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Module 1:
CONNECTIONS Basics

As a Child Welfare Services worker, you perform a vital role in providing for the safety, permanency and well-being of New York’s most vulnerable children and families. In addition to being child-centered and family-focused, child welfare practice in New York is outcome-based. As a child welfare caseworker, supervisor or manager, your work is focused on achieving the following outcomes:

- Children are safe.
- Families are preserved.
- Children are adopted when their birth family cannot be preserved.
- Children leaving care at the age of majority can live independently.
- Children and youth develop normally.

You, the caseworker (guided by your supervisor), are the primary instrument employed by the child welfare system to achieve these outcomes. You will use CONNECTIONS, New York’s child welfare information system, to guide, document and manage your efforts to achieve these outcomes.

An understanding of CONNECTIONS’ role in New York State’s child welfare system helps provide context for the work you perform. This first module introduces you to the history of the CONNECTIONS system, its role in New York State’s child welfare system, basic concepts used in CONNECTIONS and how CONNECTIONS protects the confidentiality of case record information.
What is the CONNECTIONS System?

CONNECTIONS is a child welfare computer system that provides for the documentation of information about families and children in New York State. The CONNECTIONS system is part of a federal initiative called the Statewide Automated Child Welfare Information System (SACWIS). In 1993, the federal government provided financial incentives for states to develop statewide automated child welfare processes in an effort to provide more efficient and effective administration of programs. In addition, the federal government introduced a set of foster care and adoption-related data elements to be collected by states’ SACWIS systems—the Adoption and Foster Care and Analysis and Reporting System (AFCARS)—so that national data would be available in a consistent format. Many other states have similar systems with other names.

CONNECTIONS is designed to create a single, statewide, integrated system for the collection and recording of child protective, preventive, foster care and adoption service information. The CONNECTIONS system will eventually replace the existing New York State “legacy” systems—the Welfare Management System (WMS) used in child welfare cases, the Child Care Review Service (CCRS) and the Adoption Album. It will interface with the Benefits Issuance Control System (BICS), Child Support Management System (CSMS), and WMS Non-Services, including Medicaid (MA).

- **CCRS** - CONNECTIONS will replace CCRS as the repository of all information on child assessments and service plans, legal activity, placements and moves within placement. CCRS will be available in view-only mode only. [Note: This process will not be completed until Build 19 is fully implemented.]

- **WMS** - CONNECTIONS will replace WMS Services as the system of record for authorizing all child welfare services (i.e., protective, preventive, foster care and adoption). [Note: This process will not be completed until Build 19 is fully implemented.]

- **BICS** - BICS will continue to be the system of record for all payments made on behalf of families and children receiving child welfare services. CONNECTIONS will interface with BICS.

- **Interstate Compact for the Placement of Children (ICPC)** - The ICPC database will be replaced by CONNECTIONS and all ICPC requests and subsequent processing will be completed through CONNECTIONS.

- **Adoption** - All system recording in regard to adoption, including photo-listing and adoption subsidy, will be completed in CONNECTIONS. [Note: CONNECTIONS will not replace the Adoption Album legacy system until Build 19 is fully implemented.]

CONNECTIONS is updated through Builds. When fully implemented across the state, the system will provide full case and financial management support for child welfare related staff, appropriate access to client information for those needing the information, decision-making support tools for caseworkers and managers, and support payment and claiming processes. Through the statewide network, CONNECTIONS will link child welfare caseworkers, supervisors, and other management and administrative staff.
How CONNECTIONS Supports the Child Welfare System

No matter what our roles may be in the child welfare system, each of us shares the responsibility for—and contributes to—the overall safety and well-being of children. This includes not only the safety of children; but also the achievement of permanence, whether through strengthening their family, securing an adoptive family, or supporting youth to attain the life skills and personal connections they need for independence. In addition, we share the goal of promoting children’s well-being through the support of healthy physical, emotional and educational development.

CONNECTIONS supports child welfare’s mission and achievement of the child welfare outcomes by providing assessment protocols and practice guidance to staff on essential casework activities, as well as providing a way to manage and store information related to work with children and families. Caseworkers need to document their efforts in order to facilitate the management of their caseloads. Documentation provides an historical record of information to others involved in the case, including families, supervisors, subsequent workers, service providers, lawyers, Family Court, etc. It also provides concrete information about a case and the services provided and paid for, to internal and external quality assurance staff and auditors. The Case Management system enables the structured recording and tracking of data to support decision-making at the individual and case level. Through the OCFS Data Warehouse, CONNECTIONS also provides aggregate case management information for agency management, planning and the monitoring of agency performance.

The Case Management functionality in CONNECTIONS:

- defines Case Management security functionality for the system;
- provides for the creation of a Child Welfare Services case in CONNECTIONS;
- allows CPS cases in CONNECTIONS (cases that entered the system through SCR Intake and progressed through CPS Investigation) to be completed as Child Welfare Services cases;
- provides Services Intake for families requesting services, including the determination of Programmatic Eligibility for Preventive Services;
- provides a comprehensive electronic case record for Child Welfare Services cases, including all assessment and service planning activity, now referred to as the Family Assessment and Service Plan (FASP); and
- provides for the recording of contacts and progress notes, and the capturing of Service Plan Review information, for the entire period the child welfare case is open for services.
Logging On to Your PC

The CONNECTIONS application can be accessed only by designated individuals on computers that are set up to run the application. CONNECTIONS computers use Windows 2000. This section addresses the procedures for logging on to Windows.

Once you have completed logging on to Windows, the step-by-step instructions in the next section will show you how to access CONNECTIONS.

### Step-by-Step: Logging On to Your Computer

1. Press the **Ctrl + Alt + Delete** keys on your keyboard at the same time. 
   A Confidentiality Warning displays.

2. Click on the **OK** button in response to the Confidentiality Warning. 
   The Log On window displays. Make sure that your user name and domain are listed correctly in the log on screen.

3. Enter your username and password in the designated fields.

4. Click on the drop-down arrow for the Log on to field and select the **HSEN** domain.

5. Click on the **OK** button. 
   Your local desktop displays.

---

If you incorrectly enter your username, domain and/or password when attempting to log on to your computer, the following message displays:

"The system could not log you on. Make sure your username and domain are correct, then type your password again. Letters in passwords must be typed using the correct case. Make sure that Caps Lock is not accidentally on."

Click on the **OK** button to close the message. Re-enter your username, domain and/or password and click on the **OK** button.
Accessing CONNECTIONS

The CONNECTIONS application is made available to users in three different ways:

**Production Database**
The Production Database contains “live” data. This is the database that all workers use to record information in CONNECTIONS.

**Training Database**
The Training Database contains simulated data and allows you to practice functions necessary for your casework activities. It mirrors the functionality of the Production Database.

**Preview Application**
The Preview Application contains a “snapshot” of actual case data. Information entered into the Preview application does not carry over to the Production database.

The Preview Application provides the opportunity to preview changes and enhancements planned for the CONNECTIONS system. The Preview Application is available for a limited time when changes to the system are made. You will receive special notice when the Preview Application becomes available.

You cannot have more than one Citrix session open for the same User ID at the same time.

To distinguish between the Training Database and the Preview Application, keep in mind that the Training Database contains simulated data, while the Preview Application is a “snapshot” of your actual case data. The Training Database allows you to practice functions necessary for your casework activities. Information entered into the Preview Application does not carry over to the Production Database, but allows you to practice the new system functionality using your own cases.

Using the CONNECTIONS Production Database, you can access your Assigned Workload from any CONNECTIONS workstation throughout New York State. All you need is a valid User ID and password to gain access to your workload.

If the AutoComplete window displays during the logon process, select the Don’t offer to remember any more passwords check box and click on the No button.
CONNECTIONS and Citrix

CONNECTIONS resides on a centralized Citrix server. The Connections and other Citrix Applications icon on your local desktop opens the Connections and other Citrix Applications window, which contains icons of CONNECTIONS applications that are available to you based on your NT logon. When you double-click on one of these icons, your computer accesses the Citrix server and begins a “Citrix session.” The Citrix desktop displays, covering your local desktop and remaining open for the length of your Citrix session. The Citrix desktop also has an easily recognizable background.

The CONNECTIONS icon displays on the Citrix desktop. Double-clicking the icon starts the application, opening a window on your desktop for it. The CONNECTIONS icon varies slightly, depending on the logon information you use; i.e., based on whether you opened a Citrix session for the Production Database, Training Database or Preview Application.

The Task Bar at the bottom of the Citrix desktop provides a method of organizing the application windows that you have open in Citrix. You can have more than one application window open on your desktop at a time. Minimize a window by clicking on the Minimize button \(\text{ Minimize }\). The minimized application window displays as a button on the Task Bar. This makes room for other windows you need to use at that moment. To re-open an application window, click on its button on the Task Bar; the application window displays as the active window, placing it “on top of” any other open windows.

Clicking on the Start button (in the lower left corner of the Citrix desktop) displays the Start menu, which provides access to the Citrix Log Off procedure (see page 1-7 for details on this procedure).

