



PARENT ATTORNEY TRAINING

CALLAWAY
GARDENS

March 16 - 18, 2022

Effective Case Planning: Moving Beyond “....and follow all recommendations...”

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Case/Family Plan

“...a plan that is designed to ensure that a child receives protection, proper care and case management and may include services for a child, parents, guardian or legal custodian....The case plan is a deliberate, reasonable and mutually agreed upon strategy to ***enhance caregiver protective capacities and eliminate present danger situations and/or impending danger safety threats.***”

Manuals and Policies

DHS Divisions & Offices ▲

- Commissioner Office
- Division of Aging Services
- Division of Child Support Services
- Division of Family and Children Services**
- Office of Budget Administration
- Office of Communications
- Office of Facilities and Support Services
- Office of Financial Services
- Office of General Counsel
- Office of Human Resources
- Office of Information Technology
- Office of Inspector General
- Office of Legislative Affairs and Outreach

Division of Family and Children Services

Subject	Policy	Manual
ADA/Section 504		MAN3400 - Americans with Disabilities Act and Section 504
Child Welfare	POL3000 - Child Welfare	<u>MAN3000 - Child Welfare</u>
Childcare and Parent Services	POL3540 - Childcare and Parent Services	
Claims	POL3450 - Claims	MAN3450 - Claims
Community Services Block Grant		MAN3240 - Community Service Block Grant
Energy Assistance		MAN3270 - Energy Assistance

Policy 10.23

Case Planning

8. Develop the initial case plan in partnership with the family during a Family Team Meeting (FTM) meeting within 25 calendar days of the child entering foster care.

9. Provide written notification of the FTM to develop the case plan to the parent, guardian or legal custodian, the child (if 14 years of age or older), the child's attorney, the Guardian Ad Litem (GAL), and court appointed special advocate (CASA) at least five business days in advance of the meeting.

The Gains Family

- Child is adjudicated dependent due to the mother's unrehabilitated mental health, lack of stable housing and inability to adequately address the child's special medical needs in that he is asthmatic. The Court finds that the mother was previously diagnosed with bi-polar and schizophrenia and is not addressing her diagnoses. In addition, the Court finds that the mother's instability affects her ability to provide everyday care for the child including participating in asthma appointments.

DISCLAIMER

- Between the adjudication hearing and the dispositional hearing, Ms. Stella Gains, the mother, attends a visit with L.J.. At that visit the transporter/supervisor claims that Ms. Gains was late, seemed "out of it" and smelled overwhelmingly like marijuana. The mother also went outside to smoke on a number of occasions and came back with the stench of cigarette smoke which tends to aggravate the child's asthma.

If you want to go fast, you have to slow down...

- CPS history from current and prior states
- Prior assessments and case plans
- Genogram
- Thoroughly track the problem over time
- Consider what has already been tried, what worked in the past
- ADA considerations
- Understand the “non-negotiables”
- Be aware of bias



Partners



Parents



DFCS

Partners

Parents

DFCS

Children

Providers –
Current or
Potential

Informal
Supports

CASA

Caregivers

Attorneys

Parents

DFCS

CASA

Children

CONSENSUS

Providers –
Current or
Potential

Attorneys

Caregivers

Informal
Supports



Outcomes

What will be happening to create safety



Outcome Drift:

