I. Service Definition

Provision of home based casework services for multi-problem and/or dysfunctional families provided in the family’s home. Home based casework is also available for pre-adoption and post-adoption services for adoptive families at risk or in crisis. Home based Caseworker Services (HCS) provides any combination of the following kinds of services to the families once approved by the DCS:

- Home visits
- Case planning
- In-home supervised visitation
- Coordination of services
- Conflict management
- Emergency/crisis services
- Child development education
- Domestic Violence education
- Parenting education/training
- Family communication
- Assistance with transportation
- Advocacy
- Family assessment
- Community referrals and follow-up
- Develop structure/time management
- Behavior modification
- Budgeting/money management
- Meal planning/preparation
- Parent Training with Children Present
- Monitor progress of parenting skills
- Community services information
- Develop long and short term goals

1) Services must include 24-hour crisis intervention seven days a week and must be provided in the family’s home, at a community site or (only if approved by DCS) in the office.
2) Services must include ongoing risk assessment and monitoring family/parental progress.
3) The family (families are self-defined) will be the focus of service and services will focus on the strengths of the family and build upon these strengths.
4) Services must include development of short and long term family goals with measurable outcomes.
5) Services will be time-limited and focused on limited objectives derived directly from the established DCS case plan.
6) Services must be family focused and child centered.
7) Services must include intensive in-home skill building and after-care linkage.
8) Services include providing monthly progress reports; requested supportive documentation such as case notes, social summaries, etc.; and requested testimony and/or court appearances including hearing and/or appeals; case conferences/staffing.
9) Staff must respect confidentiality. Failure to maintain confidentiality may result in immediate termination of the service agreement.
10) Services must demonstrate respect for sociocultural values, personal goals, life style choices, and complex family interactions and be delivered in a culturally competent fashion.
11) The caseload of the Home based Caseworker will include no more than 10 families at any one time.

II. Target Population

Services must be restricted to the following categories:
1) Children and families for whom a child protection service investigation has been initiated; or
2) Children and families who meet the requirements for CHINS 6 (“substantially endangers the child’s own health or the health of another needs care, treatment or rehabilitation that the child is not receiving…”); or
3) A family with a child at imminent risk of placement by enabling the family to remain intact and care for the child at home.
4) A family that adopts or plans to adopt an abused or a neglected child who is at imminent risk of placement or adoption disruption by assisting the family to achieve or maintain a stable, successful adoption of a child.
5) Families voluntarily receiving services through the Department of Child Services could be served through this program such as a voluntary service referral, Service Referral Agreement, or Informal Adjustment.

Probation youth are not excluded if they meet the criteria of number 2 or 3 above and the required case record documentation is provided.

III. Goals and Outcome Measures

Goal #1
Timely intervention with family and regular and timely communication with referring worker
Outcome Measures
1) 95% of all families that are referred will have face-to-face contact with the client within 5 days of the referral or inform the referring worker if the client does not respond to requests to meet.
2) 95% of families will have a written treatment plan prepared and sent to the referring worker following receipt of the referral within 30 days of contact with the client.
3) 97% of all families will have monthly written summary reports prepared and sent to the referring worker.

Goal #2
Improved family functioning
Outcome Measures
1) 75% of the families that were intact prior to the initiation of service will remain intact with no out-of-home, county paid placement for more than five days throughout the service provision period.
2) 60% of the families that have a child in substitute care prior to the initiation of service will be reunited by closure of the service provision period.
3) 90% of the families served will not have new incidences of substantiated abuse or neglect throughout the service provision period.
4) 90% of families actively engaged in treatment and following treatment recommendations will not have incidences of criminal or status charges while the agency is actively involved.
5) Scores will be improved on the Risk Assessment instruments in ICWIS used by the referring DCS.

Goal #3
DCS and family satisfaction with services
Outcome Measure
1) DCS satisfaction will be rated 4 and above on the Service Satisfaction Report.
2) 94% of the families who have completed home-based services will rate the services “satisfactory” or above.

