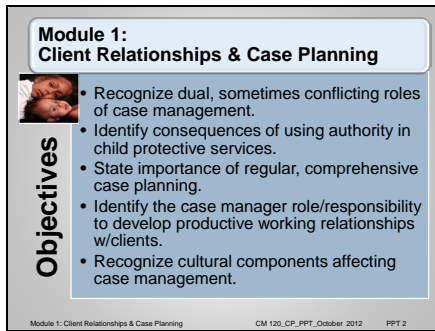


Case Planning Power Point Slides

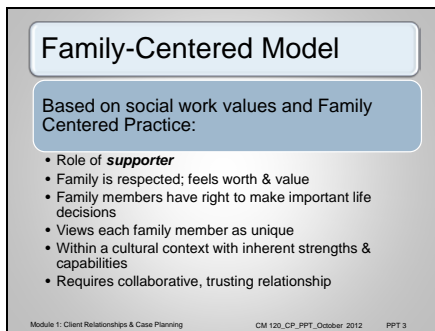
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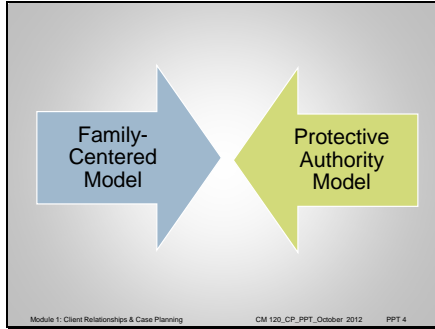
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Slide 4



Slide 5

Family-Centered Model

Empower the family to actively participate in case plan development & implementation:

- Assess needs
- Decide goals & direction for change
- Plan activities & identify resources
- Carry out activities to reach goals
- Evaluate success & revise plan for change

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Protective Authority Model

Role of **enforcer**

Assumes agency knows best

You determine changes the family needs to assure child protection

You tell the family how to comply with agency expectations

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Planning Defined

Cognitive process of thinking through a course of action to

- achieve a goal or
- solve a problem

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The Planning Process

- Gather & organize information
- Evaluate information
- Make decisions about goals & outcomes
- Explore options
- Identify resources
- Decide courses of action
- Determine activities to be performed
 - by whom
 - how, when, where, how often
- Document process & guidelines to implement

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Reacting Defined

Responding

- without fully evaluating or thinking about the situation before acting

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Planners

- learn how to plan properly
- prioritize time for planning activities
- accept responsibility for their plans
- realize that they may not always be right
- able to support choices when criticized
- recognize when they make wrong decisions & change them

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Reactors

- Avoid responsibility
- Blame others or the whole system for failures
- Feel ineffective dealing with the job's needs and problems

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Three Core Helping Conditions

Authenticity/
Genuineness

Empathy Respect

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Demonstrate Empathy

Step One	Step Two
<ul style="list-style-type: none">• Recognition: Recognize other person's experience, feelings, non-verbal communication	<ul style="list-style-type: none">• Reflection: Communicate an understanding of the person's experience & feelings in words

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Engage Families

Process begins with first contact
Build rapport by building trust & respect
Demonstrate empathy
Explain agency authority & involvement
Involve parents in all aspects of casework process
Identify, build, & support parents' strengths

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Engagement Skills

What interviewing strategies can you recall for these skills

- Core Conditions
- Exploring Skills
- Focusing Skills
- Directing Skills

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Culture

- ...is a system of values, beliefs, standards for behavior, and rules of conduct

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Making Eye Contact

- "I want to get to know you"
- "I like you" or "I am interested in you"
- "I see you as an equal"
- "Eye-to-eye"
 - May reflect challenge, aggressiveness, intent to overpower or fight another person, or
 - Disrespect to someone in a position of authority, (e.g., an elder)

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Avoiding Eye Contact

- shyness
- ↓
- desire to ignore/avoid contact; unwillingness to be friendly
- ↓
- symptom of deceit & not telling the truth; e.g., "look me in the eye and tell me the truth"
- ↓
- respect & deference to esteemed or honored position

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Calling by First Name

Implied **friendliness**, equality, & barrier dropping

- Using "Mr." or "Mrs." is seen as maintaining an artificial distance or
- A sign of disrespect
- some cultures view use of first names when not very close friends as rude
- using "Mr." or "Mrs." acknowledges respect for age, position or deference

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The Use of Specific Words

You ask the mother if she is willing to attend a school conference-
The mother answers, "I don't care."

