



# **Cúram 8.1.2**

## **Child Services Business Guide**



## Note

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Before using this information and the product it supports, read the information in [Notices on page 43](#)



# Edition

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This edition applies to Cúram 8.1, 8.1.1, and 8.1.2.

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# 1 Child Services Business Guide

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Child Services provides case management tools that support agencies that work to safeguard children, promote well-being and support child permanency. Child Services facilitates intake, ongoing case management, child abuse investigations, removal of children from unsafe situations, and the adoption of children.

## Purpose

The following pages provide an overview of Child Services (CCS) by describing:

- The processes that are undertaken by agencies that are working to safeguard children, promote well-being, and support permanency.
- The CCS solution that provides comprehensive features to support agencies in implementing best practice models and achieve agencies' goals in keeping children safe.

## Audience

The target audience is any reader that is interested in understanding the business concepts of CCS.

## 1.1 Child Services Overview

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Child welfare services is a term commonly used to describe services provided by government or non-governmental agencies to help protect children and young people who are at risk of, or victims of, child abuse and/or neglect. The goal of these agencies is typically to promote family safety and stability.

### Background

Globally, there are many national, regional, and local initiatives to protect children and promote permanent, safe homes for them. As laws have evolved over the last century, policies have set forth more comprehensive assessments and safeguards intended to protect children. This also has evolved the work of the child welfare caseworker in dealing with children using best practice models that have been extensively studied and researched. National reporting requirements provide useful information in learning about the children who have been hurt, why, and what services work to help prevent further incidents. In the 1990's the United States began a Statewide Automated Child Welfare Information Systems (SACWIS) initiative. In 1989, the United Kingdom's Children Act formalized guidance to local authorities for the safeguarding of children. This resulted in the UK's Integrated Children's System. Other countries also looked towards technology to improve outcomes and reporting for children and to support child welfare caseworkers in completing their important work. There is a strong international community that strives to improve safety and outcomes for children. Cúram has worked together with child welfare domain experts and thought leaders around the globe to improve efforts to protect children and support best practice models.

## Supporting the Caseworker

Cúram provides enterprise-wide, outcomes-based features and tools that support the caseworker in working effectively with the family. These tools provide an agency-wide working environment that supports all users and provides case management tools that can be used on an as needed basis through-out the life of a case.

These features include:

- **Home Pages:** Summary information is presented to caseworkers and may be configured to meet their unique roles.
- **Prior History View:** This provide quick summary information of an individual's prior involvement history with the agency.
- **Common Intake:** This feature is available to the caseworker and provides a unified way for social enterprise to efficiently perform intake across program offering using guide, intelligent information capture. It also supports initiatives to provide a collaborative, "no wrong door" approach to serving citizens.
- **Correspondence:** A sampling of commonly used, predefined correspondence is provided for caseworker to fulfill communication obligations.
- **Contact Management:** Record and manage interactions between caseworkers, child, family, and any additional concerned parties.
- **Multidisciplinary Team Approach (MDT):** Allows professionals, community representatives and families to collaborate in order to provide an array of services and supports to children and their families.
- **Legal Action Framework:** Record legal actions concerning a child and families' involvement with the court and ability to manage these actions through hearings, petitions, and order.
- **Background Information:** Record relationships, educational, medical and physical characteristics.
- **Special Cautions:** Capture areas of immediate concern such as health concerns, run-away risk, or suicide ideation associated with the child or other persons.

Additionally, agencies must allocate budgets and track expenditures for case related expenses including placements, services and items. Multiple funding sources, including monies available at the national level, are tapped to offset costs. Oftentimes benefit and entitlement programs are established to confirm circumstances which will allow the use of funds at various jurisdictional levels. Automated eligibility determinations review client circumstances to verify that an individual or a family is qualified or entitled to receive program benefits used to assign such funding codes to placement, services, or item expenditures. This topic is addressed further in the Eligibility section.

## Referral to Recommendation (Intake)

Child welfare agencies are required to respond to concerns about child abuse and neglect. The intake process involves receiving and screening reports of possible harm to determine if intervention is necessary. Information captured at intake includes a narrative description of what happened to the child, injuries or harm brought to the child, information about the child, parent or caregivers, potential witnesses or collateral contacts, current location and safety of the child. Often times, a family may be struggling with additional issues, such as housing, employment,

domestic violence, or emotional problems that cause additional stress. These factors can impact the family's ability to provide a safe and stable environment for children. Ensuring the safety and well-being of children and families is the core mission of child welfare agencies globally. Child welfare agencies must provide accessible and reliable means for the public to report allegations of abuse. Intake workers must record information promptly and accurately. The intake information may be reported by persons with concerns regarding the welfare of the child and by persons who have knowledge of, and concerns regarding, the situation. Reporters may include professionals who work directly with the family or child, such as teachers or doctors, or others such as family members, friends or neighbors.

## **Recommendation to Response(Investigation)**

Child welfare agencies work cooperatively with other agencies such as law enforcement to assess and investigate reports of child abuse and/or neglect. The child welfare agency will offer services to safeguard the child during the investigation process. Child welfare investigators are required to conduct face-to-face interviews with alleged victims of child abuse and neglect. They are also required to obtain information from other sources. The agency must act quickly to high priority situations and have investigators travel to various locations to fulfill contact requirements. Investigators are required to confirm person identities and capture narrative information accurately and quickly. Agency personnel assess child safety, develop a safety plan when appropriate, and assess future risk of harm to the family. Based on their interactions and local policy, investigators identify services for the child and family. The investigator must also dispose of allegations and, at times, remove the child from his/her home if the child is in an unsafe situation.

## **Removal to Return**

When determined that the child is no longer safe in their own home, the agency is required to remove that child from the unsafe situation and place the child into a safe environment. Caseworkers must also consider that the removal is in the best interest of the child and that all other options to keep the child safely in the home have been attempted. The removal process includes court involvement and orders from the judge or magistrate that foster care placement is agreed upon as the best course of action. The caseworker will also explore alternative placement options such as placing a child with kith/kin whenever possible. Such placement may involve Inter-jurisdictional cooperation to provide home studies and supervision of children while placed outside of their original jurisdiction. The agency may be required to remove a child from her/his home during any point of the agency's interaction with the family. The goal of the agency is to return the child safely to her/his home. Caseworkers work closely with the family to achieve reunification.

When placing a child, the caseworker creates a home removal for the child to indicate the date of removal from the home and record other supporting information such as the reason for removal. The caseworker then places the child with a provider by searching for available providers of the type required such as a Foster Home and enters the date that the child's placement began with the provider. If the child moves to a different provider the caseworker creates a new placement for the child and the child's placement with the previous provider is automatically ended.

If the placement for the child occurred in the past and the child has already left the provider, the caseworker can also enter an end date when creating the placement. When the caseworker enters an end-date, the home removal remains open and the caseworker then either places the child in another provider or indicates that the child has returned home.

When a child is returned to the child's own home, the caseworker enters a date of discharge from the child's current placement. When the caseworker enters a date of discharge, the system closes the placement if it has not yet been ended along with the home removal with effect from the date of discharge. If the child is removed from the child's home again, the caseworker creates a new home removal and placement.

Caseworkers can also modify or remove the discharge date of the current home removal if the discharge date was entered in error. When the discharge date is removed, the latest placement remains closed. The caseworker then reopens the latest placement or places the child with another provider.

Similarly, caseworkers can modify the placement start date, end date, or both if the placement start dates, end dates, or both were entered incorrectly. When a caseworker ends an existing placement the home removal remains open and the caseworker either creates a new placement, reopens the latest placement or discharges the child from the home removal. During the period when a child has an open home removal and no open placement, the system displays an alert on the case context panel and an informational message on the placements page to alert the caseworker to take action.

If payments to the placement provider are already processed, the changes to the discharge date or placement start dates, end dates, or both can result in reassessment and overpayment or underpayment.

## Outcome Management

Outcome Management provides caseworkers with a structure that supports assessment and planning processes that are applicable to many human service areas. Outcome Management applies to child welfare services through-out the continuum of care. For CCS, the Outcome Management structure provides additional features that relate specifically to child welfare services. Outcome Management for child welfare can be configured to fit the agency's practice model and assessment tools. The assessment process guides the case planning process and provides a means for the caseworker to measure progress towards goals and report findings to legal authorities. The assessment and planning process also guides and informs the MDT and helps members gain a better understanding of child and family strengths and needs and appropriate services and activities. Outcome Management is also used to review progress and conduct reassessments according to agency policy. For children in out-of-home placement, visitation plans are an important aspect of outcome planning and are integrated into Outcome Management. For more information about outcome management, see the *Outcome Management Guide* guide.

## Ongoing Case Management

The ongoing case is created based on investigation results. It provides the means by which the caseworker can manage operational and logistic case activities, such as contacts with clients and providers, legal activities, and placement management. An important aspect of the caseworker's responsibilities includes ongoing and regular communication with the child and family. Caseworkers can work collaboratively with MDTs to assess the needs of the child and family and provide services in a coordinated and well planned manner. Caseworkers are often required to report case planning activities and progress to legal authorities. Caseworkers utilize to manage outcome plans and other case management activities.

## Adoption

In many countries, adoption is considered an important option for a child when it is no longer feasible to return home and is based on local child welfare jurisdictional practice. Child welfare agencies are involved with the identification of potential adoptive families and placing children with appropriate families and stewarding the family and child through the adoption process.

## Performance Indicators

Performance indicators include measures that evaluate child safety, well-being and permanency and worker interactions to support those goals.

## Scenarios

The scenarios describe interactions between child welfare agencies, caseworkers, the children and families they serve and how the CCS supports those interactions.

### 1.2 Supporting the Caseworker

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CCS provides a set of case management tools to support the responsibilities associated with Child Welfare Services in this chapter.

