

Module 9: Evaluating Family Progress



***Florida Department of Children and Families
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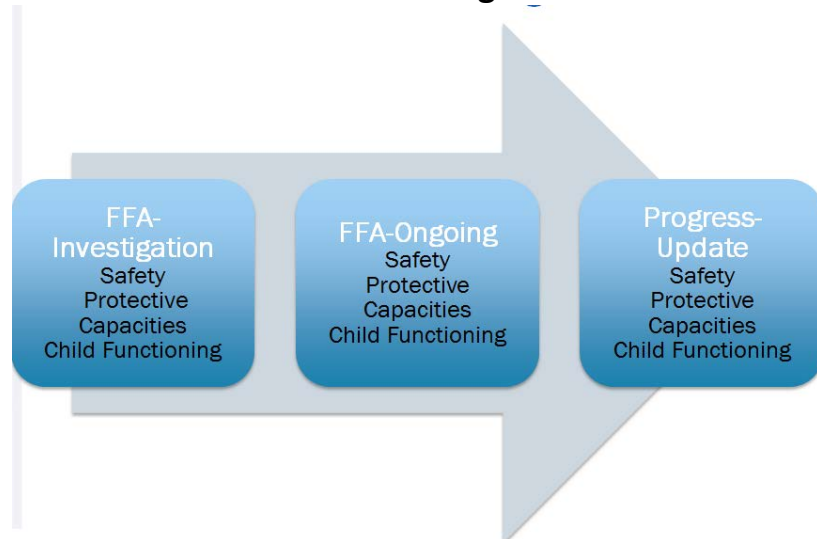
Unit 9.1:

Ongoing Assessment

- Learning Objectives:**
1. Identify the purpose of ongoing assessment.
 2. Identify and describe assessment activities and skills.
- References:**
- CFOP 170-9, Chapter 6, Evaluating Family Progress
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Assessment Overview

Assessment Progression



Ongoing Assessment Process

Information is collected to assess and monitor and support a family's progress in almost every ongoing activity of the Case Manager.

Why does documentation matter?

Why do we need a standard of entering information in FSFN within 2 days?

Purpose of Ongoing Assessment

- Are we keeping the child(ren) safe?

- Are parent(s) making progress towards strengthening protective capacities?

- Is the child experiencing improved well-being, including stability if child is in out-of-home care?

- Is the Case Plan working effectively to achieve permanency?

Of these four assessment purposes, what is the family responsible for?

And what are Case Managers, and your agency, responsible for?

Activity A: Finding Information

Directions:

1. For the topic you were assigned, identify what information you would be looking for and how you would obtain that information.
2. Be prepared to discuss.

Are we keeping child safe?

What activities do we need to perform to accomplish this change?

Are parent(s) making progress towards strengthened protective capacities?

What activities do we need to perform to accomplish this change?

Keep Children Stable while in Out-of-Home Safety Plans

What activities do we need to perform to accomplish this change?

Is the case plan working effectively to achieve permanency?

What activities do we need to perform to accomplish this change?

Unit 9.2: Progress Update

Learning Objectives:

1. Describe the purpose of and sufficient information needed to complete a Progress Update.
2. Describe the sufficient information needed to complete a Judicial Review.
3. Explain the assessment of family time.
4. Practice the evaluation of case plan outcomes.

References:

- CFOP 170-1, Chapter 2, Paragraph 2-12, Evaluation of Case Plan Outcomes

What is the Progress Update?

A Progress Update is a formalized assessment that occurs on a regular basis after the development and implementation of the case plan.

- The Progress Update is a formal assessment tool in FSFN.
 - The Progress Update provides a current picture of family progress based on the new information you have gathered.
 - Each Progress Update describes the family progress for the most recent time period, the time between the last update and the current one.
 - The Progress Update describes the family's work to achieve changes and it describes the adequacy of our work to help the family achieve change, the case plan and our "reasonable efforts."
 - Based on the family's progress, the Progress Update provides a review about whether the goals, outcomes, tasks and activities in the case plan are relevant, need to be updated, or need to be changed in other ways.
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When Progress-Updates Occur

Every three months OR Critical Junctures including:

