

CHILD PROTECTION SERVICES  
STANDARDS FOR EFFECTIVE PRACTICE

**STANDARDS FOR INTENSIVE FAMILY-BASED SERVICES**

**4.4 DEVELOPING THE CASE PLAN IN THE INTENSIVE FAMILY-BASED SERVICES PROGRAM**

**Council on Accreditation Standards**

The Council on Accreditation Standards S20.4 (Service Elements: Service Components) and S20.5 (Additional Service Requirements for Intensive Family Preservation Programs) link to and support Standard 4.4 *Developing the Case Plan in the Intensive Family-Based Services Program*.

**Administrative Code**

The Ohio Administrative Code Rules 5101:2-39-09 (Required Contents of a PCSA Case Plan); and 5101:2-39-08 (Requirements for PCSA Case Plan for In-Home Supportive Services: No Court Order) address Standard 4.4 *Developing the Case Plan in the Intensive Family-Based Services Program*.

**I. Philosophy**

The case plan is a living document used by the CFSA staff and family to guide efforts to increase child safety and family stabilization. The case plan in Intensive Family-Based Services (IFBS) sets the tone for affecting change within the family system. The information used to develop the case plan comes from the Comprehensive Family Assessment (Standard 4.2), and direct input from the family regarding the family's hopes and dreams for a more stable and well-functioning family system.

The case plan is used to organize and categorize information into attainable goals and objectives that are mutually agreed upon by the family and CFSA staff. Throughout the life of the case, it is used to measure completion of case plan goals. The case plan goals are based on family strengths, child safety, and family change, and are a primary outcome of the intensive family-based services intervention.

**II. Outcome**

The case plan document contains simple, manageable, and obtainable goals to facilitate the family's success in reducing future risk of child maltreatment.

**III. Evaluation**

FACSIS events, CPOE and the Federal Health and Human Services outcomes may be considered when evaluating this standard. In addition, the CFSA may consider the following:

- percentage of case plan goals that directly address risk assessment findings;
- percentage of families involved in actively developing a family case plan;
- evidence of strength-based case planning.

#### **IV. Standards for Implementation**

- 1) Within five working days of completion of the comprehensive family assessment, the assigned staff, in partnership with the family, identifies the family's strengths and needs to develop the goals, objectives and activities of the case plan. Both the assessment and case plan documents are reviewed on an as-needed basis to assure the most relevant information is available to support the family's efforts to reduce current and future child risk and to support family stabilization efforts.
- 2) The case plan goals and objectives should incorporate the outcomes of the comprehensive family assessment and agency sanctioned risk assessment tool. The case plan goals, objectives, and activities should address all factors contributing to the strengths and needs of the family. The goals, objectives and activities should be:
  - a. built on client strengths;
  - b. stated in positive terms;
  - c. prioritized in order of importance in reducing risk to the child;
  - d. written in measurable, behavioral terms which are clear and concise;
  - e. written in language which is understandable for all;
  - f. connected to realistic time frames; and
  - g. developed in small, manageable, achievable increments.
- 3) The assigned staff and family should determine potential barriers to the family's ability to participate in the services and activities of the case plan. Attempts to prevent the potential barriers from impeding service delivery should be documented. Consideration should be given to the following when identifying potential barriers:
  - a. any income issues;
  - b. the family's developmental stage and functional capacity to participate in the service activity plan;
  - c. the accessibility to service providers (lack of transportation);
  - d. the length of waiting list/time frames and unavailability of services; and
  - e. the unavailability of culturally-based services.
- 4) Case plan progress should be reviewed with the family on a weekly basis.

#### **V. Financial Implications**

The cost associated with negotiating and developing the case plan is as follows:

Case Plan development: 8 hours @ \$81.21/hour = \$649.68