## Home Pages

CCS provides personal pages or "home pages" which are tailored to specific caseworker roles, such as intake worker, investigator or supervisor. Home pages contain summary information called a "pod". A pod is a container, within which a set of data is presented to the caseworker. This may be presented to the caseworker or supervisor in a number of formats such as lists, charts or some other graphical view. The caseworker may alter the content and layout of the home page by rearranging the pods on the page, by adding additional pods or by hiding pods. This allows the caseworker to navigate easily to their most frequent activities and view the information that is most important to them.

Cúram provides a number of predefined pods such as My Appointments, which are available for all CCS caseworkers. For more information about pods, see the *Personalized Pod Page Configuration Guide*.

In addition, CCS provides pods which are unique to CCS. These pods are listed below.

### ***Intakes to be Completed***

The intake worker's home page includes an "Intakes to be Completed" pod. This highlights intakes which require additional information prior to completion or those which have mandatory information captured but have not yet been submitted.

### ***Initial Contacts Due***

The investigator's home page includes an "Initial Contact Due" pod. Investigators are typically required to conduct interviews with alleged victims of abuse. This pod lists the names of required contacts and the timeframe for each (days until due or days overdue). Timeframes

are configurable based on agency policy and assigned response priority level. The feature also facilitates capture of contact logs for one or more participants directly from the pod without the need to first access to the respective cases, followed by navigation to the relevant function.

### ***My Open Investigations***

The investigator's home page includes a "My Open Investigations" pod. This lists investigations which have not been completed. This feature provides the investigator with easy access to the investigations which require additional action.

### ***Contact Due***

The caseworker's home page includes an "Contacts Due" pod. Ongoing caseworkers, as well as adoption workers are typically required to have periodic visits with children in care. This pod lists the names of required contacts and the timeframe for each (days until due or days overdue). Timeframes are configurable based on agency policy. The feature also facilitates capture of contact logs for one or more participants directly from the pod without the need to first access to the respective cases, followed by navigation to the relevant function.

## **Prior History View**

Often working under tight timeframes and in need of quick summary information, an investigator or other case worker needs a brief thumbnail sketch of a person's prior history with the agency, particularly if the person has been previously involved in an investigation of abuse and/or neglect. By selecting the citizen context viewer of a case participant, the solution provides a view of a person's prior history with the child welfare or child protection agency.

## **Common Intake**

Common Intake streamlines the intake process across program areas and provides an intake process which is configurable based on agency and local policies. It promotes the no wrong door philosophy to quicken a family's access to needed benefits and services. CCS provides access to Common Intake to assist families in the application process for multiple assistance programs. For more information about Common Intake, see the *Common Intake Guide* guide.

## **Correspondence**

Cúram provides communications features which allow for the creation of Microsoft® Word, Pro-forma or e-mail which can be associated with cases or participants. A number of pre-configured templates are provided to fulfill common child welfare-related communication obligations. This sampling includes Mandated Reporter Intake Letter, Information and Referral Print, Alleged Maltreater Disposition Report, Parent Disposition Report and Mandated Reporter Disposition Letter.

## **Managing Contacts**

Caseworkers use contact logs to document contact made with case clients, including actions they take, interactions with individuals, learnings, and conclusions. Caseworkers can record and edit

contacts in the contact log, search for specific contacts to find specific information, and view upcoming and overdue contacts.

Caseworkers can access a contact log based on their involvement with the case or child and their security or log-on profile. In child welfare, it is crucial to document interactions between a child and the worker. Contacts must be completed and documented within timeframes that are established by agency policy. For example, the timeframes might include how quickly an investigator must have face-to-face contact with a child, or how often a caseworker must have contact with a child who is in foster care. Administrators can configure the timeframes of required contacts in accordance with agency policies.

### **Recording Contacts**

Caseworkers must capture details of events, interviews, and meetings in a timely manner so that the descriptions of those specific events are not influenced by later events. Caseworkers use contacts to record these details.

When recording contacts, caseworkers might also document interactions with other family members, collateral contacts and other important parties. Caseworkers can record individual contact details, the contact subject (if configured), narrative, details of the contact participants, and attach related documents, photos, or voice recordings. Caseworkers can also identify who conducted an interview, who recorded the entry in the system, and the date and time of that entry.

A supporting narrative must be entered when a contact is recorded. Contacts are available to view in the contact log list and the details of a contact can be edited at any time. From the contact log list, caseworkers can also add additional contact participants, attachments and delete contacts as needed. From the contact log list, caseworkers can also add additional contact participants, attachments, and delete contacts as needed.

Caseworkers can search for a specific set of contacts in the contact log. A preview function allows the caseworker to select and view a specific set of contacts in the contact log from the search results or the contact log list. The previewed contacts can be saved to a PDF document and printed.

The number of contacts that caseworkers see in the contact log is configurable. When the limit is exceeded, only the configured number of contacts are displayed. The most recently recorded contacts are displayed first on the list page and in search results.

### **Appending to the Narrative**

The contact narrative is the caseworker's point in time record of a contact with another party. After recording the contact, if the caseworker obtains additional information, they can edit the contact to append new narrative text as an addendum without affecting the originally documented narrative. Any caseworker can append to the narrative in addition to the original author.

Updates to contact narratives that are displayed separately to the original narrative as appended text when a caseworker views the details of a contact. No limit applies to the number of narratives that a caseworker can append to a contact.

Caseworkers cannot append new narrative text if another caseworker is editing the original narrative or an appended narrative. For more information, see *Editing the Narrative*.

## Narrative History

A history of updates to a narrative over time is maintained. By expanding a contact in the list or by editing a contact, caseworkers can see the original narrative and any appended narratives in the narrative history. The name of the caseworker and date and time of each append are also displayed. By default, the most recent narrative text is displayed first. An administrator can configure the order that narratives are displayed in the history, newest first or oldest first.

Caseworkers can also see the most recent contact details, participants, and attachments in the expanded contact record. A history of updates to other contact details, participants, and attachments is not maintained.

## Editing the Narrative

After a caseworker records the original narrative or an addendum, they might want to edit the narrative to make a correction or to add more information. If configured, the author of the original narrative or appended narrative can edit it for a specific editable period that is set by an administrator. By editing the contact, the author can make unlimited edits to their narrative during the editable period.

When the author edits the narrative within the editable period, the application overwrites the previous narrative text with the latest version when the contact is saved. The application maintains no record of the previous version of the text. For this reason, the editable period is intended to be a short period of time.

During the editable period, pencil icons are displayed to help the contact author and other caseworkers to understand whether they can edit or append to a narrative. The pencil icons relate only to the most recent narrative. When a narrative is appended, the original narrative can no longer be edited. For example, if the first caseworker authors the original narrative and after its editable period expires, a second caseworker appends an additional narrative, the second caseworker is the narrative author for the configured editable period and no user can edit the original narrative.

*Table 1: Pencil icons for narrative authors and non-authors*

Pencil icon	Description
	Indicates to the narrative author that they can continue to edit their narrative. By expanding the contact, the author can see the end date and time after which they can no longer edit the narrative.
	Indicates to non-authors that someone else is editing the narrative and they cannot append to it at this time. By expanding the contact, the non-author can see the date and time from when they can append to the narrative.

After the editable period ends, no pencil icons are displayed and the narrative can no longer be edited. Any caseworker with access to the contact log can append to the narrative only after the editable period ends.

## Searching for Contacts

Caseworkers can quickly search for a specific set of contacts to find specific kinds of information for reasons such as for presentation at court hearings. Caseworkers can search by various criteria

such as contact participants, location, purpose, contact method, and date range. They can also search for specific words that are contained in the narrative.

If configured, caseworkers can enter a subject for a narrative when they record or edit contacts. Caseworkers can search both the subject and the narrative for specific words if the subject is configured. The search returns a list of contacts that contain the words. Each search displays the results in ranked order based on best match. When the search results are returned, if the caseworker entered no subject for the contact, a – displays in the Subject field.

Table 2: Subject and narrative search results by example

Search words	Search results
accident, fall, incident	Finds matches that contain any of these words, in any order, in the subject or narrative.
counsellor	Finds matches that contain the word <code>counsellor</code> or <code>counselling</code> in the subject or narrative.
meeting with victim	Finds matches that contain the following sets of words in the subject or narrative: <ul style="list-style-type: none"> <li>• Initial meeting with the victim John Smith</li> <li>• Initial meeting with victim</li> <li>• meeting with the victim</li> </ul>

**Note:** By default, caseworkers must enter at least two characters of a full word to search the subject and narrative for that word. For best matches, enter more characters. Searches for words in the subject and narrative that include special characters also return matches.

To narrow the search results, extra search criteria are available, such as the contact participants, location, purpose, contact method, and date range. If a caseworker enters any other criteria with a subject and narrative search, the search returns matches that contain the extra criteria and any words they entered in the subject and narrative search.

Caseworkers can use the following operators to further refine searches by subject and narrative:

- **OR**  
By default, when a caseworker enters two words in the search, the search finds contacts that contain either of those two words. For example, to search for contacts that contain either the words 'substance' or 'abuse', enter:  
substance abuse  
or  
substance OR abuse
- **AND**  
Use AND to find contacts where both words are contained in the subject or the narrative. For example, to search for contacts that contain the words 'substance' and 'abuse', enter  
substance AND abuse.
- **NOT**  
Use NOT before a word to exclude results that include that word. For example, to search for contacts that contain the word 'substance' without the word 'abuse', enter  
substance NOT abuse.

For more information about configuring contact logs, see the *System Administration Guide*.