<p>In your culture, "I don't care." is a polite way of saying you don't want to do something.</p> <ul style="list-style-type: none">• interpreted as non-committal, avoidance• You decide she isn't motivated, & drop it.	<p>In her culture "I don't care." means "No reason not to...it's fine with me."</p> <ul style="list-style-type: none">• She doesn't understand why you didn't follow through & thinks you are unreliable.
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Culture Rules Regarding Relationships

In some cultures it is inappropriate to talk with certain family members without prior discussion with key family member.

Ignoring the "proper" way to approach the family communicates disrespect or deviousness & may ultimately close off communication.

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Module 2: The Case Assessment

Objectives:

- Recognize factors to consider in case assessment process.
- Use family assessment to ID problems & causes to assess family strengths & needs.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 23

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Environmental Factors

- Physical condition of the home
 - Appliances
- Hazards present in the home and yard
- Community hazards (abandoned buildings, violence, drug house, pedophile)
- Access to services
- Services available in the community
- Support system available to the family
- Presence of utilities and/or plumbing

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 24

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Child Factors

- Age
- Child/Parent Interactions
- Attachment to Caretaker/Siblings
- Behaviors
- Physical Emotional, Cognitive, Developmental Age & Stage
- Sleep Habits
- Community visibility
- Persons in home
- Energy/activity level
- Potty trained
- Cultural identity
- Loss & separation issues
- Prior Maltreatment History

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 25

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Identify Problems

Review all case file documents & assessments

Identify conditions & behaviors that result in risk

- to child's safety, well-being, and permanence

Base problems on verified maltreatments

Write problem statements that describe:

- behaviors & conditions that result in risk to the child
- include parent's acts & behaviors: "who" did "what" "to whom" resulting in "what"

Examples

- Bobby's father beat him repeatedly with a belt leaving numerous bruises and welts on the child's lower back, buttocks and thighs.
- Daniel exhibits aggressive behavior in the classroom.

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Maltreatment Scenarios: Problem Statements

- The Kincaid's 3-year old child has access to a non-working refrigerator & got trapped inside while playing unsupervised.
- The Kincaid family's 3-year old toddler is not consistently supervised.
- Mr. Rickards uses excessive corporal punishment to discipline his 4-year old son, David.
- David uses severe physical aggression towards his classmates.
- David is living in a temporary out-of-home placement.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 27

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Maltreatment Scenarios: Problem Statements

- The Benitos parents do not feed their 3 children 3 nutritious meals each day with at least 2 in their home and 1 at school during the school year.
- At birth, Mrs. Silver's baby tested positive for crack cocaine and she admitted to using drugs during her pregnancy.
- At birth, Mrs. Silver's baby was premature and weighed 4 pounds.

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Assess Needs

- Need directly relates to problem
- Need statements restates problem in positive terms
- A service is NOT a need
- What does the child need for safety, well-being and permanence?

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 29

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Sample Need Statements

Problem: "Bobby's father beat him repeatedly with a belt, leaving bruises and welts on the child's lower back, buttocks and thighs".

- Need: Bobby needs to be protected from physical abuse.
- Need: Bobby's father needs to use alternative means of disciplining Bobby.

Problem: Daniel exhibits aggressive behavior in the classroom.

- Need: Daniel needs to control his aggressive behavior.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 30

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**Maltreatment Scenarios:
Need Statements**

Problems:

- The Kincaid's 3-year old child has access to a non-working refrigerator and got trapped inside while playing unsupervised.
- The Kincaid family's 3-year old toddler is not consistently supervised.

Needs:

- The Kincaid's 3-year old needs to live in a home free of environmental hazards.
- The Kincaid's 3-year old needs consistent supervision .

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**Maltreatment Scenarios:
Need Statements**

Problems:

- Mr. Rickards uses excessive corporal punishment to discipline his 4-year old son David, by hitting him with an extension cord leaving lacerations on his back and upper leg.
- David uses severe physical aggression towards his classmates.
- David is living in a temporary out-of-home placement.

Needs:

- Mr. Rickards needs to learn alternative means of discipline that will not harm his 4-year old son.
- David needs to control his aggressive behavior.
- David needs to live in a safe, permanent home.

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**Maltreatment Scenarios:
Need Statements**

Problem:

- The Benitos parents do not feed their 3 children 3 nutritious meals daily with at least 2 in their home and one at school during the school year.

Needs:

- The Benitos children need to be fed 3 nutritious meals each day with at least 2 in their home and one at school during the school year.
- The Benitos parents need to manage their income so that there is sufficient money to provide nutritious meals for their children.
- **The agency cannot stop them from gambling.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 33

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Maltreatment Scenarios: Need Statements

Problems:

- At birth, Mrs. Silver's baby tested positive for crack/cocaine, and she admitted to using drugs during her pregnancy.
- At birth, Mrs. Silver's baby was premature and weighed 4 pounds.

