Rapid Safety Feedback
In-home Service Cases

This document contains the questions by which trained quality assurance reviewers will assess case work practice related to child safety in In-home Service Cases.
Table of Contents

Item 1: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Out-of-Home Care................................................................. 2

Item 2: Initial and On-going Assessments........................................................................ 4

Item 3: Safety Plans........................................................................................................ 6

Item 4: Monitoring the Safety Plan................................................................................... 10

Item 5: Background Checks and Home Study or Home Assessment............................... 12

Item 6: Case Manager Visits with Child.......................................................................... 18

Item 7: Case Manager Visits with Parent........................................................................ 22

Item 8: Planning for Safe Closure...................................................................................... 26

Item 9: Supervisory Case Consultation and Guidance....................................................... 28

Item 10: Case Consultation............................................................................................... 32

Item 11: Request for Action Completed in FSFN.............................................................. 32

Item 12: Safety Methodology Case..................................................................................... 32
**Item 1**

**Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Out-of-Home Care**

1.0 Were concerted efforts made to provide services to the family to prevent children’s entry into out-of-home care or re-entry after a reunification? (CFSR Safety Outcome 2, Item 2, A & B)

☐ Strength  ☐ Area Needing Improvement

**Applicable Cases:** This item is applicable to all in-home services cases involving a child age 4 and under.

**Definitions:**

- “Appropriate services” are defined as those services that are provided to, or arranged for, the family with the explicit goal of ensuring the child’s safety. Some examples include:

  (1) if there are safety issues in the home due to environmental hazards, homemaking services could be an appropriate safety-related service;

  (2) if there are safety concerns related to the parent’s ability to manage specific child needs or child behaviors, intensive in-home services could be an appropriate safety-related service;

  (3) child care services could be a safety-related service in cases where the child was being cared for in an unsafe setting or by an inappropriate caregiver; and

  (4) if there are safety concerns related to parental substance abuse, substance abuse treatment could be an appropriate safety-related service.

  (5) if a child needs mental health services, education-related services, or services to address health issues, in most cases these would not be considered relevant to the child’s safety if the child remained in the home. Efforts of the agency to meet these service needs are assessed in other items.

- “Concerted efforts” include the following activities: working to engage families in needed services and facilitating a family’s access to those services.

**The Federal CFSR On-Site Review Instrument (Item 2) focuses on two questions:**

1. For the period under review, did the agency make concerted efforts to provide or arrange for appropriate services for the family to protect children and prevent their entry into out-of-home care or re-entry into out-of-home care after a reunification?

2. If during the period under review, any child was removed from the home without providing or arranging for services, was this action necessary to ensure the child’s safety?

**Instructions:** The reviewer must determine if the agency made concerted efforts to provide or arrange for appropriate services for the family to protect children and prevent their entry into out-of-home care or re-entry into foster care after a reunification. (Be sure to assess the entire period under review.) Use the definitions above for the definitions of “appropriate services” and “concerted efforts".
When the child is removed during an in-home services case, the reviewer should focus on whether the circumstances of the case suggest that services would not have been able to ensure the child’s safety if the child remained in the home. If the information indicates that services could have been provided to prevent removal but the child was removed without providing those services, the answer is no. If services should have been offered to protect the child, but were not because those services were not available in the community, the answer is no.

Section 39.301(9)(a)6b, F.S. requires community-based care lead agency to prioritize safety plan services to families who have multiple risk factors, including, but not limited to, two or more of the following:

(1) The parent or legal custodian is of young age;  
(2) The parent or legal custodian, or an adult currently living in or frequently visiting the home, has a history of substance abuse, mental illness, or domestic violence;  
(3) The parent or legal custodian, or an adult currently living in or frequently visiting the home, has been previously found to have physically or sexually abused a child;  
(4) The parent or legal custodian or an adult currently living in or frequently visiting the home has been the subject of multiple allegations of abuse or neglect;  
(5) The child is physically or developmentally disabled; or  
(6) The child is 3 years of age or younger.

Safety methodology cases: determine if the safety service providers noted on the Safety Plan are appropriate to address the danger threat.

Rating Criterion:

- Strength, if the agency made concerted efforts to provide appropriate and relevant services to the family to address the safety issues in the family so that the child(ren) could remain in the home or would not re-enter out-of-home care and if information indicates that it was necessary to remove the child(ren) to ensure the child’s safety before services could be provided or arranged.

- Area Needing Improvement, if the agency did not make concerted efforts to provide services and the child(ren) was removed or if services should have been offered to protect the child(ren) but were not because those services were not available in the community.

Item 2

Initial and On-going Assessments

2.0 Were initial and on-going assessments conducted to assess safety concerns relating to the child(ren) in their home.
(CFSR Safety Outcome 2, Item 3, A, & B)

☐ Strength ☐ Area Needing Improvement

Applicable Cases: This item is applicable to all in-home services cases involving a child age 4 and under.

Definitions:

- “Present danger” is defined as a significant and clearly observable family condition that is occurring at the current moment and is already endangering or threatening to endanger the child. Present danger threats are conspicuous and require that an immediate protective action be taken to ensure the child’s safety. (Section 39.01,(59), F.S.)