- Birth or death of a sibling
- The addition of a new family member, including intimate partners
- Before changing the case plan to include unsupervised visits
- Before reunification and establishment of an in-home safety plan
- Before recommending case closure
- When a case is dismissed by court
- As needed based on professional judgment

Case Managers' Role During Progress Update

- Explain to parent(s) the purpose of regular, formal progress evaluation
- Listen and learn parent(s) motivations, values, and concerns
- Facilitate sharing of feedback among team members
- Attempt to build team agreement on progress being made and next steps
- Complete documentation of formal Progress Update

Appendix A: Progress Evaluation Facilitative Objectives

	Information Sources	Facilitative Objectives and Assessment Content
MINIMUM MONTHLY CONTACTS	Parent(s)/Legal Guardian(s) <i>Child Welfare Professional maintains acceptable amount of contact with caregivers to reinforce working relationship and facilitate change</i>	<ul style="list-style-type: none"> • Reinforce engagement and collaboration • Support Caregiver Self-Determination • Accurate perception of conditions resulting in Impending Danger • Emphasize what must change related to diminished Caregiver Protective Capacities • Encourage accurate perception, agreement, and/or continued commitment regarding Outcomes for Change (enhanced Caregiver Protective Capacities) • Support caregiver involvement in addressing and meeting the needs of children • Address caregiver motivational readiness for change • Assess the sufficiency of in-home safety plans • Consider the potential for a less intrusive safety plan • Consider the need to step up the level of intrusiveness of the safety plan
MINIMUM MONTHLY CONTACTS	Children <i>Child Welfare Professionals maintain acceptable amount of contact to effectively manage child safety and assure that the needs of children are met. It is important that contact with children coincide with the scheduling of the progress evaluation.</i>	<ul style="list-style-type: none"> • Assess child safety • Elicit impressions from children regarding safety plan sufficiency • Assess the needs of children • Consider progress being made in addressing the needs of children
MINIMUM MONTHLY CONTACTS	Case Plan Service Providers <i>Child Welfare Professional maintains Reasonable Contact with Service Providers to facilitate change</i>	<ul style="list-style-type: none"> • The approach to change oriented service provision • Evaluate efforts made by change service providers to address outcomes • Evaluate efforts being made by caregivers to address case plan outcomes • Evaluate caregiver participation in change oriented services • Consider barriers to service provision and/or barriers to change • Elicit feedback regarding changes that might influence safety plan sufficiency

MINIMUM MONTHLY CONTACTS	Safety Plan Service Providers <i>Child Welfare Professional maintains an acceptable amount of contact with safety plan service providers to assure continued safety plan sufficiency</i>	<ul style="list-style-type: none"> • Evaluate changes that could influence the sufficiency of safety plan • Verify the amount and frequency of safety services • Determine continued commitment of safety plan service providers • Consider the need for adjustment to the safety plan
PROGRESS EVALUATION TEAM MEETING	Case Plan Team: Caregivers Change Service Providers Safety Plan Service Providers Children (as appropriate)	<p>Objectives include reaching conclusions regarding the following:</p> <ul style="list-style-type: none"> • Effectiveness of the case plan • Sufficiency of the Safety Plan • Progress toward achieving case plan outcomes • The need for revising the Safety Plan • The need for revising the case plan <p>Specific discussions with family and team members should include:</p> <ul style="list-style-type: none"> • Status of impending danger safety influences; • Progress in enhancing caregiver protective capacities; • Existing caregiver protective capacities that support change; • Specific indicators for measuring observable behavioral change; • Progress in achieving conditions for return (reunification); • Safety planning analysis related to the least intrusive provision of protection and the sufficiency of safety plans; • Caregiver motivational readiness; • Caregiver participation in case plan service delivery; • Addressing child needs; • Anticipated date by which the child will return home or achieve another identified permanency outcome; and • Effectiveness of case plans services and verification that case plan services are occurring as directed. • Assessment of family visitation and need for change to visitation plan

