



## INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY

**Chapter 05:** General Case Management

**Section 10:** Family Services

**Effective Date:** October 1, 2021

**Version:** 10

- [Procedure](#)
- [Definitions](#)

- [Forms and Tools](#)
- [Related Policies](#)

- [Legal References](#)
- [Practice Guidance](#)

### POLICY OVERVIEW

Family services are provided to all children and families with an open case to address identified needs.

[Back to Top](#)

### PROCEDURE

The Indiana Department of Child Services (DCS) will engage the Child and Family Team (CFT) to identify services to meet the needs of the child and family and develop a Program of Informal Adjustment/Prevention Plan or a Case Plan/Prevention Plan (see policies 5.07 Child and Family Team Meetings, 5.08 Developing the Case Plan, and 5.09 Informal Adjustment/Prevention Plan).

**Note:** An incarcerated parent may have access to and receive services and/or treatment while incarcerated. DCS will discuss and document any services and/or treatment available to the incarcerated parent, including visitation, in the Case Plan/Prevention Plan.

DCS will reassess the strengths and needs of the child and family throughout the life of the case and will adjust services, if necessary, to meet identified needs. DCS will continue to offer services to the child and/or family regardless of participation, until the court closes the Program of Informal Adjustment case, dismisses the Child in Need of Service (CHINS) case, or rules that reasonable efforts to reunify the family are not required. DCS will provide reasonable accommodations for a parent who has a disability. DCS will also provide services to children and families regardless of their immigration status.

All services for parents, including visitation, should cease when Termination of Parental Rights (TPR) is filed. The Family Case Manager (FCM) should continue to maintain regular contact with the child's parent until TPR is finalized (see policy 8.10 Minimum Contact). DCS will obtain a court order finding no continued reasonable efforts to reunify prior to terminating services.

**Note:** The right of a person with a disability to parent the person's child may not be denied or restricted solely because the person has a disability.

The FCM will:

1. Utilize the family's Risk and Safety Reassessment, Child and Adolescent Needs and Strengths (CANS) Assessment, and the Family Functional Assessment (FFA) Field

Guide as tools to assist the FCM, family, and CFT to mutually determine family strengths and needs (see policies 4.18 Initial Safety Assessment, 4.23 Initial Risk Assessment, 5.19 Child and Adolescent Needs and Strengths [CANS] Assessment, 7.11 In-Home Risk and Safety Reassessments, and 8.44 Out-of-Home Risk and Safety Reassessments).

2. Identify any challenges to the family's basic survival (e.g., food, adequate housing, employment, transportation, and childcare), and if assistance is required:
  - a. Refer the family to the Division of Family Resources and other services available in the community, and/or
  - b. Request emergency funds when other resources are not immediately available by submitting the Request for Additional Funding (see policy 16.03 Assistance for a Family of Origins Basic Needs).
3. Ask the parent, guardian, or custodian and resource parent, if applicable, if they or the child need a reasonable accommodation due to a disability;
4. Collaborate with the family and the CFT to identify needed services and reasonable accommodations, if necessary, based on the family's functional strengths and underlying needs (see policy 5.07 Child and Family Team Meetings);
5. Collaborate with the CFT to make an initial determination regarding the appropriateness of remote child and family services. In making this determination, the following **may** be taken into consideration:
  - a. The child's:
    - i. CANS assessment;
    - ii. Case plan; and
    - iii. Safety plan.
  - b. The child's and family's:
    - i. Initial safety assessment;
    - ii. Initial family risk assessment; and
    - iii. Preferences regarding the manner of receiving services.
6. Obtain releases to collaborate with any community service providers who are working with the parent and are not contracted with DCS;
7. Complete appropriate provider referrals in KidTraks for the family within 10 business days of identifying the service needed. Indicate on the referral if the option for remote child and family services is allowed for the first 14 days or until a CFT Meeting determines if the remote services are appropriate (if not already determined by the CFT). At any time during the course of a case, the CFT may redetermine the appropriateness of remote services without creating a new referral;

**Note:** The FCM may access information on SharePoint: Service Standards Summaries and Comparisons about available services, how to create a referral, and contact information for Regional Service Coordinators.

8. Consult with the service provider, if requested, to discuss the appropriateness of remote services;

**Note:** A service provider's first meeting with a family, or with a child who lives with the child's family, must be conducted in person unless a declared health emergency makes an in-person meeting unsafe. After the first meeting with the family or with the child who lives with the child's family, or for purposes of providing services to a child who does not

live with the child's family, a service provider has the discretion to provide services to the child or family remotely for up to 14 days after the initial request for consultation if providing services remotely is in the best interests of the child and family, unless:

- a. A decision is reached on the use of remote services at a CFT Meeting less than 14 days after the request for consultation (if a decision was not already made by the CFT); or
- b. DCS communicates to the child, family, and service provider a preliminary determination as to the role of remote services pending the CFT Meeting (if the CFT has not already made this determination).

The service provider shall continue to meet with the child and family in person at least once a week as DCS deems necessary.

