(ren) in an out-of-state placement. The Nevada caseworker is responsible for obtaining monthly written confirmation (letter or form) from the out-of-state ICPC worker (in the state the child was placed) that the monthly face-to-face contact occurred for the current month, including the dates of contact, observations, and where the contact took place. The information must be documented as a UNITY case note.
 - f. If the child or case circumstances require more frequent updates, the Child Welfare Agency is responsible for contacting the non-Nevada caseworker or facility staff to facilitate additional caseworker contact and retrieve the information. When quarterly reports are not available, the

- ICPC unit will seek the information from the receiving state and forward to the Child Welfare Agency. For inquires or difficulty in obtaining additional information from the receiving state or technical assistance, email nvicpc@dcfs.nv.gov.
- g. It is the responsibility of the caseworker to obtain treatment plan records, IL plans, IL updates, medical records, and education records when appropriate and stay updated on supervisory reports to ensure safety, permanency, and well-being of a child.
 - h. A Prior Authorization (PAR) approval must be obtained prior to RTC placement. If an ICPC approval is not obtained, the child is at risk of losing their medical coverage (Medicaid) and becoming Title IV-E ineligible. Losing Title IV-E eligibility means the Agency is responsible for the child's cost of care versus being allowed to use federal funding.
 - i. Upon placing a Nevada child out-of-state or providing caseworker contact for non-Nevada child in state, the Nevada caseworker must inquire about the child's Medicaid status. If barriers are identified, the Child Welfare Agency must provide necessary referrals and/or offer assistance monthly, until outstanding matters are resolved. In Nevada, a child is not Medicaid eligible when the child is not Title IV-E eligible and/or the home is not licensed. In other receiving states a child, who is not Title IV-E eligible and/or the placement resulted in an ICPC violation, may be at risk of not receiving Medicaid. If a child is not Title IV-E eligible and the child is placed out-of-state, the caseworker is to notify the placement resource that they are to apply for Medicaid at the local Welfare office. Some states may request a court order with specific language to assist with applying for Medicaid and may request the order to be separate from the Child Welfare hearing orders (to avoid out-of-state system errors). Children who are Title IV-E eligible receive Medicaid in the receiving state as part of their Title IV-E eligibility, if the receiving state is aware the placement has occurred (100B submitted).

Parent Contact:

1. **Frequency:** It is the caseworker's responsibility to meet face-to-face with parents to ensure frequency is enough to monitor their progress in services, promote timely achievement of case goals, and effectively address their children's safety, permanency, and well-being needs.
 - a. The caseworker must make concerted efforts to meet face-to-face with parents monthly unless circumstances prevent the ability of the Agency to meet face-to-face with a parent.
2. **Quality:** The quality of visits between caseworkers and all parents is sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals.
 - a. When circumstances prevent face-to-face contact, the Agency must make concerted efforts to maintain monthly communication with the parent via telephone calls, text messages, letters, and e-mails. These efforts are to be documented into a UNITY case note.
 - b. The following individuals DO NOT qualify as a caseworker for parent contacts: facility staff, Juvenile Probation Offices (JPO), and service providers. These may be participants in safety planning and deferred to for gathering information for case planning and/or determining achievement of goals.
 - c. When parents are out-of-state (i.e. incarcerated, residency) the caseworker will ensure other methods of contact (i.e. e-mail, text, phone) are sufficient to maintain necessary communications.
 - d. Caseworkers are to complete formal and/or informal initial and ongoing assessments of the parent(s), identify the services necessary to achieve case goals (in some cases this may require development of separate case plans), adequately address the issues relevant to the Agency's involvement with the family, and provide the appropriate services.
 - e. Caseworkers are to ensure language is not a barrier during visits. The Child Welfare Agency is subjected to Title VI of the Civil Rights Act of 1964 and Title VI Regulations, which prohibits "discrimination based on national origin" and are required to provide language services for Limited English Proficiency (LEP) individuals. If barriers are identified, the parent is to be provided with resources, referrals, and/or services to alleviate any issues to ensure the safety, permanency, and well-being of the child(ren) and to ensure the parent(s) have access to the tools and resources to achieve case plan goals in a timely manner.
 - f. Apps can be used as a tool to assist with communicating with parent(s) when there is a lack of funds for a telephone, and they have access to a computer. Caseworkers are to follow all security awareness guidelines in place by the Child Welfare Agency.
 - g. **Trial Home Visits:** Caseworkers are responsible for educating the parent when Medicaid is

terminating, and they will need to apply for insurance for the child(ren). Trial home visits that last longer than six (6) months require a court order to extend the visit and include reasonable effort findings. If the courts do not authorize the extension, the IV-E eligibility must be re-established. If the child returns to foster care, a new court order is required to include language "Contrary to the welfare of the child".