Step-by-Step:
Launching CONNECTIONS (Production)

1. From the local desktop, double-click on the CONNECTIONS and other Citrix Applications icon.
   
   The CONNECTIONS and other Citrix Applications window displays, containing icons of application that are available to you based on your NT logon.

2. Double-click on the Connections Desktop 95 Percent icon.
   
   A Confidentiality Warning message displays.

3. Click on the OK button in response to the Confidentiality Warning.
   
   The Citrix desktop displays and your Citrix session begins.

4. Double-click on the Connections icon.
   
   When the CONNECTIONS Production Database has launched successfully, the CONNECTIONS Toolbar displays, reading: Production – CONNECTIONS Toolbar – <Your Name>.
Closing CONNECTIONS and Logging Off Your PC

When you have finished your work in CONNECTIONS, you should close both CONNECTIONS and your Citrix session. This is best done as a two-step process: first close CONNECTIONS, then log off of Citrix. Doing so (as opposed to logging off of Citrix while CONNECTIONS is still open) reduces the likelihood of problems occurring during the log off procedure.

At the end of your work day, it is important to log off your PC; if you completely shut down (turn off) your computer, it will not be able to receive any updates that may occur overnight. Leaving the computer logged off (but with the power still on) will enable it to receive these updates.

The step-by-step instructions below will assist you in closing CONNECTIONS and logging off of your PC.

Step-by-Step: Closing CONNECTIONS and Logging Off Your PC

1. Click on the File menu (represented by the Globe icon in the upper left corner of the CONNECTIONS Toolbar) and select the Close command.
   
   You may need to use the vertical scroll bar to scroll up on the Citrix desktop to reveal the Globe icon (File menu) on the CONNECTIONS Toolbar.

2. Click on the Start button in the lower left corner of the Citrix desktop and select Log Off <User name> from the resulting menu.
   
   The following message displays: “Are you sure you want to log off?”

3. Click on the Yes button.
   
   This does not log off your machine; it only ends your session with the Citrix server. Your local desktop displays.

4. Close all applications still open on your local desktop.

5. Click on the Start button and select the Shut down… command from the resulting menu.
   
   The Shut Down Windows dialog box displays. Click on the drop-down arrow and select Log off <user name>, if it is not already selected.

6. Click on the OK button.
CONNECTIONS Security

In order to protect the confidentiality and integrity of case data, access to information in CONNECTIONS is carefully controlled. A number of factors determine the information a worker can view or maintain in CONNECTIONS, including the cases to which the worker is assigned, the worker’s Business Function Profile (BFP), the organizational hierarchy and the worker’s position in the hierarchy, the Agency Access established in CONNECTIONS by that worker’s Local District or Voluntary Agency, and the worker’s job function. Workers will also have view-only access to cases in which they have persons in common in another case. This is referred to as an “implied role” in a case. Voluntary Agency workers will not be able to access or view information in CPS Intake and Investigation stages.

All CONNECTIONS users are assigned security profiles based on Guidelines issued by OCFS, but assigned locally by Security Coordinators. These security profiles determine the windows or types of information users can view or maintain. In CONNECTIONS, each person’s security profile is called a Business Function Profile (BFP). Each worker has only one BFP. Each BFP is comprised of one or more Business Functions, which in turn are comprised of one or more Security Attributes (see the graphic below).

![Diagram of Robin Worker’s Business Function Profile]

Your BFP is based on the tasks you are responsible for performing and the level of access to records needed to complete those tasks. Your BFP may contain multiple Business Functions based your responsibilities (e.g., to create a Family Services Intake, you must be assigned the CREATE FSI Business Function).

As you use CONNECTIONS, you may see buttons and menus which are gray instead of black. The gray color indicates that this function is disabled and, therefore, not available to you.

Features are sometimes disabled based on your BFP. For example, the UNIT button on the CONNECTIONS Toolbar is typically disabled for caseworkers, since this function is usually available only to supervisors. If there is information in the system that you need to access in order to complete your work, but that information is not available to you, talk to your supervisor.
If you are working on a stage and cannot view or modify information that relates to your job responsibilities, you should review your BFP with your supervisor to make sure the Business Functions included in your BFP are adequate for the work you are doing.

A special Business Function, VIEW SECURITY, allows you to review your BFP in CONNECTIONS to see the business functions assigned to you.

<table>
<thead>
<tr>
<th>Step-by-Step: Viewing Your Business Function Profile</th>
</tr>
</thead>
</table>
| 1  Click on the **Options** menu on the CONNECTIONS Toolbar and select **Security**.  
  *The Security sub-menu displays.* |
| 2  Click on the **View Staff Security** command.  
  *The Staff Search Criteria window displays.* |
| 3  Type your last name into the appropriate field.  
  *The Staff List displays.* |
| 4  Click on the **Search** button.  
  *The Staff List displays.* |
| 5  Click on your name to select it from the **Staff List**.  
  *The Staff Security window displays. The Business Function field on this window contains the available Business Functions.* |
| 6  Click on the **OK** button.  
  *The Staff Security window displays. The Business Function field on this window contains the available Business Functions.* |
| 7  The Business Functions assigned to you are identified with red check marks. Use the vertical scroll bar inside the Business Function field to view the entire list.  
  *To see the Business Functions assigned to you without scrolling through the entire list, click on the **Selected Business Functions Only** check box.* |
| 8  To close the **Staff Security** window, click on the **Cancel** button.  
  *The Staff List displays.* |
| 9  To close the Staff List, click on the **Close** button.  
  *The Staff Search Criteria window displays.* |
| 10 To close the **Staff Search Criteria** window, click on the **Close** button. |

In addition to having a BFP, you also have a role in each stage to which you are assigned. Your role is the primary determining factor regarding which pieces of the FASP you are responsible for completing.
Understanding Cases and Stages in CONNECTIONS

The CONNECTIONS case management system organizes information about a family or individual situation into **cases** and **stages**.

- A **case** contains the information about the child welfare services provided to a family or individual, including reports of abuse or maltreatment, as well as the provision of ongoing protective/preventive services, foster care, or adoption services. A “CONNECTIONS Case” consists of an associated group of “stages.”
- A **stage** is a grouping of casework activities related to a particular time frame, case status, or casework action within the context of the overall case.

The following stages exist in the CONNECTIONS Case Management system:

- CPS Intake (INT)
- CPS Investigation (INV)
- Foster/Adoptive Home Development (FAD)
- Administrative Review Investigation (ARI)
- Family Services Intake (FSI)
- Family Services Stage (FSS)

The FSI and FSS categories of stages are being implemented in Build 18. Each Family Services Stage (FSS) in CONNECTIONS will have one of the following types:

- **Child Welfare Services (CWS)**
  This is the most commonly used type of Family Services Stage. It includes adoption, foster care, preventive and long-term protective services.

- **Child Case Record (CCR)**
  The Child Case Record is created when a child is legally freed for adoption. This is a completely separate type of FSS; every child who has been freed, including those who might not be placed in an adoptive setting, has a separate CCR.

- **Out-of-Town Inquiry (OTI)**
  There are two types of Out-of-Town Inquiry (OTI): out-of-state and county-to-county. An *out-of-state* OTI is a written request for assistance or follow-up on a specific matter that usually involves a family (or family members) now residing in New York State. A *county-to-county* OTI is a request made by one Local District to another for assistance or follow-up on a specific matter that involves a family (or family members) residing outside the requesting district. The request usually requires an action that cannot be completed by the requesting district.

- **Court Ordered Investigation (COI)**
  This type is used for a case that was initiated by a court-ordered investigation, rather than by a CPS Investigation.

- **Interstate Compact for the Placement of Children (ICPC)**
  This type is used for cases where the Local District or Voluntary Agency is receiving a child from another state. All children who were in foster care in New York State and are being placed via ICPC in another state already have an open FSS/CWS in CONNECTIONS and will continue to be tracked in that stage.

- **Advocates Preventive Only (ADVPO)**
  The Advocates Preventive Only (ADVPO) type is used exclusively for Family Services Stages in New York City when ACS is the Case Manager for a preventive services case and the Voluntary Agency that will be directly providing only preventive services to the family is exempt from the responsibility of recording the FASP online, in accordance with the terms of the Advocates Preventive lawsuit settlement.
Basic Windows Skills in CONNECTIONS

If you click on the CONNECTIONS icon on the Citrix desktop the CONNECTIONS Toolbar displays. If you are using either the Production Database or Preview Application, the title bar (located at the top of the CONNECTIONS Toolbar) displays the name of that environment, “CONNECTIONS Toolbar” and your name. If you are using the Training Database, the title bar displays “Training - CONNECTIONS Toolbar” and the fictitious name assigned to the Training Database caseworker (Darryl Wilson or Jamie Miller). The CONNECTIONS Toolbar contains buttons and menus that enable you to open CONNECTIONS windows. Since CONNECTIONS is a Windows-based application, to use it effectively you need to be familiar with how windows work.

