

# Memo

**To:** All Department and Purchase of Service Child Welfare staff, managers and supervisors.

**From:** Gailyn Thomas, Deputy Director, Child Protection, Arthur Bishop, Deputy Director, Field Operations, George Vennikandam, Associate Deputy Director, Performance Monitoring And Quality Assurance and Marilyn Arnold, Associate Deputy Director, Administrative Case Review

**Re:** Creating and Completing Service Plans in SACWIS

The following information is intended to help Child Welfare Workers create and complete Service Plans in SACWIS. Please read the document carefully. Please direct questions to **SACWIS Field Support** in Outlook.

# SACWIS Practice Guide

## “SACWIS Service Plans”

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## **1. The Purpose of the Service Plan**

The Comprehensive Family Service Plan, formerly known as the Client Service Plan (CFS 497) is the document by which the Department or Purchase of Service Child Welfare Worker records services to be provided to a client/family in order to correct the issues which brought the client/family to the attention of the Department or agency. The Service Plan is a contract between the client/family and the Department/agency. This contract outlines what needs have been identified by the Child Welfare Worker and how the needs will be addressed by documenting desired outcomes and supporting interventions.

The needs identified in the Service Plan must always focus on the safety, risk and well-being/permanency of the child or children in a family unit. The family issues or needs that must be addressed should first be identified in the supporting assessments (Safety, Risk and Integrated Assessments). Once the assessment process has been completed for each milestone period, a Service Plan is created in the presence of and in collaboration with the client/family. The Service Plan should always consider the primary reason for involvement, or how the Department/agency came to be involved with the client/family. Additionally underlying conditions, when identified, should also be addressed in the Service Plan.

The Service Plan should not be a complicated document. It is not meant to confuse the client/family. Rather, this document should clearly state what issues exist, or what needs the family has and how these issues/needs will be addressed. The Service Plan is required within 45 days of case opening and *minimally* every six months thereafter. A final Service Plan, the Aftercare Plan, is required prior to case closure.

## **2. Required Assessments/ Assessments Completed in Conjunction with the SACWIS Service Plan**

Prior to completing a Service Plan in SACWIS a Safety Assessment (according to P300), a Risk Assessment and an Integrated Assessment are required.

**The SACWIS Safety Assessment is only required according to Procedure 300 Appendix G. Permanency staff should carefully review P300 to determine when the Safety Assessment is specifically required.**

**NOTE: The Safety Assessment is NOT required prior to completing a Risk Assessment in SACWIS. Rather is only required according to P300.**

The SACWIS Risk Assessment should always be completed prior to completing an Integrated Assessment in SACWIS. Within the first 45 days, a SACWIS Risk Assessment is conducted prior to the initial 45-day comprehensive Integrated Assessment. The Risk Assessment completed by the Investigation Specialist, as part of the investigation may satisfy the initial Risk Assessment requirement in SACWIS. However, the Child Welfare Worker should carefully review the Risk Assessment completed by the Investigation Specialist to determine if any additional risk information should be recorded in order to fully address risk in the SACWIS Integrated Assessment and Service Plan. If additional risk information is determined by the Child Welfare Worker, the worker must complete a new Risk Assessment before proceeding with the initial Comprehensive Integrated Assessment.

The subsequent Risk Assessment is also required *minimally* every six months after the 45-day comprehensive assessment period has been completed. The subsequent Risk Assessment is required prior to completing a subsequent Integrated Assessment. A final subsequent Risk Assessment should also be completed in SACWIS at least 30 days prior to case closure. The final subsequent Risk Assessment should document that overall risk has been addressed or minimized to the extent that the case may be closed.

The Integrated Assessment or Subsequent Integrated Assessment is required on ALL cases. The subsequent Integrated Assessment is required *minimally* every six months after the 45-day comprehensive assessment period has been completed. A final subsequent Integrated Assessment should be completed in SACWIS at least 30 days prior to case closure. The final subsequent Integrated Assessment should include all relevant closing information as well as documentation as to what aftercare services will be included in the final SACWIS aftercare Service Plan. The final Integrated Assessment in SACWIS should serve as the closing summary formerly completed on a Word template.

### **3. Service Plan Types**

- a) **Comprehensive Plans:** The Comprehensive Service Plan is the first plan completed on an open service case. Also referred to as the “initial” plan, the comprehensive or initial plan is always completed after the initial Safety, Risk and Integrated Assessments are completed in SACWIS, within the first 45-days of case opening. The Comprehensive Service Plan identifies the primary intake reason, or “Reason for Involvement,” as well as any initial identified underlying conditions or needs that must be addressed. Since this is the first plan in SACWIS, there are no evaluations to be conducted in this plan. The initial permanency goals are set for each child in the family in the initial/comprehensive plan.
- b) **Subsequent Plans:** The Subsequent Service Plan is required minimally every six months, but may be completed more frequently depending on the circumstances of the case. As mentioned above, the Safety (according to P300), Risk and Integrated Assessments are required prior to completing a Subsequent Service Plan in SACWIS.