<p>TEAM MEETING FOLLOW-UP</p>	<p>Parent(s)/Legal Guardian(s)</p> <p><i>Child Welfare Professional follows up with caregivers to debrief review revisions to the safety plan and/or case plan as applicable</i></p>	<ul style="list-style-type: none"> • Review the conclusions regarding the status of progress related to enhancing Caregiver Protective Capacities. • Discuss and confirm revisions to the safety plan.** If progress evaluation resulted in a determination to proceed with reunification, begin planning when and how the reunification process will occur. • Discuss and confirm revisions to the case plan. • Emphasize how revisions to the case plan are intended to address outcomes for change. • Seek and/or renew a commitment from caregivers to actively participate in change-oriented services.
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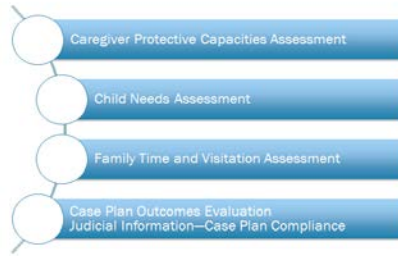
FSFN: Substance Abuse Provider Case Notes

Substance abuse professionals who are working with a parent in your case should have the FSFN security necessary to provide status reports every 30 days as to a parent's progress in treatment. In addition to a detailed case note about parent's progress in treatment, the provider selects a rating that captures one of four statements:

- **Excellent Progress:** Parent is demonstrating actions that are evidence of significant progress towards achieving changes in behavior and/or one or more protective capacities. Parent is demonstrating considerable commitment of time and energy.
- **Adequate Progress:** Parent is demonstrating actions that are evidence of beginning progress towards achieving changes in behavior and/or one or more protective capacities. Parent is demonstrating an acceptable level of commitment of time and energy.
- **Not Adequate Progress:** Parent is demonstrating minimal actions that do not reflect a sufficient commitment of time or energy to achieve the necessary changes in behavior and/or one or more protective capacities. **OR** Parent is ready and willing to participate in treatment or ameliorative services but progress is not being made based on service availability, accessibility or (treatment) is not of sufficient intensity.
- **No Progress:** Parent is demonstrating behaviors that are a significant indication that the parent has not made any commitment of time or energy to achieve the necessary changes in behavior and/or one or more protective capacities; has dropped out or is no longer attending treatment or ameliorative services; has been discharged from treatment services due to non-compliance.

What do you think should happen if you receive such a rating?

Areas of Assessment During the Evaluation



To complete the progress update you must gather additional information around the domains from all pertinent information sources. What does this mean?

Additional Assessment Areas of Judicial Reviews



Other information in the JRSSR will prefill from the child's record includes:

- Goals
- Placement information
- Medical and mental health information
- Education information
- Independent living information
- Master trust information.

The Family Change Strategy/Resources Tab in the Judicial Review worksheet allows the Case Manager to:

- Update information as to the family change strategy, including the danger statement, family goal, ideas from the parent(s) and other team members as to assistance the family needs to attain the case plan goals, information as to barriers that must be addressed.
- Update information as to resources dedicated to the case plan tasks that have been provided by parents and foster parents.
- Provide updates as to diligent search activities, results and searches pending.

Visitation/Family Time

- *Assess quality*
 - *Assess frequency*
 - *Find ways to improve visitation*
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Child Placement Information

The Placement Tab in the Judicial Review worksheet includes the following fields for Case Manager to describe:

- Strengths of the placement.
- Problems of the placement.
- Is the placement the least restrictive, family-like setting consistent with the child's best interest and special needs.
- Is placement in close proximity to the child's home and efforts to move the child closer to home when appropriate.
- Have there been any school changes and efforts to achieve school stability
- Whether placement supports level of contact necessary, as appropriate, with parents.
- Whether the child is placed with siblings and any efforts to place the child with siblings.
- Information pertaining to residential group care.
- Information regarding Rilya Wilson Act Compliance if there are children that meet the criteria.

Pre-fills information from the FSN Out-of-Home Record, generally maintained by placement staff, to report for each child on

- Total number of placements.
- Length of current removal episode.
- Total number of removal episodes.
- Total length of time in removals.

Summary of Child Needs and Protective Capacities

Information that automatically pre-fills the Judicial Review from the completed Progress Update:

- Child functioning description and Child Strengths and Needs ratings.
 - Adult and Parenting functioning descriptions and Caregiver Protective Capacity ratings.
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Assessing Outcomes

- Excellent Progress
 - Acceptable Progress
 - Not Adequate Progress
 - No Progress
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Examples of Progress Achievement

Outcome:

Ms. Dalhart takes action appropriate to situations involving her parenting and protective responsibilities.