- “Impending danger” is defined as a situation in which family behaviors, attitudes, motives, emotions, or situations pose a threat that may not be currently active but that can be anticipated to become active and to have severe effects on a child at any time. (Section 39.01(31), F.S.)

- “Family Functioning Assessment,” “Ongoing Family Functioning Assessment” and “Progress Update” mean a decision-making and documentation process conducted in response to a child abuse and/or neglect report or any other instances in which safety needs to be assessed throughout the life of an active investigation or ongoing services case to help evaluate danger threats, child vulnerability, family protective capacities and to determine the safety response, case outcomes and goals.

- An assessment of safety is made to determine whether a child is in a safe environment. A safe environment is one in which there are no threats that pose a danger or, if there are threats, there is a responsible adult in a caregiving role who demonstrates sufficient capacity to protect the child.

Core Concepts: In-home services are designed to maintain children safely in their homes by strengthening the ability of families to protect their children and reducing threats to their safety. When a child’s safety can be reasonably assured, in-home services are provided to help stabilize the family and reduce the risk of future abuse or neglect. Safety management services may be provided directly by the CBC or through contracted case management organizations and other community-based service providers. Services may include, but are not limited to: crisis intervention, domestic violence intervention, and day care. The case manager must ensure services are appropriately identified, referred, and engaged. The goal is to prevent unnecessary separation of children from their families by identifying family problems and assisting families in resolving them.

Safety Methodology Cases: Was the FFA-Ongoing completed within 30 days of case transfer to services and did it contain sufficient information to identify and seek agreement regarding what must change related to child safety and to develop case plans that will effectively address caregiver protective capacities, meet child needs and assess the sufficiency of the existing safety plan. Was the Progress Update completed at scheduled 90 day intervals and at critical junctures and did it measure the caregivers change related to child safety and caregiver performance in order to determine the need for safety or case plan modifications.
Assessments should be conducted in partnership with the family to help parents or caregivers recognize and remedy conditions so children can safely remain in their own home.

The Federal CFSR On-Site Review Instrument (Item 3) focuses on six questions. For Florida case reviews, this item has been split into 3 items (assessment, safety plans, and monitoring safety plans). For assessments the Children’s Bureau asks:

1. If the case was opened during the period under review, did the agency conduct an initial assessment that accurately assessed all risk and safety concerns for the target child and/or any child(ren) in the home? (Florida case review Item 2)
2. During the period under review, did the agency conduct ongoing assessments that accurately assessed all of the risk safety concerns for the target child and/or any child(ren) in the home? (Florida case review Item 2).

Instructions: This question should be answered for the target child and any other children in the home. For on-going assessments the reviewer must determine whether ongoing assessments (formal or informal) were conducted during the period under review. If the agency conducted an initial assessment of risk and safety at the onset of the case, but did not assess for risk and safety concerns on an ongoing basis (for example, when there were new allegations of abuse or neglect, changing family conditions, new people coming into the family home or having access to the children, changes to visitation, upon reunification, or at case closure) the answer should be no.

- The reviewer must determine if the assessment considered maltreatment allegations on the family that were never formally reported or formally investigated.
- The reviewer must determine if a progress update on the identified caregiver is documented at a minimum every 90 days.
- The reviewer must determine if an assessment of the safety of the child(ren) in the home where they resides has be documented at each home visit.

Rating Criterion:

- Strength, if the initial and on-going risk and safety assessments were conducted and qualitatively addressed case specific issues related to child safety and emerging risks.
- Area Needing Improvement, if the initial assessment of risk and safety was not conducted at the onset of the case or if the agency conducted an initial assessment of risk and safety at the onset of the case, but did not assess for risk and safety concerns on an ongoing basis (for example, when there were new allegations of abuse or neglect, changing family conditions, new people coming into the family home or having access to the children, changes to visitation, upon reunification, or at case closure).

**Item 3**

**Safety Plans**

3.0 If safety concerns were present, did the agency develop an appropriate safety plan with the family? (CFSR Safety Outcome 2, Item 3, C, (1))

- **Strength**
- **Area Needing Improvement**

**Applicable Cases:** This item is applicable to all in-home services cases involving a child age 4 and under.

**Definitions:**

- “Safety plan” is defined as a plan created to control present or impending danger using the least intrusive means appropriate to protect a child when a parent, caregiver, or legal custodian is unavailable, unwilling, or unable to do so. (Section 39.01(67), F.S.).

**Core Concepts:** A child is considered safe when there is a balance between known safety factors and the identification of protections that are put into place by all responsible persons. This includes: the capability and reliability of parents, school personnel, child care providers, and others who have immediate responsibility for the child in recognizing safety factors.

A **present danger plan** must be immediate, in place prior to leaving the situation or the home that provides a child with responsible adult supervision and care and must be short term meaning in place long enough for information to be collected to assess the family condition.