## Upcoming and Overdue Contacts

An important aspect of a caseworker's day to day tasks is being aware of upcoming and overdue contacts. Caseworkers and investigators can see their upcoming contacts and overdue contacts displayed in pods on their home page. This includes data regarding the length of time that remains before the contact is considered overdue and contacts that are overdue. The worker can prioritize the contacts they must make and easily complete activities without having to navigate through the case structure.

## Multidisciplinary Team Approach

Child welfare services are typically delivered through government child welfare agencies in partnership with other government departments and non-government (e.g. third sector, voluntary, and community) agencies. In some areas, service delivery is multi-agencies where the responsibility for delivering services may be shared with other departments and agencies. Such services may include a number of items such as assessments, counseling, therapy, training, placements, etc.. MDTs often consist of agency staff, representatives from community agencies, court representatives, health care professionals, and educators, substance abuse program representatives, housing program coordinators or representatives and family members. This approach facilitates integrated service delivery and team-based decision making.

By including representatives from a wide range of perspectives, the MDT is better equipped to respond to the needs of children and their families in a comprehensive way. The team collectively identifies the family issues that contribute to the safety risks and unsafe environments. They also discuss and document the needs of each family member by sharing assessment information. Each team member can provide their own set of skills and background to assess the risk and safety issues. Through the combined efforts of the MDT members, child welfare agencies can identify suitable programs to address the needs of the child with the intention of preventing further harmful events by safeguarding children.

Family involvement in the decision making process supports child- focused and family-centered practice. Empowering families by involving them in the decision making process encourages successful planning and service provision. The family support network of friends and other relatives can assist with finding ways to ensure safety of children during the day to day activities of the family. Involvement from court representatives can often short-cut formal court proceedings and promote differential and alternative responses to traditional child welfare practices.

The Social Enterprise Folder (SEF) allows MDT members an online collaborative environment to securely share information. The intention is to ensure that services are delivered in an integrated manner to achieve a desired outcome for the family. SEF's provide an enterprise level view of client and case information regardless of where that information is maintained.

## Legal Actions Framework

The introduction of a legal authority (e.g. council, magistrate, court, etc.) is often an important aspect of an agency's work with a child and family. In order to promote a cooperative relationship to safeguard the well-being of children, agencies are required to achieve accurate and beneficial exchanges of communication and information with the legal authority. When involvement of legal authority is required, the solution integrates the Legal Action Framework as part of the business processes implemented in the solution.

The legal authority may also determine a legal status for participants of the case. The name of a legal status varies according to local legislation and policy and may be configured to meet the requirements of the local agency. Examples of legal status could include:

- Temporary Protective Custody,
- Crown Ward,
- Permanent Custody,
- Under Care,
- Single Voluntary Agreement,
- Temporary Substitute Care, and
- Termination of Parental Rights.

The solution supports the documenting details of legal action (e.g. petition, hearing, or order) and the participants involved (e.g. children, their family if applicable). Legal actions may be linked or associated to one another to provide a chronology of legal events and outcomes. For example, a custody petition may be associated to the custody hearing

## Eligibility

Government and non-profit organizations typically utilize funding sources which focus on fiscal accountability, rather than profitability. The key concept is the balancing of expenditures into different fund accounts based on a set of criteria defined by the national or local policy. The eligibility feature in the solution allows an agency to determine which fund costs associated with the family should be allocated based on a set of rules and evidence associated with the family and/or services provided (e.g. placements, treatments, etc.).

### ***Title IV-E***

In the United States, Title IV-E of the Social Security Act (SSA) establishes the rules and conditions that states must meet in order to claim federal reimbursement for the costs they incur when placing children in foster homes or other out-of-home facilities. If a child is Title IV-E eligible, and placed with a licensed provider, part of a state's costs for a child's out-of-home placement is eligible for federal reimbursement. Programs can include Foster Care Maintenance and Adoption Assistance payments for eligible children in temporary or permanent custody of a Title IV-E provider who meets IV-E criteria (e.g. foster home).

Child Welfare provides an unsupported sample implementation of the Title IV-E "Eligibility Determination Process" that refers to the application of eligibility rules against collected information to determine if the circumstances result in a child's eligibility under Title IV-E.

The IV-E component includes a sample Classic rule set and set of evidence to illustrate how Title IV-E Eligibility can be determined. The sample rules execute against the evidence, including the age of the child, deprivation, and citizenship status along with home removal information to determine a child's IV-E eligibility.

Other data mandated by Title IV-E Eligibility such as the language in the court order associated with the initial removal order for the child that indicates the "Best Interest (BI)", "Reasonable Efforts (RE)" and "Permanency" interests of the child being removed from his or her home, is not included in the sample but can be implemented as part of a solution.

### **Related concepts**

### ***Other Eligibility Initiatives***

Governments that utilize a fund account approach to balance expenditures against monies and grants set aside to target children in the need of safety and protection will also be able to leverage this feature. If a jurisdiction provides such funds to pay for services and/or care and the funding is based on eligibility criteria (e.g. determination rules), Cúram's Common Evidence feature could be leveraged and the solution extended to capture child welfare specific criteria to address local rules. Automated eligibility determinations review client circumstance to verify which fund account an individual or a family's expenditures should be tracked against.

## **Background Information**

CCS allows for the tracking of individual information related to children and families. A number of the attributes below are available from Cúram Platform and are included in this section because of their particular importance to child welfare. Below are some areas that are available to the child welfare user:

- Special Cautions
- Physical Characteristics
- Medical Information
- Educational Information
- Gang Affiliations
- Account Transactions

### ***Special Cautions***

A list of special cautions can be maintained for individuals in order to highlight any issues requiring special attention. Special cautions are directly associated with the safety of the child or the safety of others in relation to a person. They may include behavioral (e.g. runaway, suicide risk), health (e.g. allergies, contagious disease, special dietary needs), or safety issues (e.g. pertinent criminal history - violent or sexual offender). The list of special cautions can be configured to meet the requirements of the agency.

When a child has one or more active special cautions, an icon will be displayed on appropriate pages. For more information about Special Cautions refer to the Cúram Participant Guide.

### ***Physical Characteristics***

Cúram provides the ability to maintain a record of a person's physical characteristics. While some characteristics such as eye color remain fairly constant, others such as height and weight can fluctuate; therefore, physical characteristics are recorded as a series of point-in-time descriptions. The measurements used for physical characteristics (height, weight, etc.) can be configured in the administrative component of CCS.

### ***Medical Information***

Medical information is collected in order to promote safety and well-being of children. CCS provides tools to maintain a medical history for all children including:

- Child's immunization history
- Current and past medical conditions,
- Disabilities and allergies,

- Tracking medical visits, and
- Medications

For medical conditions, the list of categories and conditions can be based on local reporting requirements and may be configured to meet the requirements of the agency.

### ***Educational Information***

Children who become involved with the child welfare agency may be struggling in school, have special educational needs, or be experiencing attendance issues. Their education may be disrupted and fragmented by many changes in accommodation or family circumstances. Improving school participation and educational performance are essential goals of agencies and they are often used as measures of competency development for the child. Children who are moved to new schools due to new foster home locations are particularly vulnerable. Changing schools can be hard for children who require stability, whether the move is across town or across the country. Any move can impact performance along with social and personal development.

An integral part of tracking a child's education is the measurement of performance. Different modes of progress can be captured (e.g. Grade Point Average (GPA), National Curriculum Assessments, report cards, etc.). The intention is to monitor the child's progress in school, as well as identify any potential impacts that being in care may have on a child. Performance can also be maintained for specific topics, thus highlighting a child's strong subjects and those that the child may be failing. Recommendations can be made based on education performance, including recommendations to address a child's special needs. Documentation associated with a child's education record can be stored as attachments. Attachments may be scanned documents or electronic versions of such documents attached to the child's person information. Examples of documentation include the storing of report cards, education plans, and assessment and test results from schools, vocational training and employment.

### ***Gang Affiliation***

Gang affiliation is important information to those working with a youth. It allows the caseworker to understand part of the context of the youth and can provide safety information about which youth may, or may not be housed together or involved in group therapy or work programs. Maintenance of a youth's gang affiliations and history of gang membership (through the recording of start and end dates) provides a view of other persons who are affiliated with the same gang.

### ***Account Transactions***

An account transaction in this solution is the capture of debits and credits against a specified bank account. Cúram provides that ability to manage bank account details (e.g. account type, account number, etc.). The account transactions facility allows the user to track transactions to the individual's account that could be used to cover services that the agency is unable to provide or support.

## ***1.3 Referral to Recommendation (Intake)***

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The CCS intake process facilitates the capture of a report (or referral) of a child in need of services or protection.

Persons may contact the child welfare agencies via various access channels to report suspected child abuse or express concerns regarding a family situation. Intake workers are required to

capture narrative information provided by the reporter, record participant information, determine intake type, and capture other information relevant to the intake type. For example, allegations must be captured for Child Protection Services intakes, but they are not required for other intake types.

The intake worker makes an initial screening recommendation to screen in or screen out a report based on the information provided by the reporter and agency screening criteria. If an intake is screened in, an investigation will be conducted to determine the appropriate response by the agency. The intake worker may submit the recommendation for approval to the intake supervisor, based on the agency workflow. The supervisor or designated staff reviews and approves or denies the intake recommendation. The intake worker may also make a recommendation regarding the response time. This determines how quickly the agency must respond to the allegations.

## Intake Narrative

During the intake process, the intake worker typically captures free-form text describing the situation, the participants, and their role in the intake, allegations, and other relevant information. The intake narrative includes rich text formatting such as bold and underlining. The intention of this feature is to allow an intake worker to capture the details presented by the reporter in the manner being provided by the reporter rather than by a strict, structured form method.

