



**State of Florida**  
**Department of Children and Families**

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Secretary

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**DATE:** December 28, 2023

**TO:** Community-Based Care Lead Agency CEOs

**FROM:** Kate Williams, Assistant Secretary of Child & Family Well-Being *K. Williams*

**SUBJECT:** CFOP 170-9, Chapter 4: Completing the Family Functioning Assessment-Ongoing (Family Engagement Standards for Exploration) and CFOP 170-9, Chapter 6: Evaluating Family Progress

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**PURPOSE:** The purpose of this memorandum is to provide guidance on the completion of the Family Functioning Assessment-Ongoing (FFA-O) and Progress Updates.

**BACKGROUND:** The Family Functioning Assessment (FFA) is the process by which information is gathered, analyzed, and assessed to determine child safety in the household where the alleged maltreatment occurred. The essential mission of the Department is to identify and protect children who need safety management and to support the enhancement of the protective capacities of the caregiver(s) responsible. The FFA process provides a current analysis by the child welfare professional at different junctures, beginning with the Family Functioning Assessment-Investigation (FFA-I). After a case involving an unsafe child is transferred to case management for ongoing services, the outcome of the family assessment is documented in the FFA-O and Progress Updates.

This operating procedure has been revised to reflect the following:

1. A standardized timeframe that requires the case manager supervisor to review and approve the FFA-O within 15 calendar days of the creation date.
2. A standardized timeframe that requires the case manager supervisor to review and approve the Progress Update within 15 calendar days of the creation date.

**ACTION REQUIRED:** Please share this memorandum and updated CFOP 170-9, Chapter 4, and CFOP 170-9, Chapter 6 with all case managers, case manager supervisors, community-based care lead agencies, and subcontracted providers.

**CONTACT INFORMATION:** If you have any questions regarding this updated operating procedure, please contact Jessica Johnson, Out-of-Home Care Specialist, at 850-717-4491 or [Jessica.johnson@myflfamilies.com](mailto:Jessica.johnson@myflfamilies.com).

cc: Community Directors  
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Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

## Chapter 4

COMPLETING THE FAMILY FUNCTIONING ASSESSMENT – ONGOING  
(FAMILY ENGAGEMENT STANDARDS FOR EXPLORATION)

4-1. Purpose. The ultimate purpose of family engagement is to jointly explore with the parents or legal guardians what must change in order for the agency to close the case. The FFA-O is the department's formal assessment that provides the basis for the case plan. The family engagement standards for exploration described in this procedure are intended to promote the case manager's interactions with parents/legal guardians in order to raise self-awareness, recognize and diffuse any parent resistance, and build constructive working relationships. The exploration standards facilitate deeper information gathering about adult functioning, parenting, caregiver protective capacities, and the relationship of all to the identified danger threats. The exploration stage lays the final groundwork for developing a family change strategy, including the child's need for a safe and permanent home.

4-2. Assessments Required.

a. The Family Functioning Assessment-Ongoing (FFA-O). The FFA-O must be completed within 30 calendar days of case transfer. The FFA-O must be reviewed and approved by the case manager supervisor within 15 calendar days of the creation date. The primary focus of the FFA-O is on the household of the parent(s)/legal guardian(s) responsible for danger threats that lead to an unsafe child as determined by a child protective investigation.

(1) The FFA-O will contain a current description of all household members as required in CFOP 170-1, [paragraph 2-3](#), Focus of Family Assessment. In the Child Welfare Information System, the information that automatically populates from the FFA-I to the FFA-O is for ease of review by the case manager and should be deleted, edited, and/or added-to in order to provide a current and more in-depth assessment of the family's functioning.

(2) When there is a non-maltreating parent/legal guardian in a separate household, the non-maltreating parent/legal guardian does not get added to either the FFA-I or FFA-O. However, information should be included in the FFA-O in the child functioning domain to describe the child's relationship with the non-maltreating parent/legal guardian. To the extent that the child has on-going contact with the other parent/legal guardian, information may be included in the parenting and discipline domains for the parent who is the focus of the FFA-O when it is relevant and important to know.

(3) When there is a parent/legal guardian in a separate household who, as the result of an investigation, has been found responsible for conditions that resulted in the child being unsafe (two maltreating households), a separate FFA-I and subsequent FFA-O for the other parent/legal guardian will be developed.

b. Other Parent Home Assessment (OPHA). When a child requires an out-of-home safety plan, AND only the removal parent/legal guardian has been found responsible for the unsafe child, an OPHA must be completed per requirements in CFOP 170-7, [Chapter 5](#).

(1) If the OPHA was completed prior to case transfer, the case manager will conduct the following activities:

(a) Discuss the findings in the completed OPHA with the non-maltreating parent.

(b) Determine if there have been any changes in the parent/legal guardian's circumstances or goals with respect to the child(ren).

(c) When the child has been released to the parent/legal guardian as part of an out-of-home safety plan, assess the sufficiency of the safety plan and the parent/legal guardian's care of the child, including any specific child needs that need to be addressed.

(d) Update the OPHA as necessary if the parent/legal guardian's situation has changed or significant additional information is learned.

(2) If the OPHA was not completed due to the parent/legal guardian not being located prior to case transfer, the case manager will continue the diligent search to locate the parent/legal guardian until released by the court to complete the OPHA per requirements in CFOP 170-7, Safety Planning and Management, [Chapter 5](#).

