

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 8: Out-of-Home Services Section 18: Behavior Management and Discipline in Resource Homes	
	Effective Date: December 1, 2024	Version: 4

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POLICY OVERVIEW

To ensure children in out-of-home care receive age and developmentally appropriate discipline (see Definitions) related to their behavior, resource parents (see Definitions) must receive support and guidance in creating, implementing, and enforcing appropriate discipline plans.

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PROCEDURE

The Indiana Department of Child Services (DCS) will:

1. Ensure resource parent is responsible for providing appropriate discipline of a child in the resource parent's care; and
2. Make reasonable efforts to support and facilitate two-way communication between a child's parent, guardian, or custodian and any resource parent who will care for the child to discuss effective discipline practices (see Indiana Co-Care).

Discipline shall:

1. Not be delegated to other children or to persons who are strangers to the child;
2. Be age and developmentally appropriate;
3. Be related and proportionate to the behavior needing modification; and
4. Be handled without prolonged delay.

DCS allows a resource parent to use the following discipline techniques (see 8.D Tool: Behavior Management Plans):

1. Verbal and written plans (i.e., to agree upon desirable behaviors), when age and developmentally appropriate;
2. Behavior management through incentives and rewards; and

Note: The resource parent, with input from the parent, guardian, or custodian; Family Case Manager (FCM); Child and Family Team (CFT) members; and other professionals (e.g., child's psychologist), will develop a behavior management plan for the child, as needed. DCS strongly encourages the use of lesser forms of discipline, including plans and behavior management before corrective action is used.

3. Corrective action to modify undesirable behaviors (this **never** includes physical discipline).

DCS **prohibits** the following types of discipline by the resource parent (this is not a comprehensive list):

1. Corporal punishment (see Definitions);
2. Physical exercise (e.g., push-ups and running);
3. Requiring or using force to make a child take an uncomfortable physical position;
4. Verbal remarks that ridicule a child and/or the child's family;
5. Punishment for an emotional response appropriate to the situation (e.g., punishing the child for crying in response to getting hurt);
6. Denial of essential services and basic needs (e.g., family visitation/communication, mail, health care, food, shelter, clothing, bedding, and/or sleep);
7. Threats of removal or denying reunification;
8. Shaking;
9. Placement in a locked room; and/or
10. Holding with mechanical (see Definitions) or chemical restraints (see Definitions).

DCS **prohibits** the use of physical restraint (see Definitions) by a resource parent unless all of the following have been met:

1. It is specifically authorized by DCS in advance, in writing, and documented in the child's Case Plan/Prevention Plan, as part of the child's behavior management plan (see 8.D Tool: Behavior Management Plans);
2. The resource parent has been appropriately trained and certified by a DCS approved provider in prevention and use of physical restraint;
3. An adult uninvolved in the restraint and trained in emergency interventions shall continuously maintain direct observation of the child during the restraint;
4. It is an emergency situation and the child is a clear and present danger to self and/or others; and

Note: If a child has a weapon and is threatening others with it, but not actually attacking anyone, the resource parent should try to avoid confrontation by:

- a. Giving the child space;
- b. Removing other persons from the area; and
- c. Obtaining appropriate assistance to disarm the child (i.e., call for assistance from the local Law Enforcement Agency [LEA]/911).

5. Less restrictive interventions have been determined to be ineffective.

Note: In an emergency situation, the safety of the child is paramount. Action should be taken to ensure the child and/or others are not harmed. **DCS must be notified immediately if physical restraint has been used on a child in DCS care.**

The resource parent must maintain a record of each incident of physical restraint and make the record available to DCS. The record must include:

1. The date and time of the incident;
2. The name of the child;
3. The form of restraint used;
4. The length of time the child was in the restraint;
5. The name and title of the person applying the restraint;
6. The name of the uninvolved person responsible for observing the child while in the restraint; and
7. A description of the child's behavior prior to, during, and after use of restraint.

Note: The resource parent and/or a Licensed Child Placing Agency (LCPA) will notify the DCS local office immediately, but no later than one (1) business day, of all instances when physical restraint has been used. DCS will be notified immediately if injury occurred to the child, resource parent, or another person.

The FCM will:

1. Ensure the resource parent is familiar with and understands the content of this policy;
2. Ensure that when requested and found necessary by the CFT, the resource parent receives assistance with creating, implementing, and enforcing behavior plans (including verbal and written plans, behavior management, and corrective action) (see policy 5.07 Child and Family Team (CFT) Meeting and 8.D Tool: Behavior Management Plans);

Note: The FCM will review and provide a copy of this policy and the child's behavior management plan to any provider and ensure the provider is aware of forms of discipline that are prohibited by DCS.