A present danger safety plan is sufficient when:

1. Identifies the correct present danger to the child(ren)
2. Describes how the plan will work to control the danger.
3. Confirms the person responsible for protection; trustworthiness, reliability, commitment, availability, and alliance to the plan.
4. Parents are willing to cooperate with the plan.
5. Evaluation of home and responsible adult if family made arrangement is a condition of the present danger plan.
6. Estimated timeframe of plan
7. Oversight monitoring and management details.

The following help establish when and **in-home impending danger safety plan** is appropriate when the caregiver agrees to cooperate with the safety actions and work closely with service providers; the home environment is calm and stable enough for services to be provided and for service providers to be safe in the home; the safety actions are sufficient to control all of the conditions affecting safety and can be put in place immediately; and a responsible person or legal guardian resides in the home. Safety plan interventions may include: restricting access of the alleged perpetrator to the child; the alleged perpetrator leaving the home either voluntarily or as a result of a court order; obtaining a protection order; assessing safety and danger threats at childcare or respite care, etc.
Impending danger safety plan is sufficient when:

1. It controls or manages the danger threat.
2. Has an immediate effect.
3. Safety services are immediately accessible and available to do what is expected to control the threat.
4. Contains safety actions only for the purpose of controlling the danger threat and must achieve this action fully each time it is delivered.
5. Is not promissory in nature.

Instructions: The reviewer must determine if the agency developed an appropriate safety plan with the family and safety service providers. Recurring maltreatment and recurring safety concerns must be thoroughly reviewed within the context of determining the sufficiency of the Safety Plan to control the identified danger threats.

- Section 39.301(9)(b), F.S. The child protective investigator shall collaborate with the community-based care lead agency in the development of the safety plan as necessary to ensure that the safety plan is specific, sufficient, feasible, and sustainable. The child protective investigator shall identify services necessary for the successful implementation of the safety plan.

- Section 39.604(3), F.S. requires that when a child is enrolled in an early education or child care program regulated by the department, the child’s attendance in the program must be a required action in the safety plan or the case plan.

- Safety of children under supervision is assessed at every home visit to determine if modification to the Safety Plan is needed.

- The reviewer must determine if the Safety Plan follows Safety Methodology Practice Guidelines.

- Safety Methodology cases require that a safety plan be in place throughout the life of a case.

Rating Criterion:

- **Strength**, if the case file indicates safety planning discussions are being conducted with the family and if safety planning addressed safety intervention strategies that are sufficient to address the identified danger threat or safety concern.

- **Area Needing Improvement**, if
  - The case file does not indicate safety planning discussions are being conducted with the family and/or if safety planning addressed safety intervention strategies are not sufficient to address the identified danger threat or safety concern.
  - The safety plan consisted of a promissory note.
  - There was at least one substantiated or indicated maltreatment report on any child in the family during the period under review AND there was another substantiated report within a 6-month period before or after that report that involved the same or similar circumstances. In determining the similarity of the circumstances, consider the perpetrator of the maltreatment and other individuals involved in the incident.
  - The case was closed while significant safety concerns that were not adequately addressed still existed.
Item 4

Monitoring the Safety Plan

4.0 If safety concerns were present, did the agency continually monitor the safety plan as needed including monitoring family engagement in any safety-related services? (CFSR Safety Outcome 2, Item 3, C, (1))

☐ Strength  ☐ Area Needing Improvement

Applicable Cases: This item is applicable to all in-home services cases involving a child age 4 and under.

Definitions:

- “Safety plan” is defined as a plan created to control present or impending danger using the least intrusive means appropriate to protect a child when a parent, caregiver, or legal custodian is unavailable, unwilling, or unable to do so. (Section 39.01(67), F.S.).

Core Concepts: Safety planning is an ongoing process and needs to be addressed at each home visit and at critical junctures. The need for a plan may be triggered by a specific event, but individual and family circumstances change frequently enough to warrant continual monitoring and updating when new safety threats are identified; parental protective capacities diminish; new members join the family or leave the home; or there is an increase in stressors in general, e.g., loss of job, illness, pregnancy, etc.

The case manager must always assess for emerging dangers that results in present danger or impending danger. The case manager assessment could result in an update to the progress evaluation that may require a modification of the safety plan.

Questions to consider include:

1. During the period under review, did the agency monitor and update the safety plan during each home visit, including monitoring family engagement in any safety-related services?
2. Did the case manager regularly engage safety managers and safety service providers in order to continually assess safety?
3. During the period under review, were there safety concerns pertaining to any child(ren) in the family in the home that were not adequately or appropriately addressed by the agency? (Florida case review Item 4)

Instructions: The reviewer must determine if sufficient monitoring took place. Monitoring may include case manager observations; feedback from safety service providers; and ongoing communication with those individuals who can provide additional insight as to behavioral change and protective capacities of the parents, documenting appropriate interactions with children, assessing occurrences of DV incidents, etc.

Rating Criterion:

☐ Strength, if the agency continually monitored and updated the safety plan as needed including monitoring family engagement in any safety-related services.

☐ Area Needing Improvement, if

– The agency did not continually monitor the safety plan as needed including monitoring family engagement in any safety-related services.
- There was at least one substantiated or indicated maltreatment report on any child in the family during the period under review AND there was another substantiated report within a 6-month period before or after that report that involved the same or similar circumstances. In determining the similarity of the circumstances, consider the perpetrator of the maltreatment and other individuals involved in the incident.