**Note:** If required, used the browser spell checker.

## Participant

Intake roles are assigned to persons involved in the intake. The roles define the part (role or responsibility) the intake participant is known to have at the time of the intake, such as child, parent/guardian, alleged victim, alleged maltreater, or caregiver. A participant can have multiple roles relating to the intake. Roles are different than relationships in that they identify the role of the person throughout the intake process. During the intake process, relationships may also be captured. Below are some roles that are included in the intake process.

- Reporter - The reporter is the person who contacts the child welfare agency to report an incident, suspicion of abuse/neglect, or request services. In many areas, certain classes of professional are required to report child abuse/neglect as a condition of their licensing. These are known as mandated reporters. Mandated reporters are expected to disclose personal information such as name, address, and contact number. The details of the agency for which the mandated reporter works should also be disclosed. A reporter may also be a family member, neighbor, or others including child who is being maltreated. Reporters, other than mandated reporters, may wish to remain anonymous.
- Parent/Guardian - The person identified as parent and/or guardian.
- Child - The person identified as child.
- Alleged Victim - For Child Protection Services intakes, the child who has been identified as the subject of abuse or neglect is identified with the role of "Alleged Victim".
- Alleged Maltreater - For Child Protection Services intakes, the person who has been identified as the alleged perpetrator of abuse or neglect is identified with the role of "Alleged Maltreater".

- Provider - A person, such as foster parent or day care provider is identified with the role of "Provider".
- Collateral - The person who provides information regarding the family, but is not considered a participant. Collaterals can include a teacher, neighbor, school counselor, day care worker, family friend, etc.
- Primary Client - The reference person of the case.
- Caregiver - The person or persons responsible for care of the child.

Previous participant information is stored. The CCS solution provides the ability to indicate that a search result is a "potential" match to a known participant. This information will be made available to the intake worker or investigation worker to be confirmed at a later time.

## Intake Types

The intake worker will need to determine the type of intake being received.

- Child Protective Services (CPS) - If allegations exist, the intake worker selects to create a Child Protective Services intake.
- Family Services (FS) - If there are no allegations, but rather a request for services (prevention), the intake worker can select to create a Family Services intake.
- Inter-jurisdictional (IJ) - If the person is requesting to transfer a child to the intake worker's jurisdiction (e.g. move a child from one jurisdiction to another), the intake worker will create an Inter-jurisdictional intake.
- Information and Referral (I & R) - If the person is requesting information regarding child welfare (or anything else), or simply requesting a referral for services, the intake worker may create an Information and/or Referral intake.

If the type of intake is unknown at the initiation of the intake, the intake worker can create an "unknown" intake type, but must select one of the previous four types of intakes prior to submission of the intake recommendation.

### **Child Protection Services**

A Child Protection Services (CPS) intake is created when an intake worker receives a report alleging or suspecting the abuse or neglect of one or more children. Child abuse and/or neglect may occur as an incident or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child. Child abuse and/or neglect may occur in child's home, or in a provider setting such as foster care or child care. Different jurisdictions have developed their own definitions of what constitutes child abuse.

The intake report requires staff to answer many questions including: Is the child safe? If not, how quickly do we need to respond? These front door questions have major implications for child safety and for agency workload. Once it is clear that the allegation(s) meet the definition of child abuse/neglect-related, the criteria for determining the urgency of response must be considered.

The child protection intake process clearly identifies factors that determine if and how quickly staff should respond to new child abuse/neglect referrals. This results in greater consistency among workers and also permits administrators to easily convey the criteria they use to decide how the agency deals with abuse and neglect referrals. The process is intended to help manage diminishing resources (i.e. investigators) while continuing to ensure the safety of a child in need of assistance. In addition, classifying and prioritizing referrals helps determine what would be

considered timely or practical with regards to the initiation of an investigation from a report. This key indicator has been defined globally as a primary consideration, as documented by New Zealand's new differential model approach, the United States' CFSR Safety Indicator and can be used to address the UK's Every Child Matters "Staying Safe" outcome.

Use of the screening and response priority assessments is optional for an agency and is not required as part of the intake process. Cúram supports use of locally preferred assessments with products such as Intelligent Evidence Gathering (IEG). IEG is used to present questions, applicable answers and collect assessment data. Either Cúram Decision Assist (CDA) or Cúram Eligibility Rules (CER) can be used to determine the assessment results. Such assessments could be completed by intake workers during the intake process and results are used to help the workers determine the screening recommendation and/or response time.

Allegations captured during the intake are assessed to determine the need for an investigation. Current types of child abuse/neglect are listed below. These types may be modified as deemed appropriate by the agency.

- Physical Abuse - physical injury to a child,
- Neglect/Deprivation - a child's basic needs such as food and shelter, are not being met,
- Sexual Abuse - sexual activity with a child under the age of consent, and
- Emotional Maltreatment - non-physical behavior such as verbal abuse.

CCS offers the flexibility to capture multiple allegations for the same intake case. Each allegation will have an Alleged Maltreater and Alleged Victim.

The Child Protection Services and Unknown types also include the ability to capture allegation details, including the type of allegations, the alleged victim, the alleged maltreater (if known), and the location of the alleged maltreatment and the time of the alleged maltreatment. A Child Protection Services Intake involving an out-of-home placement will also include the ability to capture details regarding the out-of-home care provider. Details include the name and location of the out-of-home care provider, as well as any other children for whom the out-of-home care provider may have access.

### ***Family Services***

A Family Services (FS) intake is created when a family or concerned individual seeks services from an agency to address difficult circumstances related to one or more of the family's children. The services could include those requested while a child remains in his/her home or during a child's temporary voluntary placement in an out-of-home setting. An FS intake that is screened in requires an evaluation to determine the requirements of the child/family members. The caseworker works with the family members to identify short and long-term goals, and related services.

### ***Information and Referral***

An Information and Referral (I&R) intake is created when the child welfare agency receives request for information and/or referral to services. The agency determines the appropriate response by providing information about the referral to community agencies that provide sought-after products and/or services, such as food, clothing and shelter, or counseling services. Intakes of this type typically do not result in the agency providing direct services to the requestor.

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<sup>1</sup> The Child & Family Services Reviews (CFSR): <http://www.acf.hhs.gov/programs/cb/cwmonitoring/recruit/cfsrfactsheet.htm>

### ***Inter-jurisdictional Intake***

An Inter-jurisdictional (IJ) Intake is created when a child service agency receives a request for child services from a child service agency in a different jurisdiction. An IJ intake involves a transfer of a child welfare case from one jurisdiction to another. In these instances, jurisdictions are often defined as legal authorities over specific geographic areas, such as provinces, states, counties and municipalities.

### ***Intake Recommendation***

Depending on the type of intake, the intake worker may go through different steps to gather the appropriate information including identifying participants and participant roles, and identifying allegations. Prior to completion of the intake, the intake worker validates whether or not the intake type originally identified has changed. If not, the intake worker proceeds through the intake process. If the intake type has changed, the intake worker follows the steps relevant to the new intake type.

Agencies may use a combination of policy, best practice and reliable assessment tools to assist the intake worker in making a recommendation regarding the actions required for a referral (intake). The intake worker then submits the intake with a recommendation to screen in or screen out the intake. The submission and approval process may be omitted based on the agency's requirements. If the intake supervisor is involved in the submission and approval process, the intake supervisor may approve the intake worker's recommendation. If the supervisor does not agree with the intake worker's recommendation, the intake supervisor may return the intake to the intake worker for re-work, or simply make the necessary changes and override the initial intake recommendation.

## ***1.4 Recommendation to Response (Investigation)***

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The recommendation to response (investigation) process begins with the acceptance of the referral recommendation that an intake warrants further analysis (an intake report is screened in).

The intent of an investigation is to assess the safety of the child, make contacts with participants, dispose allegations and determine risk factors related to future harm to the child. The agency determines the appropriate response based on the needs of the family in the form of services, diversionary activities, ongoing case management and/or removal of the child from the home.

### **Review Referral**

After an intake has been screened in, the first step in the investigation process is to review the originating referral details. This includes the determination of whether or not a new investigation should be started or if this intake should be associated with an existing intake.

### **Contact Family**

Upon receipt and acceptance of the intake for investigation, the investigator will attempt to locate and contact the alleged victims, the parents or guardians, any collaterals identified and (if appropriate) the alleged maltreater. The investigation worker uses contact management to log contacts. Based on agency policy, investigators are required to make face-to-face contacts with participants such as the alleged victim within certain timeframes. Maintaining contact logs involves documenting details of interactions such as those of the following nature:

- For a CPS investigation, individual interviews of the alleged maltreater, alleged victim(s), or investigation participants by the investigation worker;
- For an FS investigation, one on one interviews of the individual family members by the investigation worker;
- Interviews by the investigation worker of collaterals; and
- Schedules conferences.

For more information, see [Managing Contacts on page 14](#) for more information.

## Participants

Individuals involved directly or indirectly in the investigation case are referred to as investigation participants. After reviewing the intake participants, not all individuals listed on the intake report may be included in the investigation. Conversely, new participants may be added during the investigation process. As with intake participants, an individual may have multiple roles. Examples of roles include child, parent/guardian, collateral contact, and for investigations where abuse and neglect are alleged, alleged victim and alleged maltreater. Relationships may also be captured during the investigation process and are different from roles as they define the relationship of individuals and their reciprocal relationship.

## Assess Safety

The investigator contacts the alleged victim(s) to assess the child's immediate safety. After making contact with the child and family, the investigator must gain enough information to assess child safety concerns. Children are considered to be unsafe when any safety threat is present and the only intervention considered sufficient to protect them is removal from that environment.

An assessment of safety also identifies what safeguards that may be required to remediate potentially unsafe conditions. The investigator works with the family to identify the factors that led to the current investigation, and assesses what needs the family might be able to address immediately to alleviate the issues. The investigator can identify safeguards that will alleviate the issues being addressed and investigated. In this case and with the agreement of the family, the investigator creates a safety plan for the family. The plan identifies services and activities that would address the immediate needs of the family and keep the child safely in the home. The investigator considers the allegation disposition (or findings) as well as the family's social support network and other factors to determine whether or not the family is able to address the issues.