In SACWIS, the permanency goals and the outcomes and interventions that were created in the previous plan will copy forward to the Subsequent Service Plan. However, evaluations (progress drop down values in SACWIS) for interventions and desired outcomes and evaluation narratives for desired outcomes DO NOT copy forward as Child Welfare Workers must evaluate these aspects of the Service Plan every six months.

- c) **Amended Plans:** An Amended Service Plan is simply an amendment to an approved Service Plan and is generally completed sometime within the six-month milestone period. There are various reasons why an amended plan may be necessary. For example, perhaps an outcome or intervention was overlooked and must be added or there is a change to a service provider. Another example may be the need to amend a visitation plan by either increasing or decreasing visits. Whatever the reason, an amended plan is an addition, amendment or change to an approved plan. An amended plan should not be completed for situations, which generally require a new/subsequent plan, for example, a change to a permanency goal. Changes in permanency goals generally require a new/subsequent plan to be completed, as the previous permanency goal must be evaluated before the new goal may be selected. In this case, it is not appropriate to complete an amended Service Plan.

Child Welfare Workers are not required to evaluate in amended plans unless there is a change made to an existing desired outcome, intervention or visitation in the amended plan. If so, the previous desired outcome, intervention or visitation plan must be evaluated in the amended plan before the new desired outcome, intervention or visitation plan may be selected.

- d) Disqualified Plans: This plan is rarely used in SACWIS. Child Welfare Workers need not be concerned with this plan type. If you believe you need to disqualify a plan, please email the SACWIS Field Support mailbox for clarification.

#### **4. Working in the Family Case vs. Working in the Child Case**

As a rule, Child Welfare Workers should complete SACWIS Service Plans in the FAMILY case when the placed children have a permanency goal other than adoption (this includes split/shared cases). For cases where there has been a ruling of TPR (termination of parental rights) and the goal(s) for the child(ren) is/are adoption, then all work including assessments and Service Plans are to be completed in each individual child case.

When the family case is closed at the termination of services due to termination of parental rights (TPR) or otherwise, Child Welfare Workers should begin working in child cases rather than continuing in the family case. Staff should not leave the family case open in SACWIS unless it is open in CYCIS and services are being provided to parents/caretakers. If the family case remains open in SACWIS and closed in CYCIS, significant problems occur. Some staff do this to prevent the need to work in child cases, versus the family case. This is perceived as an efficiency when there is more than one child case. For example, work was once recorded in one case (the family case) and is now being recorded in one or more child cases. Child Welfare Workers should not keep family cases open in SACWIS unless they remain open in CYCIS. Further, supervisors should not allow workers to keep family cases open in SACWIS if they have been closed in CYCIS.

SACWIS was designed for family case information to populate from the family case to each child case. The last approved risk and integrated assessment in the family case populates each child case when the risk and integrated assessments are created in each child case. This creates an efficiency for Child Welfare Workers who need to begin working in multiple child cases. Rule 315 indicates that each child should be assessed and serviced individually and Child Welfare Workers have always been required to do so.

However, in the past this was done in the family case. In SACWIS, Child Welfare Workers need to create each assessment and Service Plan in each child case. The amount of assessment and Service Plan information recorded for each child should be the same whether recorded together in the family case or recorded separately in each child case. Therefore, workers should not view working in each child case as duplicate or additional work.

It should be noted that currently an issue exists with the SACWIS copy forward functionality. The issue is that if the family case is closed, the information from the last approved risk and integrated assessment does not pull forward to the child case. This is currently not working according to the design. When this issue is corrected, the information will pull to the child case regardless of the status of the family case. However, **until further notice, workers should not close the family case in SACWIS until the risk and integrated assessments are created in the child case(s).**

Once the family case is closed in SACWIS, the family worker will always have access to case information in the SACWIS case. However, the case will no longer appear on their desktop. Child Welfare Workers must access the case via a case search (This should take no longer than going to a file room to look up the information as done pre-SACWIS). Staff should always make sure to update the reason for involvement section in the integrated assessment on each child case. This section should always be updated to reflect the current situation or why DCFS is still involved with the family or child. For example, in cases where there was recently a TPR, the child case integrated assessment should include the original reason for involvement (why children are in care), what has happened over the years, and state that TPR occurred and the family case is being closed etc. Child Welfare Workers should then record the other pertinent

sections of the integrated assessment for each child. There is no need to type, "see family file" or "see original IA," as every integrated assessment beyond the first 45-day assessment is an update or addendum. In that regard, workers should only record updated information in keeping with the initial/primary intake reason, underlying conditions, and the risk, safety and well-being factors for each child (see Subsequent IA Help Document). There is no expectation to retype any previous assessment information from the hard copy file or from the SACWIS family case file. This information can be accessed when it is needed.