3. Communicate with the child and the resource parent regarding the child's behavior and response to discipline;
4. Seek supervisory guidance regarding appropriate actions when behavior or discipline issues arise that are beyond the scope of this policy. Consider every appropriate alternative (see policies 8.15 Services for the Resource Family, 8.17 Respite Services for Resource Parents, and 8.38 Placement Changes) before considering a placement disruption and/or placement of the child in a more restrictive setting (see policy 8.04 Emergency Shelter Care and Residential Placement Review);
5. Staff with the FCM Supervisor, Local Office Director (LOD), and Clinical Services Specialist (CSS) (see the DCS Clinical Services Specialist Contact Map) if the FCM believes physical restraint is necessary;
6. Document in the child's Case Plan/Prevention Plan if the use of physical restraint is approved (see policy 5.08 Developing the Case Plan/Prevention Plan);
7. Ensure the FCM Supervisor is aware of each use of physical restraint and document the incident in the case management system;
8. Ensure the resource parent is appropriately trained and certified by a DCS approved provider in prevention and use of physical restraint by confirming with the Central Office Foster Care Licensing Team;
9. Ensure the parent, guardian, or custodian is notified of each use of physical restraint within two (2) business days;
10. Explore additional services and/or treatment with the CFT, including, but not limited to, placement in a more restrictive setting if physical restraint becomes necessary on a routine basis; and
11. Ensure the resource parent receives, understands, and signs a copy of this policy.

After CFT Approval to Develop a Behavior Management Plan

After the CFT (including professionals) approves of a request to develop a behavior management plan for the child, FCM Supervisor will:

1. Assist and guide the FCM in developing the child's behavior management plan (see 8.D Tool: Behavior Management Plans);
2. Staff with the FCM, LOD, and CSS to discuss whether it is appropriate to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan; and
3. Ensure the FCM has documented all behavioral modifications in the case management system.

After the CFT (including professionals) approves of a request to develop a behavior management plan for the child, the LOD will:

1. Staff with the FCM, FCM Supervisor, and CSS to discuss whether it is appropriate to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan;
2. Staff with the CSS, Regional Manager (RM), and the Deputy Director of Field Operations if the decision is made to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan; and
3. Seek approval from the Central Office Foster Care Licensing Team and DCS LCPA Licensing Unit if there is agreement from all levels that it is necessary for physical restraint to be part of the child's behavior management plan.

After the CFT (including professionals) approves of a request to develop a behavior management plan for the child, the CSS will:

1. Staff with the FCM, FCM Supervisor, and LOD to discuss whether it is appropriate to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan; and
2. Staff with the LOD, RM, and the Deputy Director of Field Operations if the decision is made to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan.

Decision Made to Add Physical Restraint to Behavior Management Plan

If the decision is made to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan, the RM will staff with the:

1. LOD,
2. CSS, and
3. Deputy Director of Field Operations.

If the decision is made to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan, the Deputy Director of Field Operations will staff with the:

1. LOD,
2. CSS, and
3. RM.

If the decision is made to add physical restraint to the child's behavior management plan and Case Plan/Prevention Plan, the Central Office Foster Care Licensing Team and DCS LCPA Licensing Unit will:

1. Review and discuss the use of physical restraint with the CSS and other appropriate individuals, and provide input regarding the use of physical restraint for the child utilizing these factors:
 - a. The type of physical restraint approved for use on the child,
 - b. The criteria and time limitations for use,
 - c. The persons authorized to use the restraint on the child, and
 - d. The date and type of training received.
2. Locate and arrange an appropriate provider to provide training if physical restraint is approved. No physical restraint will be used until the training is completed.

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RELEVANT INFORMATION

Definitions

Chemical Restraint

A chemical restraint is a restraint of a child using medication to sedate the person or restrict the person's movement. This may include the use of non-prescribed medication (e.g., Benadryl) to modify a child's behavior.

Child and Family Team (CFT)

The CFT is defined as a group of formal and informal supports, identified by the child and family, and convened by DCS, who work together to achieve positive outcomes with the DCS Practice Model by engaging in the CFT Meeting process.

Corporal Punishment

Corporal punishment is physical hitting, or any type of physical punishment inflicted in any manner upon the child's body.

Discipline

Discipline involves teaching children that their behavior will result in certain consequences.

Mechanical Restraint

A mechanical restraint is a restraint of a person by the application of a device or object to the person's body or a limb of the person to restrict the person's movement.

Physical Restraint

A physical restraint is a protective hold. This does not include mechanical restraint.

Resource Parent

For purposes of DCS policy, a resource parent includes a foster parent, licensed or unlicensed relative or kinship caregiver, and a pre-adoptive parent.

Forms and Tools

- [8.D Tool: Behavior Management Plans](#)
- Case Plan/Prevention Plan (SF 2956) - available in the case management system
- [DCS Clinical Services Specialist Contact Map](#) - Available on DCS SharePoint
- fostercare.licensing@dcs.in.gov - Central Office Foster Care Licensing Team e-mail box
- [Indiana Co-Care](#)
- LcpaLicensing.Dcs@dcs.IN.gov - LCPA Licensing Unit e-mail box

Related Policies

- [5.07 Child and Family Team \(CFT\) Meetings](#)
- [5.08 Developing the Case Plan/Prevention Plan](#)
- [8.04 Emergency Shelter Care & Urgent Residential Treatment](#)
- [8.15 Services for the Resource Family](#)
- [8.17 Respite Services for Resource Parents](#)
- [8.38 Placement Changes](#)

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LEGAL REFERENCES

- [465 IAC 2-1.5-16 Care of children: discipline](#)
- [465 IAC 2-1.5-17 Physical restraint](#)

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PRACTICE GUIDANCE- DCS POLICY 8.18

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

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