## Dispose Allegations

Based on interviews with the alleged victim, alleged maltreater (if appropriate), parents/guardians and other collateral contacts, the investigator makes a determination as to the validity of the allegations. The investigator also reviews and corroborates other evidence that might be available (e.g. law enforcement collaboration, medical records, school records, etc.).

## Assess Risk

The investigator assesses whether or not the children in the home are at risk of future abuse or neglect from the parents/guardians or others. Many jurisdictions use assessment instruments to determine level of risk. Use of the safety and risk assessments is optional for an agency and

is not required as part of the investigation process. Cúram supports use of agencies preferred assessment instruments with products such as Intelligent Evidence Gathering (IEG), which is used to present questions, applicable answers and collect assessment data. Either Cúram Decision Assist (CDA) or Cúram Eligibility Rules (CER) can be used to determine the assessment results. Such assessments could be completed by investigation workers and results are used to help the workers determine the response for future services.

## Determine Response

The investigator utilizes the information above (risk level, family's ability to address needs, and allegation dispositions) to determine whether the most appropriate action for the family is to transition to an ongoing case or to close the investigation with no further action or intervention by the agency.

### 1.5 Removal to Return

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If an investigation indicates that a child's current living arrangements are unsafe, the child services agency can determine that it is in the child's best interests to be removed from the home of the child's caretaker or caretakers.

A child's removal can either be court ordered, voluntary, or as a result of an emergency. If the removal is based on an emergency, the child services agency must, in most cases, obtain a court order to continue the out-of-home placement. If a legal action already exists for the specific removal, it can be associated to the placement record. CCS supports the removal processes. The caseworker records the removal date, removal reason(s) (e.g., physical or sexual abuse) and other details. The caseworker can also specify the type of removal (court, voluntary), and capture additional relevant details as part of the removal narrative. CCS also supports the ability to capture additional details regarding the removal of a child from his or her parents or guardian, as well as the living arrangement of the child prior to the removal.

## Remove Child

If the caseworker or investigator finds that the child is in an unsafe situation, the worker immediately takes action to remove the child from the unsafe situation. This is typically, but does not have to be, the home where the child lives with her/his parents or guardians. The removal process begins with the date of a child's INITIAL removal where the child is taken from their home or where the child is placed under a formal voluntary agreement between the agency, the parents and (optionally) the placement provider. A child may have multiple removals (or removal episodes) during his/her lifetime as the family's case may reopen due to recidivism of abuse and neglect and the child may return to agency care.

The solution supports the ability to capture information regarding the removal of a child from the home, including the removal initiation details (e.g. date and reason), the removal end (or discharge) details (e.g. date and reason) and the association of the legal actions supporting the decision to remove a child from his or her home.

## Removal Types

The following types of removals are included:

- Court Ordered - A court ordered removal typically includes a "Care and Protection" Petition or Order. This is a legal action filed to protect the child and requests that the child be ordered into an out-of-home placement due to immediate or imminent danger as a result of abuse, neglect or other circumstances which dictate that the child is unsafe in their current location.
- Voluntary Relinquishment - A voluntary relinquishment typically includes a "Voluntary Placement Agreement". This is a legal action or written agreement between a child's parent(s) and the agency under which the child is removed from her or his home and placed in foster care for a limited time. This may also include a Voluntary Surrender, which is a voluntarily relinquishment by the parent of any right to the custody of the child to the agency for the purposes of adoption.

Other types of removals can be configured as needed by local agencies.

## Identify Provider

The provision of foster care may be via a large government entity (e.g. Department of Children & Family Services), a local authority (e.g. Local Safeguarding Children's Board), a non-governmental agency (e.g. Children's Aid Society) or an indigenous agency. Any of these agencies will identify, license and maintain a source of foster care providers (or carers). In Cúram, these resources are known as placement service providers. A placement service provider offers out-of-home placement services (e.g. foster care) for one or more children for a designated time period. Some placement service providers specialize in placement services to children with special needs or serious medical conditions. Typically placement services are allocated to children in single units, usually for a number of days.

Payments made to providers are typically based on a pre-negotiated rate structure. Cúram can be configured to support a child services agency's rate structure as well as contract-agreed rates. Registration and maintenance of individuals or agencies as providers is managed through the Provider Management™ (CPM). For more information about providers and payment methods, see the *Provider Management Guide* guide.

### **Placements**

Whenever possible, the caseworker or investigator works with the family to identify the least restrictive placement setting for a child or children. These resources might include neighbors, relatives or close friends. Typically, these resources are not known to the agency and therefore require validation (e.g. security screening) prior to placement approval.

Decisions about where to place a child in out-of-home care should be made by considering a number of factors, including the:

- Child's existing support network (e.g. school),
- Child's strengths and needs,
- Skills of the available caretakers or facilities, and
- Child's prospects for permanency with family placements.

The goal for the child welfare agency is to minimize the number of placements for a child by considering all of the factors listed above (plus others) to promote stability.

Children in out-of-home care (e.g. foster care) may live in a number of possible settings. These include kin or relative homes, community or kith homes, traditional foster homes, treatment foster homes, or group or residential care. Many communities use the phrase "foster care" to refer to this

array of placements. In others, "foster care" refers to care in a foster family home, while "out-of-home care" encompasses all placement service provider options.

The ultimate goal for a child in care is for that child to return home to a safe environment where they are able to thrive. If and when deemed safe and appropriate, the child is returned to the parents/guardians and the removal (or removal episode) ends.

### ***Creating a Placement Request***

A caseworker may request a particular placement for a child. The request may be for a placement resource which may include:

- a potential placement resource known to the agency,
- a potential placement resource not known to the agency, or
- special needs or characteristics of a child to be considered when identifying an appropriate placement resource.

In some agencies, there are workers dedicated to the provider management, known as placement or resource workers. In other agencies, the caseworker handles the provider management as part of their duties. The person responsible for provider management would work with the provider or potential provider to accommodate the request.

### ***Kith/Kin Placements***

Kin are familial contacts who may be available and appropriate for placement of the child. Kith are non-familial contacts who are emotionally bonded to the child - for example - neighbors, community members. Kith/kin placements are typically preferred as they tend to provide the least intrusive environment for a child. If a kith or kin placement is identified, the caseworker, investigator or other designated person must assure that the placement resource is safe and appropriate.

If a kith or kin resource is identified who has never been utilized by the agency, that resource must be vetted by the agency first before being able to use the kith or kin family as a placement resource for a specific individual(s). This process includes interviews with the family and background checks. A number of factors, such as the child's relationship with the resource, criminal history, condition of the home, etc., are used to determine whether or not the resource would be appropriate for the placement of the specified child.

## **Return Home or Establish Permanency**

The ultimate goal is to return the child to their parents/guardians if that child can be considered at a low risk of future harm and the original issues that led to the initial removal of the child have been addressed. Out-of-home placements are intended to be short term. Discharging a child signifies the end of placement services as well as the current removal record for the child.

A child can be discharged due to the following reasons:

- **Return Home:** Circumstances with the child and his/her family have progressed sufficiently for the agency to determine that it is safe for the child to return to the setting from which he/she was removed.
- **Adoption Finalized:** A court of competent jurisdiction has terminated the rights of the child's parents and all adoption processes have been completed, resulting in the adoptive parents' custody of the child.

- **Age Out:** This signifies that the child has reached a specific age limit or is legally emancipated, and is no longer eligible for placement in out-of-home care.

The caseworker must specify the effective date of discharge, and the reason for the discharge. In the solution, only a single discharge can be associated with each removal. The placement of the child is terminated when the child is discharged.

Each removal can have one or more placements, but only one discharge associated with it. The discharge marks the end of the removal.

## **1.6 Outcome Management**

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Outcome Management provides a comprehensive approach towards reaching positive outcomes for children and families.

The Outcome Management approach includes: defining assessments and outcome plans, building an outcome plan to achieve positive outcomes, managing planned activities and monitoring client progress. Outcome Management is a client-centric approach to service delivery which focuses on the results the child and family is trying to achieve. This is a collaborative approach may engage the MDT processes through-out the life cycle of a child welfare case.

### **Assessment and Planning**

Outcome Management provides the agency with the ability to implement different types of assessments to identify the issues and needs of children and families. Agencies may configure and run multiple types of assessments based on their preference of assessment instruments. Assessments use Intelligent Evidence Gathering™ (IEG) to present questions, applicable answers and collect assessment data. Either Cúram Decision Assist™ (CDA) or Cúram Eligibility Rules™ (CER) can be used to determine the assessment results.

Using the assessment results, the family and caseworker can identify the outcomes desired as a part of the planning process. Agencies typically assess children and families to measure their current situation in relation to one or more factors. Agencies do not always have the capacity to address all of the issues identified by an assessment and must concentrate on the most urgent needs. The assessment framework supports factor prioritization. Factor prioritization allows caseworkers to prioritize factors identified by the assessment as needing urgent or further attention. For example, if a person's assessment results indicate that substance abuse is an identified issue, these results can be prioritized so that the caseworker attempts to address this factor before any other issues are addressed.

### **Outcome Plan**

Based on assessment information, a caseworker develops the outcome plan for the child and family. Legal authorities may review outcome plans, and in fact, the plans may be considered legal court documents. Plans must be understood by all family members with tasks and responsibilities clearly identified. Parents and/or guardians are asked to participate in the planning process and sign-off on the plan. Outcome plans are monitored and updated on a regular basis and may be changed when circumstances change. The planning process also addresses service needs and the selection of the services. A caseworker can select from services listed in the CPM services registry or the service can be recommended by the system and subsequently selected

by a caseworker. The service can be created for multiple clients or for one single client. Service options are configurable.