## **5. Split/Shared and Residential Cases**

When a family case is shared between two or more workers or agencies, the Service Plan for all children with a return home permanency goal must be done in the family case. Therefore, there will be only one Service Plan submitted at the ACR (Administrative Case Review). The primary worker is responsible for completing and submitting for approval, the final completed Service Plan. However, the primary worker should not submit their Service Plan for approval until the secondary worker on split/shared cases has completed his or her portion of the plan. In this case, the workers must communicate prior to beginning work in SACWIS. It is crucial that all workers on split/shared cases communicate as good practice in order to ensure that all bases are covered in terms of identifying the needs of the family and what services are needed in the Service Plan. Further, it is necessary to consult with all workers in order to fully evaluate the progress made by parents.

The family case will display on the primary worker's desktop. The secondary worker must be assigned to the family case as an additional assignment. This is done by the primary worker's supervisor and should be done immediately following assignment of the child case(s) to the secondary worker(s). The secondary worker(s) should request this of the primary worker and supervisor. This allows both/all workers access to the family case for completion of the Service Plan and other case documentation.

### **Residential Cases:**

In cases where a child is placed in a residential facility, the residential worker will submit a paper Service Plan to the primary worker via the SACWIS Service Plan templates, as currently residential facilities do not have access to SACWIS.

For SACWIS Service Plan documentation, the primary Child Welfare Worker is responsible for completing one Desired Outcome statement and supporting interventions from the Outcomes and Interventions tab in the SACWIS Service Plan. The Desired Outcome should clearly define the needs of the child and reason for treatment in a residential care facility. The interventions should support the Outcome Statement. The outcomes/interventions (formerly 497 Part II) information that is submitted by the residential facility should then be attached to the SACWIS Service Plan for the Administrative Case Review and for the hard copy file. To be clear, Child Welfare Workers are not responsible for recording the Service Plan information submitted by the residential facility in SACWIS. This information will remain in hard copy form and will be attached to the printed SACWIS Service Plan document to complete the entire comprehensive plan. In this case, the ACR reviewer will receive a Service Plan that has a portion completed in SACWIS and a portion completed on the SACWIS Service Plan templates (located on the T:drive) by the residential facility.

Please note, the primary Child Welfare Worker is also responsible for completing Service Plan information for siblings and adult parent(s)/caretaker(s) when there is an open family case for the child placed in a residential facility.

## **6. Dates in the Plan**

The SACWIS Service Plan has various dates that must be documented in the plan. Each of these date fields in SACWIS must reflect the accurate date and workers should not simply apply six-month dates as often done. The following date fields can be found in the SACWIS Service Plan:

### a) Plan Initiation Date:

This is the overall date of each plan that is completed at each milestone. The plan initiation date is NOT the date the worker begins data entering the plan information in SACWIS, rather this date should reflect the date the worker and client/family began planning together as part of the collaborative process.

### b) Start Dates/Date Established:

The start date/date established is simply the date a permanency goal or an outcome or intervention begins. The start date/date established for a permanency goal is the date the goal was court ordered, or in non-court ordered goals, the date the Department or agency determined the permanency goal. The start date/date established does not change every six months. It is important to maintain the initial start dates so that the court and other parties may easily see the length of time a goal, desired outcome or supporting intervention has been in place. This information becomes especially important in preparation for termination hearings.

### c) Target Completion/Planned Achievement Dates:

The target completion and planned achievement dates are an estimation as to when a goal, desired outcome or supporting intervention may be completed. There are many factors that must be considered when determining an appropriate completion or achievement date. The length of time necessary to complete the goal or outcome should be considered. This may include the availability of services and any special needs the client/family may have that may impact service delivery.

A permanency goal should have a planned achievement date that is consistent with the timeframe of the goal. For example, a goal of "Return Home within Twelve Months" should have an achievement date that is approximately twelve months from the start date/date established. A permanency goal of "Independence" may have a planned achievement date that reflects the ward's 18<sup>th</sup> or 21<sup>st</sup> birthday, depending on the circumstances of the case. The target completion and planned achievement dates should not necessarily reflect a six-month date unless six months from the start date is actually when the goal or outcome/intervention should be completed. While Service Plans are required every six months and an ACR is held every six months on placement cases, the six-month timeframe should not generally be used to document dates where more specificity is needed. An intervention to obtain an AA (Alcoholics Anonymous) sponsor would not likely take six months. Rather, the Child Welfare Worker may give a client two weeks or a month to complete this intervention. The dates applied should make sense and should be realistic in terms of what is being asked of the client/family or what is to be achieved.

### d) Actual Completion Dates:

The actual completion date is simply the date an outcome or intervention was actually achieved or completed. This date allows the Child Welfare Worker to note with specificity, when a recommendation of a client or family was actually completed. For example, if a parent was given a target completion date of three months to complete an outcome or intervention, but only required one month to do so, the Child Welfare Worker may document this in the plan to demonstrate the parent's willingness to cooperate with

services. Conversely, a worker may want to document an actual completion date that surpassed the target completion date

## **7. Child Summaries (Health and Education Information)**

The SACWIS Service Plan has a section titled, “Child Summary.” This section replaced the 497 Part III. The SACWIS Service Plan Child Summary contains similar information to the 497 Part III. The education and health information about a child can be found in this section of the SACWIS Service Plan. It is important to note however, that this information is not documented in the Service Plan in SACWIS, rather this information is documented in Person Management (via Health and Education hyperlinks) in SACWIS and then populates the printed Service Plan document. Child Welfare Workers should keep health and education records in SACWIS Person Management up-to-date and should record pertinent health and education information as it happens or as it is learned. This practice better prepares workers for their six-month milestone requirements and decreases time spent preparing a Service Plan.