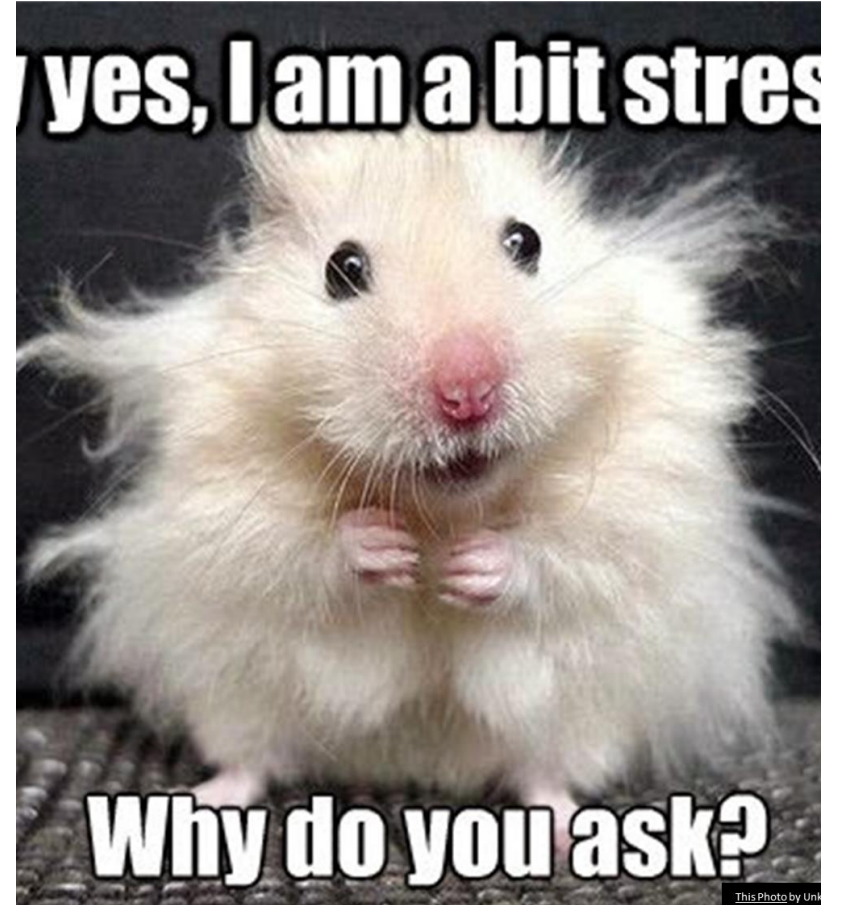
Losing focus on the
safety priorities



Get a psychological
and.....

Get a substance
abuse assessment
and.....

Get a domestic
violence assessment
and.....



Tasks

- SMART
- Include only those tasks relevant to achieving the outcome
- Address transportation
- Update the case plan with the family and provider upon receipt of recommendations from providers





Quality Assessment



- Collaboration prior to assessments
- Testing used is highly reliable with inter-rater reliability
- Addresses bio-psycho-social issues
- Administered by someone with the proper credentials
- Clear/easy interpretation of the raw data that was used for testing
- Provides specific recommendations & the order of services

Impact on Reasonable Efforts

The psychologist recommended in the psychological that Mr. Brown should receive a particular type of therapy. This was included in the case plan. The therapist, after meeting with Mr. Brown several times, decided that Mr. Brown needed a different type of therapy. At a review hearing, the therapist testified about Mr. Brown's lack of progress. Judge Lock made a "no reasonable efforts" finding because Mr. Brown was not receiving services that were identified as necessary by the psychologist and court ordered.

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Compliance or Progress?

Are the
parents/children
participating in
services?

What effect has the
service had on
behavior change by the
parents or the well-
being of the child?

- How long has this provider been working with this family/individual?
- How many sessions have been scheduled? How many completed? Reasons for missed sessions?
- When did the provider last see the client?

The Treatment goals are:

The goals are consistent with recommendations from assessments or evaluations? If not, why not?

Evidence of progress on treatment goals: (How has insight increased? What behaviors have changed?

Include - Is parent able to identify high-risk situations that could make him/her relapse? Is parent aware of signs that those high-risk situations might be approaching? What is parent doing from day to day to prevent himself from getting into high risk situations? What coping skills is parent using? What is Plan B or even Plan C?)

If no progress or minimal progress, what needs to change?

How much longer does the provider project the service will be needed?

How does the above information impact child safety?

Recommendations?

Resistance

Context of child protection
work

Feelings associated with
change

Denial or minimization

Behavior of “expert”