Caregiver Contact:

1. **Frequency:** It is the caseworker's responsibility to visit the caregivers frequently enough to adequately assess their safety, promote timely achievement of case goals, and support their well-being.
 - a. Caseworkers must have at least monthly contact with caregivers; and
 - b. **Specialized Foster Care:** Caseworkers must have at least monthly contact with the case manager or the specialized/therapeutic foster care Agency.
2. **Quality:** The quality of visits between caseworkers and caregivers must be sufficient to ensure the safety, permanency, and well-being of the child(ren), identify the services necessary to achieve case goals, and identify caregiver needs to provide appropriate services.
 - a. Caseworkers must spend a portion of the contact alone with the caregiver if requested to do so by the caregiver; and
 - b. Caseworkers must identify any issues that may impact placement stability and provide solutions as appropriate.

Concerted Efforts:

1. **Child Contact:**
 - a. Contact service providers prior to child contacts to discuss child's progress;
 - b. Assess the child's adjustment to and well-being in caregiver's home. To include adjustment to caregiver family (including siblings), daily routine, parenting, house rules, discipline, and placement stability.
 - c. For non-verbal children (i.e. disabled, infant) the caseworker is recommended to interact with the child at a developmentally appropriate level and observe the caregiver's interaction with the child.
 - d. Visit with the child in a comfortable and age appropriate setting;
 - e. Caseworkers meet alone with each child during each visit without the caregiver(s) or parent(s) present. If the caseworker is visiting with a sibling group that is placed together, the caseworker must spend time with the sibling group together to observe the dynamics and interactions between siblings. The length and location of visits must be conducive to open, honest and thorough conversations.
 - f. When appropriate, considering the child's age and level of maturity, discuss with the child health, school, culture issues, emotional or social issues, placement and caretaker relations, quantity and quality of occurring visitations with family members, case plan and/or permanency plan, case plan goals and revisions, progress with case plan, and any problems, needs, and concerns.
 - g. Follow up on priorities and/or needs as identified in previous visits with the child(ren), caregiver, or parent and possible solutions/resources.
 - h. Inform child and caregiver or parent of upcoming events (appointments, team meetings, court, visits, etc.).
 - i. Determine if the child's health needs are being met on an ongoing basis; medical, dental, mental/behavioral health (appointments, medications, diagnosis, etc.) and obtain records for the file.
 - j. Assess child's developmental growth and milestones.
 - k. Determine child's educational progress and needs (school attending, grade level, pass/fail classes, attendance, Special Ed, a 504, etc.). Refer to the statewide policy [0204 Case Planning](#) for reference to the Educational Stability Guidelines.
 - l. Observation of home atmosphere and environment, including the child's sleeping area and

belongings.

- m. Ensure child is receiving appropriate supervision and that basic needs are met (i.e. food, clothing, water, shelter, heat, etc.).
- n. Identify significant changes within the household (well-being of relationships, changes in household composition, illness, changes in sleeping arrangements, house remodel, etc.) and assess for safety.
- o. Observe the parent/caregiver and child to gather information regarding family functioning.
- p. Determine if there are any outstanding medical or dental exams, psychological reports, report cards, or other critical documents not received.

2. Parent Contact

- a. Parent contact with the child may be restricted or limited by mental health professionals, medical professionals, and/or through an order of the court. All provisions supersede this policy.
- b. The caseworker must promote, support, and otherwise maintain a positive and nurturing relationship between the child and the parents by encouraging and facilitating activities and interactions that go beyond just arranging for visitation.
- c. Encourage parental participation in school-related activities, doctor appointments for the child, or engagement in after-school activities.
- d. Provide or arrange transportation so that parents can participate in activities with the child.
- e. Provide opportunities for therapeutic situations to strengthen the relationship.
- f. Encourage and facilitate communication with parents who do not live near the child and/or are unable to have frequent face-to-face visitation.
- g. Engage the parent(s) in the case planning process, to include participation in the Child and Family Team (CFT).
- h. Develop and maintain a good working relationship with the parent.
- i. Assess progress toward changes in parental protective capacities through change focused intervention.
- j. 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.