## **8. Creating Desired Outcomes and Supporting Interventions**

### **a) Addressing Needs**

As indicated above, the Service Plan is a contract between the client/family and the Department/agency. The contract should outline what needs have been identified and how such needs will be addressed in the plan by documenting desired outcomes and supporting interventions.

The desired outcomes and supporting interventions are a response to the needs that have been identified and should clearly state “who” needs to do “what” in order to correct or address the needs that have been identified. In other words, the Service Plan should be specific as to what issues or needs must be addressed and what services will be implemented to address the issues/needs.

### **b) Safety, Risk and Well-being/Permanency in the Service Plan**

The needs identified in the Service Plan must always focus on the safety, risk and well-being/permanency of the child or children in a family unit. The family issues or needs that must be addressed should first be identified in the supporting assessments (safety, risk and integrated assessments). Once the assessment process has been completed for each milestone period, a Service Plan is created in the presence of and in collaboration with the client/family. The Service Plan should always consider the primary reason for involvement, or how the Department came to be involved with the client/family. Additionally, underlying conditions when identified, should also be addressed in the Service Plan. It is imperative that Child Welfare Workers clearly identify the safety, risk and well-being factors in the supporting assessments in SACWIS as this information populates the SACWIS Service Plan to prompt the worker as to what issues must be addressed in the plan. This was meant as an efficiency as well as a guide to help workers remain focused on what actually needs to be addressed.

### **c) Creating interventions for other involved persons**

It is often necessary to create interventions for others not part of the family group in SACWIS. Such individuals as the Child Welfare Worker, a foster parent or perhaps a child and family team member, may have a role in one or more interventions to support a desired outcome. For example, if the desired outcome is for the parent/caregiver to achieve and maintain sobriety, the Child Welfare Worker may have an intervention to make a referral to a substance abuse treatment provider. Another example may be that a foster parent will assist a child in his or her care, with a desired outcome to improve mathematical ability. In



this case, the foster parent may have an intervention to transport the child to a mathematics tutor twice a week.

In order to create an intervention in SACWIS for a non-family group member; the worker should first create the desired outcome statement for the family member (parent/caregiver or child). In order to change the name of the member in the interventions table in SACWIS (in the “who” field) simply delete the defaulted name, which is the name of the member you selected and type in the name you wish to insert. This allows workers to clearly denote who is involved in achieving the desired outcome by participating in a supporting intervention.

#### d) Including Foster Parents/Substitute Caregivers in the plan

The Service Plan is a document for the family, particularly parents/caregivers, to help them understand what issues must be addressed by them in order for their children to remain home or to return home safely to them. The Service Plan is not meant to instruct foster parents as to what guidelines they have agreed to as part of their licensing agreement. Prior to SACWIS, it was common for workers to insert a foster parent “task sheet” in the 497 Service Plan. This page was quite generic and listed such things as the frequency for meeting with the worker and that corporal punishment is not permitted. It should be noted that this type of information is not appropriate in the Family Service Plan. While foster parents are very much part of the family team, these issues regarding foster parent agreements and conduct should not be included in the Service Plan.

The best way to involve the foster parent(s) in the Service Plan is to engage the foster parent(s) in the progress of the family by asking him or her to be part of an intervention, such as transporting to a tutor in the example above. Making the foster parent an active member of the Child and Family Team is another way to help the foster parent engage in the progress of the family. This is the type of information that is appropriately documented in the Service Plan regarding foster parents. See the information in section 8c for instructions on including interventions in the Service Plan for a foster parent.

## **9. The Visitation Plan**

The visitation plan in SACWIS does not differ much from the 497. The visitation plan is accessed via a hyperlink in the SACWIS Service Plan. Visitation plans should include all pertinent information as to who should attend, the purpose of the visit, additional contact if allowed etc. Child Welfare Workers should review Procedures 301.210 (family/child visitation) and 301.220 (sibling visitation) for specific information on establishing visitation plans.

## **10. Evaluating Service Plans**

### a) Evaluating Permanency Goals

The permanency goal for each child in the family group must be evaluated minimally every six months after the goal has been set. In SACWIS, workers must select an evaluation rating for each child from the drop down value list, located on the permanency goals table on the goals tab in SACWIS. Child Welfare Workers must also include a narrative explanation of the rating selected. Goals that are *maintained* will populate to the next plan. Goals that are *revised* must be revised by selecting the evaluation rating for revising a goal and then selecting the new goal from the permanency options value list. Child Welfare Workers should NEVER delete a previous permanency goal in order to select a new goal. This is not the correct SACWIS

practice and the Service Plan document will lack previous goal information if the previous goal is deleted. Child Welfare Workers are encouraged to contact **SACWIS Field Support** with specific questions about evaluating and revising permanency goals in SACWIS.