For children in out-of-home placements, visitation plans are developed to specify and describe planned interactions that occur between the child in out-of-home placement and family members (parents or relatives) or other participants. Visitation plans, which can be court ordered, or mutually agreed upon by the agency and the family, typically specify when, how and where a visitation occurs as well as the frequency and the duration of the planned interactions. When creating a visitation plan, the caseworker must identify the participants involved. A child can have multiple visitation plans active at any time. Visitation plans are integrated into the outcome planning process for child welfare and also include the contact management feature, which tracks the actual visits completed in accordance with the visitation plan.

## Managing Planned Activities

Assessing the child and family's needs and building a plan to address these needs is only the first step in the process of helping to achieve positive outcomes. It is important to also monitor and maintain these activities to make certain that the child and family is not only participating, but also getting what they need from these activities (effectiveness) and to ensure that providers are delivering the appropriate quality level of service provision. Outcome management supports the maintenance of activities on an outcome plan. An important aspect of delivering services to clients is to ensure that the service being delivered is of high quality and to also ensure that providers are paid for the services delivered. Outcome management provides the caseworker the flexibility to make changes to a service based on child and family needs (participation and effectiveness), monitor payments made to a provider and to evaluate the quality of the services delivered.

## Monitoring Client Progress/Case Reviews

To ensure that the activities on the outcome plans are achieved and appropriately addressing the needs of persons, caseworkers review outcome plans regularly. This process is known in the child welfare world as case reviews. This feature allows a caseworker to review the goals, objectives, services and actions and modify any component of outcome plans based on the client's progress.

As part of the case review process, if a child was in placement during the period of time covered by a review, the caseworker may evaluate the current and past placements for that child. This would include, but not be limited to, an explanation of disruptions, positive aspects of the existing placements and an evaluation of the current removal episode.

Each type of outcome plan can be configured to define the number of days after which the plan is created that the first review should occur. In addition, a review frequency can then be specified that defines when the next review needs to be undertaken.

For more information about outcome management and configuration options, see the *Outcome Management Guide* and the *Outcome Management Configuration Guide*.

## 1.7 Ongoing Case Management

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Ongoing case management is the processes of managing the operational and logistic activities associated with children who are being looked after by the agency.

Many of the ongoing case management processes have been addressed in previous chapters: Cúram Outcome Management and Removal to Return. These processes support the ongoing caseworker in developing, managing and monitoring the outcome plan and visitation plan and managing placements and services. Completing caseworker tasks such as contact management, eligibility, legal actions and capturing and maintaining in-depth child and family information and special cautions is addressed in the Supporting the Caseworker chapter. The following pages address inter-jurisdictional agreements that apply to ongoing cases and adoption cases.

## Ongoing Case Participants

Ongoing case participants may include persons such as the child, the parents/guardians, family members, and other persons as deemed appropriate by child welfare agency requirements.

## Inter-jurisdictional

Agencies may enter into IJ agreements when it is in the best interest of the child to move a child from one jurisdiction to another or a potential adoption may take place in another jurisdiction from the child's original jurisdiction. Children placed in other jurisdictions need to be assured of the same protection and services that would be provided if they remained in their own jurisdiction. They must also be assured of a return to their original jurisdiction should the placement prove not to be in their best interest. This requires agencies to cooperate and assist one another in various activities to promote child safety and placement stability.

Examples of IJ activities include:

- The child has kith/kin in another jurisdiction that is suitable as a placement option,
- Home studies and case supervision for children across jurisdictional lines,
- Specialized services or institutional care available in another jurisdiction, or
- Family who has moved to another area for employment or family reasons and is subject to some case management intervention.

CCS provides capabilities for managing and tracking both incoming and outgoing inter-jurisdictional requests. CCS provides templates based on defined processes and forms for IJ agreements. The process for handling inter-jurisdictional activities is sometimes managed by specialized staff responsible for coordinating the information sharing between sending and receiving jurisdictions so that there is a point of contact for each jurisdiction.

## 1.8 Adoption

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An adoption case can be created for a child in care when it is not feasible to return the child back to the child's original home.

An adoption case can be created at any time, based on the policy and best practices identified by the agency. It can be created in conjunction with an ongoing case, or after the ongoing case has been closed. If the adoption case is created in conjunction with the ongoing case, the placement functionality associated with a child in care is viewable from both the adoption and ongoing cases, but updates to the placement details will only be available from one of the cases (initially, the ongoing case).

The ongoing caseworker may transfer the placement management functionality to the adoption caseworker at any time as deemed appropriate by, and in accordance with, agency policy. Once indicated by a legal authority (e.g. the parental rights are terminated), the child is no longer considered a part of the original ongoing case. As a result, the child is removed from the original ongoing case and a new adoption case is created to manage and track the services for the child. Adoption placement and finalization are the focus of the services provided.

Many of the adoption case management processes have been addressed in previous chapters: Cúram Outcome Management and Removal to Return. These processes support the ongoing caseworker in developing, managing and monitoring the outcome and visitation plan and managing placements and services. Completing caseworker tasks such as contact management, eligibility, legal actions and capturing and maintaining in-depth child and family information and special cautions is addressed in the Supporting the Caseworker chapter. Inter-jurisdictional agreements have also been addressed in the Ongoing Case Management chapter.

## Participants

Children can be selected as adoption participants. The intent of the adoption case is to identify, when appropriate, the most appropriate placement for a child that will promote stability and permanency. The adoption case supports single and sibling group adoption scenarios.

## Adoption Process

An adoption case is initiated by the adoption caseworker after selecting a child or children. Once a caseworker creates the adoption case, he/she typically takes steps to move the case towards finalization. Managing an adoption case involves managing (or being involved in) the child's outcome plan, planning recruitment activities (such as adoption picnics), managing pre-adoptive conferences to identify prospective adoptive families, and assessing prospective adoptive families.

An adoption worker creates an outcome plan to document the pre-adoption services the agency will provide to facilitate the goal of the child's adoption. A adoption worker uses the documented information accumulated through these activities to evaluate all of the prospective adoptive families and makes a recommendation regarding the adoptive family best suited for the child.

## Identifying Prospective Families

Persons interested in adopting children must be identified as providers. Based on various selection criteria, the caseworker searches and selects prospective adoptive families who seem suitable to attend the pre-adoptive conference.

Note: Persons interested in adopting children are managed as providers through CPM.

### ***Initiating Recruitment Activities***

Recruitment activities are intended to make the public aware of children who are available for adoption. Child welfare agencies might conduct recruitment activities such as web and media events. CCS facilitates documentation of recruitment activities conducted by the agency. The adoption caseworker can record the type, location, and date of the recruitment activity. The caseworker can also record the names of child for whom the activity was intended, and if any prospective adoptive parents expressed interest in adopting the child.

### ***Providing Placement Recommendation***

The adoption caseworker creates a recommendation for every prospective adoptive family that has been evaluated for attending the pre-adoptive conference. A caseworker can make the following recommendations in the solution.

- Yes - The participants of the pre-adoptive conference consider the prospective adoptive placement appropriate;
- No - The participants of the pre-adoptive conference consider the prospective adoptive placement as inappropriate; or
- Withdrawn - The family is no longer interested in considering the child for adoption.

The adoption caseworker can record the reason for the recommendation, and set a priority for the specific family. Prioritization allows the caseworker to identify a preferred prospective adoptive family out of the many listed.

### ***Capturing Family Responses***

CCS provides the caseworker with the ability to record information and observations about a pre-adoptive conference and a prospective adoptive family's participation. The solution's flexibility supports the caseworker capturing information and observations regarding the interaction between a prospective adoptive family and each child who participated in the pre-adoptive conference.

## **Capturing Placement Decisions**

Using information, observations, and caseworker recommendation recorded in the solution, the pre-adoption case supervisor records his/her decision about each child's placement.

Note: The caseworker may make positive recommendations about multiple prospective adoptive families per child or sibling group. A final placement decision can be based on existing information, observations and priority rating, if appropriate. Alternatively, agency personnel and select conferees of the pre-adoption conference may determine that additional contacts between prospective adoptive families and subject children would provide additional information to aid the placement decision. CCS can be configured to support a wide variety of adoption-related agency business processes.

## **Adoption Subsidy**

Jurisdictions will often provide financial or in-kind support to adoptive families to aid in the adoption of children with special needs. Special needs are defined by the jurisdiction, but typically consider conditions that make children more difficult to adopt, such as age, large sibling groups, disabilities, etc. An agreement is created and agreed upon by both the agency and the adoptive family and would remain in effect as long as the child is alive and in the home and under the age of majority. The subsidy includes a “re-certification” period to validate the conditions of the subsidy agreement and continue receipt of the financial or in-kind benefits identified.

CCS has implemented a sample adoption subsidy that is maintained separately from the adoption case such that the subsidy will remain active after the adoption activities have been completed. The subsidy is supported by Dynamic Programs and can be configured to meet the needs and rules of the jurisdiction.

## 1.9 Performance Indicators

Cúram provides reporting capabilities that includes graphical reports, dashboards and analytics to assist child welfare agencies more effectively manage programs. Performance indicators address safety, well-being and permanency, as well as measure agency and worker performance. Parameters related to time frames and other variables are administratively configurable.

### Dashboards

Listed below are some of the dashboards which have been implemented with child safety and agency performance in mind. Many of these measures from international standards based on well established evidence-based research in the field of child welfare.

#### **Operational Dashboards**

The operational dashboards for worker listed below are provided with the solution and do not require separate licensing:

- Initial Contact Timelines

This measure is related to the contact management process that is described above and relates to the initial contacts which are made by investigators who are required to have face-to-face contact with children who are alleged victims of maltreatment within specified timeframes. This measure helps agencies compare their performance to benchmark standards established in some jurisdictions and make necessary improvements to protect children in unsafe situations. Timeframes, types of contacts and other variables are configurable.