Understanding Windows

Every window, like the CONNECTIONS Toolbar, has buttons and menus. These features enable you to change information on the window and/or navigate to other windows in CONNECTIONS. Each window also includes a Close button (×), located in the upper right corner of the title bar (the colored bar at the top of the window), that you can use to close the window. Note: If a CONNECTIONS window contains a Close or Cancel button (typically located at the bottom of the window), use that button to close the window, rather than the × button.

Some features of CONNECTIONS windows are different than windows in other applications. For example, you cannot resize CONNECTIONS windows.
You can have more than one window open within CONNECTIONS and have multiple applications open within Windows, each with its own window. When you have a number of windows open, they will be stacked one on top of another, like sheets of paper. The “active window” will be topmost in the stack. You can only work in the active window.

The ability to have multiple windows open (“multitasking”) is a common Windows feature that allows you to use a number of applications at once, but it can be confusing. This section explains how to manage and manipulate multiple windows.

**Moving Windows**

Windows in the CONNECTIONS application are slightly smaller than the size of your screen. Although you cannot resize them, you can move them. This allows you to see the windows that are open but may be displayed underneath the active window.

To move a window, position your cursor over the title bar and hold down the left mouse button while you drag the mouse (“click & drag”).

**Minimizing and Maximizing Windows**

While you cannot change the size of most of the windows in CONNECTIONS, you can manipulate some (e.g., Microsoft Word documents that you open within CONNECTIONS and CONNECTIONS Help windows). These windows can be minimized or maximized like windows in other applications. To understand how this works, it is helpful to know a bit about window states.

At any point a window displays in one of three states: normal, maximized or minimized. A normal window partially fills the screen and can usually be resized. A maximized window fills the entire screen. A minimized window is still open, but is represented only by an icon on the Task Bar.

Most CONNECTIONS windows are set to a uniform size and cannot be maximized or minimized. You can, however, change the size of Microsoft Word and CONNECTIONS Help windows by using the Minimize and Maximize buttons in the upper right corner of the window.

When you minimize a window, the application displays as a button on the Task Bar. To open the window again, click its Task Bar button. This returns the window to its previous state (either normal or maximized).

**Scrolling**

The vertical and/or horizontal scroll bars display on the right side and bottom, respectively, of windows whenever there is more information than can be displayed on a window at one time. There are three ways to scroll through a document:

- Click on the top or bottom (or right or left) arrow on the scroll bar to scroll up or down (or side to side) through the document a little bit at a time.
- To scroll more quickly, click and drag the center block in the scroll bar up or down (or right or left) until you locate the appropriate section of the document.
- In some windows, “mega-scroll” buttons (which look like dog-eared pages) display at the juncture of the vertical and horizontal scroll bars. Use the mega-scroll buttons to move beyond the last record you can view with the scroll bar.
Switching Between CONNECTIONS and Applications on your Local Desktop

The Alt+Tab hot key combination enables you to move between your Citrix session and other applications on your local desktop.

<table>
<thead>
<tr>
<th>Step-by-Step: Using Alt+Tab to Switch Between Applications</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Hold down the Alt key.</td>
</tr>
<tr>
<td>2  Briefly press and release Tab key to cycle through open application windows. <em>With the first press of the Tab key, a pop-up window displays with the name of an open application; with each additional press of the Tab key, the pop-up window cycles through the names of each open application.</em></td>
</tr>
<tr>
<td>3  When you see the name of the application you want to access, release the Alt key. <em>The open application window you selected becomes the active window.</em></td>
</tr>
</tbody>
</table>

The Ctrl+Esc hot key combination also enables you to move between your Citrix session and other applications on your local desktop. The Start menu for your local desktop displays when you use Ctrl+Esc on your keyboard.

If your computer has 95% Screen Resolution, you do not need to use Ctrl+Esc or Alt+Tab; instead, use the Task Bar at the bottom of the screen to navigate among applications in Citrix. The Start button is located to the left of the Task Bar. Any applications that are open will appear on the Task Bar at the bottom of the screen.

Switching Between Open Programs While in a Citrix Session

To switch between these programs on the Citrix desktop when they are both open, click on the desired application’s task button on the Citrix Task Bar.

Remember that even though parts of a window may be visible, that window might not be the active window. Clicking anywhere within a window will make it the active window, placing it on top of any other open windows. Sometimes the active window (such as the Print dialog box) must be closed before you can select another window.
Copying and Pasting

In CONNECTIONS, as in other Windows-based applications, you can use the Copy and Paste functions to duplicate information without retyping it. This is handy for transferring notes from a Microsoft Word document into a Word document within CONNECTIONS, or copying information from one location to another within a CONNECTIONS stage. You can copy and paste only in those windows where your Business Function Profile allows you to maintain information. Be careful when using the Copy and Paste functions so that information is not inadvertently lost or misplaced. See the boxes at right and in the step-by-step instructions on the next page for more copy/paste tips. This functionality works differently for copying and pasting progress notes and the Copy to Other Children function.

Step-by-Step: Copying and Pasting Text

1. Open the window (e.g., a Microsoft Word document) that contains the text to be copied.
2. Click and hold the mouse button while you drag it over the text you want to copy. The text highlights as you drag the mouse.
3. Click on the Edit menu and select Copy. The system copies the highlighted text onto a temporary Windows “clipboard.” It will remain on this clipboard until you copy another selection of text or close the application. (If an Edit menu is unavailable on a particular CONNECTIONS window, use the hot key method described at the end of this section.)
4. If you need to switch to another window, either click on that window to make it active, or click on the appropriate button on the Task Bar at the bottom of the Citrix desktop. If you are moving from a stand-alone Word document to an open Word document in CONNECTIONS, use Alt+Tab to move from one document to the other, or minimize the first document by clicking on the Minimize button (\(\_\_\_\) ) in the top right corner of the window.
5. Click on the location where you want to paste the text.
6. Click on the Edit menu and select Paste. The copied text is pasted next to the cursor. If an Edit menu is unavailable on a window, use the hot key method described on the next page.
**Hot Key Method for Copying and Pasting**

If an **Edit** menu is unavailable on a window where you want to copy and/or paste, you can use the following “hot key” method to copy and paste.

<table>
<thead>
<tr>
<th>Step-by-Step: Copying and Pasting Text via the Hot Key Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Highlight the text you want to copy.</td>
</tr>
<tr>
<td>2 Press the <strong>Ctrl</strong> and <strong>C</strong> keys on your keyboard at the same time. <em>The highlighted text is copied onto the Windows “clipboard.”</em></td>
</tr>
<tr>
<td>3 Click on the location where you want to paste the text.</td>
</tr>
<tr>
<td>4 Press the <strong>Ctrl</strong> and <strong>V</strong> keys on your keyboard at the same time. <em>The copied text is pasted next to your cursor.</em></td>
</tr>
</tbody>
</table>

Make sure the paste location is large enough for the text you have copied. If it’s too small, CONNECTIONS will paste only what fits. Most comments boxes can contain 300 characters of information, but some hold only 40 characters.
Getting Around in CONNECTIONS

CONNECTIONS contains a number of windows. The starting point for accessing information in CONNECTIONS is the CONNECTIONS Toolbar.

There are four primary navigation tools in CONNECTIONS:

- Buttons on the CONNECTIONS Toolbar
- Menu commands on the CONNECTIONS Toolbar and on many windows in the application
- Buttons on CONNECTIONS windows
- Tabs on various CONNECTIONS windows

Sometimes buttons and menu commands are disabled. Features are disabled either because they are not available from a particular window, or because your role or Business Function Profile does not allow you access to that information.

The CONNECTIONS Toolbar

Using CONNECTIONS Toolbar Buttons

The CONNECTIONS Toolbar is always available at the top of your screen when you are working in CONNECTIONS. It is the gateway into the CONNECTIONS system. Sometimes the Toolbar may display beneath another window on your desktop. Click on the title bar to bring the Toolbar to the forefront of all of your open windows.

The first two buttons on the CONNECTIONS Toolbar (TO-DO and WORK) help you organize your day-to-day work. The TO-DO button opens the Staff To-Do List, containing items needing your attention. The WORK button opens the Assigned Workload, a list of your stage assignments. This is the method you use to access your tasks in CONNECTIONS.

The third button, UNIT, opens the Unit Summary window, which is available only to CONNECTIONS users who have been assigned the UNIT SUM ACCESS Business Function (This Business Function is typically assigned to supervisors, but others could be assigned this Business Function as well). For anyone with the UNIT SUM ACCESS Business Function, the Unit Summary window provides access to the workloads of the workers they supervise. For workers who have not been assigned the UNIT SUM ACCESS Business Function, this button is disabled.

The next four buttons (PERS, CASE, RSRC and STAFF) are search buttons, which enable you to search for people, cases, resources (including foster homes, agencies and service providers), and staff in CONNECTIONS. Keep in mind that Voluntary Agency workers cannot view information in CPS Intake and Investigation stages.
The final button, **RPRTS**, opens the *Report List*, which provides access to reports that you’ve generated (or “launched”) from within the application. Monthly management reports are also downloaded directly to the *Report List* for people with special BFPs.

