

	<b>INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY</b>	
	<b>Chapter 5:</b> General Case Management	<b>Effective Date:</b> July 1, 2019
	<b>Section 02:</b> Gathering Case Information	<b>Version:</b> 4

## STATEMENTS OF PURPOSE

The Indiana Department of Child Services (DCS) will gather as much information as possible about the child and the family to assist in completing a thorough assessment of the [functional strengths](#) and [underlying needs](#) of the family, including identification of child and family supports and connections. Information will be gathered as soon as possible and efforts will continue throughout the life of the case. This information will be used when identifying and conducting a diligent search for all adult relatives (including adult siblings), developing the [Case Plan/Prevention Plan \(SF 2956\)](#), planning for services, and establishing eligibility for federal funding. See policies, [5.08 Developing the Case Plan/Prevention Plan](#) and [15.1 Title IV-E Foster Care \(Overview\)](#) and the [Family Functional Assessment \(FFA\) Field Guide](#) for additional information.

### Code References

[IC 31-34-19-7 Placement of child; relative; evaluation; background checks](#)

## PROCEDURE

The Family Case Manager (FCM) will:

1. Collect pertinent information, including provider reports as soon as possible and throughout the life of the case:
  - a. [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114\) \(310\)](#),
  - b. [Assessment of Alleged Child Abuse or Neglect Report \(SF 113\) \(311\)](#),
  - c. Safety Assessments,
  - d. Risk Assessments,
  - e. Child and Adolescent Needs and Strengths (CANS) assessment,
  - f. All assessment and case notes, photographs, and recordings,
  - g. Educational information,
  - h. Services in which a parent or caregiver participates,
  - i. [Medical Passport \(DCS PAM 036\)](#),
  - j. Family Network Diagram. See [5.B Tool: Family Network Diagram Instruction Guide](#) for more information; and
  - k. Documentation for determining eligibility for federal funding. See policy [15.1 Title IV-E Foster Care \(Overview\)](#) for additional information.
2. Record all pertinent contacts and information pertaining to the assessment and permanency case in the case management system;
3. Analyze all information as it pertains to the safety, stability, permanency, and well-being of the child and discuss the information with the FCM Supervisor during regular [clinical supervision](#);

**Note:** Any new allegations of Child Abuse or Neglect (CA/N) must be reported to the DCS Child Abuse Hotline (Hotline). See [Practice Guidance](#) and policy [4.38 Assessment Initiation](#) for more information.

4. Update the [Safety Plan \(SF 53243\)](#) and/or [Plan of Safe Care \(SF 56565\)](#), as needed. See policies, [4.19 Safety Planning](#), [4.42 Plan of Safe Care](#) and [5.21 Safety Planning](#) for further guidance;
5. Provide a summary of all pertinent information to the Child and Family Team (CFT), for the purpose of developing or updating the [Case Plan/Prevention Plan \(SF 2956\)](#) to meet the needs of the child and family. See policies [5.07 Child and Family Team Meetings](#) and [5.08 Developing the Case Plan](#) for more information; and
6. Complete needed Service Referrals in KidTraks and ensure all relevant information is included in the referral. See policy [5.10 Family Services](#) for more information.

The FCM Supervisor will:

1. Ensure all pertinent information is gathered and entered or updated in the case management system case record;
2. Review all information as it pertains to safety, stability, permanency, and well-being during [clinical supervision](#) with the FCM;
3. Review and discuss any changes that may be necessary to the [Safety Plan \(SF 53243\)](#) and/or [Plan of Safe Care \(SF 56565\)](#);
4. Ensure the family's service needs are met by reviewing the [Case Plan \(SF 2956\)](#) with the FCM and discussing any changes in services that may be necessary.

## **PRACTICE GUIDANCE**

### **Use of the Family Functional Assessment (FFA) Field Guide**

The FCM may utilize the [FFA Field Guide](#) for suggested questions to assist in gathering the parent, guardian, or custodian's [functional strengths](#) and [underlying needs](#). DCS will utilize the family's [functional strengths](#), along with assessed [protective factors](#), to assist in the identification of informal and formal support systems that may decrease the possibility of future risk of (CA/N). Over time, the parent, guardian, or custodian's [functional strengths](#) should increase with the completion of identified services, which address [underlying needs](#). Each case should be evaluated independently based upon its own unique conditions.

