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DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES
Helping people. It's who we are and what we do.



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MTL # 0212 – 6162022
06/16/2022

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POLICY DISTRIBUTION

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

0212 Protective Capacity Progress Assessment (PCPA)

This policy is/was effective: 06/09/2022

- 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): The frequency that a case plan must be updated was changed from every 90 days to every 6 months. This change documented on page 4 in PCPA timeframe section (d)(iii); page 8 under PCPA Debrief Meeting section (1)(c); page 9 under Revisions of the Case Plan section (1)(a) and (1)(d).
 - A policy form has been revised: (List form, page number and summary of change):

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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0212 Protective Capacity Progress Assessment (PCPA)

Policy Approval Clearance Record

<input type="checkbox"/> Statewide Policy	<input checked="" type="checkbox"/> New Policy
<input type="checkbox"/> Administrative Policy	<input type="checkbox"/> Modified Policy
<input type="checkbox"/> DCFS Rural Region Policy	<input type="checkbox"/> This policy supersedes:
Date Policy Effective:	07/24/2019
Attorney General Representative Review:	01/22/2019
DCFS Deputy Administrator Approval	07/24/2019
DMG Original Approval	07/24/2019
DMG Approved Revisions	N/A

STATEMENT OF PURPOSE

Policy Statement and Purpose: The PCPA is a comprehensive assessment process which evaluates the case plan goals developed/implemented during the Protective Capacity Family Assessment (PCFA). The PCPA's purpose is to encourage, support, and facilitate caregivers in the process of behavioral change which enhances their capacity to protect their children and reestablishes their role and responsibilities as the caregiver.

The PCPA tracks and measures progress toward case plan goal achievement (e.g. enhancement of diminished caregiver protective capacities, effectiveness of change-oriented services and improvement in child well-being) and continues to be used at scheduled intervals until the case is closed. The PCPA process is highly active as caseworkers support and facilitate change, arrange and monitor service provision, troubleshoot and resolve conflict, sustain family connections, assure safety management, and evaluate progress.

AUTHORITY

NAC: [NAC 432B](#)

NRS: [NRS 432B](#)

DEFINITIONS

Protective Capacity Progress Assessment (PCPA): An ongoing comprehensive assessment process that utilizes specific criteria to evaluate progress toward case plan goals. The PCPA assesses two (2) major areas to evaluate caregiver progress toward enhancing protective capacities: 1) specific indicators of change, and 2) caregiver readiness to change. The PCPA consists of information collection that occurs during change focused contacts and/or any meaningful contact with caregivers, family members, treatment providers and safety providers, analysis and measurement of progress toward achievement of case plan goals, and changes in behaviors and conditions.

Caregiver: Adults who have primary and/or daily responsibility for the supervision, care, and protection of a child in the family's home. This can include parents, stepparents, adoptive parents, relatives, companions of the child's parent, or any adult who is a member or associate of the family network, and is judged to have, and continues to have, responsibility for a child's supervision, care, and protection with respect to the child's place of residence or living situation. This definition does not include foster parents or relatives who are providing protection through a Safety Plan, such persons are considered safety service providers. Those alleged to have maltreated a child may be included as caregivers.

Change Focused Contacts: Process of engaging caregivers in change-based contacts in an objective and focused manner that utilizes Motivational Interviewing strategies that correspond with the caregiver's specific stage of change. This allows for the contact and conversations to engage the caregivers where they are at in their thoughts about the need to change and to bring about discrepancy between the

caregiver's current behaviors, thoughts and emotions and how they contribute to goal achievement. Change focused contacts support the worker in effective facilitation of change.

Motivational Interviewing: An evidenced based intervention that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior.

PCPA Preparation Contact: During the PCPA Preparation Contact the caseworker and caregivers discuss the purpose of the PCPA, determine the team members who will participate in the PCPA Meeting and the agenda items to inform and prepare the caregivers for the PCPA Meeting.