(3) A staffing with Children's Legal Services (CLS) must be held when the case manager and supervisor determine that there should not be any case plan goals, outcomes, or family time which involves the non-maltreating parent/legal guardian.

#### 4-3. Activities to Assess Parent(s)/Legal Guardian(s).

a. The activities of the exploration stage are described in a logical sequence, but the order in which they occur is controlled by the specific circumstances of the case. The case manager must engage with the parent(s)/legal guardian(s) in a positive manner to gather additional information in the domain areas, understand danger threats, and develop a deeper understanding of caregiver protective capacities. When there is another parent in a separate household, information will be gathered from each parent to inform the FFA-O as well as the OPHA, when required.

b. The case manager will work with the parent(s)/legal guardian(s) to identify the diminished protective capacities which may have resulted in the identified danger threats. The case manager will:

(1) Explain information to parent(s)/legal guardian(s) about protective capacities.

(2) Encourage the parent(s)/legal guardian(s) to offer their perspective as to which diminished protective capacities led to an unsafe child. As necessary, the case manager should help the parents understand specifically what makes the child unsafe. Discuss with the family what the current family behaviors, conditions, and circumstances are that create danger threats. The case manager will explore the following through conversational interviewing:

(a) What has changed in the family that creates the unsafe situation.

(b) What has/hasn't worked in the past around that change.

(c) The information necessary to develop the information domains as outlined in CFOP 170-1, Chapter 2, [paragraph 2-4](#).

(3) Reach agreement with the parent(s)/legal guardian(s) as to which diminished protective capacities directly impact child safety. If the parent(s) are unable or unwilling to offer their perspective, offer suggestions as to which protective capacities may be diminished and ask for feedback.

(4) Encourage the parent(s)/legal guardian(s) to offer their perspective as to which enhanced protective capacities (strengths) could be built upon to address the identified danger threats. If the parent(s)/legal guardian(s) are unable/unwilling to offer their perspective, offer suggestions as to which protective capacities may be enhanced and ask for feedback.

(5) Explore what the parent(s)/legal guardian(s) might do to enhance protective capacities and improve diminished protective capacities.

c. The case manager should determine if an expert evaluation for either a parent/legal guardian(s) or the child is appropriate to help inform case plan outcomes when there is a specific condition or behavior that requires additional professional assessment, including situations such as:

(1) The parent(s)/legal guardian(s) or child is displaying unusual or bizarre behaviors that are indicative of emotional or behavioral problems, physical illness or disability, mental illness, trauma assessment, suicidal or homicidal ideation.

(2) Other conditions where there is a need for additional information regarding an individual's functioning in the area of the professional's specialized knowledge; or to develop a better understanding of whether the individual's functioning impacts his or her protective capacity or child functioning.

#### 4-4. Develop Danger Statement.

a. The case manager will review with the parent(s)/legal guardian(s) the danger threats identified by the investigation and re-evaluate if the parent(s) are denying the presence of danger threats, are in partial agreement, or are in near complete agreement.

b. The case manager will co-construct the danger statement with parent(s)/legal guardian(s) when possible. The danger statement is a behaviorally based statement in very clear, non-judgmental language which states the following:

(1) What are the parent(s)/legal guardian(s)' actions?

(2) What is the impact on the child?

(3) What are the case manager's ongoing concerns?

c. When there is no full agreement, the danger statement includes the case manager's concerns and which party is not in agreement.

d. The case manager will ensure that the Danger Statement is written, to the fullest extent possible:

(1) Simply enough so the youngest person in the family with the ability to understand can comprehend.

(2) In the family's primary language as it serves as the framework for effective safety planning.

4-5. Establish Permanency Goal for Child. All case plans established for unsafe children, whether or not they are court supervised, will include the Department's permanency and placement goal(s) for the child(ren). The case manager should explain to the parent(s)/legal guardian(s), as well as any substitute caregiver(s) involved, the goals for the child that the Department has identified. Case plan goal options are as follows:

a. "Maintain and strengthen" means to maintain the child with the parent and strengthen the parent's ability to fulfill their responsibilities.

(1) If a child has not been removed from a parent, even if adjudication of dependency is withheld, the court may leave the child in the current placement with maintaining and strengthening the placement as a permanency option.

(2) If a child has been removed from a parent and is placed with the parent from whom the child was not removed, the court may leave the child in the placement with the parent from whom the child was not removed with maintaining and strengthening the placement as a permanency option.

(3) If a child has been removed from a parent and is subsequently reunified with that parent, the court may leave the child with that parent with maintaining and strengthening the placement as a permanency option.

b. "Reunification" means the court has reviewed the Conditions for Return and determined the circumstances that caused the out-of-home placement and issues subsequently identified have been remedied to the extent that the return of the child to the home with an in-home safety plan prepared or approved by the Department will not be detrimental to the child's safety, well-being, and physical, mental, and emotional health.

c. "Adoption" means that a petition for termination of parental rights has been or will be filed.

d. "Permanent guardianship" of a dependent child under s. [39.6221](#), F.S.

e. Placement in another planned permanent living arrangement under s. [39.6241](#), F.S., under certain limited circumstances for children age 16 years and older.

f. Transition from licensed care to independent living for a young adult who satisfies the conditions outlined in s. [39.6251](#), F.S.