3. Caregiver Contact

- a. Assess the caregiver's needs in providing for the child to meet case plan goals.
- b. Provide any services based on assessment of needs and monitor service provision.
- c. Encourage caregivers to serve as mentors/role models for parents.
- d. Meet privately (alone) with caregiver(s) and discuss questions or concerns regarding the child.
- e. Identify any needs, requests, or support for caregiver (respite, support services, training, etc.) to address placement stability, normal childhood activities the child participates in, and address any requests that significantly change the child's appearance.
 - i. When parent's rights are intact, prior approval (written, verbal, etc.) must be obtained prior to changing a child's appearance. If the parent has not had contact with the Agency, despite reasonable efforts of the Child Welfare Agency, the supervisor may approve changes in the child's appearance.

Documentation: All caseworker contact notes must be entered in UNITY within five (5) business days of the contact. Refer to [FPO 0205A](#) how to enter case notes in UNITY to qualify as a federal caseworker contact. Information entered into UNITY should be professional opinions and fact-based information. Avoid documenting about the intimate lives or political, religious, or other personal views of (a) parent(s) or caregiver(s), unless this information is relevant to Child Protective Services (CPS) purposes, is negatively impacting the child, is a violation of a court order, or is not aligned with the case plan. Caseworker contact notes should also include:

1. The location where the caseworker contact occurred;
2. The frequency of contact between caseworker and parent, child, and caregiver;
3. The quality of contacts between the child, parent, and foster parent/caregiver to mitigate issues pertaining to the safety, permanency, and well-being and to identify the achievement of case goals.

JURISDICTIONAL ACTION

Development of Internal Policies: Each Jurisdiction is to ensure staff are educated and trained to complete tasks identified in this policy to implement this policy and ensure compliance.

Supervisory Responsibility: Supervisors must provide oversight to ensure caseworker contacts are occurring and to provide directives as necessary to track caseworker contacts.

1. When the caseworker normally assigned to the child is unable to complete a monthly contact with a child, the supervisor must arrange for an alternate caseworker to complete the monthly contact with the child. The alternate caseworker must be assigned, in UNITY, outlined in [FPO 0205A](#) and [FPO 0205B](#)

STATE RESPONSIBILITIES

1. DCFS to extract data through UNITY report (UNITY RPT7D7) to ensure the total number of contacts made by caseworkers monthly to children in foster care complies with federal standards during each fiscal year.
 - a. Target contact goal is 95% of the total number of such visits that would occur if each child were visited once every month while in care.
 - b. Failure to meet this benchmark results in federal penalties.
 - c. For specific information about how this report functions, refer to statewide [Monthly Federal Caseworker Contact Compliance Guide FPO0205B](#)
 - d. DCFS to provide exception reports to the Child Welfare Agency and Juvenile Justice Agency to assist with monitoring caseworker contacts for federal compliance.

POLICY CROSS REFERENCE

Policies: [0204 Case Planning Policy](#)
[0209 Psychiatric Care and Treatment](#)
[0211 Protective Capacity Family Assessment \(PCFA\) 0212](#)
[Protective Capacity Progress Assessment \(PCPA\) 0701](#)
[Statewide ICPC Policy](#)
[0801 Youth Independent Living Program](#)

History and Updates: This policy supersedes: 0205 and 0205A effective 6/20/2008 Caseworker Contact with Children, Parents and Caregivers and is effective as of 3/26/2018. ICPC information was revised and approved on 7/24/2019.

ATTACHMENTS

[FPO 0205A – UNITY CHEATSHEET/HANDOUT – Oversight Monitoring of Caseworker Contact to Ensure Federal Compliance](#)
[FPO 0205B – Monthly Federal Caseworker Contact Compliance Guide – UNITY Report](#)