- Ongoing Contact Timeliness

This measure is related to the contact management process that is described above and relates to the ongoing contacts which are made by caseworkers who are required to maintain contacts with children in out-of-home placements or children who remain in their own homes, but safety measures have been implemented to ensure the well-being of the child. This measure helps agencies compare their performance to benchmark standards that have been established in some jurisdictions and make necessary improvements to ensure the ongoing protection and well-being of our children. Timeframes and other variables are configurable.

#### **Additional Dashboards**

Additional reporting capabilities are available with additional licensing requirements. This capability provides evaluation of information which takes into account highly developed reporting processes which can measure factors such as recidivism, number of placements, and other evidence based information that has been established by international guidelines.

Cúram developed the following dashboards to illustrate the capabilities under this option and they include:

- Recurrence of Maltreatment

The intention of this dashboard is to provide information related to children who have been victims of substantiated or indicated child abuse and/or neglect and were victims of another substantiated or indicated maltreatment within a specified time frame following the maltreatment incident. This helps to ensure conformity with child welfare requirements so children are first and foremost protected from abuse and neglect and children are safely

maintained in their own homes whenever possible. This measure helps agencies compare their performance to benchmark standards that have been established in some jurisdictions. Timeframes and other variables are configurable.

- Permanency

The intention of this dashboard is to provide information about the stability of children in out of home placement. Evidence-based research has proven that the less often a child's placement is changed, the more stability the child acquires, the fewer the number of moves, the less disruption in a child's life. This measure helps agencies compare their performance to benchmark standards that have been established in some jurisdictions. Timeframes and other variables are configurable.

## 1.10 Scenarios

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Five scenarios are used to describe the interactions between child welfare agencies, workers, families and children. The five scenarios are child protection, family services, information and referral, inter-jurisdictional, and adoption areas.

### Child Protection Services Scenario

#### ***Participants***

- Daniel Walker - Male, 14 months
- Laura Gibson - Daniel's mother
- Bob Jackson - Laura Gibson's boyfriend
- Deborah Turner - Laura Gibson's friend and neighbor
- Amy Walker - Mark's sister (Daniel's paternal aunt)
- Jerry Walker - Amy's husband (stationed in military overseas)
- Bethany Walker - Amy and Jerry's daughter (Female, age 6)
- Joe Hall - Intake Worker
- Betty Nelson - Investigator
- John Lee - Ongoing Caseworker
- Veronica Castillo - Eligibility Worker

#### ***Intake - Child Protection***

Daniel Walker is a 14 month old child who lives with his mother, Laura Gibson. Laura has a boyfriend, Bob Jackson, who often stays at her house. Daniel's father, Mark Walker is currently living in a halfway house for drug and alcohol abuse in order to fulfill a legal obligation. He must successfully complete this program or face time in prison. Laura and her boyfriend have not returned home from a night of partying. Laura left Daniel with Laura's friend and neighbor, Deborah Turner. Deborah has two children of her own and worries about Laura's behavior since she has started her relationship with Bob. Deborah noticed some bruises on Daniel's cheek and chin. She questioned Laura about it before Laura left for her night out. Laura stated that the baby

fell. After Laura left, Deborah noticed other bruises on Daniel. Deborah calls the child welfare agency.

Intake worker Joe Hall takes the call. He records the names of the participants and records the narrative information. He then completes the allegations information and alleged victim and alleged maltreatment information. Based on the information gathered during the intake, Joe recommends screening-in the intake. The intake is then reviewed and approved by the intake supervisor.

### ***Investigation - Child Protection***

Investigator Betty Nelson is assigned to the Daniel Walker investigation. Betty reviews the information and calls the neighbor, Deborah Turner, to arrange a time to come and visit the child. Betty attempts to contact the mother and leaves a message on her cell phone. Betty documents her attempt to contact the mother on the contact log. Betty comes to the home of Deborah Turner. Daniel looks healthy and well fed. The facial bruises do not appear to be normal for a fall. Betty tries to find out how to contact the father or other relatives. Deborah does have a number for Amy Walker, Mark Walker's sister. Betty takes photos of the child's injuries and arranges for a medical examination for the child. The examination shows old fracture wounds and other evidence of previous physical abuse by an adult. Betty contacts Mark's sister, who provides a cell number and email contact for Mark. She states that contact is very limited while Mark is in treatment but there is an emergency contact number where family can leave a message. Betty contacts the halfway house and speaks with the half-way house director. The director of the agency locates Mark and informs him of what has occurred.

Betty records the contacts she has completed or attempted so far, including contact with the father, child, medical examiner, neighbor, and with the father's sister, Amy. She verifies and updates participant and relationship information. Betty documents the contact with the mother and completes a safety assessment based on the information available.

The child is not safe staying at home with his mother at this time. Based on the information provided, the safety assessment's finding is that the child is "UNSAFE" and should be immediately removed. Betty concurs with the assessment's findings and Daniel is placed in an emergency foster home.

Betty concurs with the assessment's findings and speaks to Amy, Daniel's aunt. Amy indicates that she would be willing to have Daniel move in. Amy has a six year old daughter and has an extra bedroom. Amy is a teacher and her husband, Jerry, is serving in the military overseas.

Betty begins the process of licensing Amy as a relative foster home. She conducts background checks on Amy and her husband Jerry. No history of previous arrests or allegations is discovered. Betty refers Amy and Jerry to the resource manager to begin the licensure process.

Betty finally reaches Laura. She admits that Bob is rough with Daniel and may have handled him too firmly at times. Laura admits that her father was very strict with her and he physically abused her and her siblings when they misbehaved. She admits that Bob cannot handle the baby crying all the time

Betty disposes the allegations after conducting additional interviews with the father and father's sister over the next 30-45 days (depending on agency policy). After all the interviews, and relevant assessments, she concludes that there is a need for ongoing services. The case is transferred to ongoing case management.

### ***Ongoing***

- Outcome Plan

Amy is approved as a relative foster placement, and the ongoing caseworker, John Lee, moves Daniel from the emergency foster home to Amy's home. John completes assessments for Daniel and each parent. From the assessments, an outcome plan is developed for the family. Daniel thrives under Amy's care. Mark is near completing his obligation at the halfway house and is working on his transition plan. John sets up an MDT meeting with other people involved with the family including Mark's halfway house counselor, George, the family counselor from the Army that supports military families, June, and Mark and Amy. Mark agrees to attend regular meetings, submit to drug and alcohol testing, have supervised visits with Daniel at Amy's house twice a week and start a job. Mark is working towards a bike master certification program and has found an apprentice job at a bike shop close to Amy's house. He is searching for an apartment close by and plans to bike to work and to visits with Daniel. Mark agrees to the outcome plan for his activities and the visitation plan with Daniel. He signs off on the plan.

According to agency policy, John must make three face-to-face visit per month with Daniel and Amy. He also must contact Amy on a regular basis regarding Daniel's progress

An MDT meeting is also set up with Laura. Laura does not show up for her meeting. John Lee calls and leaves a message. Laura calls him the next day to reschedule and said that her car broke down and her cell phone battery was dead. They reschedule the meeting for the following day. John agrees to meet Laura at her home. When John arrives, there is no answer. John leaves a note under her door to please call him. Laura does not make any of her visits with Daniel. John records the attempted contacts with Laura.

- Case Review - 6 Month Hearing

John Lee captures the 6 month hearing details as a legal action in the ongoing case. The system then generates and sends notifications to identified parties (e.g. the parents) informing them of the next scheduled hearing date, time and court room.

Daniel is doing well at Amy's house and is progressing at a normal pace for his age. He also has grown attached to Amy and her daughter, Bethany. John completes his regular face-to-face contacts with Daniel and Amy, as well as ongoing phone calls with Amy. John records contacts with Amy and Daniel using contact logs.

Mark completes his required visits with Daniel according to his visitation plan and is doing well with staying clean and sober. He is dating one of Amy's friends. He also is doing well at his job. He shares an apartment with a friend from the halfway house who is also staying clean and sober and is also working at the same bike shop. Laura has relocated to another town and has not made contact with Daniel, Amy or Mark. She has not contacted the agency and has not been keeping up with regular visits with Daniel.

John begins the process to terminate Laura's parental rights with the court. He continues his regular face-to-face contacts with Daniel and Amy. He files his report to the Court as directed by the judge. The judge approves the plan and supports Mark's goal of reunification with Daniel. John updates the plan with the goal details.