PCPA Meeting: During the PCPA Meeting the caseworker, caregivers and team formally discuss progress or barriers towards case plan goals, status of safety planning/Conditions for Return, and status of motivational readiness.

PCPA Debrief Meeting – The meeting held between the case worker and the caregiver(s) after the PCPA Meeting to debrief the PCPA meeting and update the case plan.

Reunification: The determination that sufficient caregiver behavior or family circumstance adjustment has occurred related to the identified Conditions for Return which allow for the implementation of an in-home safety plan.

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

Team Members: May include attorneys, CASA's, service providers, family members and any other participant that can contribute to enhance case goal attainment.

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

Protective Capacity Progress Assessment (PCPA)

1. The Protective Capacity Progress Assessment (PCPA) contacts and conversations should be changed focused and consist of:
 - a. Focused objectives and Motivational Interviewing strategies determined by the caseworker and supervisor in consultation prior to each contact with the caregiver in order to best engage caregivers and effectively facilitate change.
 - b. The caseworker will identify what progress the caregiver has made toward enhancing caregiver protective capacities.
 - c. Caseworkers will assess the client's motivational readiness by monitoring changes in behaviors and conditions.
 - d. Identify each child with health (medical, dental, and/or vision), mental health, behavioral and/or educational needs that requires direct, ongoing, and/or formal services above and beyond routine health care as part of the case plan.
 - e. The status of the Conditions for Return (CFR).
 - f. A PCPA meeting will be held initially within one hundred and twenty (120) calendar days after the conclusion of the PCFA and every ninety (90) days after the initial PCPA meeting until the PCPA Process is no longer required due to any of the following conditions: case closure, termination of parental rights or relinquishment, reunification is neither the primary or concurrent permanency goal. The PCPA meeting is held to discuss the progress and status of the case with the caregiver and with team members and plan the next steps of a case. Best practice is to schedule the following meeting at the conclusion of this meeting.
2. There are four (4) main assessment areas that are covered in the PCPA:
 - a. The extent to which caregivers are making progress related to case plan goal achievement is assessed (e.g. the enhancement of diminished caregiver protective capacities).

- b. Safety management is paramount to the PCPA. During the PCPA, permanency caseworkers and supervisors must reconfirm the sufficiency of safety plans. This involves determining the status of impending danger and completing a Safety Plan Determination (SPD) to ensure the safety plan is the least intrusive and most appropriate. In cases where the safety plan is out-of-home placement (foster care or kinship), determining the status of the CFR and whether it is possible to decrease the level of intrusiveness and reunify children with the implementation of an in-home safety plan.
- c. During the PCPA, permanency caseworkers assess and determine the current status of the motivational readiness of caregivers to change and/or participate in change-oriented services. The primary role of permanency caseworkers during intervention is to be facilitators of change. In order to be effective at facilitating change with caregivers, it is important that permanency caseworkers recognize the stage of change the caregivers are in at the point a PCPA is being completed and apply appropriate Motivational Interviewing strategies.
- d. Child's unmet needs.

Completing the PCPA with Caregivers

1. Permanency Caseworker Responsibilities:
 - a. Attempt to involve caregivers throughout the PCPA process.
 - b. Involve other team members and case participants in the PCPA process including the safety manager, family members, treatment service providers and safety services providers as appropriate.
 - c. Conduct a PCPA Preparation Meeting to prepare the caregivers for the PCPA Meeting. During the PCPA Preparation Meeting the caseworker and caregivers should determine the other team members who will participate in the PCPA Meeting and discuss agenda items in order to inform and prepare the caregiver for the upcoming meeting.
 - d. Conduct the PCPA Meeting using a solution focused and collaboration techniques focused on information, discussion, evaluation, and decision making. During the PCPA Meeting the team should discuss their impressions regarding the progress of the case, any areas of agreement or disagreement, progress toward achieving case plan goals, service provisions and caregiver participation in services, child(ren)'s needs, and continued safety plan sufficiency.
 - e. Conduct the PCPA Debrief Meeting to provide caregivers information and decisions from the PCPA Meeting including case status information; feedback from other participants in the case; and changes in the case plan, the safety plan, and other care or intervention decisions.
2. Permanency Supervisor Responsibilities:
 - a. Provide support and assistance to the caseworker in engaging caregivers with the PCPA process.
 - b. Document any case staffing as a 'PCPA SUPERVISION' (PCPASUPCONSULT) UNITY case note type within five (5) business days of the staffing.