### **Family Network Diagram**

The Family Network Diagram is a tool that combines the Ecomap and Genogram to provide valuable information on genealogy and community resources available to the family. The use of this tool recognizes the family as the most knowledgeable source of information see [5.B Tool: Family Network Diagram Instruction Guide](#) for more information.

**Note:** A Permanency and Practice Support (PPS) referral to the [DCS Investigators](#) may be made via KidTraks if additional assistance is needed in locating absent parents, relatives, and/or other identified persons of interest in the case.

### **Initiation of an Assessment Prior to Reporting the Allegations of CA/N to the DCS Hotline**

When an FCM becomes aware of new CA/N allegations while on the scene and immediately (i.e., prior to leaving the scene) initiates an assessment, the FCM will report the allegations to the DCS Hotline within 24 hours of leaving the scene. An assessment is considered initiated

upon face-to-face contact with **all** alleged child victims. See policy [4.38 Assessment Initiation](#) for additional information regarding initiation.

**Note:** If the FCM is unable to ensure safety through face-to-face contact with one (1) or more victims prior to leaving the scene, the FCM must report the allegations to the DCS Hotline immediately.

**All new allegations of CA/N must be reported to the Hotline, per State reporting statutes, and may not be handled as part of the case.** See policy, [4.36 Linking Child Abuse or Neglect \(CA/N\) Reports to Open Assessments](#) for more information regarding the receipt of an additional 310 during an open assessment.

The FCM must specify in the report to the Hotline that the assessment has already been initiated. The exact date and time the FCM became aware of the allegations and initiated the assessment must also be specified. The FCM may report the new allegations to the Hotline by emailing or faxing the completed [310](#) form, emailing equivalent information (e.g., time initiated, parent names, child victim names, description of concerns, etc.), or by calling to report equivalent information. The [310](#) or equivalent information may be submitted via email to: [DCSHotlineReports@dcs.in.gov](mailto:DCSHotlineReports@dcs.in.gov), via fax to: 317-234-7595 or 317-234-7596, or via phone to: 1-800-800-5556.

### **Areas of Assessment**

An Assessment is an ongoing process that occurs at every interaction with the family. Throughout the life of the case, the FCM will strive to assess the [functional strengths](#) and [underlying needs](#) for each family member in the following areas:

1. Safety;
2. Well-being, for example: physical health, mental health, learning and development, as well as self-identified issues surrounding sexual orientation and/or gender identity;
3. Domestic violence;
4. Sexual abuse;
5. Living conditions, including the location of incarcerated parents;
6. Finances and employment;
7. Education;
8. Formal and informal supports available to caregivers;
9. Resources available to the family;
10. Interaction between caregivers and child(ren);
11. Academic or developmental level of the child(ren) and the parent, guardian, or custodian;
12. Relationship between adult caregivers and child(ren);
13. Recent losses;
14. Substance use challenges;
15. Stability and transitions; and
16. Permanence

As the FCM is gathering case information from the family and service providers, the most accurate and up-to-date information should be documented in the case management system. For example, if an item can be scanned into the case management system, it does not need to be saved in the hard file. The following details are needed regarding persons living in the household of the removed child:

1. The relationship of household members to the removed child;
2. Sources and amount of income for each household member in the month of removal;

3. Each parent's place of residence in the month of removal;
4. Each parent's employment status; and
5. Any significant physical or mental illness(es) of one (1) or both parents that would prevent the parent from providing care and support to the child.

**Note:** These details may be used to determine a child's eligibility for Title IV-E Foster Care, Title IV-E waiver, and/or Title IV-A Emergency Assistance. [Title IV-E and Title IV-A/EA Information \(SF 55435\)](#) can be used to document information needed for the Title IV-E and/or Title IV-A Emergency Assistance determination.