IV. Qualifications

Minimum Qualifications
Bachelor’s degree in social work, psychology, sociology, or a directly related area and under the direct weekly supervision of a person with a Masters degree in Social Work, Psychology, Sociology, or a directly related area.

In addition to:
- Knowledge of child abuse and neglect and child and adult development
- Knowledge of community resources and ability to work as a team member
- Belief in helping clients change their circumstances, not just adapt to them.
- Belief in adoption as a viable means to build families.
- Understanding regarding issues that are specific and unique to adoptions such as loss, mismatched expectations and flexibility, entitlement, gratification delaying, flexible parental roles and humor.

V. Billable Units

Face to face time with the client:
(Note: Members of the client family are to be defined in consultation with the family and approved by the DCS. This may include persons not legally defined as part of the family)
- Includes client specific face-to-face contact with the identified client/family during which services as defined in the applicable Service Standard are performed.
- Includes crisis intervention and other goal directed interventions via telephone with the identified client family.
- Not included is routine report writing and scheduling of appointments, which are included in the rate for service provision.

For hourly rates, partial units may be billed in quarter hour increments only. Partial units to be billed are to be rounded to the nearest quarter hour using the following guidelines: 8 to 22 minutes = .25 billable hours, 23 to 37 minutes = .50 billable hours, 38 to 52 minutes = .75 billable hours, 53 to 60 minutes = 1.00 billable hours. All billed time must be associated with a family/client.

Case Conference:
Includes case conferences initiated or approved by the DCS for the purposes of goal directed communication regarding the services to be provided to the client/family. Such approval is to be documented on the Referral Form or subsequent DCS correspondence.

Collateral contacts:
Collateral contacts includes up to eight (8) hours per family per month that are consistent with the plan of the case. Additional time must be approved and documented through subsequent DCS correspondence.

Court Time on case:
Services include providing any requested testimony and/or court appearances including hearings or appeals. Includes up to one hour for preparation of a DCS requested and approved court testimony. The provider may bill up to one hour per day for testimony in client/family specific court hearings as requested and approved by the DCS.

Travel Time:
1) Travel Time with the client is factored door to door from the service provider's home or the agency's office, whichever is closest to the client. If both these locations are outside the county being served, travel time is to begin at the county line unless otherwise approved by the referring DCS.
2) Travel time is to include only travel to and from the client/family's home, to and from case conferences, court, errands with the family, transporting for job interviews and appointments, other related transportation needs of the family, and no shows. The travel time rate includes
mileage expenses at the State rate of .40 per mile. Mileage expenses are not to be billed in addition to travel time.

No Show:
1) Includes attempted scheduled home visits with the identified client/family for which the client/family does not appear. Upon the 3rd consecutive “no show”, the provider must contact the referring FCM to determine if continuation of services is appropriate.
2) Includes attempted unscheduled home visits if such visits are requested by the DCS via the Referral Form, the DCS Case Plan, or subsequent DCS Progress or Case Notes.
3) Wait time for a “No Show” must be no less than 15 minutes. A note must be left to inform the client/family that a contact attempt was made.
4) “No Shows” are to be billed per occurrence.

Emergency Cash Assistance
Up to $500 per family who have needs which will cause the placement or prevent reunification of the child(ren) if not met. These funds are accessible after other available resources are used. Approval is required writing by the referring DCS.

Translation or sign language:
Services include translation for families who are non-English language speakers or hearing impaired and must be provided by a non-family member of the client. Dollar for dollar amount.

VI. Case Record Documentation

Necessary case record documentation for service eligibility must include:
1) A DCS referral form;
2) Documentation of regular contact with the referred families/children and referring agency;
3) Monthly written reports, or more frequently if requested, regarding the progress of the family/children provided to the referring agency.

VII. Service Access

Services must be accessed through a DCS referral. Referrals are valid for a maximum of six (6) months unless otherwise specified by the DCS. Providers must initiate a reauthorization for services to continue beyond the approved period.

NOTE: All services must be pre-approved through a referral form from the referring DCS. In emergency situations, services may begin with a verbal approval but must be followed by a written referral within 5 days. It is the responsibility of the service provider to obtain the written referral.