Excellent Progress:

The judgment is that Ms. Dalhart is becoming action oriented in general and as a caregiver. The behavioral evidence is:

- Ms. Dalhart performs her duties and responsibilities when necessary.
 - Ms. Dalhart proceeds with a course of action.
 - Ms. Dalhart takes necessary steps.
 - Ms. Dalhart does think expediently and timely.
 - Ms. Dalhart discharges her duties in a timely and appropriate manner.
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Sandler/Braun Case: Mr. Braun

Outcome:

Bruce will recognize how his alcohol use and aggressiveness negatively impact his family. Bruce will control these urges and seek healthy means to cope with his frustrations.

Outcome will be achieved when:

- He will recognize how his alcohol use and aggressiveness negatively impact his family.
 - He is able to refrain from excessive alcohol consumption and develops a lapse/relapse plan to protect his family.
 - He develops positive coping mechanisms for his frustrations.
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Sandler/Braun Case: Ms. Braun

Outcome:

Melanie will demonstrate recognition of when Bruce's alcohol use and aggressive behavior negatively impacts their children she will take immediate action to protect the children when needed.

Outcome will be achieved when:

- She understands the impact of Mr. Braun's drinking on her family.
 - She will understand and recognize Mr. Braun's triggers
 - She has developed and implemented a plan keep the children safe in the event of a relapse.
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Sandler/Braun Case: Both Parents

Outcome:

Both parents will be in agreement with, and consistently use, acceptable parenting methods to manage James' behavior.

Outcome will be achieved when:

- The parents are able to follow through with acceptable discipline and behavior management methods with James
 - The parents are able to communicate and remain consistent with consequences.
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Activity B: Progress Ratings and the Sandler/Braun Case

Directions:

- a. In small groups, using your assigned topic:
 - a. *Determine which outcome rating you would apply for each of the three outcomes.*
 - b. *Justify your ratings by identifying the information from the notes that support your choice.*
 - c. *Identify one or more criteria for the outcome rating above the one selected that supports your decision not to select a higher rating.*
 - b. Be prepared to discuss.
-

Outcome:

Bruce will recognize how his alcohol use and aggressiveness negatively impact his family.
Bruce will control these urges and seek healthy means to cope with his frustrations.

Outcome will be achieved when:

- He will recognize how his alcohol use and aggressiveness negatively impact his family.
- He is able to refrain from excessive alcohol consumption and develops a lapse/relapse plan to protect his family.
- He develops positive coping mechanisms for his frustrations and urges.

a. **Outcome Rating:**

b. **Rating Justification:**

c. **Why higher rating not selected:**

Ms. Braun will recognize threats created by Mr. Braun's drinking and know how to act accordingly.

Outcome will be achieved when:

- She describes and understands the impact of Mr. Braun's drinking on her family.
- She will understand Mr. Braun's triggers and ways that she can respond appropriately.
- She will have a plan about what to do to protect herself and the children in the event of a relapse.

a. Outcome Rating:

b. Rating Justification:

c. Why higher rating not selected:

Ms. Braun and Mr. Braun will recognize the different needs of their children and demonstrate effective skills in managing child behaviors.

Outcome will be achieved when:

- The parents verbalize their understanding of their children's behaviors.
- The parents demonstrate positive methods to shape desired behavior,
- The children's behaviors show improvement.

a. Outcome Rating:

b. Rating Justification:

c. Why higher rating not selected:

CASE NOTES – Progress Update

04.24.2014, 04:15

Worker Creating Note: Reid, Spencer

Category: Case Management

Telephone Call with In-Home Parenting Provider

As of the date of this update, Ms. Braun and the family are engaged in home-based parenting and family counseling 1x/week and are working on reestablishing a chore chart and positive reinforcement for the behaviors they want to see and extinguishing those behaviors they don't want to reinforce in their children. Ms. Braun is participating in weekly home-based individual and family counseling to help her work on personal growth and development, improving communication skills. She has been participating in these sessions for a little over 2 months and progress is described as positive, however Ms. Braun tends to still justify her decisions and continues to oftentimes reward James and Byron's negative attention seeking behavior.