4-6. Establish Family Goal and Change Strategies.

a. The case manager will work with the parent(s)/legal guardian(s) to establish a mutually agreed-upon family goal and assess their motivation for change. This should happen after the protective capacities which resulted in the identified danger threats are better understood. The family goal should be established collaboratively with family members. When that is not possible, the case manager should provide some choices for the family that would be acceptable to the agency.

b. The family goal describes what the family hopes to accomplish in order to achieve the permanency goal that has been established for the child. The family goal statement:

(1) Describes agreement between the parent(s)/legal guardian(s) and the case manager about what must happen (to parent's protective capacity) for the child's safety to be sustained without the involvement of the agency.

(2) Is written in clear, everyday language.

(3) Describes the presence of new, observable behaviors or actions related to the child(ren) (rather than the absence of old, problematic behavior).

(4) The case manager should develop the family goal statement using the family's words, to the extent possible. A family goal is not a description of services or treatment which might be the method for achieving the goal.

c. After a family goal has been established, the case manager will gather information from the parent as to possible strategies for achieving the family goal as follows:

(1) Identify the family's resource network that might be willing and able to assist the parents in achieving the family goal.

(2) Explain to parent(s)/legal guardian(s) any next steps that the case manager will take to inform the completion of the FFA-O.

(3) Gather parent(s)/legal guardian(s)' ideas about interventions, treatment, and services.

(4) Explore parent(s)/legal guardian(s)' concerns as to possible barriers.

(5) Seek consideration of case manager ideas that other family members or persons involved have suggested.

d. The case manager will assess the parent(s)/legal guardian(s)' motivation to change after all of the activities to gather information from the family have been conducted, including working with the family to establish a family goal and change strategies. Knowing the stage of motivation a parent is currently experiencing will guide the case manager's efforts throughout the life of the case to help the parent(s)/legal guardian(s) move forward through the stages of change. See Appendix A of this operating procedure, "Progress Evaluation Facilitative Objectives."

#### 4-7. Difficulty Engaging the Parent(s)/Legal Guardian(s).

a. When there are situations where the parent(s) are unable or unwilling to engage, or the case manager and the parent(s) disagree about the reason for the agency's involvement or what needs to change, it is the ongoing responsibility of the case manager to exhaust all efforts to move the case forward and to continue to actively seek the parent(s)' involvement.

b. The case manager will continue to make diligent efforts to engage the parent(s)/legal guardian(s) in the following ways:

(1) Work diligently to identify and overcome the barriers to the parent(s)/legal guardian(s)' participation in family assessment and planning.

(2) Frequently and actively re-invite the parent(s)/legal guardian(s)' participation.

(3) Continue to work toward establishing a partnership by stating the case manager's need for the parent(s)/legal guardian(s)' perspectives, ideas, and input.

(4) Obtain and review all relevant documentation for family strengths that might be the basis for further exploration with the family

(5) Interview other persons who know the parent(s)/legal guardian(s) to elicit their suggestions for engaging the parent.

(6) Obtain professional assessments and evaluations.

(7) Obtain professional input as to engagement approaches such as use of a substance abuse expert, domestic violence advocate, or mental health professional.

c. When the parent(s)/legal guardian(s) are incarcerated, the case manager will attempt to meet with the parent personally or, when necessary, through an out-of-county services referral to gather information as to their understanding of the child's current status, the child's strengths and needs, their relationship with the child and how it is maintained, and the parent's plans for the future concerning the child.

#### 4-8. Validate and Reconcile Information.

a. As necessary, the case manager will gather information from other persons and professionals to inform completion of the FFA-O.

b. The case manager will seek and validate information from others who know the family as to the behaviors, conditions, or circumstances that led to an unsafe child. This might include other case managers who worked with the family before if there was prior involvement. There may be other professionals who have had past or current involvement with the parent(s) or the child(ren), or current evaluations may be in the process of being completed, such as the Comprehensive Behavioral Health Assessment. Activities to complete information gathering will include:

(1) Obtain and complete review of any relevant documentation.

(2) Interview other involved persons.

#### 4-9. Qualitative Indicators of Family Engagement. Indicators of effective family engagement include the following:

a. The parent(s)/legal guardian(s) believe that their feelings and concerns have been heard, respected, and considered.

b. The parent(s)/legal guardian(s) are invested in and committed to achieving a family goal and outcomes in a case plan.

c. The parent(s)/legal guardian(s) follow through and take the actions expected.

d. The parent(s)/legal guardians) have trust in the case manager and are open to hear feedback from the case manager as to concerns and non-negotiable expectations.

e. The parent(s)/legal guardian(s) and the case manager have a shared understanding of the danger threats in the family that must be addressed and are working toward the same goals and outcomes.

f. Whether or not it has not been possible to reach a shared understanding and agreement as to the reasons for the family's involvement; the case manager and the parent(s) are able to co-construct a case plan.



#### 4-10. Supervisor Consultation and Approval.

a. At any point during the development of the FFA-O, if parents are highly resistant and/or are unwilling to engage with the case manager during or at the conclusion of the exploration stage, a supervisor consultation is required to:

- (1) Provide the case manager an opportunity to assess family dynamics and sources of resistance.
- (2) Support the case manager in considering other efforts to engage and in determining next steps.

b. A supervisory consultation pertaining to the family assessment is required in all cases prior to approval of the family assessment.