- There was a critical incident report or other major issue relevant to noncompliance by foster parents or facility staff that could potentially make the child unsafe, and the agency could have prevented it or did not provide an adequate response after it occurred.

- The child’s placement during the period under review presented other risks to the child that are not being addressed, even though no allegation was made and no critical incident reports were filed.

- The case was closed while significant safety concerns that were not adequately addressed still existed.

Item 5
Background Checks and Home Study or Home Assessment

5.0 Are background checks and home study or assessment sufficient and responded to appropriately? (CFSR Safety Outcome 2, Item 3)

☐ Strength ☐ Area Needing Improvement

Applicable Cases: This item is applicable to all in-home services cases involving a child age 4 and under.

Definitions:

- “Other Parent Home Assessment” is the assessment that occurs when children are released or placed with a non-maltreating parent. In these situations, the Department must determine whether such person is a responsible adult who will be able to safely care for the child. When children are not able to be provided with an in-home safety plan that keeps them in the home with the parent who was the focus of the investigation, consideration must be given to release of the child to the other parent.

- “Family-Made Arrangement” is a safety action initiated by the parent/legal guardian to voluntarily and temporarily relocate the child from the family’s home to a responsible adult chosen by the parent/legal guardian as part of an agency managed safety plan in response to present danger or impending danger. The child welfare professional remains responsible for approving the family arrangement. A family-made arrangement will not be used when a parent/legal guardian(s) is unable, unwilling or in denial of the need for the child’s temporary relocation.

- “Informal provider” means a responsible adult identified by a parent or legal guardian who agrees to provide safety management services as specified in a safety plan. The child welfare professional responsible for the safety plan is expected to determine that any safety plan provider is capable and dependable to implement their role in the safety plan, including a review of child abuse and criminal history checks.

Requirement: A criminal, delinquency and abuse/neglect history checks on additional persons subsequent to a living arrangement in a relative’s or non-relative’s home, is required for new household members, frequent visitors or paramours of any household members if they have not otherwise received the checks within the previous twelve months and there has been no break in service for over ninety days. The court shall be informed of the results within seventy-two hours of their receipt:

(a) A local criminal records check, a child abuse/neglect records check and a delinquency records check are required on new household members, frequent visitors or paramours of any household members.
(b) A state criminal records check is required on new household members or paramours of any household members.
(c) A federal criminal records check, including a name check followed by submission of fingerprints to the Florida Department of Law Enforcement, is required for any new household members eighteen years of age or older.
**Core Concepts:** The file must contain an assessment of implications for child safety based on background check results for all household members and other visitors to the home. This includes the home of the alleged maltreating parent and the home where the child currently resides. The case manager must demonstrate an understanding of the background screening information and must also be alert to new household members and request a criminal background check and the abuse and neglect record check on those people. If a determination is made an individual is another visitor in the home, the case manager has the discretion to request a background check through the Hotline. For the purpose of determining an “other visitor,” the following guidelines should be used.

- Does the visitor spend the night at the house? If so, how often?
- Does the visitor spend any unsupervised time in the home with the child?
- Is the visitor ever left in a caregiver role? If so, how often? Under what conditions?
- Is the visitor a boyfriend or girlfriend of any adult household member?

The reviewer should review the family history, investigation family functioning assessment and case notes to determine how effectively the background information is used to assess and address potential danger threats.

**Instructions:** The reviewer must determine if the case manager demonstrates an understanding of the background screening information and is alert to new household members. For all cases, the reviewer must ensure the file contains an approved home study or the assessment of the home to determine if it is of sufficient quality to ensure child safety. There should be an emphasis on the overall assessment of the child(ren’s) home environment.

Background checks are required for informal safety plan providers. After the child welfare professional has conducted an interview to determine if the informal safety plan provider is appropriate, they will conduct background screening to include child abuse history and local and state criminal history. The investigator will request a child investigation recheck as the method to obtain state criminal history. The case manager will follow CBC locally approved protocol to obtain the state criminal history. The investigator or case manager will determine whether the results of any of the background checks provide information that indicates the caregiver is not currently dependable or suitable to care for and/or protect the child. Current automatic statutory disqualifiers still apply.

The definitions and table below may be used for the purpose of explaining the criminal history information that may be gathered by an investigator or a case manager for specific purposes as authorized by both the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigations (FBI). This includes information as to the purpose codes to be used and whether any of the information received may be shared.

**Purpose Code “C”** is a code used for criminal justice purposes to obtain criminal history records from FCIC and NCIC on individuals involved in an investigation of abuse, abandonment, neglect, threatened harm, or exploitation. FCIC Purpose Code “C” records may contain expunged or sealed information and NCIC contains national information. The criminal history rap sheet may include Person and/or Status Files: (Injunctions, Warrants, Missing Person, Sex Pred/Sex Offender, Probation/Parole etc.). Criminal history records generated using Purpose Code “C” are for **investigative purposes only** and may not be shared with other individuals in or outside of the Department.

