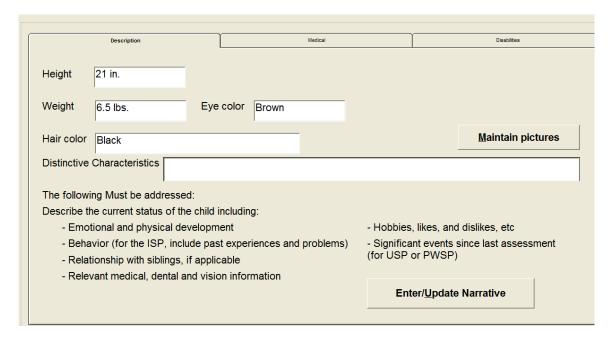
Guide for Completing Service Plans in SWSS-FAJ

This guide was developed to assist foster care workers in identifying where current and new case specific information should be documented. The screen shots provide a quick reference on topics that are to be covered. The additional information required is identified below each screen shot.

Child Information



The following additional information must be entered on screen 4 of 4 in the narrative tab.

- Child's perception of their medical, dental and mental health needs, if applicable.
- Summarize the activities provided by the caretaker to support the DOC.

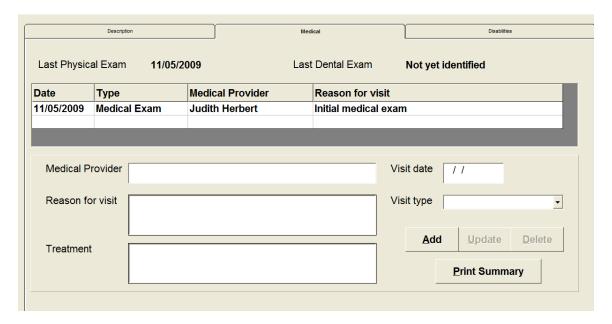
Medical

- Current health status and medical needs.
- List prescribed medications, and regularly dispensed over-the-counter medications, including dosage, diagnosis resulting in prescribed medications and prescribing physician.
- Documentation of informed consent for each psychotropic medication.

Mental Health

- Date of referral to mental health provider for mental health screening and/or assessment (from the initial 30 day physical/medical exam).
- Description of any needed mental health treatment/assessment, if applicable. Include name of treatment provider, frequency of sessions and treatment goals.

Continuing with Medical include the following in the Medical Tab



Add the following information:

- Any needed emergency medical, dental and health care provided since entry into care
- · Date of full medical examination.
- Description of any needed medical follow-up appointments.
- Immunization status.

Dental

- Date of dental examination or date of scheduled appointment.
- Description of any needed dental follow-up appointments.

<u>Legal</u>

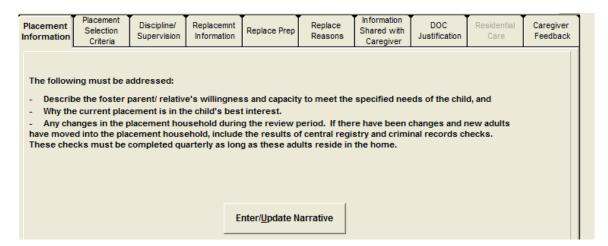


Court Order Requirements						
Activities Required by this Court Order	ABC					

Permanent Wardship Attitudes regarding termination of parental rights and adoption.	ABC
Possibility of adoption by kinship network or foster parents.	
Possibility of adoption by kinship hetwork or loster parents.	
Preparation of child for adoption.	