When a permanency goal changes from Return Home to Adoption and workers must begin working in the child case, it is imperative that the Return Home goal be evaluated a final time in the family case Service Plan, including a narrative that clearly explains why Return Home could not be achieved. The new Adoption goal will then be selected in the child case Service Plan.

#### b) Evaluating Interventions

When evaluating interventions, workers simply choose an evaluation rating for each intervention that supports the desired outcome. The interventions are located on the Outcomes/Interventions tab in SACWIS. Interventions that are *maintained* will populate to the next plan. Interventions that are *discontinued* will not appear in the next plan. SACWIS does not require workers to re-enter outcomes or interventions that are maintained as part of the plan for the next six months (formerly considered the “new” 497 plan). By simply choosing *maintain* as the evaluation rating for the intervention, the next plan will include all interventions that were maintained in the previous plan.

When a permanency goal changes from Return Home to Adoption and workers must begin working in the child case, it is imperative that the interventions in the family case Service Plan be evaluated a final time.

#### c) Overall Evaluation of Desired Outcomes

When evaluating desired outcomes, workers simply choose an evaluation rating for each desired outcome statement. The desired outcomes are located on the Outcomes/Interventions tab in SACWIS. Desired outcomes that are *maintained* will populate to the next plan. Desired outcomes that are *discontinued* will not appear in the next plan. As indicated above, SACWIS does not require workers to re-enter outcomes or interventions that are maintained as part of the plan for the next six months (formerly considered the “new” 497 plan). By simply choosing *maintain* as the overall evaluation rating for the desired outcome, the next plan will include all outcomes that were maintained in the previous plan.

Child Welfare Workers must also include a narrative explanation of the overall evaluation rating selected. The narrative should clearly state why such ratings were selected and present a solid indication of the progress that is or is not being made by the family member.

When a permanency goal changes from Return Home to Adoption and workers must begin working in the child case, it is imperative that the desired outcomes in the family case Service Plan be evaluated a final time.

### **11. The Concurrent Plan**

The Concurrent Plan is essentially an alternate permanency plan for each child in the family. Even children that remain home need a Concurrent Plan in the event the child cannot safely remain in the home. It is the worker’s responsibility to establish this plan in advance so that the best possible solution can be implemented in the event a Concurrent Plan must be initiated.

In SACWIS, the Concurrent Plan table is located on the bottom of the Goals tab. This table is simply a place to document what the plan is and if the plan needs to be initiated. The time to initiate the Concurrent Plan is not after the goal has changed from Return Home, rather when it becomes evident to the worker and

supervisor that a return home is not likely due to extenuating circumstances or lack of progress that prevents the child(ren) from safely returning home. Again, these plans must be established and when necessary, implemented in advance so that the best possible outcome for the child(ren) may be achieved.

When the Concurrent Plan needs to be initiated in SACWIS, workers simply click the YES radio button next to the question “*Does action on the Concurrent Plan need to be taken now?*” Once this YES button has been selected, workers MUST create at least one desired outcome statement that supports the Concurrent Plan. Child Welfare Workers may also designate an existing desired outcome statement as part of the Concurrent Plan. To create or to designate a desired outcome as part of the Concurrent Plan, workers simply click the Concurrent Plan radio button that is located near the middle of the desired outcomes window on the Outcomes/Interventions tab in SACWIS. The button defaults to Permanency Plan, so the user should change this to Concurrent Plan if appropriate.

## **12. The After Care Service Plan**

The After Care Service Plan is the final plan in which the Child Welfare Worker makes final recommendations to the client/family as to what needs/issues the client/family should continue to address beyond involvement with the Department or agency. The After Care Plan should include final evaluations of outcomes and interventions and should clearly state in evaluation narrative sections, the progress made for each outcome that led to case closure.

When evaluating the After Care (final closing Service Plan) Plan, workers should choose an evaluation rating of *maintain* for any of the outcomes and supporting interventions the client/family is encouraged to continually address beyond involvement with the Department or agency. Although these will not be evaluated again in this case episode, this evaluation gives the client/family a clear understanding of what needs/issues should continue to be addressed.

To complete the After Care Plan in SACWIS, workers should create a subsequent plan and evaluate the permanency goals for each child. It is important to note that when doing a final closing After Care Plan, the proper evaluation for a permanency goal is *close case*. The permanency goal evaluation narrative should include supporting information as to the progress that led to case closure.

Once the permanency goal(s) has/have been evaluated the worker should then go to the Outcomes/Interventions tab and begin evaluating the outcomes and interventions as indicated above. To denote the outcomes and interventions that will be shared with the client/family as part of their After Care Service plan, workers must also choose the drop down value of *After Care Plan* from the value list titled “*Additional Plans met by this Outcome.*” This value list is located on the Outcomes/Interventions window, which is accessed by clicking the Outcomes/Interventions tab. It is located in the middle of the window on the left side.

Finally, once the worker has an approved After Care Service plan and has shared the plan with the family, the worker should do a final contact note in SACWIS to document the contact with the client/family. The note should state that after care services were discussed and the After Care Service Plan was presented as part of the agenda for the contact.