Social structure

Trauma



Trust

Practical help

Listen

Words matter

Seek exceptions

Involve the family

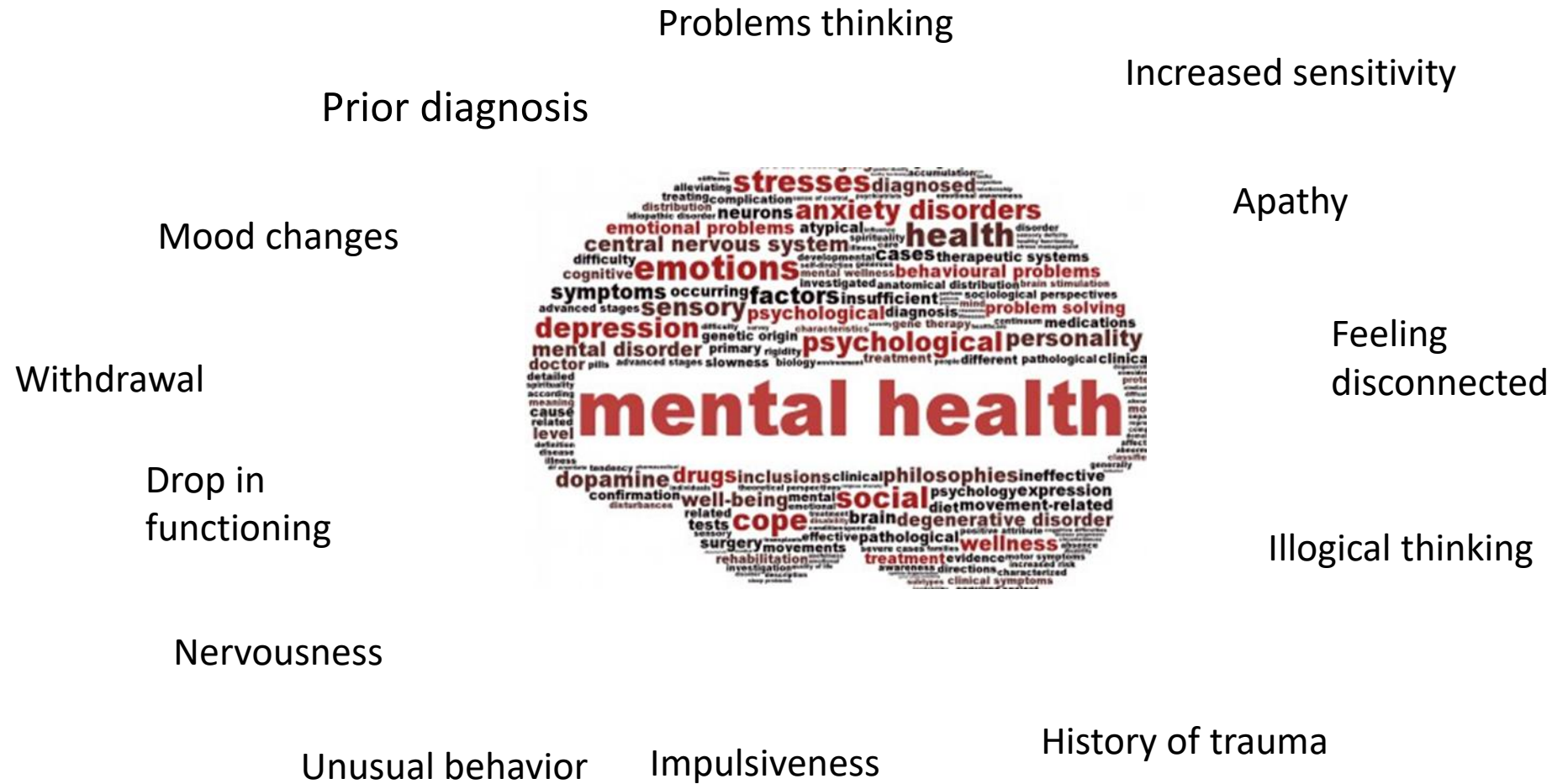
Empower



A background image showing two hands, one from a darker-skinned person and one from a lighter-skinned person, holding each other. The hands are silhouetted against a bright, hazy sunset or sunrise over a body of water. The text "Mental Health" is overlaid in white, bold, sans-serif font, centered horizontally. Below the text is a thin, white, wavy horizontal line.

Mental Health

DIVISION OF FAMILY & CHILDREN SERVICES



Choosing a Treatment Provider

Ask about the therapist/counselors training and experience in the field of traumatic stress, etc including:

- What is your formal training background?
- What is your treatment philosophy and approach (methods)?
- Which evidence-based interventions are you trained to use?
- What specific training have you had in the area of trauma?
- How long have you been doing this work and with how many people?
- How will we know when we are finished?



Progress Indicators

- More supportive relationships
- Finding a niche in the community
- Commitment to treatment
- Managing symptoms
- Recognizes impact on their children.



The family will use their plan to ensure that LJ has a safe place to live and that his medical needs are met so LJ will be healthy and safe from harm.

- DFCS will help Ms. Gains fill out applications for independent housing by 5/1/2022.
- Ms. Gains will maintain safe housing for at least six consecutive months.
- Ms. Gains will attend all of LJ's medical appointments either in person or virtually.
- DFCS will ensure that Ms. Gains is notified of all of LJ's medical appointments.
- Ms. Gains will ensure that DFCS has contact information for Ms. Gains.
- Ms. Gains will refrain from smoking and handle LJ gently when visiting LJ.
- DFCS and Ms. Gains will update the case plan within 7 days of receiving the results of Ms. Gains parental fitness assessment.