**Using CONNECTIONS Menus**

Just above the buttons on the CONNECTIONS Toolbar (and at the top of every window opened within CONNECTIONS) is the Menu bar, a row of key words that, when clicked, open menus (see the CONNECTIONS Toolbar graphic above).

Commands available from the menus vary by window and are related to the actions you may wish to perform at that point. They provide an alternative way to open windows available from buttons, and also serve as a means for opening additional CONNECTIONS windows.

### Step-by-Step: Navigating via Menus

1. Click on a key word from the Menu bar at the top of any window.  
   A menu displays with commands related to the selected key word.

2. Click on a command from the resulting menu.

**Using Buttons on Windows**

Most windows contain additional buttons, often near the bottom of the window. These buttons serve as shortcuts to frequently performed functions or frequently visited windows from that window. The functions available through these buttons are often also found in menus.

**Partial List of Buttons and Their Functions**

- **Add**
  This button adds information to certain windows. To save the information to the database, you also need to click on the **Save** button.

- **Cancel**
  If changes have not been saved when you click on the **Cancel** button, the following message displays:
  
  “Changes have not been saved.  
  *Do you want to Cancel?”*

  - Click on the **Yes** button to close the window without saving the information.
  - Click on the **No** button to leave the window open; all changes remain pending.

- **Clear**
  This button clears detail fields from certain windows, or search criteria from search windows.

- **Close**
  This button closes the window.

- **Delete**
  This button deletes information from the database.

- **Detail…**
  This button opens a window with detailed information for a selected item.

- **Modify**
  This button modifies existing information on certain windows or tabs. To save the information to the database, you need to click on the **Save** button.
**New**  This button creates a new detail window with blank data entry fields.

**OK**  Use this button to respond to a message window and return to the previous window. This button is also used to accept a selection from a list.

**Save**  This button stores new or modified information to the database.

**Search**  This button performs a search, displaying all records that match the search criteria.
Managing Your Workload

CONNECTIONS provides tools to help you manage your caseload. These tools include the Assigned Workload and the To-Do Lists.

The Assigned Workload is your “gateway” in CONNECTIONS to performing and documenting your work on the stages assigned to you. Each of your assignments is listed on your Assigned Workload. This information is organized and available for you to fulfill the responsibilities for each stage and case efficiently.

The To-Do List supports the completion of timely work required by regulations. Since more than one worker may be involved in completing work on a stage, the To-Do List can assist with communication. The To-Do List helps workers manage the shared responsibility that often occurs in case, particularly between a Caseworker assigned to a Family Services Stage (FSS) and that Caseworker’s supervisor, who may be required to provide internal review of casework.

Managing Your Assigned Workload

The Assigned Workload is an important workload management tool in CONNECTIONS. It lists all of the stages assigned to you, along with basic information about them, such as the stage/case name, when it was assigned to you, etc. You can sort your Assigned Workload in different ways to organize the work you need to do.

New assignments are highlighted in gray and displayed at the top of the Assigned Workload when it is initially opened. They remain highlighted until you display the case information on screen. New assignments do not automatically display on the Assigned Workload if it is open at the time of the assignment. It is necessary to refresh the workload for these assignments to appear. To refresh the Assigned Workload, click on the Refresh button.

### Step-by-Step:
**Opening the Assigned Workload**

The following columns on the Assigned Workload provide an abbreviated view of relevant information about each stage assigned to you.

! This column displays an exclamation point (!) if a case has been marked “sensitive.” A case is usually marked sensitive if it contains allegations of suspected child abuse or maltreatment by an employee of the State Central Register (SCR) or a Local District or Voluntary Agency child welfare services worker. Occasionally, a Local District may choose to mark a high-profile case as sensitive (such as a case involving a celebrity or other public figure). Workers need to treat sensitive cases with special handling to guard confidentiality.

Role This column denotes your assigned role in the stage. The roles that display depend on the type of stage.

For CPS Investigation and FAD stages, the following roles are available:
- “PR” indicates that you are the Primary worker for the stage.
- “SE” indicates that you are the Secondary worker for the stage.

For FSS stages, the following roles are available:
- “CM” indicates that you are the Case Manager for the stage.
- “CP” indicates that you are the Case Planner for the stage.
- “CW” indicates that you are a Caseworker assigned to the stage.
- “WM” indicates that you are the CPS Worker/Monitor for the stage.

Stage Name The Stage Name is the name by which the stage is identified in CONNECTIONS. Stages are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. ACS policy for CPS-originated cases; however, is to assign Stage Names based on the alleged subject. In an FSS/CCR (Child Case Record) stage, the Line 1 person is the solitary child in the CCR.

County This column displays a code representing the Local District whose caseworker has Primary (for CPS stages) or Case Manager (for FSS stages) assignment for the stage. For FAD stages, the County Code indicates the county where the foster home is located.

Zone This column displays a code for New York City addresses only, specifying a geographical subdivision within a particular borough.

Stage This column denotes the stage of service the selected item represents. One of the following stage types will display: INV, INT, FSI, FSS or FAD.
Type: This column displays the type of stage (e.g., “CWS” for a Child Welfare Services stage, “OTI” for an Out-of-Town Inquiry, “CCR” for a Child Case Record).

Start: This column displays the Stage Start Date, which is based on the Intake start date. For a FAD stage, the Stage Start Date is the date on which the foster home was created.

Assigned: This column denotes the date the stage was assigned to the worker.

Unit: This column indicates the unit to which the worker is assigned.

Stage ID and Case ID: The Stage ID and Case ID numbers are unique, system-generated identification numbers assigned to stages and cases, respectively.

The Assigned Workload for ACS caseworkers (New York City) displays three additional columns:

HPF: This column indicates the ranking of the High Priority safety factor associated with the stage. The lower the number, the higher the ranking. High Priority factors are determined by the system and are calculated from the type of allegations made, the age of the child and the safety factors selected. This affects CPS INV stages only. It does not carry forward to FSS stages.

*: An asterisk (*) in this column indicates that the stage has more than one High Priority factor.

CD: This column displays the Community District (CD) code for the address associated with the stage.

Six buttons also display at the bottom of the Assigned Workload:

Tasks...: This button opens the Family Services Stage window for the selected stage. If no stage is selected, or if more than one stage is selected, this button disables. (For CPS INT or INV stages, or for FAD stages, this button opens the Task List for that stage.)

Assign...: This button opens the Assign window for the selected stage(s). If no stage is selected, this button disables.

Accept: Use this button to accept the selected new Intake assignment. This button disables if no stage is selected, the selected stage is not an INT or FSI stage, or the worker has already accepted the INT or FSI stage. It is also disabled for Voluntary Agency workers.
Reject

Use this button to reject the selected new Intake assignment. This button disables if no stage is selected, the selected stage is not an INT or FSI stage, or the worker has already accepted the INT or FSI stage. For CPS INT stages, reports are rejected only for incorrect jurisdiction; rejected reports are returned automatically to the SCR for review and reassignment. For FSI stages, rejected intakes are returned automatically to the Voluntary Agency worker who submitted the FSI for Local District acceptance.

Refresh

This button refreshes the Assigned Workload to display new assignments that have been received since the last time the Assigned Workload was opened or refreshed. New assignments do not automatically display on the Assigned Workload if it is open at the time of the assignment. You need to refresh your workload for these assignments to appear.

Close

Use this button to close the Assigned Workload.

Sorting the Assigned Workload

Your Assigned Workload may have more stages than are visible on the window at one time. You may need to arrange the data in the list to find a particular stage. You can change the display order of your assignments on the Assigned Workload by using the Sort menu. The following sorts are available:

- **Case**
  Sorts assignments by Case ID number (from lowest to highest).

- **Alphabetical**
  Sorts assignments in alphabetical order by Stage Name.

- **Stage of Service, Stage Name**
  Sorts assignments by Stage of Service (e.g., INT, INV, FSI, FSS), then alphabetically by Stage Name.

- **County**
  Sorts assignments by County code, then alphabetically by Stage Name.

- **Chronological**
  Sorts assignments by Start date, earliest (oldest) date first. If two or more stages have the same Start date, a secondary sort is performed by Stage ID, with Stage IDs listed from lowest to highest.

- **Reverse Chronological**
  Sorts assignments in reverse order by Start date, most recent (latest) date first. If two or more stages have the same Start date, a secondary sort is performed on Stage ID, with Stage IDs listed from highest to lowest.

- **Date Assigned**
  Sorts assignments in order of the date on which the stage was assigned to the worker. If two or more stages have the same Date Assigned, a secondary sort is performed on Stage ID, with Stage IDs listed from lowest to highest.
Step-by-Step: Sorting the Assigned Workload

1. Click on the WORK button on the CONNECTIONS Toolbar. The Assigned Workload displays.

2. On the Assigned Workload, click on the Sort menu. The sort commands display.

3. Click on a sort command to select it. The Assigned Workload displays according to the sort command you selected.

4. To change the sort, click on the Sort menu again and select another sort command.

5. To return the sort to the default setting, click on the Refresh button at the bottom of the Assigned Workload.

Filtering the Assigned Workload

The Workload Filter… command on the Options menu opens the Workload Filtering window. You can use this window to view a sub-set of assignments from the Assigned Workload. This is especially helpful if you have a very long list of assignments.