**Purpose Code “Q”** is a code used to obtain criminal history records from FCIC on individuals in potential contact with children or vulnerable adults in need of placement and is also provided for investigations so the INVESTIGATOR has a Florida Rap Sheet that can be discussed with contracted providers providing protective and placement services. These records do not contain any expunged or sealed information. Criminal history records generated using Purpose Code “Q” may be shared with other individuals in the Department and its contracted providers charged with the responsibility to provide protective and placement services.

**Purpose Code “X”** is a code used to obtain national criminal history records from NCIC on individuals in potential contact with children in need of emergency placement (including children relocated or placed in a family
arrangement) in exigent circumstances with delayed fingerprint submission. These records do not contain expunged or sealed information. Criminal history records generated using Purpose Code “X” may not be shared with any non-governmental entity including contracted child providers. Some states do not currently recognize Purpose Code X and will not return results but may include a standard statement that a record exists. Further information must be obtained from the fingerprint submission results. It has been DCF’s experience that the following states do not always respond to Purpose Code X queries with specific records, however, it is not official from FDLE: Alabama, California, Illinois, Indiana, Kentucky, Massachusetts, Mississippi, Nebraska, North Dakota, Pennsylvania, *New York, *North Carolina, South Dakota, Washington.

Driver and Vehicle Information Database (DAVID) is a database where authorized individuals are able to search and obtain information on driver licenses, identification cards, vehicle and boat registrations, driver history and tags. DCF investigators are authorized to obtain digitized driver license photos and signature information. Pursuant to s. 322.142(4), F.S.

JJS refers to the Juvenile Justice Information System operated by the Department of Juvenile Justice that contains juvenile delinquency history and services.

Jail Booking System (APPRIS) – Jail booking information throughout Florida and 42 other states which includes booking images.

Florida Clerk of Courts (CCIS) – Florida court case information. DCF investigations has level 6 CCIS authorization for access to the following court records: felony, misdemeanor, traffic but not warrants/capias/summons, Civil (Circuit, traffic, county, domestic relations, child support, domestic violence, family, law), Juvenile (dependency not delinquency), and Probate/Guardianship, but not mental health.

Fingerprint Submissions - ORI numbers used to submit fingerprints that end in 3Z indicate non-emergency planned placement and ones that ends in 4Z indicate an emergency placement. Any Purpose Code X query of the NCIC system should have a matching 4Z fingerprint submission unless the placement was not made.

Authority (National Criminal History Records)

Investigations


Emergency Placements

Title 28 Code of Federal Regulations (CFR), the National Crime Prevention and Privacy Compact Council, and the Department’s agreement with FDLE recognizes that there are situations in which a child must be placed but there is insufficient time to complete fingerprinting of the proposed caregiver and notification to the court prior to the placement. This is considered an emergency placement in exigent circumstances with delayed fingerprint submission only if the placement must be made within 72 hours of the child’s relocation from the home. For an emergency relative/non-relative placement, the Department is authorized to direct access the NCIC/JJS system to obtain criminal history records to be followed by a delayed fingerprint submission.

**CJIS Policies and Agreements**


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**Rating Criterion:**

- Strength, if background checks and home studies/assessments are sufficient and responded to appropriately.
- Area Needing Improvement, if background checks and home studies/assessments are not sufficient and responded to appropriately.
Item 6
Case Manager Visits with Child

6.0 Is the frequency and quality of visits between case managers and the child(ren) in the case sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals? (CFSR Well-being Outcome 1, Item 14)

Strength  Area Needing Improvement

Applicable Cases: All cases are applicable for an assessment of this item:

Definitions:

- A “visit” is defined as a face-to-face contact between the case manager and the child.

Core Concepts: Case manager visits are an integral part of assessing and ensuring the safety, permanency, and well-being of children. Visits provide an opportunity to meet with children to monitor children’s safety and well-being; assess the ongoing service needs of children; monitor progress toward established goals; evaluate the continued appropriateness of safety interventions; observe or parent and child interactions with siblings, caregivers, and other household members; and assess child functioning and child vulnerability. Qualitative visits and case manager contacts should be professional consultations which are:

1. Planned in advance of the visit, with issues noted for exploration and goals established for the time spent together.
2. Open enough to offer opportunities for meaningful discussions with children.
3. Individualized. For example, visits should include separate time for discussions with children. This provides the opportunity to privately share their experiences and concerns and to ensure that issues that might not be disclosed when other family/household members are present are identified and addressed.
4. Focused on the case plan and the completion of actions necessary to support children in achieving the goals established in their plans.
5. Exploratory in nature, examining changes in the child’s circumstances on an ongoing basis.
6. Supportive and skill-building, so children feel safe in dealing with challenges and change and have the tools to take advantage of new opportunities.
7. Well documented so that the agency can follow up on commitments and decisions made during the visit.

The Federal CFSR On-Site Review Instrument (Item 14) focuses on two questions.

