

CHILD PROTECTION SERVICES
STANDARDS FOR EFFECTIVE PRACTICE

STANDARDS FOR INTENSIVE FAMILY-BASED SERVICES

4.7 CASE CLOSURE AND INTENSIVE FAMILY-BASED SERVICES

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 4.7 *Case Closure and Intensive Family-Based Services*.

Administrative Code

The Ohio Administrative Code Rule 5101:2:39:02 (Case Records For Children Services) addresses Standard 4.7 *Case Closure and Intensive Family-Based Services*.

I. Philosophy

The length of CFSA involvement with a family is determined by many factors, including: the nature of the family's needs; the level of progress made toward correcting the situation that caused the family to become involved with the CFSA; and risk reduction to a level under which the family is able to function independently from the CFSA. At the time the family agrees to participate in the Intensive Family-Based Services (IFBS) program, both the CFSA and the family acknowledge that the IFBS-family partnership will be intense and brief, and that case closure is imminent. All plans made in partnership with the family focus on child safety and family stabilization with an eye on case closure.

Case closure with a family occurs after the staff and family review the primary crisis that caused the CFSA's involvement and affirm that significant change has occurred in the family regarding the child's safety.

CFSA involvement with a family is terminated when :

- the children in the family are receiving care and support which meet their needs;
- the parents have demonstrated a sustained ability to protect and care for their children;
- the necessary network of community resources are in place;
- the court does not require CFSA services.

II. Outcome

The level of risk to the children is sufficiently reduced, the children's safety is assessed to be adequate, and family functioning is stable and maintained.

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:

- number of specific service links to community upon case closure;
- level of family connectedness to community members prior to, and upon, case closure;
- rate of success in meeting case plan goals and objectives at time of case closure;
- documentation of reduced risk.

IV. Standards for Implementation

- 1) Each family involved with the IFBS program should enter in to a contract with the CFSA. The contract agreement includes a statement of commitment to following through with program services, broad goals to be achieved, and time frame for services. All activities and corresponding time frames are geared towards case closure.
- 2) The assigned IFBS staff and family use the comprehensive assessment and case plan document as their guide in working towards ameliorating the primary problems which caused the crisis that brought the family to the attention of the CFSA.
- 3) The CFSA should close a case when one of the following conditions have been met:
 - a. the caregiver(s) successfully achieved all primary and critical goals and objectives in the case plan, and a risk assessment indicates that the risk has been reduced to an acceptable level which allows for the independent care of the child by the family (including any community services identified as needed); or
 - b. the caregiver(s) have not successfully achieved the primary and critical goals and objectives of the case plan, but due to other factors, risk to the child has been reduced to an acceptable level as determined by the assigned staff and supervisor.
- 4) Prior to case closure, the CFSA and family should revisit the comprehensive assessment to affirm a change in the primary issues which originally led to CFSA involvement. All professionals actively involved in the case should be contacted and consulted, and their observations and recommendations documented prior to case closure.

Child safety, level of parental nurturance, and level of appropriate family interaction are reviewed. Interviews with family members and the family's support system are held to reaffirm family functioning, family stability and child safety.
- 5) When the CFSA closes a case, all service providers who are actively involved with the case should be sent written notification of the CFSA decision.
- 6) As part of the case closure activities, the family should be provided with, and requested to complete, a client program assessment survey for quality assurance tracking.
- 7) Upon case closure, assigned staff should develop a thorough closing summary, documenting all activities conducted as stated in this standard. The closing summary should also include the reason for opening the case and date of case closure. The case should not be considered closed until this document is completed. The closing summary should include the following elements:
 - a. the reason for opening the case;
 - b. a narrative as to whether case plan goals were completed and outcomes met;
 - c. a review of the agency-sanctioned risk assessment instrument and written narrative as to how risk has been sufficiently reduced;
 - d. the reason for closing the case;
 - e. the date of case closure.

V. Financial Implications

The costs associated with closing a case are estimated as follows:

Case Closure: 8 hours @ \$81.21 per hour = \$649.68