Your Assigned Workload can be filtered according to Stage ID, Case ID and Match Retrieve by Stage Name. Once the filter is in place, the title bar on the Assigned Workload reads:

Assigned Workload - <worker’s name> (Filtered)

Step-by-Step: Filtering the Assigned Workload

1. From the Assigned Workload, click on the Options menu and select the Workload Filter… command. The Workload Filtering window displays.

2. Enter information in the Stage ID, Case ID or Match Retrieval by Stage Name field.

3. Click on the Search button. The Assigned Workload (Filtered) displays the results of the filter.

4. To remove the filter from the Assigned Workload, click on the Refresh button. The Assigned Workload displays at the default setting.

A minimum of two characters (which must not be ALL CAPS) of the Stage Name must be entered in the Match Retrieved by Stage Name field to enable that particular filter.
The Family Services OCI Report

The Family Services Open Caseload Inquiry (OCI) Report is a valuable tool that lists and identifies the status of FASPs for FSS stages on a worker’s caseload.

Step-by-Step: Generating the Family Services OCI Report

1. On the Assigned Workload, click on the Reports menu and select Family Services OCI by Worker. The following message displays: “The Report has been launched. Check Report List Window.”

2. Click on the OK button.

3. Click on the Close button to close the Assigned Workload.

4. Click on the RPRTS button on the CONNECTIONS Toolbar. The Report List displays.

5. Select the OCI Report you just generated. Make sure the value in the Status column is “DONE.” If the status is “PEND” or “RUN,” click on the Refresh button.

6. Click on the Open button. The report opens as a Microsoft Word document.

7. To print the report, click on the Print button. —OR— Click on the File menu and select the Print command.

8. To close the window, click on the File menu and select Close. The Report List displays.

9. To close the Report List, click on the Close button.
Using Staff and Case To-Do Lists

CONNECTIONS sends you To-Do’s to notify you of actions you must take on an assigned stage, and of events (such as decisions, new assignments, approvals, rejections and stage closings) in a stage. You can also send To-Do’s to yourself and others.

These To-Do’s appear on the Staff To-Do List and the Case To-Do List. The Staff To-Do List contains all To-Do’s for a specific worker. The Case To-Do List contains all To-Do’s associated with a particular case, regardless of assignment.

To-Do Lists are useful workload management tools in CONNECTIONS. The lists provide you with information about a particular stage. You can also organize your To-Do’s, keep the lists current by deleting outdated To-Do’s, and reassign To-Do’s that should be handled by another worker.

Types of To-Do’s

There are three types of To-Do’s:

- **Alert**  
  Alert To-Do’s are created by CONNECTIONS to notify workers that something has happened or needs to happen. For example, you are sent an Alert To-Do when you receive a new assignment. Alert To-Do’s are identified by an “A” in the Type column of a To-Do List. You can delete Alert To-Do’s at any time. Because they are not directly task-related, you cannot navigate directly from Alert To-Do’s to task-related windows.

- **Reminder**  
  Reminder To-Do’s are created by CONNECTIONS users and are not related to a task from the Task List. You might create this kind of To-Do to remind yourself of an upcoming appointment. You can also send Reminder To-Do’s to other people. If confidential information must be sent from one worker to another, it should be accomplished by sending a Reminder-To-Do, rather than using an e-mail message. Reminder To-Do’s are identified by an “R” in the Type column of a To-Do List. Reminder To-Do’s can be deleted at any time. Because they are not directly task-related, you cannot navigate directly from Reminder To-Do’s to task-related windows.

- **Task**  
  Task To-Do’s can be either system- or user-generated to notify workers that there is a task they must complete. Task To-Do’s are identified by a “T” in the Type column of a To-Do List. System-generated Task To-Do’s cannot be deleted. The only way to remove a system-generated Task To-Do from your Staff To-Do List is to complete the Task.

  Creating a *user*-generated Task To-Do can be helpful if you need another worker to complete a task for your stage. To remove a user-generated Task To-Do, open the To-Do Detail window and record the date the task was completed. The only user-generated Task To-Do available for an FSS stage is “Create Progress Notes.” (See Module 7.)

  An example of a *system*-generated Task To-Do is one reminding you to complete a Safety Assessment by a particular due date. You can navigate to task-related windows from a Task To-Do by selecting it from the list and clicking on the Navigate... button.
Step-by-Step: Viewing To-Do's on the Staff To-Do List

1. Click on the TO-DO button on the CONNECTIONS Toolbar.
   The Staff To-Do List displays.
2. Click on a To-Do to select it from the list.
3. Click on the Detail… button.
   The To-Do Detail window displays for the selected To-Do.
4. To close the To-Do Detail window, click on the Cancel button.
   The Staff To-Do List displays.
5. To close the Staff To-Do List, click on the Close button.

By default, the Staff To-Do List is sorted by date and includes To-Do’s with due dates up to seven (7) days into the future. New To-Do's appear at the bottom of the list. You can change the way they are sorted (see “Sorting To-Do Lists” on page 1-27), but To-Do’s revert to the default sort each time you open the window.

Step-by-Step: Viewing To-Do’s on the Case To-Do List

1. Click on the WORK button on the CONNECTIONS Toolbar.
   The Assigned Workload displays.
2. Click on a stage to select it.
3. Click on the Options menu on the Assigned Workload and select Case To-Do’s.
   The Case To-Do List displays with To-Do’s for the selected case. If the selected case has multiple stages, To-Do’s display for every stage of the case. If the Case To-Do command is disabled, the stage has not been accepted. Accepting and rejecting assignments is covered on page 1-21.
4. Click on a To-Do to select it from the list.
5. Click on the Detail… button.
   The To-Do Detail window displays for the selected To-Do.
6. To close the To-Do Detail window, click on the Cancel button.
   The Case To-Do List displays.
7. To close the Case To-Do List, click on the Close button.
   The Assigned Workload displays.
Navigating from Task To-Do’s

From a Task To-Do, you can navigate directly to the window needed to complete the task. For example, if you receive a system-generated Task To-Do notifying you that the Safety Assessment is due, you can navigate directly to the Safety Assessment window for that stage. This feature is available only for Task To-Do’s.

Step-by-Step: Navigating from Task To-Do’s

1. Open the Staff To-Do List or Case To-Do List. See “Viewing To-Do’s on the Staff To-Do List” or “Viewing To-Do’s on the Case To-Do List” on page 1-26.
2. Click on a Task To-Do to select it from the list. The Navigate… button enables.
3. Click on the Navigate… button. The task-related window associated with the selected To-Do displays.
4. If you make changes on that window, save your work by clicking on the Save button.
5. To close the window without saving changes, click on the Cancel or Close button. The To-Do List displays.

Sorting To-Do Lists

You can sort To-Do Lists to make them easier to use and maintain. These sorts help you prioritize your work in CONNECTIONS. The tables below illustrate the sorts available on the Staff To-Do List and the Case To-Do List.

Staff To-Do List Sorts

<table>
<thead>
<tr>
<th>Sort Name</th>
<th>Primary Sort</th>
<th>Secondary Sorts</th>
</tr>
</thead>
<tbody>
<tr>
<td>To-Do Type</td>
<td>Sorts by type of To-Do.</td>
<td>Items of the same type are sorted by date, then by Stage ID.</td>
</tr>
<tr>
<td>Event Status</td>
<td>Sorts by Event status (NEW, PROC, PEND, REJT, COMP).</td>
<td>Items with the same status are sorted by type, then by date.</td>
</tr>
<tr>
<td>Date</td>
<td>Sorts in ascending order by date.</td>
<td>Items with the same date are sorted by type, then by Stage ID.</td>
</tr>
<tr>
<td>Case Name</td>
<td>Sorts alphabetically by Case Name.</td>
<td>Items with the same Case Name are sorted by Stage ID, then by type, then by date.</td>
</tr>
<tr>
<td>Created By</td>
<td>Sorts alphabetically by the To-Do creator’s initials.</td>
<td>Items with the same creator are sorted by type, then by date.</td>
</tr>
</tbody>
</table>
## Case To-Do List Sorts

<table>
<thead>
<tr>
<th>Sort Name</th>
<th>Primary Sort</th>
<th>Secondary Sorts</th>
</tr>
</thead>
<tbody>
<tr>
<td>To-Do Type</td>
<td>Sorts by type of To-Do.</td>
<td>Items with the same type are sorted by date, then by Stage ID.</td>
</tr>
<tr>
<td>Event Status</td>
<td>Sorts by Event status (NEW, PROC, PEND, REJT, COMP)</td>
<td>Items with the same status are sorted by type, then by date.</td>
</tr>
<tr>
<td>Date</td>
<td>Sorts in ascending order by date.</td>
<td>Items with the same date are sorted by type, then by date.</td>
</tr>
<tr>
<td>Stage ID</td>
<td>Sorts by Stage ID.</td>
<td>Items with the same Stage ID are sorted by type, then by date.</td>
</tr>
<tr>
<td>Assigned To</td>
<td>Sorts alphabetically by the initials of the worker to whom the To-Do is assigned.</td>
<td>Items with the same assignees are sorted by type, then by date.</td>
</tr>
<tr>
<td>Created By</td>
<td>Sorts alphabetically by the To-Do creator’s initials.</td>
<td>Items with the same creator are sorted by type, then by date.</td>
</tr>
</tbody>
</table>

### Step-by-Step: Sorting To-Do Lists

1. Click on the **Sort** menu and select a sort command.  
   The To-Do List displays in the order of the selected sort command.