1. During the period under review, what was the most typical pattern of visitation between the case and the child(ren) in the case?
2. During the period under review, was the quality of the visits between the case manager and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals (for example, did the visits between the case manager and the child(ren) focus on issues pertinent to case planning, service delivery, and goal achievement)?
Instructions: This item is assessed based on the frequency of the visits (based on the needs of the child not the Florida DCF 30 day requirement) and the quality of the visits. The reviewer must consider the frequency necessary to ensure the child’s safety, permanency, and well-being and not on state policy requirements regarding caseworker contacts or visits with the child. For example, if state policy is that the caseworker should visit the child at least once a month, and the reviewer determines that given the circumstances of the case (for example, there are safety concerns), the caseworker should visit more frequently, then the answer should be an Area Needing Improvement. If the typical pattern of visits is less than once a month, the answer to question should be an Area Needing Improvement unless the reviewer determines that there is a substantial justification for a Strength answer. If the child is in post-placement supervision, visitation requirements in CFOP-175-38 must be met.

Face-to-face contacts shall occur more frequently than every thirty days when the child's situation dictates more frequent contact, as determined in consultation with the case manager’s supervisor based on a review of the case and assessed safety and risk level or as determined by the court.

At least once every three months, the case management agency shall make an unannounced visit to the child’s place of residence. Contact requirements are required even if a child is placed in a Department of Juvenile Justice facility.

If either the frequency of the visit question or the quality of the visit question is rated NO, the Item is rated NO.

Quality of Visits:

- For quality, consider both the length of the visit (for example, was it of sufficient duration to address key issues with the child, or was it just a brief visit) and the location of the visit (for example, was it in a place conducive to conversation, such as a private home, or was it in a more formal or public environment, such as a restaurant or court house?).

- Consider whether the case manager saw the child alone or whether the parent or foster parent was usually present during the case manager’s visits with the child.

- Also consider the topics that were discussed during the visits, if that information is available in the case file or through interviews. For the answer to be a "strength", there must be some evidence that the case manager and the child addressed issues pertaining to the child’s needs, services, and case goals during the visits.

- Consider the pattern of visits during the period under review and not over the life of the case.

- Focus on the visitation frequency of the agency caseworker (or other responsible party) responsible for the case and not on other service providers who may be visiting the children.

- Determine the most typical pattern of visiting during the period under review because the actual frequency may vary in specific time periods.

Rating Criterion:

- Strength, if the frequency and quality of visits between case managers and the child(ren) were sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals

- Area Needing Improvement, if the frequency and quality of visits between case managers and the child(ren) were not sufficient to ensure the safety, permanency, and well-being of the child and
promote achievement of case goals; if the child is older than an infant and the case manager did not see the child alone for at least part of the visits; there is no evidence that the case manager and the child addressed issues pertaining to the child’s needs, services, and case goals during the visits; the typical pattern is less than once a month or if the child was older than an infant, and the case manager did not see the child alone for at least part of each visit.

*Reference:* Florida Administrative Code 65C-30.007 (1) (a-b); (2) (a-d); (3) (a-b), 4 (a), (5) (a-b), & (7), Federal Child & Family Services Review, Well-Being Outcome 1, Item 14
**Item 7**

**Case Manager Visits with Parents**

7.0 Is the frequency and quality of visits between case managers and the mothers and fathers of the children sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals? (CFSR Well-being Outcome 1, Item 16)

- **Strength**
- **Area Needing Improvement**

**Definitions:**

- For in-home services cases, “**parents**” are defined as the children’s primary caregivers with whom the children live (for example, biological parents, relatives, guardians, adopted parents) or a noncustodial parent who is involved, or has indicated a desire to be involved, in the child’s life.

- A “**visit**” is defined as a face-to-face contact between the case manager and the parent. Preference is that the visit will occur in the home where the child resides.

- “**Caregiver Protective Capacities**” are personal and caregiving behavioral, cognitive and emotional characteristics that can be specifically and directly associated with being protective of one’s child. Protective capacities are personal qualities or characteristics that contribute to vigilant child protection. (This does not include people who care for a child temporarily such as relatives caring for a child from time to time, day care providers, other institution providers, babysitters, etc.)

**Core Concepts:** Case manager visits are an integral part of assessing and ensuring the safety, permanency, and well-being of children. Visits by the case manager with the parents must be purposeful and focused on the reasons for supervision and progress with tasks and services in the case plan or safety plan. Visits provide an opportunity to meet parents to monitor children’s safety and well-being; assess the ongoing service needs of children and their parents; monitor progress toward established goals; evaluate the continued appropriateness of safety interventions; observe or parent and child interactions; and assess parental protective capacities. Qualitative visits and case manager contacts should be professional consultations which are:

1. Planned in advance of the visit, during a supervisory consultation with issues noted for exploration and goals established for the time spent together.
2. Open enough to offer opportunities for meaningful discussions with each parent.
3. Focused on the case plan and the completion of actions necessary to support children and families in achieving the goals established in their plans.
4. Exploratory in nature, examining changes in the child’s or family’s circumstances on an ongoing basis.
5. Supportive and skill-building, so children and families feel safe in dealing with challenges and change and have the tools to take advantage of new opportunities.
6. Well documented so that the agency can follow up on commitments and decisions made during the visit.