Recommendations for court order content for next hearing

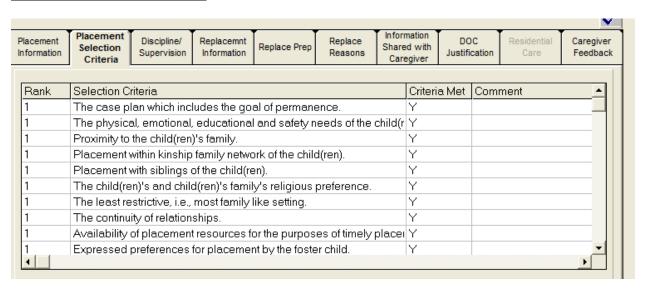
Placement



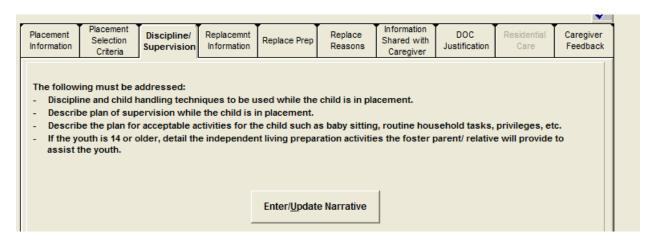
In the Placement Information tab in Placement add the following,

- Describe how this placement supports the child's permanency plan.
- Describe any safety concerns in the home and specify how it was addressed.
- For Indian children, include the Foster Care Placement Preference for NAA 215, Place Priorities for Indian Children.
- How the child's permanency plan was shared with the child and the child's feelings about the plan.
- Document efforts made to prevent replacement, if applicable.
- Specify if a placement change was made during the report period, if it was planned. Does it meet the child's permanency goal?
- Document any CPS complaints and/or investigations since the last report period, omitting any information about the referral source.

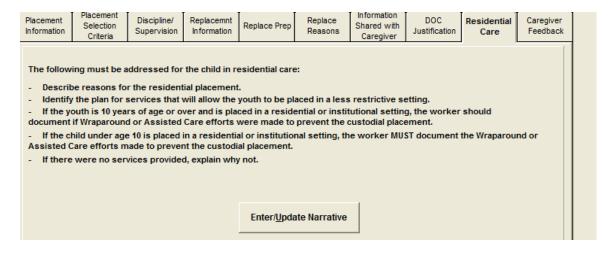
Placement Selection Criteria



Discipline/Supervision



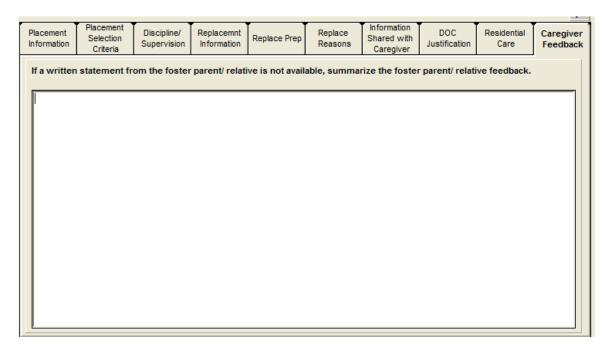
Residential Care



In the Residential tab in Placement include the following,

• Date of PPC or other efforts to prevent the residential placement (regardless if the child is over or under age 10).

Foster Parent/Relative/Unrelated Caregiver Input

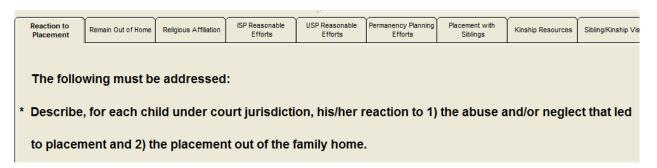


Using the Caregiver Feedback tab in Placement include the following,

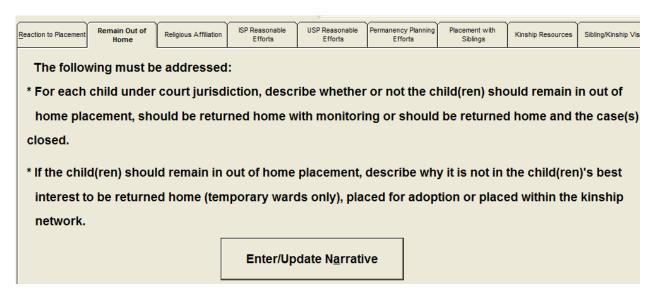
- Date Medicaid card/Medicaid number and Consent for Emergency Treatment Card (DHS-3762) was given to caregiver.
- Document how the caregiver involves the parents in decision making regarding the child(ren)'s needs and activities.
- Describe the caregiver's adjustment to the child's placement.
- Document how the permanency plan for the child was shared with the caregiver and the caregiver's comments regarding the permanency plan.