PCPA Timeframes

1. Permanency Caseworker Responsibilities:
 - a. Caregiver contacts are required during the PCPA process at a frequency determined by the Agency. The initial PCPA Meeting must be completed within one hundred and twenty (120) calendar days from the conclusion of the PCFA.
 - b. Ongoing PCPA Meetings are required:
 - i. At a minimum every ninety (90) days, until the PCPA Process is no longer required due to any of the following conditions: case closure, termination of parental rights or relinquishment, reunification is neither the primary or concurrent permanency goal.
 1. The supervisor may extend the due date, not to exceed one hundred twenty (120) days from the last PCPA, of the next PCPA to align with the court report due date.
 - ii. When evaluating the Conditions for Return and returning a child home; and
 - iii. Prior to recommending a case for closure.
 - c. A PCPA Meeting should be completed:

- i. When there are significant changes to the family circumstances, including but not limited to changes in household members, progress measurement, case plan revisions, or safety plan revisions that would warrant review or revision.
 - ii. When there are possible changes to or newly emerging impending danger threats.
 - iii. When there are opportunities to reduce the level of intrusiveness of the Safety Plan
 - d. During the PCPA Preparation Meeting, the caseworker advises the caregiver that the next meeting is devoted to evaluating progress, case planning, and safety planning.
 - i. This contact may be in person or by telephone
 - ii. All PCPA scheduling attempts must be documented in UNITY case notes.
 - iii. After a PCPA is completed, updates to the case plan should be made when a significant event has occurred; there are significant changes to the services needed by the family or child; or it has been six (6) months since the last case plan update.
 - e. The caseworker facilitates the PCPA Meeting. This contact should occur in person, must involve caregivers when they are available, and may include others who are involved with the case.
 - i. The choice about who is involved in the PCPA Meeting is based upon the caregiver's preference.
 - ii. The PCPA Meeting must be documented in UNITY case notes within five (5) business days of the meeting.
2. Permanency Supervisor Responsibilities:
 - a. Ensure the caseworker meets the required timeframes of the PCPA.
 - b. Assist the caseworker in determining if the case requires a PCPA Meeting prior to the next scheduled interval and provide approval if determined it is appropriate.
 - c. Document any case staffing as a 'SUPERVISOR' UNITY case note time within five (5) business days of the staffing.

Supervisory Waiver of PCPA

1. Each jurisdiction will follow their own internal policy regarding supervisory waivers during a PCPA (for example a PCPA Meeting occurred within the last forty-five (45) days and current circumstance was included in the conclusion of this PCPA UNITY window). Any supervisory waiver must be documented in UNITY case notes, within five (5) business days.
2. A PCPA Meeting may not be required if, during the PCPA period, the caregiver's whereabouts are unknown. The caseworker must make concerted efforts to locate the caregiver.
 - a. When a caregiver's whereabouts are unknown, the caseworker must staff with the supervisor at least thirty (30) calendar days before the PCPA is due to determine if a PCPA should be completed.
 - b. If, during the PCPA period, the caregiver's whereabouts are unknown, a supervisor must document in a 'SUPERVISOR' UNITY case note type within five (5) business days indicating that a PCPA is not required. The case note must include the following:
 - i. Attempts that have been made to locate the caregiver.
 - ii. Attempts that are going to be made to locate the caregiver.
 - iii. Preliminary plan for completing the PCPA upon locating the caregiver.