Ms. Stella Gains will use her plan to keep herself from becoming overwhelmed, without using marijuana, so she can provide LJ with stability, meet his medical needs, and keep him safe from physical and emotional harm.

- By 4/22/2022, Ms. Gains will sign releases for past mental health records.
- By 5/6/2022, Ms. Gains will begin to participate in weekly counseling with ABC Counseling to address stress management and managing her feelings.
- Ms. Gains will complete a psychological and parental fitness assessment with Dr. Priscilla Faulkner at Southeastern Psychological Associates on 5/10/2022 at 9:00 am.
- DFCS will pick up Ms. Gains from her home at 8:00 am on 5/10/2022 and drive her to Dr. Faulkner's office.
- On 5/12/2022 at 10:00 am, Ms. Gains will complete a substance abuse assessment with Telehealth via Zoom.
- DFCS and Ms. Gains will work with Dr. Faulkner and Telehealth to update the case plan within seven days of receiving the results of the assessments.

The family will use their plan to ensure that LJ has a safe place to live and that his medical needs are met so LJ will be healthy and safe from harm.

- Ms. Gains will maintain safe housing for at least six consecutive months.
- Ms. Gains will attend all of LJ's medical appointments either in person or virtually so that she can learn to manage his special needs.
- DFCS will ensure that Ms. Gains is notified of all of LJ's medical appointments.
- Ms. Gains will ensure that DFCS and the parent aid have contact information for Ms. Gains.
- Beginning the week of 5/29/2022, Ms. Gains will work with the parent aid at least twice per week to learn how budget her money, develop a schedule, and to nurture LJ without becoming overwhelmed with his special care needs.
- Ms. Gains will refrain from smoking and handle LJ gently when visiting LJ.
- By 8/1/2022, Ms. Gains will identify at least one support person that can safely care for LG and is approved by DFCS if she begins to feel overwhelmed.

Ms. Stella Gains will use her plan to keep herself from becoming overwhelmed without using marijuana so she can provide LJ with stability, meet his medical needs, and keep him safe from physical and emotional harm.

- Ms. Gains will complete a psychiatric evaluation at Pathways Behavioral Health on 5/30/2022 at 9:30 am.
- On 5/30/2022, DFCS will pick up Ms. Gains at 9:00 am from her home and transport her to Pathways.
- Ms. Gains will take medication as prescribed by Pathways Behavioral Health.
- Ms. Gains will participate in random drug screens at least twice per month and test negative for at least six consecutive months.
- Beginning 6/7/2022, Ms. Gains will participate in an evidence-based group once per week, such as Parenting Without Partners, to help her learn to manage her symptoms of bipolar disorder without using marijuana and interact with others without using violence.
- With the help of Parenting Without Partners, Ms. Gains will identify triggers and coping skills and document times she was able to use the coping skills.
- By 7/1/2022, DFCS will help Ms. Gains apply for SSI.
- By 7/1/2022, Ms. Gains will identify and engage in a meaningful activity at least once per week (such as a hobby, church, volunteer.)
- If there are changes needed in Ms. Gains' treatment, DFCS and Ms. Gains will work with the providers to update the case plan.

What about Al Jones????

- Correlation between engagement with non-custodial parents and fewer subsequent allegations of child maltreatment
- Faster achievement of permanency
- Help with safety planning
- Possible placement
- Better outcomes for kids



Fathers Matter

- **LOCATE**
- **ENGAGE**
- **ASSESS**
- **SERVE**

- Mr. Jones will provide DFCS with his contact information by
- Mr. Jones will take steps to legitimize his child.....
- Mr. Jones will meet with DFCS so his needs can be assessed....
- Mr. Jones will complete assessments that will assist in determining services that will help him develop and maintain a healthy relationship with LG....
- DFCS will assist Mr. Jones with transportation to assessments.....

Evidence-Based Clearinghouses

Interventions are rated based on the strength of the research evidence supporting a practice or program:

- 1 – Well Supported by Research Evidence
- 2 – Supported by Research Evidence
- 3 – Promising Research Evidence

<https://www.cebc4cw.org>

<https://familyfirstact.org/resources/prevention-services-clearinghouse-website>

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