#### 4-11. Documenting the FFA-O.

a. After all activities in Chapters 3 and 4 of this operating procedure have been completed, the case manager is ready to complete and document family assessment findings. While facts gathered from the family and other sources are briefly documented in contact notes, the completed assessment provides a critical analysis of all facts gathered. It is important for the case manager to always review and update the child's record prior to documenting the family assessment. This ensures that the child's record is current and provides all of the relevant supporting documentation for the family assessment. The case manager will:

- (1) Ensure that all chronological notes are current.
- (2) Update information about case participants including their relationship to the child and contact information.
- (3) Ensure that Living Arrangement or Placement information is current.
- (4) Ensure that the most current safety plan is in the child's record.
- (5) Update contact information as to other professionals and other persons who are involved with the child's case.
- (6) Update the child's record to ensure it is current for:
  - (a) Child's birth certificate and photograph.
  - (b) Medical/Mental Health information which documents all primary health care and any specialty providers, child health conditions and/or diagnoses, services received including immunizations, and any medications prescribed.
  - (c) Education information which includes current school information (case manager can enter school information which reflects past school attendance history), this section of the child's record is used to document any child's Exceptional Student Education/Individualized Education or 504 Plan, as well as diploma and certificate information



b. Document the Family Assessment. There are currently two methods for documenting a family assessment for maltreating parents:

(1) For cases opened prior to implementation of the updated Child Welfare Practice Model (formerly known as “Safety Methodology”), the Family Assessment in the Child Welfare Information System was utilized and may continue to be used until case closure.

(2) For all cases opened after implementation of the updated Child Welfare Practice Model, the FFA-O will be used.

c. The case manager will confirm that the parent(s)/legal guardian(s) whose behaviors need to change are the primary focus of the FFA-O and will determine which other persons will be associated with, and described in, the information domains for the parent/legal guardian. See CFOP 170-1, Chapter 2, [paragraph 2-3](#), “Focus of Family Assessment.”

d. The FFA-O will be pre-populated with information developed by the investigator. The case manager must develop a new description based on further information collected and assessed to provide a basis for the scaling of caregiver protective capacities, child strengths and needs, and the identification of case plan outcomes. The information developed by the investigator should be deleted and replaced with the case manager’s narrative. The Child Welfare Information System will maintain the information developed in the original FFA-I and all domain information will also become part of each participant’s Child Welfare Information System person record.

(1) The case manager will document the reason(s) for ongoing agency involvement. The danger statement which was crafted with the family will populate this section of the FFA-O.

(2) The case manager will complete the family assessment areas as follows:

(a) Information gathered and assessed about the maltreatment and surrounding circumstances by the child protective investigator (CPI) will automatically populate the FFA-O and will not be editable.

(b) Maltreatment and Surrounding Circumstances. In the “Additional Ongoing Information” section for the maltreatment and surrounding circumstances, the case manager will describe any new information learned about the incident or surrounding circumstances (e.g., the father had been prescribed medications and revealed to the case manager that he was not taking them at the time of the incident). If not already documented in the FFA-I, the case manager must add any findings and recommendations of a Child Protection Team (CPT). For all judicial cases, if the child was not evaluated by a CPT, the case manager must add a statement reflecting that no report exists.

(c) Child Functioning. Information gathered and assessed by the CPI about child functioning, for each child in the household, will automatically populate the FFA-O and be editable. The case manager will develop this section with an analysis of new information learned from all sources about child strengths and needs. This section will support the scaling of child strengths and needs that the case manager will later complete in the FFA-O.

(d) Information gathered and assessed by the CPI about adult functioning for each parent and caregiver will automatically populate the FFA-O and be editable. The case manager will develop this section with an analysis of new information learned from all sources about adult functioning. This section will support the scaling of caregiver protective capacities that the case manager will later complete in the FFA-O.

(e) Information gathered and assessed by the CPI about parenting practices, discipline, and child behavior management for each parent and caregiver will automatically populate the

FFA-O and be editable. The case manager will develop this section with analysis of new information learned from all sources.

(3) The case manager will complete scaling of Caregiver Protective Capacities and Child Strengths and Needs using the 4 point scaling criteria provided in CFOP 170-1, [Chapter 2](#), paragraphs 2-6 and 2-7. The case manager will make sure that there is sufficient information in the family assessment areas to support the capacity ratings. The scaling of caregiver protective capacities supports the case manager's confirmation of the diminished protective capacities that will become the focus of the case plan. It is possible that the case manager's further assessment will result in changes to the determinations documented in the FFA-I. Some caregiver protective capacities that the FFA-I indicated were diminished may be determined to be adequate based on further information gathered and assessed. Likewise, some caregiver protective capacities that were identified as adequate in the FFA-I may be determined by the case manager to be diminished.

(4) The completed Safety Analysis must provide sufficient information to support how each of the five safety analysis criteria are met or not met. Refer to Appendix A of this operating procedure, "Progress Evaluation Facilitative Objectives," for a more in-depth discussion of Safety Analysis criteria and examples that demonstrate when the family behaviors or conditions for an in-home safety plan are met or not met.

(5) The case manager will document the "Family Change Strategy" developed with the family in the following areas:

- (a) Family Goal.
- (b) Ideas for change.
- (c) Potential barriers.

(6) The case manager will update the safety analysis criteria to ensure that reasonable efforts are adequately reflected and:

- (a) Update the safety plan as necessary.
- (b) Modify Conditions for Return, if needed.

e. The following Child Welfare Information System resources are located on the FSFN "How Do I Guide" page:

(1) For basic information about documenting all case participants and their associated demographics, including a child's birth certificate and photo, refer to the Person Management – How Do I Guide.