Caseworker and Supervisor Consultation during the PCPA

1. Permanency Caseworker Responsibilities:
 - a. Schedule and attend consultation with the supervisor prepared with information and potential actions to staff regarding PCPA decision-making and planning for the PCPA Meeting.
 - b. Consistently evaluate the case status, case progress, emerging issues, and those involved in the case to determine whether a PCPA Meeting needs to occur prior to the minimum timeframe.
 - i. Conducting a PCPA Meeting prior to the minimum timeframe may be based upon:
 1. Changes in impending danger or caregiver protective capacities;
 2. Compliance with CFR;
 3. People leaving or moving into the home/family;
 4. Opportunities to reduce the level of intrusiveness of the safety plan;

5. Opportunities for reunification;
 6. A need for change of the case plan;
 7. Change in the status of treatment service providers or safety service providers;
- c. Prepare and submit a draft of the PCPA document prior to PCPA consultation.
2. Permanency Supervisor Responsibilities:
- a. Attend supervisor consultation sessions related to the PCPA and achieve the following objectives:
 - i. Confirm PCPA decision making.
 - ii. Ensure that all relevant sources of information have been included to update the PCPA document.
 - iii. Assist the caseworker in measuring progress toward the achievement of case plan goals.
 - iv. Ensure that children's needs are being addressed.
 - v. Ensure that safety plans are sufficient and least intrusive.
 - vi. Assist the caseworker in planning how best to involve caregiver in the PCPA process.
 - vii. Approve PCPA decisions, including the continued appropriateness of the case plan and permanency goal.
 - b. Prior to a PCPA consultation, review any available PCPA documentation and case notes and prepare for any coaching issues to be addressed during the consultation.
 - c. During consultation review each section of the PCPA document and evaluate the following:
 - i. Review the general status of the case, and debrief most recent contact with caregivers including:
 1. Status of caseworker-caregiver working relationship.
 2. Confirming the caregivers are informed of any upcoming PCPA Meeting.
 - ii. Case plan goals continue to be relevant with respect to the status of impending danger and identify what must change:
 1. Review justification for measurement of progress.
 2. Confirm sufficiency of information sources to justify decision-making, including treatment and safety service providers, family members and others.
 3. Apply criteria for determining progress.
 4. Ensure the case plan goals continue to be relevant for addressing impending danger.
 5. Confirm current status of caregiver stage of change related to making changes.
 - iii. Effectiveness and suitability of case plan treatment service providers:
 1. Review current status of treatment services.
 2. Discuss caseworker's perception regarding the effectiveness of treatment services on influencing change.
 3. Discuss caregiver's perception regarding treatment services.
 4. Consider any need for adjustment to treatment services.
 - iv. Confirm sufficiency of safety plans:
 1. Discuss CFR and determine feasibility for proceeding with an in-home safety plan.
 2. If applicable, discuss the initiation of efforts to begin planning for the development of an in-home safety plan.
 3. Determine what planning for developing an in-home safety plan needs to occur during the PCPA Meeting (as applicable), to include an appropriate transition plan to meet the needs of the child(ren), caregiver(s) and out-of-home provider family.
 4. Confirm that current placement setting continues to be a safe environment (DCFS and CCDFS only).
 5. Discuss any necessary adjustments to in-home safety plans (as applicable).
 - v. Confirm that children's needs are being addressed:
 1. Discuss last contact with the children.
 2. Determine current status of children's needs.
 3. Discuss any ongoing or necessary services for children.
 4. Discuss any necessary adjustments to services for children.