She continues to struggle with her feelings when her children are perceived as angry with her and she capitulates to their demands, arguments, yelling or tantrums. She is setting a goal to count the number of times she gives in and increase the number of times she does not. She will work on her feelings of inadequacy in individual counseling.

04.26.2014, 04:15

Worker Creating Note: Reid, Spencer

Category: Case Management

Telephone Call with Substance Abuse Treatment Provider

POC: Dr. Drew

Phone: 555.231.4567

Mr. Braun has attended all sessions for intensive outpatient treatment (3x week for past 6 weeks). There are 21 weeks left in program. He has not yet attended AA but it is strongly recommended. He has a quiet personality; alert and listening; is beginning to ask questions and challenge group participants about discrepancies he picks up on. His progress in treatment is adequate at this time.

04.27.2014, 04:15

Worker Creating Note: Reid, Spencer

Category: Case Management

Announced HV

Address: 209 Kettinger Ct Florida City, FL

POC: Ms. Sandler, Mr. Braun, James, Byron, Shane

Visit was scheduled to discuss upcoming Progress Update, feedback from providers and to gather family perspectives.

Private interview with Mr. Braun.

Shane was in the middle of a diaper change. After changing his diaper the father put him down on the floor. He laid on his side and crawled around a little bit. Byron was playing independently with his trucks. He asked Mr. Braun for a snack and sat at the kitchen table to eat it as directed by his dad.

There have been no issues with Bruce's drinking; he has not stopped drinking completely, he informed his treatment provider that he had been drinking casually on the weekend, though not in the presence of his children or wife. Mr. Sandler states that he will begin attending AA meetings at the beginning of July as his treatment provider is insistent that he will find it helpful.

Ms. Braun and James returned to the home from the store during interview with Mr. Braun.

James' medication has been adjusted and he is administered a Ritalin booster at 6:00 PM as well as no 'days off' on weekends. The parents have noticed a significant change in his behavior and attitude, his willingness to listen, his cooperation level. Both parents feel that James had been complying well with his chores, but is beginning to "slack off" some and having an attitude. Based on information from parenting provider, they know his 'good behavior' was part of the 'honeymoon' period, but they all understand that this is a long term life style change and approach and that results are not immediate.

Mr. Braun and James's relationship is less acrimonious. If his mother gives him a consequence like taking away video games or his phone, he still yells and cries, but when he calms, he and his mom talk about how he can earn it back. He likes that he can earn things back.

Private interview with Ms. Braun.

Ms. Braun contends that she was not aware that Bruce was continuing to drink beer on week-ends, but asserts that when she is with him, he does not appear to be under the influence of alcohol. She understands that she may not see signs and symptomatology of traditional 'drunk' behavior and is committed to learning how to confront and challenge Bruce, to recognize signs and question him so that they can be confident in their plan to protect the children.

As of the date of this update, Melanie has started attending AlAnon to help her learn about family dynamics and co-dependency associated with substance abuse toward self-awareness. She stated it is eye-opening and scary to see that what they describe, is who she is and how she behaves but she is encouraged and working on self-improvement in her individual sessions.

Private interview with James.

James planning to visit relatives this summer and complete a number of Boy Scout merit badges. James stated that even if Mr. Braun isn't mean he always has something to say. James stated that they are all doing things differently and argue less. He thinks the

parenting provider is making a difference in how his parents treat him. He believes that his behavior is different too, he does not give his mother “a hard time” as much as he used to. He feels that he can trust Mr. Braun more than he used to; he has not seen him drinking in quite a while and he feels that Mr. Braun is better when he doesn’t drink.

Unit 9.3: Modifications to the Case Plan and Family Time

Learning

Objectives:

1. Review the actions that should result from a Progress Update.
2. Describe the reasons for parents not participating in family time or negative child behaviors and possible solutions.
3. Describe the process for case plan modifications.

References:

- CFOP 170-7, Chapter 1, Paragraph 1-6, Removing Children;
- Paragraph 1-7, Judicial Actions Related to Child Safety
- Paragraph 1-8, Staffings with Children's Legal Services

Results of Progress Evaluation

Now what?



