

INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY

Chapter 8: Out-of-Home Services | Effective Date: October 1, 2021

Section 10: Minimum Contact Version: 14

POLICY OVERVIEW

Minimum Contact with the child; parent, guardian or custodian; and resource parent is required to ensure the safety and well-being of the child. Additionally, minimum contact and contact during case junctures is completed to ensure compliance with court orders, the Case Plan/Prevention Plan, Safety Plan, and all recommendations of the service providers and the Child and Family Team (CFT).

PROCEDURE

Face-to-face minimum contact requirements vary between contact with the child (including a child placed out-of-state or in a residential treatment facility), resource parent, and the child's parent, guardian, or custodian. See below for the specific timeframes and requirements for each.

Contact with the Child

The Family Case Manager (FCM) will have face-to-face contact with each child in out-of-home care within three (3) business days of the initial placement and at least monthly, with no more than 30 calendar days between contacts and complete the Face-to-Face Contact form. Face-to-face contact may alternate monthly between the placement home and other locations.

Note: Each child should be assessed individually. The 5.C Tool: Face to Face Contact Guide may be utilized to assist in completing the Face-to-Face Contact form.

During each face-to-face contact with the child, the FCM will:

1. Assess each child's safety, stability, permanency, and well-being, including mental health (e.g., emotional distress), physical health (e.g., injuries and illness), educational status (e.g., attendance and grade level achievement), and progress toward successful adulthood transition (if applicable), and gather information to complete the Face-to-Face Contact form. See policies 8.43 Meaningful Contacts, 11.01 Older Youth Services (OYS), and 11.06 Transition Plan for Successful Adulthood for additional guidance.

Note: Any new allegations of Child Abuse and/or Neglect (CA/N) must be reported to the DCS Child Abuse Hotline (Hotline), per State reporting statutes, and may not be handled as part of the case. Seek supervisory approval to initiate emergency removal if the child is in immediate danger. See policy 4.38 Assessment Initiation for further guidance.

- 2. Allow sufficient time alone with the child in a setting that provides the child an opportunity to speak freely and/or express their thoughts and feelings;
- 3. Discuss, in an age and developmentally appropriate manner, any positive or negative feelings the child may have regarding:

- a. The placement (e.g., the resource family members or other people who visit the home),
- b. Services currently offered or needed,
- c. The Permanency Plan and second Permanency Plan, if Concurrent Planning,
- d. Visitation (e.g., parents and siblings), and
- e. The child's interests (e.g., friends, hobbies, and extracurricular activities).
- 4. Gather any additional information necessary to complete the Child and Adolescent Needs and Strengths (CANS) Assessment. See policy 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment for additional guidance; and
- 5. Photograph the child. See policy 4.14 Examining and Photographing a Child and/or Trauma for additional guidance.

Contact with Children in Residential Treatment

The FCM will, when possible, have contact with each child admitted for residential treatment at least weekly and face-to-face contact, including time alone with the child, at least monthly, with no more than 30 calendar days between contacts. The weekly contact may be by phone or virtual (i.e., using virtual technology), depending on the residential agency's capacity. The FCM will complete the Face-to-Face Contact form for each contact and document each contact in the case management system.

Contact with Children in Out-of-State Placement

The FCM will have face-to-face contact, including time alone, and complete the Face-to-Face Contact form with each child placed out-of-state through the ICPC program once every four (4) months. The FCM will also have face-to-face contact with the resource parent and follow steps outlined above during each face-to-face contact. The FCM will have weekly contact by phone or virtual (i.e., using virtual technology) with the child. Documentation of the face-to-face contact must be completed in the case management system.

The FCM will utilize the Interstate Compact on the Placement of Children Request form to make a formal request for the receiving state to have face-to-face contact with the child in the off months. The FCM should notify the receiving state's ICPC worker of the intent to make face-to-face contact with the child. For more details, see policy 9.08 Minimum Contact for DCS ICPC Placements.

Note: The receiving state will not provide supervision for a child admitted for residential treatment.

Contact with the Resource Parent

The FCM will have face-to-face contact with the resource parent at a minimum of every other month to gather information; discuss any updates; and ensure safety, stability, permanency, and well-being for each child is considered during each visit. Information gathered will be documented in the Face-to-Face Contact form.

Note: The 5.C Tool: Face-to-Face Contact Guide may be utilized to assist in completing the Face-to-Face Contact form.

During each face-to-face contact with the resource parent, the FCM will:

1. Observe the overall condition of the entire home and discuss any areas of concern with the resource parent;

- 2. Discuss the child's overall progress including, but not limited to, behavior management and school adjustment;
- 3. Assess the needs of the resource parent in caring for the child, including but not limited to financial needs and licensure. For additional information, see policies 16.01 Clothing, Personal Items, and Permitted Per Diem Expenses and 16.02 Assistance for Unlicensed Relative Placements:
- 4. Ensure the resource parent is aware of scheduled court hearings regarding the child;
- 5. Assist the resource parent with problem-solving and accessing community resources as needed:
- Assess for safety concerns, address any identified issues, and update the Safety Plan and/or Plan of Safe Care as needed. See policy 5.21 Safety Planning for more information; and

Note: Any new allegations of CA/N must be reported to the Hotline, per State reporting statutes, and may not be handled as part of the case. Seek supervisory approval to initiate emergency removal if the child is in immediate danger.