5. Confirm the need to pursue services for children.
- vi. Confirm the appropriateness of the permanency goal; need for concurrent permanency goal.
- vii. Prepare for the PCPA Meeting:
 1. Confirm when the PCPA Meeting is scheduled to be held.
 2. Consult with the caregiver to determine who is participating or has been invited to participate in the PCPA Meeting.
 3. Discuss caregiver's understanding of the purpose for the PCPA, and their anticipated reaction to the meeting.
 4. Strategize how the PCPA decision-making will be discussed with caregivers:
 - a. Identify any anticipated challenges to facilitating the PCPA Meeting.
 - b. Identify approaches for addressing facilitation challenges.
 - c. Identify approaches for addressing caregiver resistance.
 - d. Identify any specific questions and/or issues that need to be addressed during the PCPA Meeting.
 - e. Determine specific practice objectives for attempting to facilitate change as a result of the PCPA Meeting.
- viii. Case Closure
- d. Document the following items covered during supervisor consultation for PCPA in a 'SUPERVISOR' UNITY case note type within five (5) business days of each consultation/staffing:
 - i. Review of the PCPA process with caseworker.
 - ii. Guidance provided regarding who should be included as participants in the PCPA Meeting.
 - iii. Guidance provided on how to facilitate the progress to further promote change focus intervention and/or address caregiver resistance or lack of progress (e.g. caregiver believes they are making progress, but only minimal progress is being achieved).
 - iv. Issues associated with addressing children's needs (as applicable).
 - v. Guidance provided regarding necessary changes related to safety management.

PCPA Preparation Contact

1. Permanency Caseworker Responsibilities:
 - a. Prior to the PCPA Meeting, the caseworker should advise the caregiver that the next meeting (the PCPA Meeting) is devoted to evaluating progress, case planning, and safety planning.
 - b. Arrange for the PCPA Meeting to be in person, when possible, and involve caregivers in determining who attends. Individuals who are invited should support, encourage and motivate change for the caregiver. Individuals the caregivers are opposed to attending the meeting must not be invited to attend. The decision about who participates in the PCPA Meeting may be based upon:
 - i. Caregiver preference and concerns;
 - ii. Consensus about who can best contribute to the PCPA decisions;
 - iii. Those who have special information, interests, or resources to offer to the PCPA Meeting and decisions;
 - iv. Persons whose commitments or involvement are necessary in order to pursue continuing case plan efforts;
 - v. Persons who may possess special standing, roles, or responsibilities in relationship to the caregivers, family members, children within the case generally or specific to the case plan.
 - c. The following are people that may be included in the PCPA Meeting:
 - i. Caregivers;
 - ii. Permanency Supervisor;
 - iii. Safety Manager;
 - iv. Treatment Service Providers;
 - v. Safety Service Providers;
 - vi. Children (as appropriate);
 - vii. Other Family Members;
 - viii. Attorney's and/or CASA;
 - ix. Out-of-home Caregivers; and

- x. People who the parents indicate have an interest in participation.
 - d. When participants cannot be there it is desirable to include their input provided verbally or in written form. This is for any professional or non-professional person who has responsibility for and participates in the implementation of the case plan.
 - e. Schedule the PCPA Meeting with availability of parties to be included. Preference should be given to the caregiver's schedule. Best practice indicates the next PCPA Meeting should be scheduled before the conclusion of the current PCPA Meeting
 - f. A draft of the Protective Capacity Progress Assessment (PCPA) UNITY Screen, must be completed prior to and in preparation for the PCPA Meeting.
 - g. On the Protective Capacity Progress Assessment (PCPA) document the caseworker must apply:
 - i. PCPA Measurement Criteria to assess and draw conclusions about progress toward case plan goal achievement:
 - 1. No Progress
 - 2. Minimal Progress
 - 3. General Progress
 - 4. Significant Progress
 - 5. Goal Achievement
 - ii. Jurisdictions will follow internal protocols when addressing the Unmet Needs Criteria to determine the extent to which a child's needs are being addressed. There are four (4) need categories to assess:
 - 1. Medical
 - 2. Mental Health
 - 3. Behavioral
 - 4. Educational
 - iii. Case Plan Measurement Criteria to evaluate case plan effectiveness:
 - 1. Poor
 - 2. Fair
 - 3. Good
 - iv. The stages of change concept throughout the PCPA process and reach conclusions at the PCPA Meeting.
 - h. Document any actions in the applicable UNITY case note type with five (5) business days for the action.
2. Permanency Supervisor Responsibilities:
- a. Ensure the caseworker completes the PCPA Preparation Meeting.
 - b. Document any case staffing as a 'PCPA SUPERVISION' UNITY case note type within five (5) business days of the staffing.