(2) Information about updating a case in FSFN, including participants, splitting, or merging a case can be found in the Maintain Case – How Do I Guide.

(3) For information about updating the placement pages in FSFN, refer to the Out-of-Home Placements – How Do I Guide.

(4) For information about the creation, completion, and maintenance of a child's education record, refer to the Education – How Do I Guide.

(5) For information pertaining to life skills for children 13 and older, refer to the Independent Living – How Do I Guide.

(6) For information specific to the creation and completion of the FFA-O, refer to the FFA-Ongoing – How Do I Guide.

4-12. Filing the FFA-O with Dependency Court. An FFA-O must be filed with the court when a case plan is filed. The case manager must submit the completed FFA-O to CLS at least five business days prior to the following time frames for court filing per s. [39.521\(1\)\(a\)](#), F.S.;

a. Not less than 72 hours before the disposition hearing if the disposition hearing occurs on or after the 60<sup>th</sup> day after the date the child was placed in out-of-home care.

b. Not less than 72 hours before the case plan acceptance hearing, if the disposition hearing occurs before the 60<sup>th</sup> day after the date the child was placed in out-of-home care and a case plan has not been submitted pursuant to this paragraph, or if the court does not approve the case plan at the disposition hearing.

c. The court may grant an exception to the requirement for an FFA-O upon finding that all the family and child information required by s. [39.521\(2\)](#), F.S., is available in an FFA-I filed with the court. The case manager is still required to complete the FFA-O.

## Chapter 6

## EVALUATING FAMILY PROGRESS

6-1. Purpose. Evaluating family progress is a collaborative review and conclusion about enhanced caregiver protective capacities and child needs. The evaluation includes information from the case manager, parent(s)/legal guardian(s), temporary caregivers, treatment providers and others who are a part of the remediation process. The evaluation of family progress should be continuous and result in timely modifications to safety plans and case plans as progress, or lack thereof, is made. Sufficient evaluation of family progress is critical to achieving permanency goals for children in accordance with established timeframes. The evaluation of family progress is documented in Progress Updates which provide the agency's formal justification and record for the current safety plan and all case plan actions. Per requirements in s. [39.701](#), F.S., judicial reviews must be conducted by the court at a minimum of every six months from the date of a child's removal to review the child's status as to placement stability, progress towards permanency, and other aspects of well-being.

6-2. Purposeful Case Management Contacts.

a. Contacts are one of the primary methods used by case managers to evaluate family progress as well as to evaluate the sufficiency of a safety plan. Contacts regarding safety management are outlined in CFOP 170-7, Chapter 11, [paragraph 11-2](#), "Monitoring Responsibilities."

(1) The case manager will make face-to-face contact with every child under supervision and living in Florida no less frequently than every 30 days in the child's residence. The primary case manager is responsible for monitoring that the child's needs, as defined in Chapter 3 of this operating procedure, are being met whether the child remains with a parent/legal guardian or is in an out-of-home placement.

(2) At least every 90 days, or more frequently if warranted based on the safety plan, the case manager shall make an unannounced visit to the child's current place of residence.

(3) Contacts with parent(s)/legal guardian(s) must occur at a minimum every 30 days. The frequency of face-to-face contact with parent(s) should be driven by safety management as well as what the case manager needs to achieve as a result of the contact. When meetings with parent(s) occur at least every 30 days or more frequently, the case manager is better able to assist parent(s) with moving through the stages of change and progressing towards goal achievement. Refer to Appendix A to this operating procedure, "Progress Evaluation Facilitative Objectives," for further discussion as to the progress evaluation objectives with parent(s), children, and providers.

(4) When a child is with a parent in a certified domestic violence shelter or a residential treatment program, visitation arrangements shall be coordinated with program staff and may occur outside of the facility.

(5) When non-maltreating parent(s)/legal guardian(s) have outcomes and/or tasks that have been added to the case plan, face-to-face contacts shall be every 30 days.

(6) When an out-of-county services case manager is responsible for courtesy supervision or when another case manager conducts the contact with the child or parent on behalf of the primary worker, the primary case manager remains responsible for reviewing the contacts made to determine the quality of the contact and addressing any concerns.

b. The case manager is responsible for ongoing communication and collaboration with the family, team members involved, and the court to effectively evaluate family progress. If the case plan is targeting the correct issues and casework practice reflects consistent efforts to engage the family and

the family's team, there will be adequate information supporting the evaluation of family progress and conclusions reached. The evaluation will be sufficient to determine whether the outcomes of the case plan remain appropriate or have been met and whether the strategies, services, and interventions are working effectively or not to achieve lasting child safety or permanency.

c. The case manager is responsible for helping the parent(s)/legal guardian(s) and the team identify how to measure change in behavior, family conditions, or dynamics. This includes:

(1) Identify how the other persons, including any out-of-county services workers involved in the case plan, will determine if adequate progress is being made.

(2) Explain to the parent(s)/legal guardian(s) that every service provider involved in the case plan will be asked to provide certain information including:

(a) Notifying the agency immediately when it is believed a child is in danger or threat of harm.

(b) Providing updates to the parent(s)/legal guardian(s) about progress or lack thereof in meeting outcomes or in meeting the child or family's needs at the time of parent contacts.

(3) Identifying expectations for when team meetings will occur and what the team will address.