- Case Review - 12 Month Hearing

Daniel is doing well at Amy's house. Mark spends lots of time with Daniel and Jerry, Amy's husband who has returned home from military duty overseas. Mark has become engaged to Amy's friend, Chloe. They have been dating for over 7 months. Chloe works as a teacher's aide and loves children. Mark plans to move in with Amy and has completed parenting classes and is working towards his GED. Chloe is also working on her degree to become a teacher. Mark would like Daniel to live with him and feels he is now ready to take on fatherhood. John completes the risk reassessments and reunification plans for Mark and Daniel. As Mark gets settled into his new life with Chloe, Daniel begins staying with Mark and Chloe. They set up a bedroom for

Daniel. John Lee updates the outcome plan and identifies the steps to reunification. John Lee works with the family to complete a plan. John submits the updated outcome plan to the court. The judge approves the plan and recommends that Daniel return to Mark's custody. The agency custody is terminated and the plan is signed off by all appropriate parties. Continued support will be provided by Mark's sister and brother-in-law, Jerry. Mark and Chloe will attend a parent's workshop together, which focuses on blended families. John Lee continues to check in with the family for a few months. At an appropriate point, John calls Mark to tell him he is closing out his ongoing case. Mark thanks John for all his help and John closes the case

## Family Services Scenario

### ***Participants***

- Nick McKesson - Male, 14 years
- Anna McKesson - Nick's mother
- Larry McKesson - Nick's father
- Joe Hall - Intake Worker
- Betty Nelson - Investigation Worker
- John Lee - Ongoing Caseworker

### ***Intake - Family Services***

Nick's mother contacts the Local Safeguarding Children's Board (LSCB) to indicate that she is having a difficult time with her son Nick. He locks himself in his room and will not come out for meals. His school counselor called and said that Nick has not turned in any homework for several weeks. Nick's father Larry lost his job and the family is under financial stress. Anna started a job with her friend, Marissa, cleaning houses to make ends meet. Larry is depressed and has been staying out late at the local pub with his old friends from high school. According to Amy, Nick has always been a great kid and always done well at school and sports. Last night, Nick went on the roof and stayed there until midnight. Anna tried to go up the ladder and get him down. She was unable to go onto the roof and Larry was not home to help retrieve Nick from the roof. Anna went to bed and Nick came down sometime during the night and went to bed. Anna tried to get him up for school, but he refused and said he was too tired. Larry went into his room and said he better get to school now. Nick cried and said "I'm a loser, I hate school!" Larry stormed out of the house. Nick's mom is anxious. She is afraid that Nick will run-away. She has no where left to turn. She said her family has never asked for anything from the local government before. They are hard-working and believe in always taking care of family matters within the family, but, as they have no family in the area, she felt that she had nowhere else to turn.

Joe Hall records the intake information. He talks to Anna. Anna says she must get to work to have enough money to buy groceries and the mortgage is 3 months overdue. Joe records the information and attempts to calm Anna down. He records the participant information. There is no indication that Nick is being abused or neglected, but clearly the family is under stress. Joe feels that the situation must be addressed immediately. He records the current location of all participants. Joe "screens-in" the intake as a referral for Family Services.

### ***Assessment - Family Services***

Betty Nelson is assigned to assess the McKesson family and opens an investigation case. Betty contacts the mother, Anna and asks for a time to discuss the situation. They set an appointment for that afternoon at Anna's home. Betty comes to Anna's home. When she gets there, Anna has just come home from work. She invites her to sit in the living room and asks if she would like a glass of water. Nick is still in his bedroom. Larry is not home. Anna begins to cry. She states that Nick missed school. Betty talks with Anna and learns that the house is under foreclosure. Anna has very little food in the kitchen and Nick is a growing teen-ager but he hasn't been eating because he is worried about the family's financial situation. After talking to Anna for awhile, she asks if it is ok to go and talk to Nick. Anna agrees. Betty walks into Nick's room. He is lying in bed and has not turned on any lights. After a very long discussion, Betty asks Nick if he wants to eat something. Nick says he hasn't had a decent meal for days. Betty calls her supervisor and gets approval for takeout food for the family. The food arrives and so does Larry. He states he has found a new job as a landscaper. He seems inebriated. Anna apologizes for bothering Betty and asks Betty to leave. Betty provides her contact information and leaves.

Betty records the information and consults with her supervisor and team members the next day. Betty contacts the school to see if Nick is in school. The school social worker reports he has missed over 10 days in the last semester and that his performance in classes has deteriorated significantly. Betty contacts School-Home Support (SHS) to provide support for Nick's concerns about housing and money worries, as well as support for improving his school grades and results.

Betty contacts Anna to see how things are going. Anna said that Larry did not get the landscaping job. Betty asks whether Larry has interacted with JobCentre Plus (of the Department for Work and Pensions [DWP]). Anna indicates that she's not sure if Larry has been keeping his appointments. Betty directs Anna to the DWP's Directgov Website and explains that it includes information for job seekers, and also indicates that she can assist Anna and Larry in applying for Jobseekers Allowance and Employment & Support Allowance. Anna quickly agrees. She also agrees to meet with Betty and others to work out an Outcome Management Plan for the family to get through this time. The family's case is transferred for ongoing case management and services by a 3rd sector agency.

### ***Outcome Management Planning - Family Services***

Caseworker John Lee contacts Anna and Larry to identify the most appropriate professionals and personal support systems to be involved in a multidisciplinary team (MDT). The MDT consists of a JobCentre Plus representative, a LCSB representative, a social worker from SHS and Nick's school counselor. Prior to the MDT conference, John sits with the family to conduct strengths and needs assessments for the caregivers and for the Nick. At the session, while reviewing the recommendations of the assessment, it becomes apparent to everyone that the family's financial situation has had a tremendous impact on Nick. He has felt tremendous peer pressure and low self-esteem. Nick and the family indicate that this is their top priority issue, and the team agrees that this is the first area that should be addressed. John and Betty, the school counselor and SHS caseworker work with the family to develop an outcome plan to help Nick get back on track in school by obtaining a tutor, which is provided through a program in the school system, as well as counseling sessions to deal with the worry and frustration associated with the family's current situation.

Nick's parents are saddened about the impact this situation has had on Nick. They agree to family sessions to discuss the problems they are facing and find ways to work together as a family. Anna will continue to work with Marisa in cleaning houses. Larry is looking into a training program through JobCentre Plus that will provide opportunities in the medical arena. Larry also agrees to

an alcohol assessment and feels that his drinking has gotten out of hand. The family also applies for Employment & Support Allowance. This information is documented in the outcome plan with specific target dates to achieve outcomes. Betty will continue to monitor the family's progress according to the outcome plan.

## Information and Referral Scenario

### ***Participants***

- Elizabeth Farman - Female, 6 months
- Jennifer Farman - Elizabeth's mother
- Joe Hall - Intake Worker

### ***Intake***

Jennifer is new to the community. She is looking for child care for her 6 month baby. She calls intake worker, Joe Hall, for information about how to find a child care provider. Joe refers her to the child care licensing agency that assists families in finding providers who are licensed and fit the needs of the family. Joe gets Jennifer's email address and submits an electronic referral to the child care agency. This includes the child care agency's phone number, website address, physical address and general information about their referral services. Joe records the intake type as an Information & Referral (I & R) intake and completes the intake.

## Inter-jurisdictional Scenario

### ***Participants***

- John Taylor - Male, 14 years
- Emily Smith - John's aunt
- Joe Hall - Intake Worker (Receiving Organization)
- John Lee - Ongoing Worker (Receiving Organization)
- Maggie Friedman - Ongoing Worker (Sending Organization)

### ***Inter-jurisdictional Process***

John Taylor, age 14, is living in a foster care setting in the northern zone of Ontario. John's parents are currently incarcerated. Maggie Friedman, John's caseworker, learns that he has an aunt in Toronto (central zone), which may be an appropriate placement for John. John's current foster care parents have decided to discontinue as foster care providers and are willing to keep John until another placement can be found. Maggie makes a request to the Children's Aid Society (CASO located in Toronto to explore the option of placing John with his aunt. John Hall, intake worker for the Children's Aid Society of Toronto, records the intake information regarding John Taylor and his aunt. He records the type of intake as inter-jurisdictional and the intake is screened in. No investigation is launched for an IJ intake. An ongoing case is created for John Taylor. John Lee, ongoing worker who also had responsibility for inter-jurisdictional placements, reviews the information submitted by the sending agency. He completes the necessary interviews, on-site visits, background checks and other agency protocols with Emily Smith. He returns this

information to the outgoing jurisdiction. The placement agreement is approved and arrangements are made to move John. John Taylor is placed with his aunt Emily. Responsibility for case management and financial obligations are determined by the CAS's according to local policies.

## Adoption Scenario

### ***Participants***

- James Stance - Male, 14 years
- Christy Stance - Female, 7 years
- Jeremy Johnson - Adoption Supervisor
- Geoffrey Wilkins - Adoption Caseworker
- Mark and Mary Jones - Potential Adoptive Parents
- Jerry and Sara Matthews - Potential Adoptive

### ***Adoption Process***

James Stance, age 14, and Christy Stance, age 7, are siblings who have been in foster care together for 2 years. The court has recently terminated the parental rights (TPR) of their parents, allowing the child welfare agency to proceed with adoption activities. At a meeting subsequent to the TPR order, Jeremy, the adoption supervisor, instructed Geoffrey Wilkins, the adoption caseworker, to manage the case. The team determined that the children's foster home experience demonstrated that it would be in the best interests of the children to be adopted as a sibling group. In this context, when Geoffrey creates a single adoption case for both children. Geoffrey views the adoption case information, verifying that the children's removal and placement records and legal information are accessible from the new case.

Geoffrey uploads the children's information on the statewide adoption photo listing website as his first adoption activity for the children. In response to seeing the children on the state's website, two families show interest in adopting the children: Mark & Mary Jones and Jerry & Sara Mathews. Geoffrey schedules two pre-adoptive conferences so James and Christy meet each family separately. Subsequent to the conferences, Geoffrey recorded that the children's conference with the Jones family went quite well, while it was apparent during the children's conference with the Mathews family that the prospective adoptive family was far more interested in adopting Christy alone than the siblings together.

As a result of the pre-adoptive conferences, Geoffrey creates a visitation plan with the Jones family and the children to schedule multiple visits between them over a 4-week period. After all of the visits are completed and documented, Geoffrey meets with the children and adoptive parents separately to discuss whether they still wanted to proceed with the adoption, which they did.

Geoffrey recommends to Jeremy that the children be adopted by the Jones family, based on the interviews he conducted with the family, their pre-approved status and the successful visits between the children and families. Jeremy approves the recommendation, leading to agency undertaking the subsequent legal activities, which results in the adoption of James and Christy by Mark and Mary Jones. The family may also be eligible to receive adoption subsidy payments based on local policy.

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