PCPA Meeting

1. Permanency Caseworker Responsibilities:
- a. Conduct the PCPA Meeting face-to-face with each caregiver when they are available.
 - b. Assess the status of impending danger, the sufficiency of safety plans, CFR, and the least intrusive method for assuring safety.
 - c. Achieve the purposes of the PCPA:
 - i. Regulate the case plan facilitation process.
 - ii. Ensure sufficient safety management.
 - iii. Ensure the case plans are working effectively.
 - iv. Ensure the safety plan is working effectively.
 - v. Involve parents and provide constructive feedback concerning permanency services.
 - vi. Determine the appropriateness of the permanency goal.
 - vii. Determine the achievement of case plan goals.
 - viii. Determine if the children's needs are met.
 - ix. Evaluate whether case outcomes have been achieved.
 - d. Review of the purpose and objectives of the meeting with caregivers.
 - e. Provide a general overview of case activity since the PCFA or last PCPA was completed.
 - f. Review of case plan goals and discussion regarding measurement of progress.
 - g. Conclusions and Next Steps.

- h. Update the drafted Protective Capacity Progress Assessment (PCPA) document, located in UNITY, following the conclusion of each PCPA Meeting and prior to the PCPA Debrief Meeting.
 - i. Document the PCPA Meeting in a 'PARENT CONTACT' UNITY case note type within five (5) business days of the meeting.
2. Permanency Supervisor Responsibilities:
 - a. Ensure that the caseworker completes purposes, objectives, and decisions of the PCPA Meeting.
 - b. Attend the PCPA Meeting and provide support, guidance, and direction as needed.
 - c. Review and approve the Protective Capacity Progress Assessment (PCPA) UNITY window within five (5) business days of submittal.
 - d. Document any case staffing as 'PCPA SUPERVISION' UNITY case note type within five (5) business days of the staffing.

PCPA Debrief Meeting

1. A PCPA Debrief Meeting occurs following the PCPA Meeting as part of the next change focused contact. The objectives of the PCPA debrief contact is to:
 - a. Debrief the PCPA Meeting, ensuring caregivers understand what occurred at the meeting;
 - b. Confirm PCPA decisions;
 - c. Update the case plan when changes are warranted;
 - d. Confirm changes in the safety plan and safety management; and
 - e. Seek renewed involvement and commitment by caregivers.
 - f. The conclusion must be documented as a 'PARENT CONTACT' UNITY case note type within five (5) business days of the contact.

