

**STANDARD: CONTACT BETWEEN THE SOCIAL WORKER/CLINICIAN,  
THE CHILD, THE FAMILY AND RESOURCE PARENT(S) OR OTHER  
ALTERNATE CARE PROVIDERS**

**PURPOSE**

The purpose of this standard is to provide direction and guidance to the Children and Family Services (CFS) program regarding frequency and purpose of contact between the social worker, the child, the parent/caregiver, and resource parent(s) or other alternate care providers. This standard is intended to achieve statewide consistency in the development and application of CFS core services and shall be implemented in the context of all applicable laws, rules and policies. This standard will also provide a measurement for program accountability.

**INTRODUCTION**

Findings from the initial Children and Family Services Review (CFSR) indicate significant improvements in the outcomes of child safety, permanency, and well-being when social workers/clinicians have consistent, purposeful, and frequent contact with parents and children. Contact should be used to continually assess the child's safety and to review the family's progress towards achieving the desired results of service plans. Regular contact between the social worker/clinician and the child's parents can serve as motivation for parents to make progress on their case goals and provides a means of monitoring, redirecting, and supporting their efforts.

It is equally critical for CFS staff to maintain frequent and regular contact with resource parents or other alternate care providers as a means of assuring the safety and well-being of children placed in their care. Frequent contact also allows the social worker/clinician to continually assess the resource family's ongoing needs and to provide additional supports that will enhance the stability of placements for children. This standard establishes minimum requirements and methods for social worker/clinician contact with children, parents, and resource families in the child welfare system.

**Definitions**

**Alternate Care:** 24-hour a day care provided for children in a location other than the family home. Examples of alternate care settings include: foster family, residential facility, treatment homes.

**Contact:** Communication between the responsible party and the child, the child's parents or caregivers, resource family members or other individuals who are involved in the child's life. Information gathered through this communication will serve as a basis for assessing the child's current situation, their safety, their needs, and their overall well-being. Methods of contact include face-to-face visits, phone calls, letters, and reports.

**Responsible Party:** Responsible party refers to individuals such as CFS social workers/clinicians or contracted service providers who maintain responsibility and authority for case planning and case management.

**NOTE:** In some cases there may be more than one responsible party assigned to a case. For example, both a Casey Family social worker/clinician and a CFS social worker/clinician can be considered the “responsible party” for the same case. When the assigned social worker/clinician is absent from work or otherwise unavailable, a supervisor may designate another social worker/clinician to serve as the responsible party during the assigned social worker’s/clinician’s absence.

## STANDARD

### **Frequency of Contact with Children**

- The responsible party shall have face-to-face contact with each child on their caseload a minimum of one time each month. More frequent contact between the responsible party and the child and contact in various settings may be indicated depending upon the needs of the child or family.
- Children living in the home of their parent or guardian must be seen monthly in their own home.
- Face-to-face contact between the responsible party and a child placed in a resource family home or other alternate care setting may be made in settings other than the alternate care setting as long as contact between the responsible party and the child occurs in the child’s alternate care setting a minimum of once every 60 days.
- Children placed in treatment facilities located a significant distance from the responsible party’s office must also be seen face-to-face every month. However, the region may choose to assign a second responsible party through a contract to see the child face-to-face every month. When this is the case, face-to-face contact between the regional responsible party and child is required a minimum of once every 90 days. Communication, by phone, shall occur monthly.
- A 90 day face-to-face requirement does not pertain to cases that are accepted for courtesy supervision by another region as the supervising region also assigns a responsible party.
- Contact between the responsible party and a child placed in a resource family home or other alternate care setting outside the State of Idaho is required a minimum of once every 6 months. Children who are in out-of-state placements through interstate compact shall be contacted face-to-face no less frequently than every 6 months, by either the responsible party in Idaho, by a representative of the state in which the child is placed, or by a private agency contracted by either (Safe and Timely Interstate Placement of Foster Children Act [ICPC] P.L. 109-239).

Although the Fostering Connections Act sets a minimum federal standard for worker/child contact for children placed out-of-state through ICPC at once every 6 months, there is also the expectation that children in state custody will be seen face-to-face monthly by a responsible party wherever they are residing. Therefore, the

responsible party in Idaho will request the state in which the child is placed, to see the child on a monthly basis. If the policy of the state in which the child is placed allows only for face-to-face contact every 6 months, the responsible party in Idaho shall contact the child and the child's caregiver each month, by telephone, to confirm the child's safety and well being. The region may consider a private contract to ensure face-to-face contact will occur each month.

When the state in which the child is placed is providing supervision of the placement, the responsible party in Idaho will request regular supervisory reports from the state where the child is residing. The reports should include detailed information related to the child's circumstances and the extent to which the out-of-state placement meets the child's interest or special needs. Supervisory reports should include information provided by collateral contacts.

Monthly contact with each child will include a brief interview, conducted out of the presence of parents/caretakers, in a non-threatening environment, to allow the child to objectively discuss their safety and/or any concerns.

### **Frequency of Contact with Parents**

The responsible party shall have contact with both the child's mother and father at least monthly in both in-home and out-of-home cases. More frequent contact between the responsible party and parents and contact in various settings may be indicated depending upon the needs of the child or family.