- No Change
 - Requires the evaluation/update to be documented.
- Change in Safety Plan
 - Requires the evaluation/update and safety plan to be updated.
- Change in Family Time Plan (if removal)
 - Requires the Progress update and visitation assessment within the Judicial Review Court Report to be updated.
- Change in Case Plan
 - Requires the evaluation/update and case plan to be updated.

What are the things that you will have the most control of?

Changes in Safety Plan

- Increase or decrease level of restrictiveness of any type of plan
- Change in-home plan to out-of-home
- Conditions for Return are met - Reunify

Conditions for Return Met = Reunification Planning

How will I know when:

1. Parents are now willing to accept in-home plan and cooperate...
2. Home environment is now calm and consistent enough...
3. Safety services are available at a sufficient level...
4. No further professional evaluations are needed at this time...
5. The parent(s) have an adequate physical location....

Activity C: Caregiver Behaviors

Directions:

1. In your small group, develop a report on the question you were assigned. Make sure to answer the following questions:
 - a. *What are we seeking to learn about the parent at this point to know that their situation is different?*
 - b. *What information would be an indicator that the parent is not yet where they need to be (meaning that they do not yet meet the specific criteria)?*
2. Be prepared to discuss.

[illegible]

Visitation/Family Time

The Case Manager has many opportunities to promote better quality family time.

What conversation might you have with the parent who is missing family time?

How do you think children might behave during family time with their parents or siblings?

What do you think a Case Manager can do to improve parent child family time?

Promoting Successful Visits.

- Provide children's books and encouraging parents to read to their child or to have an older child read to them; having children bring their homework to visits so the parent can truly parent;
- Directing the caregiver not to feed the child so that the parent may do so (if the visit coincides with mealtime and parent is able and willing to bring a meal);
- Encourage the parents to engage in enriching and memorable activities with their child, such as creating artwork;
- Permitting the parent to attend sporting or other extracurricular activities;
- Permitting the parent to expand visits at the home of relative caregivers to do the ordinary bedtime tasks for the child.

Things that do not promote successful visits that the Case Manager will need to address in a non-judgmental way:

- Parent bringing additional people who may cause conflict.
 - Parent talking on the cell phone the whole time or being otherwise distracted.
 - Parent not taking the baby out of the car seat the whole time.
 - The baby sleeping during family time.
 - Having to travel long distances for either the parent or the child.
 - Scheduling family time at the child's regular nap or meal time (if no food is being provided by the parent).
 - Case Manager using family time to discuss case plan issues during the visit.
 - Other behaviors by Case Manager or persons responsible for supervising family time that conveys indifference, shame, or blame towards the parent.
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Modifications to Case Plans

- Identifying and implementing solutions related to services/treatment access.
 - Enlisting the provider's assistance.
 - Changing providers.
 - Other strategic changes.
 - Identifying outcomes achieved.
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Unit 9.4:

Achieving Safe Case Closure

Learning Objectives:

1. Review the steps on how to safely close a case.

References:

- CFOP 170-9, Chapter 9, Safe Case Closure

Reasons for Case Closure

- The caregiver has substantially achieved all of the outcomes in the case plan pertaining to improved caregiver protective capacities and a safety plan is no longer needed.
 - The caregiver has not achieved outcomes in a case plan and:
 - A relative or non-relative has obtained legal custody of the child.
 - Parental rights have been terminated and child has achieved a permanency goal.
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Who to Contact

- The Parent
 - Safety Plan Providers
 - GAL
 - Service Providers
 - Supervisor
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Closing a Case

In order to close a case and have it ready for supervisory review, you must ensure that the following have been completed:

- Documented discussions with all service providers and, if applicable, the GAL that you are considering closing the case. If the service provider or GAL disagrees with your decision, you may reconsider or schedule a staffing to further discuss the concerns.
- Documented staffing/discussion with legal and preparation of a termination summary for the court and case file.
- Inclusion of school officials in the discussion if they have been actively involved with the family during the supervision period.
- A Staffing with your supervisor to discuss the case closure.
- Documented contacts with the family that includes discussions with the caregiver and child that you are considering closing the case. At no time must closure of a case be considered without input from the family.

Closure: Case Involving Court Supervision

There must be a termination summary or court report made explaining the basis for requesting termination.