(4) Following local operating procedures for periodic team meetings with the parent(s)/legal guardian(s), providers, and the family resource network to discuss progress towards case plan goals, and any safety plan and case plan modifications needed.

d. Monitoring activities of the case manager to evaluate family progress include, but are not limited to:

(1) For the child, gathering information to determine whether the child's medical, mental health, and/or developmental needs are being adequately addressed by the parent(s)/legal guardian(s) and the parents and/or any other caregivers are getting the child to necessary appointments and accessing identified resources including:

(a) Having a conversation with a verbal child; the focus of the conversation should be the child's feelings regarding his or her safety in the home or current placement.

(b) Getting feedback from the child as to whether they are visiting the persons that they wish to see, with adequate frequency and quality of the visitation setting, and transportation arrangements.

(c) Providing the child with information that is age-appropriate as to the progress of their parent(s)/legal guardian(s) case plan goals and outcomes.

(d) Assessing the quality of the child's placement setting in terms of meeting their basic needs for care including routine health care and supervision.

(e) Assessing whether the child's special medical or mental health and educational needs are being adequately addressed. Additional information may be needed from treatment providers or other persons to assess whether the child's special medical and mental health needs are being adequately addressed. The child's school attendance, review of school records, and any educational assessments may be necessary to ensure the child's educational needs are being met. If the child is younger than school age, developmental needs shall be addressed through an

assessment of any records from a child care program, early education program, or preschool program, including attendance requirements.

(f) Determining whether the out-of-home caregiver for the child has any needs for support, including services or training that might be critical to the child's placement stability.

(2) The case manager must complete the following actions to evaluate the current status of the caregiver's protective capacities and to confirm the sufficiency of any safety plan. These actions will be a combination of in-home visits, parent contacts for the child in an out-of-home placement, and on-going communication with any current safety plan providers.

(a) Having face-to-face contact with parent(s)/legal guardian(s) and any non-maltreating parent or alternate caregivers that a child has been released to or placed with.

(b) Providing the parent(s)/legal guardian(s) with information as to their progress towards achieving case plan outcomes. Feedback should begin with the positive findings and praise, reinforcement, and encouragement. When information has been gathered from providers, other team members, or the case manager's own observations and concerns reflect a lack of progress, it is the obligation of the case manager to share that information as well. The case manager should explore the caregiver's perception as to the quality of treatment services provided including any barriers, interpersonal conflicts, or other safety management or case management challenges.

(c) Assessing whether there have been any changes in the parent(s)/legal guardian(s) conditions, attitude, ability, or willingness to support the current in-home plan, or to create an in-home plan to achieve reunification.

(d) Determining whether the parent(s)/legal guardian(s) continue to be cooperative, or would now be cooperative, with safety services necessary for an in-home safety plan as evidenced by:

1. The parent(s)/legal guardian(s) is agreeable to the safety services necessary for an in-home safety plan.

2. The parent(s)/legal guardian(s) is cooperative with all participants in the safety plan.

3. The parent(s)/legal guardian(s) is participating as expected in the actions and the time requirements of the ongoing safety and case plan.

4. The parent(s)/legal guardian(s) is meeting the expectations detailed in the ongoing safety plan.

5. Whether the home environment continues to be, or has become, stable enough for safety service providers to be in the home and be safe.

6. Determine whether the condition of the child is satisfactory and danger threats to the child are being actively managed.

### 6-3. When a New Progress Update Is Required.

a. Case notes will be used to document new information learned through family contacts and other activities that will be taken into consideration when the family assessment is formally updated and documented. Reports from treatment providers and evaluations received will be scanned into the Child

Welfare Information System file cabinet under the relevant Image Category and Image Type to ensure that the child's record is current.

b. A new Progress Update will be created in the Child Welfare Information System at a minimum of every 90 days from the approval date of the FFA-O or last Progress Update. The FFA-O or Progress update must be reviewed and approved by the case manager supervisor within 15 calendar days of creation of the assessment. A new Progress Update will be created sooner when fundamental decisions are being made for the child or children, or when critical events are occurring that necessitate a formal re-evaluation of protective capacities and child needs. Such times include, but are not limited to:

(1) When safety management has resulted in a decision to remove a child from their home.

(2) At the birth or death of a sibling.

(3) Upon the addition of a new family member, including intimate partners.

(4) Before changing the case plan to include unsupervised visits.

(5) Before recommending or implementing reunification as Conditions for Return are met.

(6) Before a recommendation for case closure.

(7) When a case has been dismissed by the court.

c. The case manager shall seek a supervisory case consultation to review case dynamics when case circumstances include any of the following. The case consultation will determine if a Progress Update should be completed prior to the 90-day period based on the discretion of the supervisor.

(1) When significant changes in family members' and/or family circumstances warrant review and possible revision to the safety plan and/or case plan, such as a change to unsupervised visitation.

(2) When an emergency change in a child's out-of-home safety plan placement is needed.

(3) When the children and/or caregivers are making little or no progress toward the established outcomes and/or an immediate change in the case plan is needed.

(4) After any review (i.e., judicial, administrative, state, or county QA) recommends or directs that changes be made.

(5) At receipt of a new investigation or report of domestic violence in the home.

d. Before every required judicial review hearing or citizen review panel hearing, the Progress Update must also include pertinent details relating to the child that includes, but is not limited to:

(1) Documentation of the diligent efforts made by all parties to the case plan to comply with each applicable provision of the plan.