For in-home cases - there is no requirement to search for or contact a parent when:

- contact could result in a safety concern for the child or the other parent;
- the parent has not been involved in the child's life;
- there is no identified relationship between the child and the parent; or
- the parent would not be expected to contribute toward the reduction of risk to the child.

For in-home cases, if one of the parent's whereabouts are unknown and that parent does not meet one of the criteria above, efforts to locate, contact, and involve that parent must be ongoing. All efforts to locate and involve parents and other family members in planning for the child must be documented.

In out-of-home cases, if one parent's whereabouts are unknown, efforts to locate, contact, and involve an absent parent must be ongoing. All efforts to locate and involve parents and other family members in planning for the child must be documented.

In both in-home and out-of-home cases, if the child's parent(s) are unavailable for monthly contact due to special circumstances such as distance, hospitalization, or incarceration, other means of communicating, including telephone or written communication should be used on a monthly basis. In such cases, if it is feasible to see the parent(s) and they are available, they should be seen face-to-face.

### Contact with hard to reach or unavailable parents:

Despite efforts of social workers/clinicians to engage parents, some individuals refuse to be present for home visits, answer their calls, or respond to written communication. At times, a social worker/clinician may be unable to locate a parent. Social workers/clinicians must continue to make diligent efforts each month by conducting a variety of the following activities:

- Make contact by going to the parent's home at different times in an attempt to reach him/her;
- Identify other suitable locations where contact could occur;
- Call the parent by telephone;
- Contact the parent's attorney;
- Call relatives or collateral contacts who may know how to reach the parent;
- Send a certified letter to the last known address, asking the parent to contact the social worker/clinician regarding their child and progress of their case.

Diligent efforts to contact parents must be ongoing. Document all efforts in FOCUS on the monthly contact/visitation screens.

### Worker Safety

Although monthly face-to-face contact with parents or caregivers is extremely important, a worker's safety must not be compromised in making those contacts. In cases where a parent has made threats against a worker or is known to be dangerous to others, face-to-face contact must only occur in the office or another location that is considered to be safe. Alternative means of contact, such as letters or phone calls may be used in lieu of face-to-face contact if direct contact is deemed unsafe. In rare cases, any type of contact may be contraindicated. The social worker/clinician must document the specific reasons for any deviation from making monthly face-to-face contact in a narrative in the contact/visitation screens in FOCUS.

### **Purpose of Contact with Children and Parent(s)**

Each contact with the family must have a defined purpose related to assessing and monitoring the family's progress toward reducing safety/risk issues and monitoring the child's safety and well-being. The following represent some issues to consider:

- Observation and assessment of the child's safety, emotional and physical health, developmental status and general well-being.
- Assessment of the adequacy of the home environment.
- Observation of the child with other children or individuals living in the home.
- Observation of any changes in the household composition.
- Assessment of services provided to the child and parent and identification of additional services that may be needed.
- Review of the child/parent visitation plan (out-of-home cases).
- Review of progress towards service plan goals and objectives.
- Discussion of court recommendations or plans for closing the case when applicable.

### **Frequency of Contact with Resource Parents and Other Alternate Care Providers**

The responsible party shall have face-to face contact with resource parents or other alternate care providers a minimum of one time each month. More frequent contact and contact in various settings may be indicated depending upon the needs of the child or family.

- The responsible party shall have face-to-face contact with resource parents or other alternate care provider in the alternate care setting at least every 60 days.
- Face-to-face contact between the responsible party and alternate care or treatment providers located a significant distance from the responsible party's office is required a minimum of once every 90 days. Communication by telephone shall occur monthly.

### **Purpose of Contact with Resource Families and other Alternate Care Providers**

Face-to-face contact and monthly communication with the resource parents must include a review of the following:

- Assess the child's safety, emotional and physical health, developmental status and general well-being.
- Assess the safety and adequacy of the resource home environment.
- Assess the child's adjustment to foster care placement.
- Assess services provided to the child and resource parents and determine if additional or different services are needed, including respite or financial supports.
- Notify regional resource family licensing staff if there are concerns or issues that need to be addressed.
- Assess the ability and willingness of the resource family/alternate care provider to preserve connections between children, their parents, and their support systems.
- Using the concept of full disclosure, assess the resource family's ability and willingness to be a permanent resource and/or home for the child.

### **Documentation of Contact**

The following data must be recorded in FOCUS in the contact/visitation screens:

- Date and time of Contact
- Type of contact (face-to-face, telephone, etc.)
- Duration of contact
- Person Contacted – mother, father, resource parent, child, etc.
- Location of Contact– family home, resource family home, office, etc.
- Result of the contact: a short summary of the product of the contact
- Name and title of responsible party making the contact.

All communication made in lieu of or as a supplement to face-to-face contact must be documented. Reasons for not meeting face-to-face contact and communication standards with the child, the child's parents, or the child's resource parents must be documented in FOCUS.

**Disclaimer:** Any request for variance from this standard must be submitted in writing and receive written approval from the FACS Division Administrator unless otherwise noted.