

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL	
	Tool: Face-to-Face Contact Guide	Effective Date: July 3, 2024
	Reference: 5.C Face-to-Face Contact [SF 53557])	Version: 3

This tool may help guide the Family Case Manager (FCM) to conversationally discuss the child's safety, stability, permanency, and well-being, as well as the caregiver's strengths and needs in caring for the child during face-to-face contact with the child, parent, guardian, custodian, and/or resource parent. The [Face-to-Face Contact \(SF 53557\)](#) form may be utilized to document notes if necessary.

SAFETY
Child Abuse and/or Neglect (CA/N) <ul style="list-style-type: none"> Is the child free from CA/N (i.e., exploitation, domestic violence, exposure to substance use)? Who are the family's informal supports (e.g., family and friends) outside of the home that are able to help support and care for the child, and is the family utilizing the informal supports? Is there evidence to support that the parent or caregiver has the ability and willingness to protect all children, including a new child, residing in their home?
Home Safety <ul style="list-style-type: none"> Is the child's environment safe (e.g., following age appropriate safe sleep, meeting sanitary standards, pest control, restricting access to medication)? Is there anyone in the home, or any home circumstance, that would pose a threat to any children, including a new child, residing in the home?
Child's Feelings <ul style="list-style-type: none"> Does the child feel safe in all environments (i.e., home, placement, school, community, during services)? What are the child's feelings regarding current placement, services, and/or the permanency plan?
Protective Strategies <ul style="list-style-type: none"> What are the shared protective strategies with the team? Have all Child and Family Team (CFT) and Case Plan Conference members been afforded the opportunity to provide input into the Safety Plan and/or Plan of Safe Care? What is the parent or caregiver's plan to ensure the child's safety for the new child residing in their household? What are the resources available and accessible to the family? What resources are they engaged in currently? What resources has the family identified that they may need?
STABILITY
Consistency <ul style="list-style-type: none"> Does the child have consistent routines, relationships, etc.? Has the child experienced recent changes in the child's daily setting (e.g., change in household composition and school)?

<p>Placement Needs (if applicable)</p> <ul style="list-style-type: none"> Is the current placement meeting the needs of the child? Assess the needs of the resource parent in caring for the child (i.e., access to community resources, financial need, licensure, etc.)
PERMANENCY
<p>Daily Living</p> <ul style="list-style-type: none"> Is the child's daily living stable and free from risk of disruption? Have there been recent changes to the composition of the home?
<p>Behavioral and Emotional</p> <ul style="list-style-type: none"> Has the child experienced a change resulting from behavioral difficulties or emotional disorders since the last visit?
<p>Permanency Plan</p> <ul style="list-style-type: none"> Are all CFT and Case Plan Conference members aware of the child's permanency plan? Does the team have a shared understanding of the long-term view for the child? Does the child's permanency plan include relationships that will endure lifelong? Is there a second permanency plan in place for the child?
WELL-BEING
<p>Emotional</p> <ul style="list-style-type: none"> Does the child display age-appropriate emotional development, coping skills, self-control, and behavioral functioning in daily settings and activities with others? Does the child express a sense of belonging or seem bonded to family and/or friends?
<p>Physical</p> <ul style="list-style-type: none"> Observe and document the child's physical condition (e.g., child's skin [free from marks and bruises], teeth, hair, etc.). Repositioning, removing blankets, and changing light may be necessary to appropriately observe the child. Are there concerns regarding personal hygiene practices (e.g., bathing, dental, etc.)? Is the child achieving key physical (e.g., growth-height, weight, head circumference) and developmental milestones?
<p>Health Care</p> <ul style="list-style-type: none"> Is the child achieving their optimal and best attainable health status? Is the child's Medical Passport up to date? Does the parent and/or caregiver have the capacity and support necessary to address any identified special medical needs (e.g., medication, medical equipment, compliance with physical and/or specialist appointments, emergency procedures, and appropriate food and/or supplement for a special diet)?
<p>Educational</p> <ul style="list-style-type: none"> Is the child achieving at a grade level appropriate for their age? Has the child experienced recent successes and/or disciplinary actions at school? Has the child experienced any behavioral or social issues that are impacting the child's school performance or ability to learn? Is the child able to attend both school and social functions? Discuss recent Individualized Educational Program (IEP) or other school related meetings.
<p>Adjustment</p> <ul style="list-style-type: none"> How does the child adapt to changes that affect their life? How is the youth (age fourteen [14] and older) working toward independence and achieving Transition Plan goals?
OTHER

Case Plan Goals

- Is the pace for achieving safe, sustainable case closure consistent with the following guidelines?
 - Reunification: 12 months
 - Guardianship: 18 months
 - Adoption: 24 months
- Discuss the Case Plan Goals and progress made toward meeting the goals.

Parent/Child Relationship

- Assess and discuss the relationship between the child and the parent, step-parent/significant other, siblings, and/or other household members, and address how any issues or concerns are impacting the child.

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