Needs:

- Mrs. Silver needs to provide a drug-free environment for her child.
- The child needs to live in a drug free environment to develop his physical, mental, and emotional health and well-being despite his drug exposure.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 34

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Deciding Causes

Focus on child's needs

Convey problems in terms of the child's need for safety, well-being, & permanence

Conference with family & encourage their input re: causes

Identifying underlying causes helps individualize the case plan

Focus outcomes & tasks to individualize the case plans & avoid "boiler plate" plans

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Maltreatment Scenarios: Causes

The Kincaid family has not removed the non-working refrigerator from the yard where the toddler has access to it.	Mr. Rickards reports that his father used the same method of discipline, and he turned out okay.
The Benitos parents are spending a large amount of money on gambling.	Mrs. Silver exposed her unborn child to crack/cocaine during her pregnancy.

Module 2: The Case Assessment CM 120_CP_PPT_October 2012 PPT 36

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Module 3: The Case Planning Process



Objectives:

- Identify case plan statutory requirements.
- Identify the case planning process components.
- Describe case plan writing mechanics.
- Apply case planning methodology & statutory requirements to draft case plan.
- Describe steps you must take when caregiver is unwilling/unable to participate in a case plan.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 37

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Case Plan Defined

FS 39.01(11)

- document prepared with input from all parties
- follows the child from voluntary services through any dependency, foster care, termination of parental rights proceeding or related activity or process F.S. 39.01(11)

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 38

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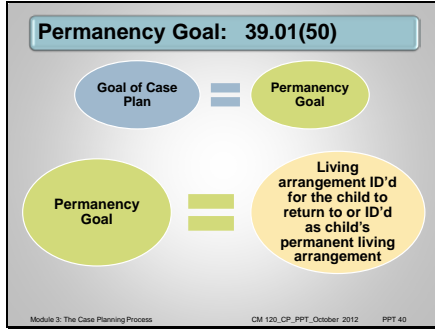
Zahid's Law HB 381

Zahid Jones, Jr., Give Grandparents and other Relatives a Voice Act"

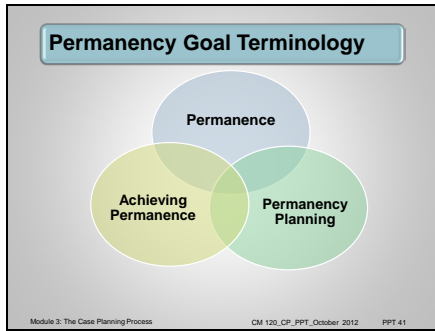
- Goal: To establish a more effective protocol for engagement of relatives and assurance that their voice will be heard during investigative and judicial processes.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 39

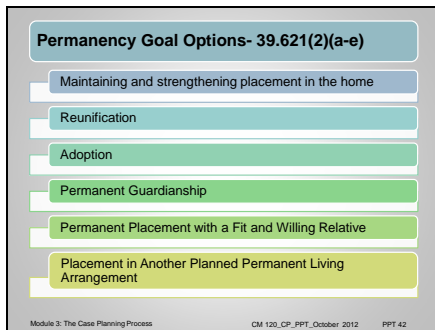
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Statutory References to Outcomes
F.S. 39.6012(1)(b)(7)

Case plan must describe each task the parent must comply with & services to be provided to the parent, addressing the specific identified problem.

- Description of measurable outcomes
- Specify timeframes to achieve case plan outcomes address specific problem(s)

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 43

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Criteria for Outcomes

- Relate to child's safety, well-being, permanency
- Express positively
- Use action verbs (e.g., demonstrate, develop, practice, apply, etc.)
- Realistic & possible to achieve

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Case Plan Outcomes

Relate to problems & causes to satisfy needs & state:

- who is responsible
- what he/she must do – what action/behavior to:
 - address the problems, causes, needs
 - alleviate the risk to the child
 - reach the permanency goal for the child

Measurable by task

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 45

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Outcomes must be Measurable

Express in terms of behavior or situation change.

Describe whose behavior or what situation to change.

Describe how the change will be demonstrated.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 46

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Writing an Outcome:

Problem: • Ms. Dolly lets her children remain in an unsafe, unclean environment that places them at risk (soiled bedding, bug infestation, feces on the floor, unclean clothing).

Need: • Children need to live in a home free of environmental hazards.

Cause: • Financial needs (husband does not pay child support) and possible mental health problems (previous medication for depression).