Conditions for Return (CFR) and Reunification

1. Permanency Caseworker Responsibilities:
 - a. During the PCPA process, evaluate CFR and determine whether children who are placed in substitute care may be safely reunified with their parents by utilizing an in-home safety plan.
 - b. If it is determined during the PCPA process that CFR have been met, consult with the supervisor.
 - c. Establish well-defined circumstances within a child's home that establish an in-home safety plan and manage impending danger for a child to be reunified with their family.
 - d. Determine in-home safety plan provider suitability.
 - e. Assess circumstances and behavior that allow the use of an in-home safety plan, as outlined in Safety Plan Determination Analysis A including:
 - i. Does the child's primary caregiver(s) have a suitable place to reside where an in-home Safety Plan can be considered?
 - ii. Is there confidence in the sustainability of the Safety Plan in the current location of the caregivers?
 - iii. Is the home environment consistent enough to allow safety services in accordance with the Safety Plan, and for people participating in the Safety Plan to be in the home safely without disruption?
 - iv. Are the primary caregivers cooperative with CPS; and willing to participate in the development of the in-home Safety Plan?
 - v. Are the primary caregivers willing to allow safety services and actions to be provided in accordance with the Safety Plan?
 - vi. Do the primary caregivers possess the necessary ability/capacity to participate in an in-home Safety Plan and do what they must do as identified in an in-home Safety Plan?
 - vii. Are there sufficient resources within the family or community to perform the safety services necessary to manage the identified Impending Danger threats?
 - f. When it is determined that an in-home safety plan is appropriate, complete a draft safety plan to transition the family to an in-home safety plan prior to the PCPA Meeting.
 - g. During the PCPA Meeting, plan and arrange to finalize an in-home safety plan.

- h. In many instances, it may not be possible to arrive at a detailed, implementable in-home safety plan during the PCPA Meeting. Any appropriate and agreed upon in-home safety plan must be implemented as soon as possible. Concerted efforts must be made to have an in-home safety plan prepared for implementation within three (3) business days to one (1) week following the PCPA meeting.
 - i. Transition planning for determining reunification timeframes must be specifically designed to meet the child(ren)'s and caregiver's best interests and take into consideration the out-of-home care provider's family. Supervisory approval is required if family circumstances are such that implementation of an in-home plan extends beyond this timeframe.
 - i. Once a child is reunified with their family, have face-to-face contact with the parent and the child within five (5) business days. Assess child safety, respond to immediate needs, and evaluate and adjust the in-home safety plan as needed.
 - j. Once the in-home safety plan has been confirmed to be sufficient to control identified impending danger threats, continue safety management efforts.
 - k. Document the contact in a 'CHILD CONTACT' and 'PARENT CONTACT' UNITY case note type within five (5) business days of the contact.
2. Permanency Supervisor Responsibilities:
- a. Staff the case with the caseworker to review the CFR and determine if they have been met. Approve appropriate safety plans and ensure they are implemented as designed for transition to an in-home safety plan.
 - b. Ensure that any required follow-up contacts are completed by the caseworker within the required timeframe.
 - c. Staffing with caseworker for continued monitoring and support ongoing safety management efforts.
 - d. Ensure documentation is input into UNITY by the caseworker and document any case staffing as a 'PCPA SUPERVISION' UNITY case note type within five (5) business days of the staffing.

Revision of Safety Plans

1. Permanency Caseworker Responsibilities:
 - a. Revisions must be made to safety plans within three (3) business days from the PCPA Meeting.
 - b. When a safety services provider is involved in safety management, they must be included in the revisions of the safety plan.
 - c. Revisions to safety plans require the approval of a permanency supervisor.
 - d. Complete in-person contact with parents, children, and safety plan participants within one (1) week after implementing the revised safety plan.
 - e. The safety plan in UNITY must be revised as determined from supervisory staffing or PCPA Meeting within five (5) business days.
2. Permanency Supervisor Responsibilities:
 - a. Review any submitted safety plan revisions from the caseworker.
 - b. Approve revised safety plans and ensure they are sufficient and implemented as designed.
 - c. Ensure that any required follow-up contacts are completed by the caseworker within the required timeframe.
 - d. Ensure documentation is input by the caseworker and document any case staffing as a 'PCPA SUPERVISION' UNITY case note type within five (5) business days of the staffing.

Revisions of the Case Plan

1. Permanency Caseworker Responsibilities:
 - a. Within five (5) business days following the PCPA Meeting, complete any revisions to the case plan, if warranted. If there are no changes to case plan goals or services. The case plan must be updated at least every six (6) months.
 - i. Adjustment and revisions include:
 1. Confirming any changes in case plan participants.