2. To change the sort order, click on the **Sort** menu again and select another sort command.

### Searching for To-Do’s

When first opened, the To-Do List includes all outstanding To-Do’s created before the current date, as well as To-Do’s that will be due up to seven days into the future. You can plan beyond that seven-day period, and extend this date by completing a search within the To-Do List.

### Step-by-Step: Searching for To-Do’s

1. Click on the **From** date field at the top of the To-Do List and enter the date from which you want to start your search.

2. Press the **Tab** key to move to the **To** field and enter the date through which you want to end your search.

3. Click on the **Search** button.  
   To-Do’s display that fall within the selected time period.
**Deleting Alert and Reminder To-Do’s**

It is strongly recommended that you delete Alert and Reminder To-Do’s that you no longer need. Otherwise, your Staff To-Do List will become so long that you may have difficulty finding the To-Do’s you need.

You can only delete Alerts and Reminders. Task To-Do’s received from another worker can be removed by recording a Completed Date on the To-Do Detail window. You cannot delete system-generated Task To-Do’s. Once completed, these To-Do’s are removed from the list automatically.

---

**Step by Step: Deleting Alert and Reminder To-Do’s**

1. From the Staff To-Do List, click on the Alert or Reminder To-Do you want to delete. To select multiple Alert or Reminder To-Do’s, click on each one. If you inadvertently select a To-Do that you do not want to delete, click on it again to deselect it.

2. Click on the File menu and select Delete. The selected To-Do is removed from the list. You cannot delete system-generated Task To-Do’s.

3. To close the Staff To-Do List, click on the Close button.

---

**Reminder To-Do’s**

You can create Reminder To-Do’s from either the TO-DO button or the WORK button on the CONNECTIONS Toolbar.

---

**Step-by-Step: Creating a Reminder To-Do**

1. Click on the TO-DO button on the CONNECTIONS Toolbar. The Staff To-Do List displays.

2. Click on the New button. The To-Do Detail window displays. The Short Desc. field highlights in yellow, indicating that comments are required in that field.

3. Record a brief description in the Short Desc. field. Examples of the type of information to include in this field are the Stage Name, Stage ID or Case ID number, a topic and your name (e.g., “Mary Smith - Stage #98765432 – Review Progress Notes by Darryl Wilson”).

4. Add an additional explanation, if necessary, in the Description/Notes field.
5 If appropriate, record the correct due date in the Due field.

6 If you are sending the Reminder To-Do to yourself, skip to Step 11.
   --OR--
   If the Reminder To-Do is for another person (e.g., your supervisor), click on the Staff button.
   The Staff Search Criteria window displays.

7 Enter that person’s last name in the Last name field. The Search button enables.
   If you are searching for a worker outside your agency, enter that worker’s agency code in the Agency field.

8 Click on the Search button. The Staff List displays with the results of the search.

9 Select the appropriate worker from the Staff List.

10 Click on the OK button. The To-Do Detail window displays, with the selected staff person’s name in the Assigned To field.

11 Click on the Save button. The new To-Do is saved and displays on the Staff To-Do List of the person to whom the To-Do was sent.

12 To exit the Staff To-Do List, click on the Close button.
Using the Event List

There are two types of Event Lists in CONNECTIONS—one for a stage and one for a case. Each Event List contains a list of CONNECTIONS tasks and case-/stage-related activities that have been completed or are in progress. Events are recorded on the list, for example, when you receive a new assignment, or when work you’ve submitted is accepted or rejected.

You can use the Event List to keep track of the progress of work on a stage and, in some situations, to view details of specific events (e.g., viewing comments recorded for an approval or accessing information on closed cases). All access to information from the Event List is view-only.

The Event List includes two date columns:

- **Event Date** displays the date an event was completed, as recorded on the specific window or during the events evaluation (e.g., the date that was recorded in the Date field on the Safety Assessment window). If no date was recorded, the Event Date column will be blank for that event.
- **TX Date** signifies the system transaction date, which is the date an event was updated by the worker using one of the Save functions (i.e., Save, Save and Submit, Save and Close, Save and Stay).

### Step-by-Step: Opening the Event List for a Stage

2. Click on a stage to select it.
3. Click on the Options menu and select the Event List… command. *The Event List displays for the selected stage.*

### Step-by-Step: Opening the Event List for a Case

2. Write down the Case ID number from the stage for which you want to view the Event List.
3. If you need to view events for a stage, and neither that stage nor any other stage associated with its corresponding case is on your Assigned Workload, you must first conduct a Case Search and subsequently access the Event List.

   1. Click on the CASE button. *The Case Search Criteria window displays.*
   2. Enter search criteria in the appropriate fields (e.g., Case Name or Case ID). *The Search button enables.*
   3. Click on the Search button. *The Case List displays with the search results.*
   4. Click on a case to select it from the Case List. To view the Event List for all stages in the selected case, click on the Options menu and select the Event List… command. To view the Event List for a specific stage within the selected case, continue with Steps 5-7 below.
   5. Click on the Summary button. *The Case Summary window displays.*
   6. Click on a stage to select it from the Case Summary window.
   7. Click on the Events button. *The Event List displays for the selected stage.*

Your ability to access this information is dependent on your system security.
3 Click on the **CASE** button on the CONNECTIONS Toolbar.  
*The Case Search Criteria window displays.*

4 Enter the Case ID number in the **Case ID** field.

5 Click on the **Search** button.  
*The Case List displays the case that matches the search criteria.*

6 Click on the case to select it.

7 Click on the **Events…** button.  
*The Event List displays for the selected case.*

---

For task-related events, you can navigate to detail windows directly from the **Event List**. The information will display in view-only mode.

### Step-by-Step: Navigating from the **Event List**

1. Click on an event to select it from the **Event List**.  
*If there are details to view, the **Detail…** button enables.*

2. Click on the **Detail…** button.  
*The task-related window associated with the selected event displays. For example, if you select an event related to a Safety Assessment, clicking on the **Detail…** button opens the Safety Assessment window in view-only mode.*

3. To close the window, click on the **Cancel** button.  
*The Event List displays.*

### Step-by-Step: Searching for Events

1. Select a stage from the **Assigned Workload**.

2. Click on the **Options** menu and select the **Event Search…** command.  
*The Event Search Criteria window displays.*

3. Enter search criteria in this window. To search by date, enter a date range. To search by event type, select from the list by double-clicking on a type (you can select more than one type).

4. Click on the **Search** button.  
*The Event List displays with events that match the search criteria.*

5. Click on the **Close** button to close the **Event List**.  
*The Event Search Criteria window displays.*

6. Click on the **Close** button to close the **Event Search Criteria** window.  
*The Assigned Workload displays.*
Case Search

When working in a Family Services case, it is important to know about any other stages that may exist in the case, as well as other cases with which an individual may be involved. Performing a Case Search enables you to retrieve historical information about case involvement for the individuals you are currently working with. Keep in mind that if you know the name of the person(s) involved in the case, it may be more effective to conduct a Person Search; from the Person Search results, you can open the Case Summary window to see other cases with which that person was involved. Your ability to see detailed case information is dependent upon your role, your Business Function Profile, the Agency Access rights put in place at your agency, and any other system edits that control access to information to protect the confidentiality of client data. For example, Voluntary Agency workers cannot access information in CPS Intake and Investigation stages.

Case Search is a way to search for a case that is not on your Assigned Workload. This would be a case that you do not have a role in, so you may not be able to view certain pieces of the case based on your security access.

A Case Search is a direct route to case information when you know the Case ID number, Stage ID number or Case Name. When searching by Case Name, the search criteria must exactly match the CONNECTIONS Case Name in order for the search to return a match. Other names in the Case Composition for that case will not return. (For example, if a case is named after Sandra Connors, her daughter Mary will be included in the Case Composition, but will not return a match if the Case Search uses Mary’s name as the search criteria.)