(2) A description of the type of placement the child is in at the time of the hearing, including the safety of the child and the continuing necessity for and appropriateness of the placement,



any concerns for the stability of the placement, and what efforts have been undertaken to ensure the child's stability.

(3) The amount of fees assessed and collected from parent(s)/legal guardian(s) during the period of time being reported.

(4) The services provided to the foster family or legal custodian in an effort to address the needs of the child as indicated in the case plan.

(5) The number of times a child has been removed from his or her home and placed elsewhere, the number and types of placements that have occurred, and the reason for the changes in placement.

(6) The number of times a child's educational placement has been changed, the number and types of educational placements which have occurred, and the reason for any change in placement.

(7) If the child has reached 13 years of age but is not yet 18 years of age, a statement from the caregiver on the progress the child has made in acquiring independent living skills.

(8) Copies of all medical, psychological, and educational records that support or indicate a change is needed to the terms of the case plan, and that have been produced concerning the parent(s)/legal guardian(s) or any caregiver since the last judicial review hearing.

(9) Copies of the child's current health, mental health, and education records.

(10) When children are in out-of-home care, visitation and family time opportunities are evaluated for quality and frequency using the ratings in CFOP 170-1, [Chapter 2](#), "Core Safety Concepts." The case manager should determine if the frequency and quality of family time arrangements need to be modified to provide more sufficient opportunities to meet any of the following or other objectives:

(a) Provide an opportunity for parent(s)/legal guardian(s) to practice new skills and, if using a parenting coach, to acquire new skills and improve parent-child interactions.

(b) Provide critical information about parental capacity to safely meet the needs of their child in a less restricted form of family time such as unsupervised or overnight visitation.

(c) Ease the pain and potential damage of separation for all.

(d) Help the child to eliminate self-blame for removal.

(e) Support the child's adjustment to a new caregiver's home.

(f) Reinforce the parent(s)/legal guardian(s)' motivation to change.

(g) Offer a potentially therapeutic intervention, rather than just "a visit."

(h) Provide a unique opportunity for the parent(s)/legal guardian(s) to observe the parenting skills of foster parents who are willing to co-parent.

(i) Help parent(s)/legal guardian(s) gain confidence in their ability to care for their child.

(j) Provide opportunities for parent(s)/legal guardian(s) to be up-to-date on their child's developmental, educational, therapeutic, and medical needs as well as their child's religious and community activities.

(k) Family time may provide an opportunity to heal damaged or unhealthy relationships between the parent(s)/legal guardian(s) and other family members who may be caregivers.

(11) In all court supervised cases, the case manager is required to provide the court with an overall evaluation of case plan compliance at each judicial review. The overall case plan compliance evaluation will be based on the case manager's assessment of progress on all of the outcomes, and when a child is in out-of-home care, the quality and frequency of family time. The case manager will choose from the following:

(a) The parent(s)/legal guardian(s), though able to do so, did not comply substantially with the case plan, and the agency recommendations;

(b) The parent(s)/legal guardian(s) did substantially comply with the case plan;  
or,

(c) The parent(s)/legal guardian(s) has partially complied with the case plan, with a summary of what has been partially completed, additional progress needed, and the agency recommendations.

(12) In out-of-home cases, a statement from the foster parent or legal custodian providing any material evidence concerning the return of the child to the parent or parents must be provided to the court along with the Progress Update.

#### 6-4. Progress Updates for Dependent Children 17 Years Old.

a. At the first judicial review hearing held subsequent to the child's 17<sup>th</sup> birthday, the Department shall provide the court with an updated case plan that includes specific information related to the independent living skills that the child has acquired since the child's 13<sup>th</sup> birthday, or since the date the child came into foster care, whichever came later.

b. For any child that may meet the requirements for appointment of a guardian pursuant to Chapter [744](#), F.S., or a guardian advocate pursuant to s. [393.12](#), F.S., the updated case plan must be developed in a face-to-face conference with the child, if appropriate; the child's attorney; any court-appointed guardian ad item; the temporary custodian of the child; and the parent(s)/legal guardian(s), if parental rights have not been terminated.

c. At the judicial review hearing, if the court determines pursuant to Chapter [744](#), F.S., that there is a good faith basis to believe that the child qualifies for appointment of a guardian advocate, limited guardian, or plenary guardian for the child and that no less restrictive decision making assistance will meet the child's needs:

(1) The Department shall complete a multidisciplinary report which must include, but is not limited to, a psychosocial evaluation and educational report if such a report has not been completed within the previous two years.

(2) The Department shall identify one or more individuals who are willing to serve as the guardian advocate pursuant to s. [393.12](#), F.S., or as the plenary or limited guardian pursuant to Chapter [744](#), F.S. Any other interested parties or participants may make efforts to identify such a guardian advocate, limited guardian, or plenary guardian. The child's biological or adoptive family

members, including the child's parent(s)/legal guardian(s), if the parental rights have not been terminated, may not be considered for service as the plenary or limited guardian unless the court enters a written order finding that such an appointment is in the child's best interests.

6-5. Actions Following Progress Updates. Based on the Progress Update as to the progress that parent(s)/legal guardian(s) are making as well as any changes in the status of the child, the case manager will determine whether any changes are needed to:

- a. The safety plan.
- b. Case plan goal(s).
- c. Case plan outcomes.
- d. Case plan activities and tasks.
- e. Case plan services provided and/or service providers.