**There reviewer should consider the following four questions:**
1. During the period under review, what was the most typical pattern of visitation between the case manager and the mother of the child(ren) - was the frequency of the visits between the case manager and the mother sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

2. During the period under review, what was the most typical pattern of visitation between the case manager and the father of the child(ren) - was the frequency of the visits between the case manager (or other responsible party) and the father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

3. During the period under review, was the quality of the visits between the case manager and the mother sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals? Were parental protective capacities addressed?Were behaviors that resulted in service referral monitored for caregiver progress? Were child needs and safety explored?

4. During the period under review, was the quality of the visits between the case manager and the father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

Instructions:

**Frequency of Case Manager Visits**
- Consider only the pattern of visits during the period under review and not over the life of the case.
- Determine the most typical pattern of visiting during the period under review because the actual frequency may vary in specific time periods.
- During the period under review, was the frequency of the visits between the case manager and the mother and father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?
- Consider the frequency of visits that is necessary to effectively address: (1) the child’s safety, permanency, and well-being, and (2) achievement of case goals.
- Do not assess this item based on the case manager visit requirements that are established by Department policy. The reviewer should consider the needs of the mother, father, and family for the frequency required to be sufficient to meet those needs.

**Quality of Case Manager Visits**
- Consider both the length of the visit (for example, was it of sufficient duration to address key issues with the mother/father, or was it just a brief visit?).
- Consider whether the visits between the case manager or other responsible party and the father/mother focused on issues pertinent to case planning, service delivery, and goal achievement.
- Consider whether visits occurred in the parent’s home.
Rating Criterion:

- **Strength**, if the frequency and quality of visits between case managers and the mother and father were sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals

- **Area Needing Improvement**, if the frequency and quality of visits between case managers and the mother and father were not sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals or if the typical pattern of contact is less than once a month, unless the reviewer has a substantial justification for answering either question as Strength.

- **NA**, if
  
  - Agency contact with the mother or father was determined to be contrary to a child’s safety or best interests (and this is documented in the case file),
  
  - The location of the mother or father was unknown during the entire period under review, despite documented concerted agency efforts to locate her or him,
  
  - The mother’s or father’s parental rights were terminated before the period under review and she or he is not involved in the child’s life, or
  
  - During the entire period under review, the mother or father was not involved in the child’s life or in case planning in any way despite agency efforts to involve her or him.
  
  - Both parents are deceased (during the entire period under review).
  
  - The court has released the agency from involving the mother and father as documented in FSFN or the order is uploaded into FSFN.

*Reference:* Florida Administrative Code 65C-30.007(2) (d); (5) (a), (9) (a-d) & Federal Child & Family Services Review, Well-Being Outcome 1, Item 15; Safety Methodology Reference Guide, Pg. 47
Item 8
Planning for Safe Closure

8.0 Does planning for case closure provide a sequence of strategies, interventions, and supports that are organized into a coherent service process providing a mix of services that fits the child and family’s evolving situation?

- Strength
- Area Needing Improvement

**Core Concepts:** Closure is the point at which the agency no longer maintains an active relationship with the family. The decision to end the agency’s involvement must be based on the monitoring and evaluation of the case. The Adoption and Safe Families Act (ASFA) requires decisions regarding case closure to be made in conjunction with the family and individuals important to the family. The preeminent concerns that inform case closure decisions are based on safety and permanency outcomes. The agency should support the family’s right to self-determination by ending services when the risks to child safety have been reduced significantly and the family and the case manager believe they no longer need services.

The Child Welfare Practice Guidelines were written to ensure that families in any jurisdiction in Florida are afforded common, standardized criteria for the closure of their child welfare case when they are receiving case management as the result of an unsafe child determination.

**Instructions (from Practice Guidelines):** A case should be closed when a determination has been made that the child is now safe.

(a) The child’s parent/legal guardian has substantially achieved all of the outcomes in the case plan pertaining to improved caregiver protective capacities and a safety plan is no longer necessary. A Progress Update has been completed that provides sufficient information and analysis that caregiver protective capacities are adequate to manage any danger threats or danger threats have been eliminated.

(b) The child’s parent/legal guardian has not achieved outcomes in a case plan and

- A relative or non-relative has obtained legal custody of the child and has a demonstrated history of protecting the child from the danger threats associated with the parent(s).
- Parental rights have been terminated and the child has achieved a permanency goal.

Supervisors must approve case closure and a case consultation should be provided to the case manager as needed to explore issues and provide feedback regarding progress and/or challenges in achieving case plan outcomes or permanency goals.

**Instructions and Considerations:** Documentation clearly reflects on-going discussion and completion of activities and regular communication between the family and other entities responsible for the child’s safety. The reviewer should consider:

- Is there evidence that information from service providers is included in the decision to close a case?
- Have services been effective and resulted in behavior changes that are needed for the child to safely remain in the home?
When parents have not cooperated with services during an in-home services case and there is not legal sufficiency to remove the child—does the agency have a plan for case closure. If not, rate as NO.

**Rating Criterion:**

- **Strength**, if documentation clearly reflects on-going discussion and completion of activities and regular communication between families and other entities responsible for the child’s safety prior to case closure.