9. Document services, including visitation, in the Case Plan/Prevention Plan (see policy 5.08 Developing the Case Plan/Prevention Plan);
10. Monitor the family's progress by:
  - a. Maintaining regular contact with service providers to assess the family's level of participation in services, and
  - b. Review the family's progress at each face-to-face contact and during CFT Meetings and/or case conferences (see policies 5.07 Child and Family Team Meetings, 7.03 Minimum Contact, 7.05 Meaningful Contacts, 8.10 Minimum Contact, and 8.43 Meaningful Contact);
11. Update the court regularly regarding the family's participation and progress including any violation of the dispositional order (see policy 6.08 Three Month Progress Report);

**Note:** A modification of the disposition decree is required prior to modifying services ordered in the dispositional decree.

12. Reassess the child and family's needs utilizing the Risk and Safety Reassessments and the CANS Assessment at least every 180 days;

**Note:** Risk and Safety Reassessments are completed when the Case Plan/Prevention Plan is revised (see policy 5.08 Developing the Case Plan/Prevention Plan). Risk Reassessments should be completed more often if new circumstances or information arise that would affect risk.

13. Discuss the family's participation and progress regarding case goals and results of any new assessments with the CFT and FCM Supervisor and adjust services and/or service levels as necessary; and

**Note:** Referrals should be cancelled in KidTraks when services are no longer active.

14. Document in the case management system the family's progress, reasons for service type or intensity changes, and if applicable, reasons why services were not offered or were stopped.

The FCM Supervisor will:

1. Ensure services are appropriate for the identified risk and needs of the child and/or family, including the appropriateness of remote services as indicated on the referral;

2. Ensure referrals for services have been made within 10 business days of needs being identified; and
3. Review and approve services in KidTraks for the child and/or family and ongoing service adjustments as needed.

### **Adjusting and/or Discontinuing Services**

The FCM will:

1. Notify the child's parent, resource parent (if applicable), service providers, and the CFT of the decision to adjust and/or discontinue one (1) or more services;

**Note:** DCS will request court approval prior to discontinuing any services ordered through the Dispositional Decree.

2. Work with the CFT to develop a plan for a change in services and/or the gradual removal of the services as appropriate;
3. Follow up with service providers to evaluate the family's response to the change and/or removal of services and, if applicable, to determine if the reasonable accommodations provided to the parent are appropriate;
4. Modify the service withdrawal plan, if necessary;
5. Notify the service provider of the last allowable service date;
6. Cancel the referral in KidTraks; and

**Note:** Ensure information is documented in KidTraks to explain why the referral is being adjusted and/or terminated.

7. Continue to maintain regular contact with the family until case closure is complete.

The FCM Supervisor will:

1. Confirm service interventions are modified and/or discontinued as needed to address service provisions;
2. Ensure the FCM has notified the child, family, resource parents, and service providers of modification and/or discontinuation of services; and
3. Provide adequate and consistent supervision in order to ensure service level need is appropriate.

[Back to Top](#)

## **RELEVANT INFORMATION**

### **Definitions**

#### **Functional Strengths**

Functional strengths are "the buildable" strengths of our families, which help build toward goal achievement.

#### **Underlying Needs**

Underlying needs are the root source of an individual's and/or family's challenges, which determines the appropriate use of services or interventions.

### **Forms and Tools**

- Case Plan/Prevention Plan (SF 2956)- Available in the case management system
- Child and Adolescent Needs and Strengths (CANS) Assessment- Available in KidTraks
- [Division of Family Resources](#)

- Family Functional Assessment (FFA) Field Guide - Available on the [Indiana Practice Model SharePoint](#)
- In-Home Risk and Safety Reassessment- Available in the case management system
- Out-of-Home Risk and Safety Assessment- Available in the case management system
- Program of Informal Adjustment- Available in the case management system
- Provider Referral- Available in KidTraks
- [Request for Additional Funding \(SF 54870\)](#)
- [SharePoint: Service Standards Summaries and Comparisons](#)

### Related Policies

- [4.18 Initial Safety Assessment](#)
- [4.23 Initial Risk Assessment](#)
- [5.07 Child and Family Team Meetings](#)
- [5.08 Developing the Case Plan](#)
- [5.09 Informal Adjustment/Prevention Plan](#)
- [5.19 Child and Adolescent Needs and Strengths \(CANS\) Assessment](#)
- [6.08 Three-Month Progress Report](#)
- [7.03 Minimum Contact](#)
- [7.05 Meaningful Contacts](#)
- [7.11 In-Home Risk and Safety Reassessments](#)
- [8.10 Minimum Contact](#)
- [8.43 Meaningful Contact](#)
- [8.44 Out-of-Home Risk and Safety Reassessments](#)
- [16.03 Assistance for a Family of Origin's Basic Needs](#)

[Back to Top](#)

### LEGAL REFERENCES

- [IC 31-10-2-3: Rights of persons with a disability](#)
- [IC 31-17-2-8.1: "Disability"; custody](#)
- [IC 31-25-2-7.5: Remote child and family services](#)
- [IC 31-34-15-4: Form; contents](#)
- [IC 31-34-20-1: Entry of dispositional decree; placement in home or facility outside Indiana: findings and conclusions](#)
- [IC 31-34-21-5.5: Reasonable efforts to preserve and reunify families](#)
- [42 USC 671\(a\)\(15\)\(B\): State plan for foster care and adoption assistance](#)
- [42 USC 12102: Definition of disability](#)

[Back to Top](#)

## PRACTICE GUIDANCE- DCS POLICY 5.10

*Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.*

N/A

[Back to Top](#)