



Series: 100: Case Management

Policy Name: Case Supervision

Policy Number: 105

Regulations: F.S. Chapter 39. F.A.C 65C-30, CFOP 170-1

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Policy: It is the policy of Communities Connected for Kids to assign a single case manager to children and families under case management supervision. Each case manager is part of a case management team that has peripheral knowledge of the case for purposes of support and coverage. The primary goal of case management for children served in-home is to ensure that safety plans are monitored, danger threats are mitigated, protective capacities are continually assessed. This also includes the provision of services to support and to prevent unnecessary placement in out-of-home care. The primary goal of case management for children receiving out-of-home care is to ensure child well-being, stability, and services for the child and family to ensure that permanency is achieved within 12 months. The case managers will provide case management, services and supports, based on ongoing assessments and court orders. This procedure ensures continuity in case supervision when a referral for services has been made by the Child Protective Investigations unit to Communities Connected for Kids.

Procedure:

1. The case manager is the person who coordinates all services rendered to the child or family and who serves as the single and continuous point of contact for the child and family from entry into services until exit from services. The actual transfer of case management responsibility occurs at the Case Transfer staffing. However, under local agreement with DCF, case management may also begin to assist with the needs of children placed in out of home care one business day after notification of the removal.
2. Initial case supervision when a child is placed in shelter status requires the case manager to:
 - a. Make the referrals for all needed services.
 - b. Ensure the Child Health Check-up is completed timely. Florida requirement is within 5 days, best practice is within 72 hours.



- c. The Child Resource Record (“green book”) is completed within 72 hours (3 days) of the initial placement and contains information about the child’s health needs. This is provided to the foster parents or other caregivers and must accompany the child during the child’s time in out of home care.
 - d. Refer for Comprehensive Behavioral Health Assessment within 72 hours of removal.
 - e. Completing a diligent search for a missing parent and exploring relative placements including referral for Family Finders.
 - f. Notify Children’s Legal Services if an out-of-state placement appears possible so a request for priority placement home study can be made.
 - g. Keep the parent/guardian informed of the case status.
 - h. Arrange for family visitation as determined by the court. Terms of family visitation should be outlined in the out of home safety plans including who, where, when and how the supervisor of visit will control any danger threats.
 - i. Visit the child once per week (minimum).
 - j. Handle any placement disruptions and request MDT (Multi Disciplinary Team) staffings timely for all placement moves
 - k. Conduct a home visit for children & caregivers following a placement move within 3 business days to assess for safety, well being, and service needs. For out of circuit placements only, the placement change contact by case management may be made virtually (children to be interviewed separately) until OCS in person services are established.
3. Communities Connected for Kids contracts with the Children’s Home Society for case management services in 3 of the 4 counties in Circuit 19. Children’s Home Society is responsible for cases in Martin, Indian River and Okeechobee counties. Communities Connected for Kids is responsible for cases in St. Lucie County.
4. The responsibilities of case managers will be the same across both case management agencies and based upon child and family needs and determinations made at the Case Transfer Staffing and, will include:
- a) Collecting all assessment information from any records and working to secure assessments, as needed.
 - b) Provide ongoing family functioning assessment and monitoring of child and family which includes safety planning, well-being and permanency.
 - c) Developing and coordinating a Family Service Case Plan with the family that is based on identified strengths and needs, includes cultural considerations and identifies service needs for any clients with disabilities
 - d) Working with the staff to access services from network providers.
 - e) Work with the Placement staff to determine level of care, when a placement in paid out of home care is needed.
 - f) Coordination with the permanency specialist in each respective county to provide prospective, concurrent, and retrospective review and to monitor the success of cases to reach timely permanency.
 - g) Providing ongoing case management and coordination with any other system of care and with the courts.
 - h) Ongoing coordination with providers of health care services and others that are part of the child's life.
 - i) Having regular and meaningful contact with the child/adolescent and family (minimum of every 30 days and as a best practice twice per month when feasible)
 - j) Ensure visitation and services defined in the case plan are being provided by the agency serving the child.
 - k) Assisting the child welfare legal attorney with all court activities that may be necessary: shelter hearing, affidavits, dependency petition, arraignment and review hearings, adjudicatory hearing, predisposition



study, judicial case plan approval/disposition hearing, priority placement home study request, order of compliance, and all related documentation.

- l) Work with the DCF legal counsel, paralegals to prepare court-related documents within the time frames defined.
- m) Stabilizing crisis situations and assisting the Child Protective Investigators in working with the family on any subsequent abuse reports.
- n) Prepare updated progress updates including safety analysis prior to recommending termination and document case closure and after care services/activities.

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