### **Engagement with the Incarcerated Parent**

The [Incarcerated Parent Letter – Assessment](#), [Incarcerated Parent Letter – Permanency](#), [Incarcerated Parent Demographics \(SF 56538\)](#), and [Incarcerated Parent Information \(SF 56539\)](#) have been developed for use as tools for contact with incarcerated parents and for gathering information. These forms do not replace appropriate engagement and regular contact with the parents.

## **FORMS AND TOOLS**

1. [Family Functional Assessment Field Guide](#) – Available on the Indiana Practice Model SharePoint
2. [Service Referral](#) – Available in KidTraks
3. [Case Plan \(SF 2956\)](#) – Available in the case management system
4. [Preliminary Report of Alleged Child Abuse or Neglect \(SF 114\) \(310\)](#) – Available in the case management system
5. [Assessment of Alleged Abuse or Neglect Report \(SF 113\)\(311\)](#) – Available in the case management system
6. [Medical Passport \(DCS PAM 036\)](#) – Available in hard copy
7. [Initial Safety Assessment](#)-Available in the case management system
8. [Initial Family Risk Assessment](#)-Available in the case management system
9. [Title IV-E and Title IV-A/EA Information \(SF 55435\)](#)
10. [Plan of Safe Care \(SF 56565\)](#)
11. [Incarcerated Parent Letter-Assessment](#)
12. [Incarcerated Parent Letter-Permanency](#)
13. [Incarcerated Parent Demographics \(SF 56538\)](#)
14. [Incarcerated Parent Information \(SF 56539\)](#)
15. [Safety Plan \(SF 53243\)](#)
16. [5.B Tool: Family Network Diagram Instruction Guide](#)

## **RELATED INFORMATION**

### **Functional Strengths**

Functional strengths are 'the buildable' strengths of our families; they help us build toward goal achievement. Exploring those strengths beyond the surface level provides a great deal of information when trying to match the strength (asset) to meet a need in the planning process. For example, saying someone is good at soccer doesn't provide much to work with; however, identifying that they are able to participate in group activities, follow directions from a leader and the ability to work towards a clear goal, are strengths that may be utilized to meet the family's goals.

### **Underlying Needs**

Underlying needs are the root source of an individual and/or family's challenges. An underlying need determines the appropriate use of services or interventions. In order to identify the underlying need, the question of what does the family need or what needs to change in order to achieve the family's outcomes should be answered. The FCM will assist the family and the team to identify these needs.

The ability to identify an underlying need is a crucial step in engaging a family and promoting safety, permanency, and well-being. We address underlying needs so that we understand the root of the problem and are able to provide accurate/effective services to address the needs. This method supports safe sustainable case closure. See policies [7.5 Meaningful Contacts](#) (In-Home) or [8.43 Meaningful Contacts](#) (Out-of-Home) for more information.

### **Clinical Supervision**

Clinical Supervision is a process in which an individual with specific knowledge, expertise, or skill provides support while overseeing and facilitating the learning of another individual.

**Example:** The focus of clinical supervision is on the practice that directly impacts outcomes for families.

### **Protective Factors**

Protective factors are characteristics in families that, when present, increase the safety, stability, permanency, and well-being of children and families. Protective factors are directly connected to the strengths of the family and can be used as a resource to learn new skills and solve problems. The FCM should consider the following protective factors when working with children and families:

1. Nurturing and attachment;
2. Knowledge of parenting and of child and youth development;
3. Parental resilience;
4. Social connections;
5. Concrete supports for the parents; and
6. Social and emotional competence of children

See <https://www.childwelfare.gov/topics/preventing/promoting/protectfactors/> for additional information.

### **DCS Investigators**

DCS Investigators are employees of DCS who are responsible for assisting FCMs in locating absent parents, relatives, and/or other identified persons of interest to the case and/or assessment. FCMs may make a referral for this assistance in situations where all procedural steps have been completed and their efforts have been unsuccessful. Additional information regarding how to make a referral, when to make a referral, and other helpful information can be found on the [Permanency and Practice Support-Investigator](#) website.