Child Welfare Workers should consider this information when preparing Service Plans in SACWIS. This information is intended to guide staff, as well as establish consistency in how the work is done in SACWIS. Questions regarding information contained in this document should be directed via email to **SACWIS Field Support** in Outlook.

### **13. Appendix A, SACWIS Service Plan Document**

The SACWIS Service Plan template is located on T:drive and should be used only when there are prolonged system outages or as a draft document for planning with the client/family in their home as part of the collaborative process. In the event of a prolonged system outage, there will be an announcement on the D-Net and staff will be directed to use templates. Please note that SACWIS usage is mandatory.

**ILLINOIS DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

CLIENT SERVICE PLAN FACESHEET FOR: \_\_\_\_\_ DATE PLAN INITIATED: \_\_\_\_\_

Family Case Name: \_\_\_\_\_ SACWIS Case ID: \_\_\_\_\_

Date of Next Court Hearing: \_\_\_\_\_ CYCIS Case ID: \_\_\_\_\_

Worker Name: \_\_\_\_\_

Region/Site/Field: \_\_\_\_\_ Agency: \_\_\_\_\_

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**CHILD SUBJECT OF PLAN**

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| <b>Child's Name<br/>Status</b> | <b>Birth Date</b> | <b>Child Docket #</b> | <b>Living Arrangement/Legal</b> |
|--------------------------------|-------------------|-----------------------|---------------------------------|
|--------------------------------|-------------------|-----------------------|---------------------------------|

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\_\_\_\_\_

Permanency Goal: \_\_\_\_\_ Achievement Date: \_\_\_\_\_

Previous Permanency Goal: \_\_\_\_\_

Progress Toward Goal: \_\_\_\_\_

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| <b>Child's Name<br/>Status</b> | <b>Birth Date</b> | <b>Child Docket #</b> | <b>Living Arrangement/Legal</b> |
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\_\_\_\_\_

Permanency Goal: \_\_\_\_\_ Achievement Date: \_\_\_\_\_

Previous Permanency Goal: \_\_\_\_\_

Progress Toward Goal: \_\_\_\_\_

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| <b>Child's Name<br/>Status</b> | <b>Birth Date</b> | <b>Child Docket #</b> | <b>Living Arrangement/Legal</b> |
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\_\_\_\_\_

Permanency Goal: \_\_\_\_\_ Achievement Date: \_\_\_\_\_

Previous Permanency Goal: \_\_\_\_\_

Progress Toward Goal: \_\_\_\_\_

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| <b>Child's Name<br/>Status</b> | <b>Birth Date</b> | <b>Child Docket #</b> | <b>Living Arrangement/Legal</b> |
|--------------------------------|-------------------|-----------------------|---------------------------------|
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Permanency Goal: \_\_\_\_\_ Achievement Date: \_\_\_\_\_

Previous Permanency Goal: \_\_\_\_\_

Progress Toward Goal: \_\_\_\_\_

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**Service Plan Narrative**

1. Problem(s) that brought this case to the attention of the Department:

2. Summarize significant developments since the last plan

3. Indicated allegations since the last service plan

Investigation ID:                      Allegation:                      Alleged Perpetrator:                      Alleged Victim:

4. Information regarding the family's primary language or mode of communication:

- a. Bilingual worker needed: yes/no
- b. Recommended services are available in the preferred language: yes/no

5. Legal Screening

*Has this case been referred for a legal screen: yes/no*

6. Current Goal: \_\_\_\_\_ Child Name: \_\_\_\_\_

Reason for Goal:

Evaluation of Goal from the last Plan:

Current Goal: \_\_\_\_\_ Child Name: \_\_\_\_\_

Reason for Goal:

Evaluation of Goal from the last Plan:

Current Goal: \_\_\_\_\_

Child Name: \_\_\_\_\_

Reason for Goal:

Evaluation of Goal from the last Plan:

7. Overall Progress: *(Evaluate the overall progress. Evaluate the permanency goal(s) for each child if goals are not all the same.)*

8. Describe the Concurrent Plan: *(for each child)*

**Does action need to be taken on the concurrent plan: y/n**

9. Court orders that affect how services are to be delivered or visitation conducted are as follows:

## DESIRED OUTCOME AND INTERVENTIONS

Name of family member:

Risk, safety or well-being factor being addressed:

Domain: **(choose one)** [cultural/spiritual, educational/vocational, emotional/psychological/developmental, family/attachment, health, legal, physical needs, safety, socialization, other, none]

The Desired Outcome supports the [Permanency / Concurrent] Plan: **(choose one)**

Additional Plan(s) met by this Outcome: **(choose one)** (aftercare, protection/supervision, reunification, risk management, N/A)

|   |   |
|---|---|
| <p><b>Desired Outcome:</b></p> <p>Who:</p> <p>Needs to do what:</p> <p>In order to:</p> | <p><b>Date outcome was established:</b></p> <p><b>Planned outcome achievement date:</b></p> |
|---|---|

|                          |
|--------------------------|
| <p><b>Strengths:</b></p> |
|--------------------------|