Case List

When a Case Search is conducted, the search results display on the Case List. This window contains the following columns:

<table>
<thead>
<tr>
<th>Column</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>!</td>
<td>An exclamation point (!) in this column indicates that the case is marked “sensitive.”</td>
</tr>
<tr>
<td>Image</td>
<td>A red check mark in this column indicates that one or more stages in the case pre-date the implementation of the CONNECTIONS system; the pre-dated information exists in CONNECTIONS as a scanned image.</td>
</tr>
<tr>
<td>Mrg</td>
<td>An “M” in this column indicates that the case was involved in a Case Merge. An “S” indicates that the case was involved in a Case Split.</td>
</tr>
<tr>
<td>Status</td>
<td>“CLD” in this column indicates that the case is closed. Open cases are designated with “OPN” in this column.</td>
</tr>
</tbody>
</table>
**Case Name**  
The Case Name is the name by which the case is identified in CONNECTIONS. Cases are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. ACS policy for CPS-originated cases, however, is to assign Case Names based on the alleged subject. In an FSS/CCR (Child Case Record) stage, the Line 1 person is the solitary child in the CCR. (A CCR is a case for a child who has been legally freed for adoption.)

**Case ID**  
This column contains the unique, system-generated case identification number.

**District/Agency**  
This column lists the name of the Local District that has Primary investigative or Case Management responsibility for the case.

**Zone**  
This column, which is only populated for cases in which the Primary address is within the five boroughs of New York City, indicates the geographical borough subdivision corresponding to the case address.

**Case Type**  
This column displays “SVC” for all CPS Intake and Investigation stages, as well as for Family Services Intakes and Family Services Stages (including a Child Case Record). Foster and adoptive home stages are designated with “FAD” in this column.

**Primary**  
This column lists the name of the Primary worker (or the Case Manager) for SVC cases and Local District-authorized FAD cases; for Voluntary Agency-authorized FAD cases, the name of the agency displays in this column.

---

**Conducting Case Searches**

All Case Searches are conducted from the Case Search Criteria window, which is opened via the CASE button on the CONNECTIONS Toolbar.

**Searching by Case ID or Stage ID Number**

The Case ID and Stage ID numbers are unique, system-generated, 8-digit identification numbers. Using either the Case ID or Stage ID in the search criteria is a direct method for conducting a Case Search *(if you have the correct Case ID or Stage ID number)*, since only one case will display in the search results on the Case List.

Entering a Case ID or Stage ID disables all other search fields on the Case Search Criteria window. The Case List displays the case that contains the Case ID or Stage ID entered in the search criteria.
Step-by-Step:
Conducting a Case Search by Case ID or Stage ID Number

1. Click on the CASE button on the CONNECTIONS Toolbar. 
The Case Search Criteria window displays.
2. Enter the Case ID number in the Case ID field (or the Stage ID number in the Stage ID field).
3. Click on the Search button.
The Case List displays with the only case that matches the search criteria.

Searching by Case Name
You can also conduct a Case Search using the Case Name in the search criteria. When conducting a Case Search by the Case Name, remember that this is the name of the case, not just the name of any individual associated with the case. Most familial cases use the mother’s name for the Case Name. In addition, the search criteria you enter must be an exact match to information in the database.

Conducting a Case Search by Case Name

1. Click on the CASE button on the CONNECTIONS Toolbar.
The Case Search Criteria window displays.
2. Enter the first and last name of the case in the fields of the Case Name Search section on the Case Search Criteria window.
3. To narrow your results to a specific county, click on the drop-down arrow for the County field and select from the resulting list. (Keep in mind that narrowing your search limits the results, which may miss the case you are searching for; always start with a name-only Case Search.)
4. Click on the Search button.
The Case List displays, containing a list of cases which match the search criteria.

Conducting a Case Search by WMS Number
The Welfare Management System (WMS) Case Number is generated by WMS to identify cases for which the services are being provided. Since the same number can be used by two Local Districts, a combination search must be completed by entering the WMS Case Number and selecting the Local District from the drop-down list.

Conducting a Case Search by WMS Number

1. Click on the CASE button on the CONNECTIONS Toolbar.
The Case Search Criteria window displays.
2. Enter the WMS number in the WMS Number field.
The District field enables.
3 Click on the drop-down arrow for the District field and select the district code from the resulting list.
    The Search button enables.
4 Click on the Search button.
    The Case List displays with the only case that matches the search criteria.

Viewing Detailed Information about a Case

Once you have conducted a Case Search, you may need to view more detailed information about the case. The Case Summary window, Case Composition window and Event List provide detailed, case-specific information. These windows can be accessed from the Case List.

Your individual security profile and your role in the case determine the extent of your access to case information. If the case you are viewing is outside your district (and you have no implied role) you are only able to view the Case Composition window. Voluntary Agency staff cannot view information in CPS Intake and Investigation stages.

Case Summary

The Case Summary window lists all of the stages in a specific case and provides a brief overview of case information, including the status of the case (open or closed).

Step-by-Step:
Viewing Detailed Information about a Case:
Case Summary Window (from the Case List)

1 Click on a case from the Case List to select it.
2 Click on the Summary button.
    The Case Summary window displays with a list of all stages in the selected case. For CPS INV stages, a check mark in the SEC column on the Case Summary window indicates that a secondary assignment has been made to the stage. If the case being displayed is closed, a check mark indicates the existence of an Historical Secondary worker. You can access both person- and case-specific information from here by selecting a stage and clicking on the Options menu, then selecting an enabled command to navigate to related windows.
    The Case Summary window also includes a column labeled CD, which displays the Community District for New York City stages.
3 To close the Case Summary window, click on the Close button.
    The Case List displays.

Step-by-Step:
Viewing Detailed Information about a Case:
Case Summary Window (from the Assigned Workload)

1 Click on a stage from the Assigned Workload to select it.
2 Click on the Options menu and select the Case Summary... command.
    The Case Summary window displays with a list of all stages in the selected case.
    (See detailed information about this window in Step 2 of the previous set of step-by-step instructions above.)
3 To close the Case Summary window, click on the Close button.
    The Case List displays.
**Event List**

The *Event List* for a case provides an historical list of significant case activities, including current and historical workers assigned to any stages of a case, the date(s) when necessary letters were generated and the date on which certain tasks were approved. This information can help you obtain a comprehensive view of case activity; for example, stage creation and closing dates.

There are two types of *Event Lists* in CONNECTIONS: one contains a list of events for a particular *case*; the other lists the events for a particular *stage* within a case. The *Events* button at the bottom of the *Case List* opens the *Event List* for the selected case.

---

**Step-by-Step:**

**Viewing Information on the Event List (Accessed from the Case List)**

1. Click on a case to select it from the *Case List*.
2. Click on the *Events* button.
   *The Event List displays a list of all events in the case.*
3. Click on the *Close* button to close the *Event List*.
   *The Case List displays. If you return to the Event List after viewing other windows, the Event List displays the previous scroll position and the previously selected event remains highlighted.*

---

**Step-by-Step:**

**Viewing Information on the Event List (Accessed from the Assigned Workload)**

1. Click on a stage to select it from the *Assigned Workload*.
2. Click on the *Options* menu and select the *Events...* command.
   *The Event List displays a list of all events in the selected stage.*
3. Click on the *Close* button to close the *Event List*.
   *The Assigned Workload displays. If you return to the Event List after viewing other windows, the Event List displays the previous scroll position and the previously selected event remains highlighted.*
Resource Searches

In the course of your casework, you may need to locate information about agencies, facilities or providers to arrange services for an individual associated with one of your cases. If you know the name of the resource, you can conduct a Resource Search using the resource’s name in the search criteria. If you are looking for a resource that matches certain service and/or location characteristics, you can conduct a Resource Search using the resource’s characteristics in the search criteria.

The Resource Directory is considered the “yellow pages” of CONNECTIONS. It contains information about providers of child welfare-related services throughout New York State. Resource Directory searches (other than those that search by resource characteristics) can be conducted using one of these search types:

**Phonetic Name**

Resource Search defaults to the Phonetic Name search type, which returns matches that *sound similar* to the search criteria. This usually produces the largest pool of results. You can use Phonetic Name search even if the resource’s name is not spelled correctly. The **Resource Name** field is required to conduct a Phonetic Name search.

**Phonetic Address**

Phonetic Address Search returns results that *sound similar* to the information entered in the Address section. The **Street 1** field is required to conduct a Phonetic Address search. When the Phonetic Address search type is selected, all non-address fields disable. All address fields are enabled, but search criteria must be entered in the **Street 1** field to initiate a Phonetic Address Search.

**Exact/Directory**

An Exact/Directory search returns results that *exactly* match the search criteria. You can use Exact search when you know the exact spelling of the Resource name you’re searching for. This search type also enables you to search for resources based on their characteristics, rather than by name. You can also search by Resource ID (RID), the unique system-generated identification number for that particular resource; or by the Vendor ID (VID).

Each resource has a designated **Resource Type**. Six Resource Types exist in the Resource Directory:

**Agency**

A Local District or a Voluntary Agency.

Only OCFS can record and maintain agencies in CONNECTIONS. Each agency has a three-character agency code and CONNECTIONS-assigned Resource Identification (RID) number. The voluntary child caring agencies have been assigned Vendor Identification (VID) numbers. Agencies that operate facilities or certify/approve foster homes are displayed as “Primary.” They are able to submit Database Checks to the SCR.
Facility is a location that provides professional child welfare services:
- Foster and Adoptive homes
- OCFS congregate care facilities, such as institutions and group homes
- OCFS, OMH and OMRDD facilities
- OCFS preventive facilities (converted and newly entered by districts)

Provider is an individual or organization that provides services for the Local District:
- Day care
- Foster care
- Housing (preventive)
- Adoption

Each Provider is maintained exclusively in CONNECTIONS by the district displayed as the Maintainer for that provider.