Children's Status

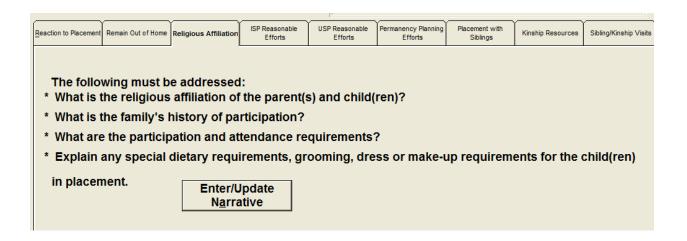
Reaction to Placement



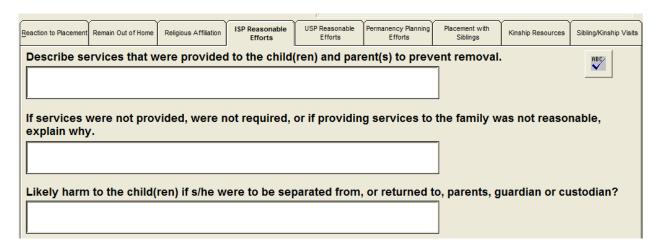
Remain Out of Home



Religious Affliation



ISP Reasonable Efforts



USP Reasonable Efforts

				JI.				
Reaction to Placement	Remain Out of Home	Religious Affiliation	ISP Reasonable Efforts	USP Reasonable Efforts	Permanency Planning Efforts	Placement with Siblings	Kinship Resources	Sibling/Kinship Visits
custodian, a		ntal adults (if	applicable) t		ren), parent(s) child(ren) hor			ABC
List the rea	sons why the	agency beli	eves that pro	oviding servi	ces for reunif	ication are no	ot reasonable	. .
If services	were not prov	vided, explai	n the reasons	s why.		_		
Likely harm	to the child(ren) if separa	ated from, or	returned to,	a parent, guai	rdian, or cust	odian.	
						_		

Permanency Planning Goal

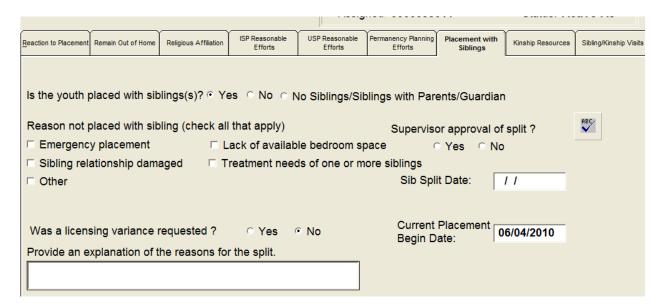
Permanency Planning Efforts

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Reaction to Placement Remain Out of Home Religious Affiliation	ISP Reasonable Efforts	USP Reasonable Efforts	Permanency Planning Efforts	Placement with Siblings	Kinship Resources	Sibling/Kinship
Efforts made by the Agency to place	the child in a	ı permanent ı	olacement in	a timely mar	nner.	7
Describe the efforts made to finalize	the permane	ncy plan.		٦		
				_		
If services were not provided, explain	the reasons	s why the ser	vices were n	ot provided. –		

In the **Permanency Planning Efforts tab in Children's Status** include the following under "Describe the efforts made to finalize the permanency plan":

- State the permanency planning goal and the concurrent permanency planning goal, if applicable. Describe efforts made to finalize the permanency plan. If the permanency plan is not reunification, describe the reasons why the identified permanency planning goal is in the child's best interest.
- How the child's permanency plan was shared with the child's and the child's feeling about the plan, if age appropriate.