- **Area Needing**, if documentation does not reflect on-going discussion and completion of activities and regular communication between families and other entities responsible for the child’s safety prior to case closure.

**Reference:** s. 39.6012 (1) (a) & (b) 1-7, F.S.; Safety Methodology Practice Guidelines, Case Management, Pg. 40-41
**Item 9**

**Supervisory Case Consultation and Guidance**

9.0 Is there evidence the case management supervisor is regularly consulting with the case manager, recommending actions when concerns are identified, and ensuring recommended actions followed up on urgently?

- Strength
- Area Needing Improvement

**Applicable Cases:** All cases are applicable for assessment of this item.

**Core Concepts:** Supervisors must be involved in any casework decision that affects child safety and permanence. The supervisor and case manager should collaborate to reach consensus on decisions regarding safety for the child. Since the case manager is the primary holder of the information, the supervisor should review his or her documentation and meet with the case manager to analyze the information. The supervisor and case manager must both be aware of the information needed and why. The case manager must consult with the supervisor to review the observed family condition and discuss what was observed and why the child was assessed to be safe, or if there is evidence of Impending Danger, is evidence to support Present Danger. The supervisory consultation should focus on whether the case manager’s information and observations are sufficient to support the case manager’s conclusion. When the case manager determines there is present or impending danger, the supervisor must explore all aspects of the family condition and ensure the information obtained is reconciled with the core concepts of each.

The following (from the Child Welfare Practice Guidelines) summarizes the required supervisor approvals and case consultations, as well as case consultation that should be offered and available for case managers experiencing family or case dynamics that they need assistance with. The detailed expectations for case management responsibility related to each topic are covered in the respective practice guideline topic.

- **Supervisory Case Consultations Defined:** Supervisor case consultations are guided discussions at specific points in the case management process that apply safety methodology criteria focused on promoting effective practice and decision making. Effective supervisory case consultations provide modeling of strength-based interviewing, encouraging case manager input and ideas; and offering feedback. Case consultations provide the supervisor with venues to learn about the quality of practice of the case managers assigned to them. This includes understanding the interpersonal skills that their case managers use to engage families, knowing how to build effective family teams, critically thinking and assessing family dynamics throughout the life of a case, and ultimately which case managers need additional support and professional development.

- **Case Consultation General Requirements:** Supervisors are expected to have significant expertise to provide consultation around the new concepts in the Safety Practice Model including the foundational skills that case managers must have.

- **Case Consultation and Approval of Safety Plans:** Within five business days of case transfer, the supervisor will conduct a case consultation with the case manager to affirm that the safety plan is reasonable and adequate.
Within 5 days of any safety plan modification: The supervisor will conduct a case consultation with the case manager for purposes of affirming the safety plan.

At critical junctures: the supervisor will conduct a case consultation with the case manager to review safety plans, including but not limited to the following situations:
- a new child is born or comes into the home
- a parent/legal guardian returns to the home
- parent/legal guardian becomes involved in new intimate partner relationship
- significant changes to household composition

Case Consultation Regarding Documentation of the Family Functioning Assessment (FFA)-Ongoing or Progress Update: A supervisory consultation is required in all cases prior to approval of the FFA-Ongoing or Progress Update.

Case Consultation Regarding Family Engagement Standards for Building a Case Plan: Supervisors will provide a case consultation prior to approving a case plan.

Case Consultation Regarding Evaluation of Family Progress: The supervisor is responsible for the approval of any completed Progress Update.

Case Consultation Regarding New Children in an Open Case: Provide supervisor consultation as necessary to ensure the child welfare professional’s due diligence in:
- (a) Gathering sufficient additional information to fully assess the impact of the new child on family conditions and dynamics.
- (b) Seeking the expertise and/or input from other professionals, family members and the family team as to the assessment, safety plan and/or case plan.

Case Consultation Regarding Modifications to a Case Plan: Supervisors will provide a case consultation prior to approving modifications to a case plan.

Safe Case Closure: Approve case closure. Case consultation should be provided to the case manager as needed to explore issues and provide feedback regarding progress and/or challenges in achieving case plan outcomes or permanency goals.

Documentation of Supervisory Case Consultations: The Supervisor will use FSFN functionality to document Supervisor Case Consultations.

The reviewer should look for evidence the case manager was encouraged to critically analyze the information obtained, observations made, and what is known and unknown about the family.

Rating Criterion:

- Strength, if supervision identifies concerns in service provision related to all of the above and recommended actions are followed up on urgently.
Area Needing Improvement, if supervision does not identify noted concerns in service provision related to all of the above and/or if recommended actions are not followed up on urgently.

References: This item is tied to CFSR Safety Outcome 1, Item 3: Services to the family to maintain in the home and Safety Outcome 1, Item 4: Risk and safety management; Safety Methodology Practice Guidelines, Case Management, Pg. 42-49
Items 10 - 12
Data Collection Items

10.0 Was the case consultation completed?

☐ Yes  ☐ No

11.0 Was a Request for Action completed in FSFN for an immediate safety concern?

☐ Yes  ☐ No

12.0 Was this case a safety methodology case?

☐ Yes  ☐ No