2. Treatment services being provided.
 3. Level of effort for treatment services.
 - b. Once the case plan has been revised, ensure that all case participants are informed of the changes, attempt to obtain caregiver signatures on the updated case plan, and provide a copy of the updated case plan to caregivers with five (5) business days of the revision.
 - c. Jurisdictions will follow internal protocols in regard to any revisions to the case plan and updating the court.
 - d. At a minimum, revisions of the case plan that require court approval will be completed every six months at the court hearings; updates to the case plan after a PCPA meeting will be done as least every **six (6) months**, if applicable.
2. Permanency Supervisor Responsibilities:
- a. The supervisor must review and approve the revisions to the case plan prior to distribution to case plan participants.
 - b. Ensure that all required follow-up contacts are completed by the caseworker within the required timeframe and the caregivers are provided copies of the updated case plan.
 - c. Ensure the updated case plan is approved by and/or filed with the court, as deemed necessary.
 - d. Ensure documentation is input into UNITY by the caseworker. Document any case staffing as a 'PCPA SUPERVISION' UNITY case note type within five (5) business day of the staffing.

Changing the Permanency Goal

1. When PCPA conclusions indicate the lack of a parent’s progress toward achieving case plan goals and enhancing caregiver protective capacities, consult with the supervisor regarding changing the child’s primary permanency goal from reunification to another option (refer to statewide policy [0204 Case Planning](#)). At the next court hearing, the Agency will recommend any changes to the permanency goal for the court’s review and decision.

Case Closure

1. Close the case when a conclusion is reached during a PCPA Meeting that the children are safe.
 - a. The case plan goals have been achieved and there are no impending danger threats, and/or caregivers have sufficient caregiver protective capacities to ensure a safe home environment;
 - b. The child(ren) is/are safe with an alternative permanency plan; or
 - c. The case is being closed for reasons other than the caregiver’s achievement of case plan goals.

Timeline:

Requirement	Deadline	Starting Date	Responsible Party	Actions to be Taken
Initial PCPA Meeting	120 calendar days	From the conclusion of the PCFA	Caseworker	Meeting with the caregiver
Ongoing Meeting	Every 90 days	Subsequent to the initial PCPA	Caseworker	Conducting caregiver meetings and updating the PCPA document

Documentation:

Case File Documentation (paper)

File Location	Data Required
<ul style="list-style-type: none"> • Location in primary file 	<ul style="list-style-type: none"> • Signed case plan • Signed safety plans

UNITY Documentation (electronic)

Applicable UNITY Screen	Data Required
<ul style="list-style-type: none"> • COM070 	<ul style="list-style-type: none"> • Document the contact in a 'CHILD CONTACT' and 'PARENT CONTACT' UNITY case note type within five (5) business days of the contact. • Document any case staffing as a 'PCPASUPCONSULT' UNITY case note type within five (5) business days of the staffing.

JURISDICTIONAL ACTION

Development of Internal Policies: Jurisdictions shall develop internal policies and procedures as necessary to implement the provisions of this policy.

Supervisory Responsibility: Provide guidance and direction to caseworker completing the PCPA process as needed. Ensures the caseworker completed the PCPA within the allotted timeframes and provides oversight to ensure safety and case plans are sufficient and least intrusive. Must review and approve/deny all Protective Capacity Progress Assessments (PCPA) and document staffing with caseworker and a 'PCPA SUPERVISION' case note type in UNITY, ensuring all supervisory responsibilities identified throughout this policy are being completed.

STATE RESPONSIBILITIES

The State will provide technical assistance regarding program development and implementation to the Child Welfare Agencies.

POLICY CROSS REFERENCE

Policies: [0204 Case Planning](#)

History and Updates: This is a new policy.

ATTACHMENTS

FPO 0212A – Statewide Protective Capacity Progress Assessment
 FPO 0212B – Statewide CSE Instrument