7. Gather any additional information necessary to complete the CANS Assessment. See policy 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment for additional guidance.

Contact with the Child's Parent, Guardian, or Custodian

The FCM will have face-to-face contact with the child's parent, guardian, or custodian at least monthly to gather information; discuss any updates; ensure safety, stability, permanency, and well-being for each child is considered during each visit; and document in the Face-to-Face Contact form.

Note: If the parent, guardian, or custodian is incarcerated or resides out-of-state, the Face-to-Face Contact form still must be completed during the virtual face-to-face contact.

DCS will ensure sufficient time is allowed to observe and evaluate the parent-child relationship during visitations, as often as necessary, at least one (1) month prior to reunification. All safety concerns identified must be reported immediately to the FCM Supervisor and Hotline and the Safety Plan and/or Plan of Safe Care must be updated as needed. Issues involving child safety must be immediately addressed. See policy 5.21 Safety Planning for more information.

During each face-to-face contact with the parent, guardian, or custodian, the FCM will:

- 1. Assess the family's progress toward Case Plan goals;
- 2. Discuss services the family needs and/or is receiving;
- 3. Update the parent, guardian, or custodian on the child's services, needs, and progress toward Case Plan goals;
- Gather any additional information needed to complete the CANS Assessment. See policy 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment for additional guidance; and
- 5. Provide assistance to the family to promote the safety, stability, well-being, and permanency of the child.

Following each face-to-face contact with the child; parent, guardian, or custodian; and/or resource parent, the FCM will:

- 1. Clearly and accurately document the Face-to-Face Contact in the case management system within three (3) business days. This includes, but is not limited to:
 - a. New information gained about the assessment of safety, risk, stability, permanency, and well-being (including income, employment status, place of residence, physical and mental health, medical care, educational status, and progress toward successful adulthood transition),
 - b. Photographs taken,
 - c. The completed Face-to-Face Contact form,
 - d. The updated Safety Plan and/or Plan of Safe Care (if applicable), and
 - e. Any other documents obtained.

Note: See policies 8.20 Educational Services, 8.27 Maintaining Health Records Medical Passport, 8.43 Meaningful Contacts, 11.01 Older Youth Services, and 11.06 Transition Plan for Successful Adulthood for additional information.

- 2. Discuss any safety concerns and the need for any additional referrals with the FCM Supervisor, and complete referrals in KidTraks, as needed, to address identified service needs for the child; parent, guardian, or custodian; and/or resource parent. See policy 5.10 Family Services for further guidance;
- 3. Contact the resource parent's licensing worker, if applicable, to share relevant information, and collaborate to maintain the placement and retain the resource parent; and
- 4. Send the receiving state a request for an ICPC Supervision Report following each face-to-face contact for ICPC cases, and document in the case management system the reports of FCM face-to-face contact and those completed by the receiving state. For more details, see policy 9.09 Placement Updates and Supervision Reports.

The FCM Supervisor will:

- 1. Ensure face-to-face contact with each child; parent, guardian, or custodian; and resource parent is completed and entered in the case management system within three (3) business days of the contact; and
- 2. Review the case during regular clinical supervision, and approve any updates to the Safety Plan and/or Plan of Safe Care and any additional service referrals.

LEGAL REFERENCES

- IC 34-6-2-34.5: Domestic or Family Violence
- IC_31-34-21-4: Notice of case review; testimony; and periodic case review
- C 31-35-2-6.5: Notice of hearing

RELEVANT INFORMATION

Definitions

Case Juncture

A case juncture is defined as a new awareness of significant information regarding the child or family's strengths or needs, which may impact the Case Plan, Safety Plan, and or the Plan of Safe Care. Case junctures may include, but are not limited to, transition planning and/or positive or negative changes in:

- 1. Placement:
- 2. Formal or informal supports;

- 3. Family Involvement;
- 4. Visitation:
- 5. Behavior:
- 6. Diagnosis (mental or physical);
- 7. Sobriety;
- 8. Skills acquisition; or
- 9 Education

Clinical Supervision

Clinical supervision is a process in which an individual with specific knowledge, expertise, or skill provides support while overseeing and facilitating the learning of another individual.

Forms and Tools

- 5.C Tool: Face-to-Face Contact Guide
- Case Plan/Prevention Plan (SF 956) Available in the case management system
- Child and Adolescent Strengths and Needs (CANS) Assessment Available in the case management system
- Face-to-Face Contact (SF 53557)
- ICPC Supervision Report (SF 54335)
- Interstate Compact on the Placement of Children Request (SF 106)
- Plan of Safe Care (SF 56565)
- Preliminary Report of Alleged Child Abuse or Negled (310) (SF 114)
- Safety Plan (SF 53243)

Related Policies

- 4.14 Examining and Photographing a Child and/or Trauma
- 4.38 Assessment Initiation
- 5.10 Family Services
- 5.19 Child and Adolescent Needs and Strengths (CANS) Assessment
- 5.21 Safety Planning
- 8.20 Educational Services
- 8.27 Maintaining Health Records Medical Passport
- 8.43 Meaningful Contacts
- 9.08 Minimum Contact for DCS ICPC Placements
- 9.09 Placemen Updates and Supervision Reports
- 11.01 Older Youth Services (OYS)
- 11.06 Transition Plan for Successful Adulthood
- 16.01 Clothing, Personal Items, and Permitted Per Diem Expenses
- 16.02 Assistance for Unlicensed Relative Placements