The following interventions will lead to or support the desired outcome:

| Interventions                                     | Start Date | Target Completion Date | Actual Completion Date | Evaluation of Progress | Evaluation Date |
|---|------------|------------------------|------------------------|------------------------|-----------------|
| Who:<br><br>Needs to do what:<br><br>In order to: |            |                        |                        |                        |                 |
| Who:<br><br>Needs to do what:<br><br>In order to: |            |                        |                        |                        |                 |
| Who:  |            |                        |                        |                        |                 |



|                   |  |  |  |  |  |
|-------------------|--|--|--|--|--|
| Needs to do what: |  |  |  |  |  |
| In order to:      |  |  |  |  |  |
| Who:              |  |  |  |  |  |
| Needs to do what: |  |  |  |  |  |
| In order to:      |  |  |  |  |  |

**Evaluation of Progress Toward the Desired Outcome**

|                     |               |
|---------------------|---------------|
| Date:               | Evaluated By: |
| Narrative:          |               |
| Overall Evaluation: |               |

## Parent-Child Visitation Plan

Date visitation plan established: \_\_\_\_\_

Visits are intended to:

Visits are between:

Day(s) and Time(s) of visit:

Visits will take place at:

Visits will be supervised. **Y/N:**

Visits will be supervised by:

Role of supervisor:

Transportation arrangements: *Parents -*  
*Children -*  
*Other -*

The following additional contact is allowed:

Others involved in visits include:

Visit cancellation and rescheduling arrangements:

During the visit, the parent agrees to:

Worker will observe the visits (*frequency*):

| <b><i>Evaluation of Visitation Plan Progress</i></b>          |                      |
|---|----------------------|
| <i>Date:]</i>   | <i>Evaluated By:</i> |
| <i>Narrative:</i>   |                      |
| <i>Overall evaluation of progress toward visitation plan:</i> |                      |

## Sibling Visitation Plan

Date visitation plan established: \_\_\_\_\_

Visits are intended to:

Visits are between

Day(s) and Time(s) of visit:

Visits will take place at:

Visits will be supervised. **Y/N:**

Visits will be supervised by:

Role of supervisor:

Transportation arrangements: *Parents -*  
*Children –*  
*Other -*

The following additional contact is allowed:

Others involved in visits include:

Visit cancellation and rescheduling arrangements:

During the visit, the parent agrees to:

Worker will observe the visits (*frequency*):

| <b><i>Evaluation of Visitation Plan Progress</i></b>          |                      |
|---|----------------------|
| <i>Date:]</i>   | <i>Evaluated By:</i> |
| <i>Narrative:</i>   |                      |
| <i>Overall evaluation of progress toward visitation plan:</i> |                      |

## CHILD'S HEALTH SUMMARY

Name of Child:

Date of birth:

Current Primary Care Physician:

Phone # :

Address:

Current Dentist:

Phone # :

### **Date(s) of Last Exam/Screening:**

**EPSDT (Well Child Exam):**

**Dental:**

**Vision:**

**Hearing:**

### **Other health care visits:**

Type: Start Date: (*examination date*)

Type: Start Date:

Type: Start Date:

### **Immunizations:**

Type: Start Date: (*date of last immunization*)

Type: Start Date:

Type: Start Date:

Type: Start Date:

### **Asthma/Allergies/Medical Equipment**

Other than asthma or allergies, the child has been diagnosed with disabilities or chronic illnesses.

**Y/N:**

Description and diagnosis(es):

The child has been diagnosed with asthma or breathing problems.

**Y/N:**

The child has an Asthma Action Plan. **Y/N:**

The child has a Peak Flow Meter. **Y/N:**

Date of last physician follow up visit:

Date of next physician follow up visit:

The child has been diagnosed with allergies. **Y/N:**

Diagnosed allergies:

The child uses specialized medical equipment. **Y/N:**

Describe specialized equipment:

**Hospitalizations/Medications**

The child has had a hospitalization, acute care visit and/or surgery in the past six months.

**Y/N:**

Type: *(type of hospitalization or visit)*

Date:

Facility name:

Description:

The child is on prescribed medication(s). **Y/N:**

The prescribed medication(s) the child is currently taking is/are displayed in the table below:

| Medication | Dosage | Frequency | Diagnosis |
|------------|--------|-----------|-----------|
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |
|            |        |           |           |

The substitute caregiver has been made aware of the side effects of this child’s prescribed medication(s) and the actions that should be taken if side effects are observed. **Y/N:**

Explain *(If the substitute caregiver has not been made aware of the side effects of a prescribed medication, please describe):*

## **Child's Adjustment to Placement**

**Child's Adjustment:** *(Describe the child's adjustment and any significant developments regarding the child's placement since the last plan)*

Describe:

## CHILD'S EDUCATIONAL SUMMARY

**Name of child:**

**Date of birth:**

Name of child's current school:

Address of school:

Grade in school:

Type of school program: *(public, private, alternative ed., home school)*

The child has all his/her educational needs met in the current program/placement **Y/N**:

Explain *(if the child's educational needs are not met please explain)*:

The child's academic performance is at grade level in all subjects. **Y/N**:

Explain *(if the child's academic performance is not at grade level in all subjects)*:

Areas of academic achievement: *(academic awards, academic competitive teams, accelerated classes, gifted program, honor roll, National Honor Society, N/A, other)*

Areas of special performance achievements: *(art, athletics, debate, drama, leadership roles, music, N/A, other)*

Extracurricular activities: *(art, athletics, debate, drama, leadership roles, music, N/A, other)*

Disciplinary Action(s) information:

| Type<br><i>(expulsion/removal, sent home early, suspension, other)</i> | Date | Length |
|--|------|--------|
|  |      |        |
|  |      |        |
|  |      |        |

The child has been absent \_\_\_\_\_ days for the last completed semester. Explanation for over 9 absences:

Explain (*explain the impact to the child if the child has been absent for multiple days*):

**If child is age 14 or over:**

The Life Skills Assessment has been completed on this child. **Y/N:**

If child is in special education, has the DCFS transition plan been coordinated with the school's transition plan?

**Y/N:**



## Addendum

**Name of Child:**

**Date of Birth:**

1. The child is placed in the least restrictive setting most closely approximating a family environment.  
**Y/N:**

Explain *(if child is not placed in the least restrictive setting, please explain)*:

2. Siblings are placed together in the same setting. **Y/N:**

Explain *(if siblings are not placed together, please explain)*:

3. The child is placed within reasonable proximity to the home of their custodial parent.  
**Y/N:**

Explain *(if the child is not placed within reasonable proximity to the home of their custodial parent, please explain)*:

4. The substitute caregivers meet the child's cultural needs. **Y/N:**

Explain *(if substitute caregivers do not meet the child's cultural needs, please explain)*:

5. The child is in a home with the same religion as the parent. **Y/N:**

Explain *(if the child is not placed in a home with the same religion as the parent, please explain)*:

6. The child is placed with relatives. **Y/N:**

Explain *(if the child is not placed with relatives, please explain)*:

7. The requirements of the Indian Child Welfare Act were observed. **Y/N:**

Explain *(if the requirements of ICWA were not met, please explain)*:

8. The CFS Language Determination form was completed and is in the case record. **Y/N:**

Explain *(if the CFS Language Determination form was not completed, please explain)*:

9. The following eligibility factors for this child were updated:

Child's income **Y/N:**

Deprivation factors **Y/N:**

Current grade and school **Y/N:**

## Case Planning Acknowledgments

I have reviewed this service plan. \_\_\_\_\_  
Supervisor's Signature Date

I conducted an administrative case review of this case on \_\_\_\_\_  
Date Reviewer's Signature

I request Emergency Assistance for the services provided to this family and authorize all necessary services. This emergency was not the result of the client refusing to accept employment.

Case Plan and EAP Service Authorization Completed by:

\_\_\_\_\_ DCFS Worker Signature POS Worker Signature

I have received a copy of the service plan and the plan has been explained to me. I know I can disagree with any part of this plan and have my disagreement recorded. My written Statement of Disagreement will be attached and, therefore, will become a part of the Service Plan. I know I can request a review and appeal of this plan or any part of it by completing the appropriate forms. I have received a statement of my service appeal rights. I understand that if I don't respond within forty-five (45) days I waive my right to an appeal.

\_\_\_\_\_ Client Signature Date Client Signature Date

\_\_\_\_\_ Client Signature Date Client Signature Date

CLIENTS COMMENTS/DISAGREEMENTS ATTACHED Yes  No

Case plan given or mailed on \_\_\_\_\_ to: \_\_\_\_\_

If whereabouts of mother or father are unknown, when was the last diligent search completed? \_\_\_\_\_

### Notice to parents if permanency goal is to return home

(Check if applicable)

I understand that the Department of Children and Family Services will continue to work with me toward the goal of returning my child(ren) home as long as I make substantial progress toward correcting the conditions that require my child(ren) to be in care, as demonstrated by behavior changes that ensure the health, safety, and well being of my child(ren), cooperate with the Department of Children and Family Services and my agency caseworker, and comply with the terms of the service plan.

This means that if I fail to substantially fulfill my obligations under the service plan and correct the conditions that require my children to be in care, the Department of Children and Family Services and/or Juvenile Court may decide that my child(ren)'s need for a permanent home requires a new plan. This may include identifying a permanent home for my child(ren); and asking the court to terminate my parental rights.

\_\_\_\_\_ Client Signature

### Notice to parents if permanency goal is other than return home or remain home.

(Check if applicable)

I understand that the goal selected by the Department of Children and Family Services or the Juvenile Court is that my child(ren) NOT return home, and may include identifying a permanent home for my child(ren) and asking the court to permanently terminate my parental rights.

\_\_\_\_\_  
Client Signature

---

**Request for Emergency Assistance**

I request that DCFS seek Emergency Assistance payments for the services they provide my family.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

---

**Substitute Caregiver(s) Signature(s)**

\_\_\_\_\_  
Substitute Caregiver Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Substitute Caregiver Signature