6-6. Supervisor Consultation and Approval. The supervisor is responsible for a case consultation and the approval of any completed Progress Update.

6-7. Child Welfare Information System Documentation.

a. The child's record in the Child Welfare Information System should be updated with new information, including the completion of all contact notes. This ensures that the child's record is current and provides all of the relevant supporting documentation for a new Progress Update. The child's case record in the Child Welfare Information System should be reviewed and updated as follows:

- (1) Ensure that all chronological notes are current.
- (2) Update information about case participants including their relationship to the child and contact information.
- (3) Ensure that Living Arrangement/Child Placement information is correct and the most current safety plan is in the child's record.
- (4) Update Medical/Mental Health information which documents all primary health care and any specialty providers, child health conditions and/or diagnoses, services received including immunizations, and any medications prescribed.
- (5) Update Education information which includes current school information (the case manager can enter school information which reflects past school attendance history). This section of the child's record is used to document a child's Exceptional Student Education/Individualized Education or 504 Plan, as well as diploma and certificate information.

b. It is important for the case manager to always create a new Progress Update in the Child Welfare Information System in order to document the current assessment. This will ensure that prior versions of the Progress Update remain intact. When a new Progress Update is created, it will prefill with information from the most recent version which should be edited and updated to provide current progress information.

(1) For cases opened prior to implementation of the updated Child Welfare Practice Model (formerly known as "Safety Methodology"), the Family Assessment in the Child Welfare Information System was utilized and may continue to be used until case closure.

(2) For all cases opened after implementation of the updated Child Welfare Practice Model, the FFA-O and Progress Update will be used.

(3) The case manager will confirm that the parent(s)/legal guardian(s) whose behaviors need to change are the primary focus of the Progress Update and will determine which other persons will be associated with, and described in, the information domains for the parent/legal guardian. See CFOP 170-1, Chapter 2, [paragraph 2-3](#), “Focus of Family Assessment.”

(4) When a new Progress Update is created, it will be pre-populated with information already entered in any previous FFA-O or Progress Update for ease of review. The case manager will delete, edit, and add information to compose a new description, based on further information gathered and assessed which will support any progress or change in protective capacities and child needs. The new Progress Update prepared by the case manager will provide a current status description for child functioning, adult functioning, parenting approach and discipline based upon case manager observations, conversations, and information gathered from other team members involved including all service providers. The status description will provide:

(a) A description of what each family assessment area (child functioning, adult functioning, parenting, and discipline) looks like currently based on assessment information gathered from the different sources which are included.

(b) When pertinent for an in-home case, and for all out-of-home cases, the case manager is responsible for incorporating a summary of relevant information about the child’s educational status, medical/mental health, and independent living skills into the child functioning domain.

(c) The information in the family assessment areas should support the case manager’s scaling of Caregiver Protective Capacities and Child Strengths and Needs.

c. The case manager will ensure that information received from any of the parent(s)/legal guardian(s) treatment providers informs their current assessment of protective capacities. If there have been improvements or a decline in any of the protective capacity ratings, the basis for those changes must be described in the information domains, current status descriptions.

d. The case manager will update the scaling of Caregiver Protective Capacities using the ratings in CFOP 170-1, Florida’s Child Welfare Practice Model, [Chapter 2](#), “Core Safety Concepts,” and establish the baseline ratings for any new parent/legal guardian. If there is a diminished capacity rating of “C” or “D” that will not be addressed in the case plan, the reasons need to be provided.

e. For any new household members who have significant caregiver responsibilities, the case manager will provide assessment information specific to that person and rate their caregiver protective capacities.

f. The case manager will ensure that information received from any of the child’s treatment providers and out-of-home caregivers informs their current assessment of child strengths and needs. The case manager should update the scaling of “Child Strengths and Needs” indicators using the ratings in CFOP 170-1, [Chapter 2](#), “Core Safety Concepts,” and establish the baseline ratings for any new child in the home.

(1) If a child has a need that is scaled at a “C” or “D” there should be a narrative description as to whether or not the parent(s)/legal guardian(s) is adequately meeting the need.

(2) When parent(s)/legal guardian(s) with an in-home safety plan are adequately meeting the child’s needs, they do not need to be addressed in the case plan.

g. A new Safety Analysis should be written to justify and document why current safety services should continue, if less intrusive safety actions are feasible, if the Conditions for Return should be modified, or if other actions to achieve a lasting safety resolution are needed.

h. Each time a Progress Update is completed, each case plan outcome will be evaluated to determine the extent to which the parent(s)/legal guardian(s) is making progress. The case manager will rate progress with each outcome using the ratings provided in CFOP 170-1, Chapter 2, [paragraph 2-12](#). Given progress, or lack thereof, case plan outcomes might need to be adjusted.

i. The Child Welfare Information System functionality is designed to support the case manager in preparing a Judicial Social Study Report (JSSR) that meets all of the statutory requirements. The case manager will complete the Judicial Review Worksheet in the Child Welfare Information System to capture additional information for court cases involving a child in out-of-home care. The Child Welfare Information System will create a final JSSR for the court that pulls all necessary information from both the Progress Update and Judicial Review Worksheet.

j. The following Child Welfare Information System resources are located on the FSFN “How Do I Guide” page:

(1) Progress Update – How Do I Guide.

(2) Judicial Review Worksheet – How Do I Guide.