Outcome: • Ms. Dolly will keep her home clean, sanitary, and free of hazardous conditions and will, upon reunification and overnight visits, keep her children and their clothing clean and sanitary.

Outcome: • Ms. Dolly will receive treatment for her depression by a licensed mental health agency, so she can ensure the safety and well-being of her children.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 47

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The Kincaid Family

Problem #1: • The Kincaid family's 3-year old child has access to a non-working refrigerator and got trapped inside while playing unsupervised.

Need: • The Kincaid's 3-year old needs to live in a home free of environmental hazards.

Cause: • The Kincaid family has not removed the non-working refrigerator from the yard where the toddler has access to it.

Outcome: • The Kincaid parents will provide a home free of environmental hazards.

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The Kincaid Family

Problem #2:

- The Kincaid family's 3-year old toddler is not consistently supervised.

Need:

- The Kincaid's 3-year old needs consistent supervision.

Outcome #2:

- The Kincaid parents will provide consistent supervision for their 3-year old child.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 49

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The Rickards Family

Problem #1:

- Mr. Rickards uses excessive corporal punishment to discipline his 4-year old son David, by repeatedly hitting him with an extension cord leaving lacerations on his back and upper leg.

Need:

- Mr. Rickards needs to learn alternative means of discipline that will not harm his 4-year old son.

Cause:

- Mr. Rickards reports that his father used the same method of discipline, and he turned out okay.

Outcome #1:

- David will live in an environment free of physical abuse.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 50

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The Rickards Family

Problem #2:

- David uses severe physical aggression towards his classmates.

Need:

- David needs to control his aggressive behavior.

Outcome #2:

- David will interact with his classmates in a calm, non-aggressive style.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 51

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The Rickards Family

Problem #3: • David is living in a temporary out-of-home placement.

Need: • David needs to live in a safe, permanent home.

Outcome #3: • David will live in a safe, permanent home.

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The Benitos Family

Problem: • The Benitos parents do not feed their 3 children 3 nutritious meals daily with at least 2 in their home and 1 at school during the school year.

Need: • The children need to be fed 3 nutritious meals each day with at least 2 in their home and one at school during the school year.

Need: • The parents need to manage their income so that there is sufficient money to provide nutritious meals for their children.

Cause: • The parents are spending a large amount of money on gambling.

Outcome: • The parents will ensure their children receive 3 nutritious meals a day by managing their income.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 53

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The Silver Family

Problem: • At birth, Mrs. Silver's baby tested positive for crack cocaine, and she admitted to using drugs during her pregnancy.

Problem: • At birth, Mrs. Silver's baby was premature and weighed 4 pounds.

Need: • Mrs. Silver needs to provide a drug-free environment for her child.

Need: • Child needs to live in drug free environment to develop physical, mental, & emotional health & well-being despite drug exposure.

Cause: • Mrs. Silver exposed her unborn child to crack cocaine during pregnancy.

Outcome: • Beginning immediately after evaluation results, Mrs. Silver will provide for the child an environment free of drugs as evidenced by clean random drug urinalysis.

Outcome: • Mrs. Silver's newborn baby will have his physical, emotional, and mental health needs met.

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Tasks – F.S. 39.6012(1)(b)1-7

Case plan must include:

- description of the parents' tasks and
- services for parent & child, that specifically address identified problem:
 - services/treatment types
 - date each service/referral will be provided
 - date parent must complete each task
 - services/treatment frequency
 - service delivery location
 - accountable agency staff or service provider

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 55

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Tasks Identification Steps

For each Outcome:

- Describe available community services and resources available
- Brainstorm additional resources (e.g., family, friends, etc.)
- Select best options to meet each desired outcome
- List tasks, clarify who is to do what, when, where & how often

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 56

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Tasks: The Silver Family

- Outcome 1: Beginning immediately, after evaluation results, Mrs. Silver will provide for the child an environment free of drugs as evidenced by clean random drug urinalysis.
 - Mrs. Silver will submit to random urinalysis within 24 hours of request by the Case Manager.
 - Failure to comply within the time frame will result in presumption of a positive screen.

Task 1

- Mrs. Silver will contact (program name) to set up an appointment for an evaluation within 1 week of the Case Manager's request.

Task 2

- Mrs. Silver will complete the evaluation and provide documentation to the Case Manager within 3 days of completing the evaluation.

Task 3

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Tasks: The Silver Family

Task 4

- Mrs. Silver will begin to follow all recommendations by the evaluator beginning on the date of the written evaluation.

Task 5

- The Case Manager will make necessary referrals as needs are identified to the evaluation/treatment program (program name).