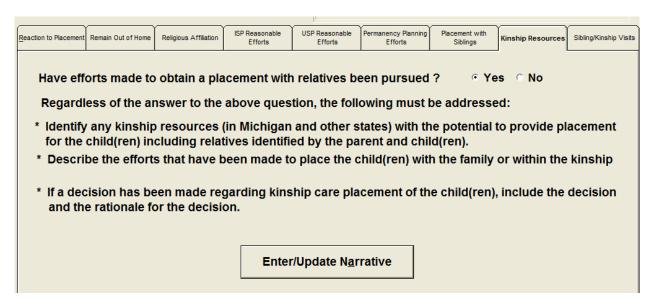
Placement with Siblings



In the **Placement with Siblings tab in Placement** add the following in "Provide an explanation of the reasons for the split":

Summarize reasonable efforts made to place the siblings together.

Kinship Resources



Using the **Kinship Resources tab in Child Status** include the following:

• Identify any relative resources (in Michigan and other states, per Interstate Compact for Placement of Children—ICPC-procedures) with the potential

- to provide placement or other supports for the child, as indicated by Relative Response, DHS-989.
- List all relatives who were notified of the child(ren)'s placement via Relative Notification Letter, DHS-990.
- If a decision has been made regarding relative care placement of the child, include the decision and the rationale for the decision. You must attach a copy of the DHS-31 Foster Care Placement Decision Notice to your service plan.
- Attach any completed home studies.
- A statement of the efforts that were made to place the child(ren) with the family or with the Relative Network.
- If a relative is pursuing foster care licensing, document progress made toward achieving licensing.
- If licensing waiver is being pursued, document reasons why and approval/denial date.

Sibling and Relative Visitation



Additionally, report on all sibling and relative visits. Visits between siblings are to occur at least monthly, if in separate placements. Specifically document the following:

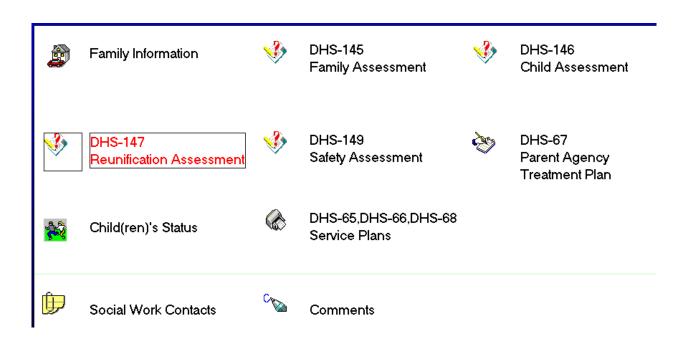
- Dates of visits or contacts.
- Location of visits or contacts.
- Duration of visits or contacts.
- Other ongoing interactions between siblings (phone calls, letters, school activities, etc).
- Worker assessments on the quality of sibling visitation, based on personal observations, each child description of visits and any reports from others, including parent(s), relative(s) and foster parent(s), as applicable.

- Reasonable efforts made to provide frequent visitation, if sibling visitation did not occur.
- Relative visits including adult siblings and potential placements in the relative network.
- Worker assessment of relative visitation.
- Include a discussion of any exceptions (missed appointments, changed appointments, suspension of appointments and changes in supervision status) to the plan during the reporting period.

If visitation or interaction between siblings not placed together are contrary to their safety or well-being, please include one or more of the following reasons:

- The visit may be harmful to one or more of the siblings.
- The sibling is placed out of state in compliance with the Interstate Compact on Placement of Children.
- The distance between the children's placement is more than 50 miles and the child is placed with a relative.
- One of the siblings is above the age 16 and refuses such visits, include reasons for refusal.
- Other.