Task 6

- The Case Manager will request urinalysis screenings on a random basis.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 58

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Tasks: The Silver Family

- Outcome 2:** Mrs. Silver's newborn baby will have his physical, emotional and mental health needs met.

Task 1

- The child will be referred to a developmental clinic/specialist to determine an appropriate intervention to reduce or eliminate the effects of the drug exposure on his future development.

Task 2

- The Case Manager will make a referral for the child to the Developmental Clinic within 5 days of the acceptance of this case plan.

Task 3

- The caregiver will assure the child goes to each developmental assessment and intervention appointment and will follow the recommendations of the treatment specialists.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 59

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Tasks: The Silver Family

Task 4

- Mrs. Silver will participate in the developmental clinic appointments and follow the recommendations of the treatment provider during her visits with her child.

Task 5

- Mrs. Silver, upon return of the child into her custody, will maintain in contact with the developmental clinic and follow the recommendations of the treatment specialists following successful reunification.

Module 3: The Case Planning Process CM 120_CP_PPT_October 2012 PPT 60

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Module 4: Integrating Child & Family Needs into Case Plan

**Domestic Violence
It's Not Enough
Make It
STOP**

Objectives:

- Describe how to integrate child's mental health needs w/other interventions & case plan services.
- Name case planning issues related to domestic violence.

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 61

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Problem/Need Statement

Problem:

- Marcus is acting out aggressively with classmates.

Need:

- Marcus needs to demonstrate positive methods for dealing with his aggression.

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 62

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Outcome

- Marcus will attend counseling sessions to learn to deal with his aggression until the LCSW determines that substantial progress has been made.

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 63

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Task Statement

- Marcus's caregiver's will arrange for him to be transported to the Community Mental Health Clinic for counseling on Thursday afternoons until his therapist ends the treatment.
- Case Manager will call the clinic, at least monthly, to ensure attendance.

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 64

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Children Jointly Served by CBC and DJJ

Children in DCF's legal or physical custody in paid out-of-home care, &

- in secure detention facilities & residential programs through commitment to DJJ program, or
- on probation in lieu of commitment to a DJJ program

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 65

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CBC/DJJ Relationship

You must

- Share information with DJJ regarding child's background, family history, service history
- Participate with DJJ during initial planning and during transition back into the community

DJJ must

- Provide monthly progress reports to you regarding services and sanctions

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 66

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Responsibilities for Assessment & Provision of Mental Health Services

DJJ Counselor:

- children in secured detention on a long-term basis

You:

- children in licensed care
- children in temporary, short-term secured detention
- (Within 5 days of any placement change between agencies, must meet with DJJ counselor to transition services)

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 67

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Day Treatment

You

- retain responsibility for treatment provision and monitoring

DJJ

- retains responsibility for monitoring progress at day treatment program

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 68

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Commitment

You participate in commitment hearing for service transition

You/ DJJ/Child/Family/Others meet to develop case plan

DJJ coordinates services w/ you & provides monthly progress reports & ongoing JRSS/CPU information

You continue visitation planning in accordance with DJJ facility visitations policy

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 69

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Principles of Intervention

Protect children	Increase children's well-being by increasing their mother's safety
Increase children's safety by supporting the autonomy of the adult victim	Hold the batterer, not the victim, responsible for the abusive behavior

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 70

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Supportive Services Network

- Social Services
- Counseling
- Al-Anon meetings
- Church
- School

Module 4: Integrating Child & Family Needs into Case Plan CM 120_CP_PPT_October 2012 PPT 71

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Module 5: Concurrent Case Planning

Objectives

- Identify basis for concurrent case planning.
- Describe key concepts of concurrent case planning.
- Identify when to use concurrent case planning.

Module 5: Concurrent Case Planning CM 120_CP_PPT_October 2012 PPT 72

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Concurrent Case Planning- 39.01(19)

What is concurrent case planning?

- Establish case plan permanency goal using reasonable efforts to reunify the child with the parent, while at the same time establishing another goal.
- Concurrent efforts to more quickly move children from foster care to a permanent family.

Module 5: Concurrent Case Planning CM 120_CP_PPT_October 2012 PPT 73

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Good Prognosis Indicators

- Parent-child relationship
- Parental support systems
- Past support systems
- Family history
- Parent's self-care and maturity
- Child's development

Module 5: Concurrent Case Planning CM 120_CP_PPT_October 2012 PPT 74

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Poor Prognosis Indicators

- Dangerous lifestyle
- Significant child welfare history
- Inherent deficits

Module 5: Concurrent Case Planning CM 120_CP_PPT_October 2012 PPT 75