Case Management Menu

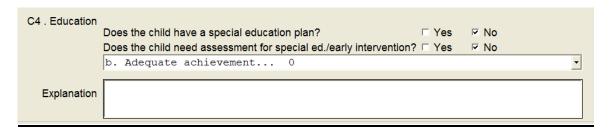


Social Work Contacts

Under **Social Work Contacts** add the following information.

Contacts with parents, teacher(s), foster parent(s), child/youth and/or educational liaison is utilized to assess the child's educational needs and strengths.

Child Assessment Needs and Strengths



Document child's view of need and strength if age appropriate.

In the **CANS section under the Education domain** the following must be included in the narrative:

- An initial assessment of the child's educational needs and strengths based on information obtained from the Michigan Department of Education Homeless Student Intake Form (if child is eligible for McKinney-Vento benefits), educational assessments and through contacts with the parents, teacher, foster parent/caregiver, child and educational liaison.
- Reassessment of education needs (educational assessments, report cards and contacts with the parents, teacher(s), foster parent, child/youth and/or educational liaison used to assess the child's educational needs and strengths).
- Detailed narrative of the child's academic performance. Describe all services provided to meet the child's specific identified educational needs and provide progress updates.
- For foster parents receiving a Determination of Care (DOC) supplement based on providing activities for education participation, summarize the specifics for school collaboration and actual tasks involved in the daily educational interventions required for the child in the case service plan during the report period.
- Statement documenting child/youth is attending elementary or secondary school as a full-time student, has completed secondary education or is incapable if attending school on a full-time basis due to a medical condition.

If a replacement occurred during a report period, the following additional information must be updated in the Education domain:

Determination of the preferred school for the child based on best interest factors and the input of the parent or legal guardian, along with education liaison.

- Name of the school child was attending prior to change of placement.
- Determination of the preferred school for the child (based on best interest factors) and input of the parent or legal guardian, along with the educational liaison (FOM 722-6).
- School transportation plan (include role of the school and foster parent, if applicable).
- Update Education module with date child began attending school. Full time school attendance is required within five days of replacement. If child does not start school within five days give explanation. (Note: If child does not change school this is not applicable).
- Verification from new school that child's previous school record was obtained within 30 days, please explain in narrative. (Note: If child does not change school this is not applicable).
- In determining the placement, the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the time is taken into account.

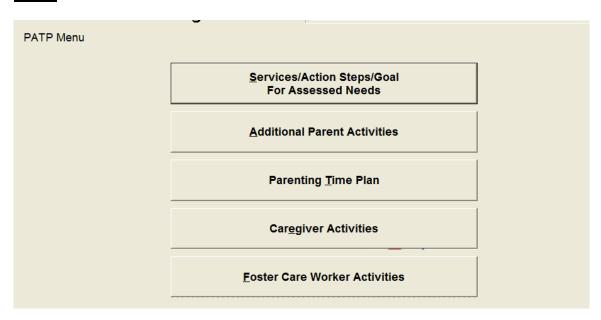
Family Reunification Assessment

Describe the reasons for the assessment of individual barriers to reunification and the reasons for the assessment — of overall barrier reduction

Using the narrative tab, describe the reasons for the assessment of individual barriers to reunification and the reason for the assessment of overall barrier reduction, include the following:

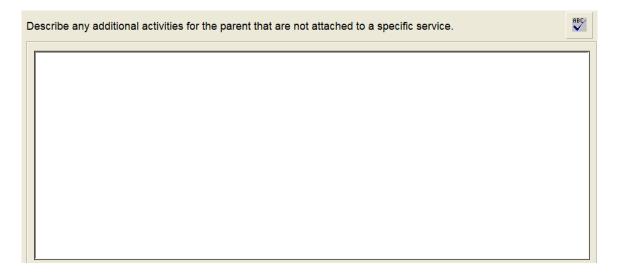
 Parent attendance at school, medical, and any required appointments for their child(ren) and/or any other activities.

PATP



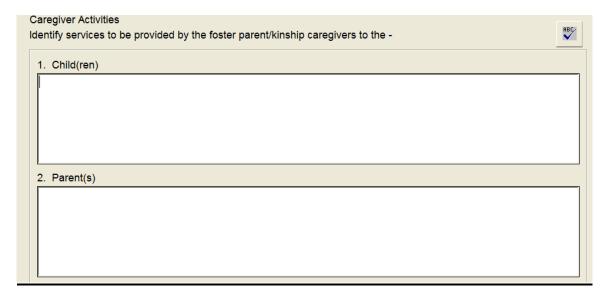
Parent/Caretaker/Non-Parent Adult Goals and Objectives

Using Additional Parent Activities include the following,



- If applicable, specify parental involvement in the child's medical, dental and mental health appointments and attendance at school conferences and/or other activities.
- Indicate if employment, day care, and/or transportation is a barrier to the parent meeting any of the goals or action steps including parenting time.
 Indicate the plan to address barriers to these items.

Foster Parent/Relative Caregiver Activities



Using Caregiver Activity tab include the following:

- Describe the plan for acceptable activities such as babysitting, routine household tasks, privileges, etc.
- If the youth is 14 or older, detail the independent living preparation activities the foster parent/relative caregiver will provide to assist the youth.
- Outline the tasks and/or additional expenses provided by the caregiver that justifies the Determination of Care Supplement (DOC). Describe specific activities by the caregiver to meet the individual needs of the child. For foster parents receiving a DOC supplement based on providing activities for education participation, detail the specifics for school collaboration and the actual tasks required for that child.
- Describe activities to be provided by the caregiver to promote educational stability and success for the child.
- Describe all specific activities required by the caregiver to meet the individual needs of the child.
- Address sibling visitation, if siblings are split. When separated, the
 relationship between siblings must be maintained by detailed plan of visits,
 phone calls and letters. Outline the specific sibling visitation plan
 including:
 - 1. Dates of visits.
 - 2. Location of visits.
 - 3. Duration of visits.
 - 4. All other ongoing sibling interactions.

Foster Care Worker Activities

1. Foster Parent(s)/Relative(s)/Other
2. Parent(s)
3. Children
1

Using the **Foster Care Worker Activities** tab include the following:

- State proposed plan for foster care worker contacts with the family, child(ren), caretakers, and service provider if applicable.
- If the youth is 14 or older, detail the independent living preparation activities the worker will provide to assist the youth.
- Identify what the worker will do to facilitate parenting time and sibling visitation if applicable.
- If siblings are in separate placements, identify the ongoing efforts the FC worker will make to place siblings within the same home.
- Identify all required FC actions to ensure educational stability.
- Document all efforts to identify and locate absent parents and/or relatives.
- Specify FC worker's activities to ensure the parent's child's and/or caregiver's progress and feedback on provided services is obtained.
- Specify the supports to be provided to the parent(s), child(ren) and caregiver(s) by the FC worker.

Parenting Time Plan and Requirements for Expansion of Parenting Time

Parenting Time Plan

Using the **Parenting Time** tab include the following,

- 1. Specify the current type, frequency, location and duration of parenting time. If less than weekly, specify why.
 - a. State how parenting time setting will assure a family friendly environment.
 - b. If location is other than parental home, specify where and what conditions must exist for in-home visits to take place.
- 2. If parenting time is supervised, specify by whom and what conditions must exist for unsupervised visits to take place.
 - a. If court is limiting parenting time, specify why more frequent parenting time would be harmful to the child and what parent must do to achieve weekly parenting time.
 - b. If parent is limiting parenting time, indicate parents reasons for wanting less frequent parenting time and project if/when frequency could be increased.
- 3. Specify behaviorally specific activities expected of the parents during parenting time.
- 4. Specify the requirement for expansion of parenting time. Identify the circumstances necessary for parenting time to progress in frequency and duration.