Hotline/Helpline is the Hotline/Helpline and Law Enforcement Resource Types are maintained by Local Districts. They are functional, but may not always be consistently maintained in every Local District.

School is the School Resource Type is maintained by the state and includes public schools.

**Searching for a Resource by Characteristics**

When you need to locate an agency, facility or provider in order to arrange services for a person associated with one of your stages, you may find it more helpful to conduct a Resource Search by using the desired resource characteristics in the search criteria. For example, if you want to locate a facility that offers therapeutic foster care for adolescents, you can use these criteria for your search. You can also narrow your search by specifying a geographical area.

When using resource characteristics as search criteria, the fields that enable in the Resource Search Criteria window depend on the Resource Type that is selected.

**Step-by-Step: Searching for a Resource by Characteristics**

1. Click on the RSRC button on the CONNECTIONS Toolbar. The Resource Search Criteria window displays.
2. Click on the drop-down arrow for the Search Type field and select Exact/Directory from the resulting list.
3. Click on the drop-down arrow for the Resource Type field and select from the resulting list.
4. Click on the drop-down arrow for the field which contains the characteristic you want to use in your search criteria, then select from the resulting list.

   (For example, if you are searching for a Facility, the Facility Type/LOC field enables; select from the Facility Types available in the drop-down list.)
5 As you make selections from a field, other fields may enable; continue selecting from each enabled field’s drop-down list until the Search… button enables. 
At this point, you do not need to enter any other search criteria, but you can narrow your search by entering more criteria.

6 Click on the Search button. 
The Resource List displays with the results of your search. Use the horizontal and vertical scroll bars to see information beyond what is displayed on screen at one time.

**Viewing Detailed Information about a Resource**

When CONNECTIONS performs a Resource Search, results display on the Resource List. The Resource List provides summarized information about a resource, including its status, Facility Type/Level of Care (LOC), Resource ID number, Vendor ID (VID) number and authorizing agency.

You can select a resource from the Resource List and view detailed information (including the Service Area and comments), as well as update information (if you have sufficient security rights to maintain information for that resource) by opening the Resource Detail window.

<table>
<thead>
<tr>
<th>Step-by-Step: Viewing Detailed Information About a Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Click on a resource from the Resource List to select it.</td>
</tr>
<tr>
<td>2 Click on the Detail… button. The Resource Detail window displays for the selected source. You can view a variety of information about the resource by clicking on the Address…, Phone…, Facility…, Svc Area… and Comments… buttons.</td>
</tr>
<tr>
<td>3 To close the Resource Detail window, click on the Cancel button. The Resource List displays.</td>
</tr>
<tr>
<td>4 To close the Resource List, click on the Close button. The Resource Search Criteria window displays.</td>
</tr>
<tr>
<td>5 To close the Resource Search Criteria window, click on the Close button.</td>
</tr>
</tbody>
</table>
**Information on the Resource List**

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource Name</td>
<td>The name of the resource.</td>
</tr>
<tr>
<td>VID</td>
<td>The Vendor ID number. All resources must have a VID to receive payment via the Benefits Issuance Control System (BICS).</td>
</tr>
<tr>
<td>Facility Type/LOC</td>
<td>If the resource is a facility, the facility type or Level of Care (LOC) displays in this column; otherwise, the column is blank.</td>
</tr>
<tr>
<td>Status</td>
<td>The resource’s current status (Active or Inactive).</td>
</tr>
<tr>
<td>Auth By</td>
<td>The authorizing state agency (e.g., OMH, OMRDD, State Health), if required, that has authorized the resource.</td>
</tr>
<tr>
<td>Maintainer</td>
<td>The Agency ID/Jurisdiction—AST (OCFS staff), SDSS (Local District staff), or Voluntary Agency—that has access to maintain the resource in CONNECTIONS. This field is “read only.”</td>
</tr>
<tr>
<td>Street 1, City and County</td>
<td>The resource’s street address, city and county.</td>
</tr>
<tr>
<td>CD</td>
<td>The Community District (NYC only).</td>
</tr>
<tr>
<td>Phone and Ext</td>
<td>The resource’s phone number and extension.</td>
</tr>
<tr>
<td>Rsrc Type</td>
<td>The resource type (e.g., Agency, Facility, Provider).</td>
</tr>
<tr>
<td>Resource ID</td>
<td>The resource’s unique system-generated identification number.</td>
</tr>
<tr>
<td>Agency ID</td>
<td>The 3-character identification code for the authorizing agency.</td>
</tr>
<tr>
<td>Sub-Agency</td>
<td>A code that displays for New York City direct Foster and Adoptive homes only.</td>
</tr>
<tr>
<td>FAD Facility</td>
<td>If the facility is a Certified Foster Home, Certified Foster/Adoptive Home, or Approved Relative Foster Home, “Y” displays in this column; otherwise, this column is blank.</td>
</tr>
<tr>
<td>Last Update By</td>
<td>The name of the worker who last updated the resource.</td>
</tr>
<tr>
<td>Phone Number</td>
<td>The phone number of the worker listed in the Last Update By column.</td>
</tr>
<tr>
<td>Case ID</td>
<td>The unique, system-generated case identification number; displays for FAD homes only.</td>
</tr>
<tr>
<td>D/V</td>
<td>This column indicates whether the resource is a Voluntary Agency (V) or a Local District (D).</td>
</tr>
<tr>
<td>C</td>
<td>This column denotes whether or not Comments are recorded on the Resource Detail window.</td>
</tr>
</tbody>
</table>
Staff Search and Office Search

During the course of your work, you may occasionally need to contact staff persons in other units or districts/agencies, in order to obtain background information about the members of a household. You may also need to assign a To-Do to a staff person or make case assignments within your own unit or in a Local District. By using Staff Search and Office Search, CONNECTIONS users can obtain the contact information necessary to perform these tasks.

Staff Search is the most effective method for finding contact information about a staff person. If you do not know the staff person’s name, but you know the agency, Office Search is the most effective method for locating contact information.

Conducting a Staff Search

All staff searches are conducted from the Staff Search Criteria window. This window is accessible from the CONNECTIONS Toolbar or from specific windows (e.g., Assign, To-Do Detail). The manner in which you open the Staff Search Criteria window depends upon the purpose of your search:

- To obtain contact information about a staff person, conduct a Staff Search from the CONNECTIONS Toolbar.
- To search for a staff person in order to send a To-Do, search from the To-Do Detail window.
- To search for a staff person in order to assign/reassign a stage, search from the Assign window.

If you are unsure of the exact spelling of a staff person’s name, it is best to search on the first few letters of the last name. You must also include the Agency Code (or Type, Region and County) in the Office section of the Staff Search Criteria window. Staff Searches locate names alphabetically on the list of all staff for a specific agency. This is similar to looking up a name in a telephone book; the search criteria bring you to a specific point in the alphabetical listing of an agency’s staff. For example, a search for “Brown” returns staff members whose last name is Brown, and all other names that follow Brown on the list. If you conduct a Staff Search entering only a “B” in the Last Name field, the resulting list will contain the name of every staff person for that agency whose last name begins with the letter B.

When searching for ACS staff, you must enter at least one letter in the Last Name field.

Workers searching for a staff person in a large agency (e.g., Erie County) might find it helpful to use the Unit section of the Staff Search Criteria window. This can be particularly useful if you know the staff person’s unit but you are not sure of the spelling of the person’s name.

When a Staff Search is complete, the Staff List displays in alphabetical order for the search criteria you entered.
Step-by-Step: Conducting a Staff Search from the CONNECTIONS Toolbar

1. Click on the STAFF button on the CONNECTIONS Toolbar. The Staff Search Criteria window displays. The Agency field defaults to your own agency code and the Active check box is selected.

2. Enter search criteria. Enter the first few letters of the person’s last name. If you are searching for someone outside your agency and you know the agency code, enter it in the Agency field. If you do not know the staff person’s agency code, see the tip box above.

3. Click on the Search button. The Staff List displays with the results of your search.

Viewing Detailed Information About a Staff Person

The Staff Detail window contains detailed information about a staff person, including contact information, his/her supervisor’s name and whether the worker is case assignable.

Staff persons do not have demographic information recorded in CONNECTIONS.

Step-by-Step: Viewing Detailed Information About a Staff Person

1. After conducting a Staff Search, click on a name to select it from the Staff List.

2. Click on the Detail… button. The Staff Detail window displays.

3. To close the Staff Detail window, click on the Cancel button. The Staff List displays.

4. To close the Staff List, click on the Close button. The Staff Search Criteria window displays.

5. To close the Staff Search Criteria window, click on the Close button.
**Conducting a Staff Search from the Assign Window**

When a decision is made to assign a stage to another staff person who is outside of your unit (e.g., for a cross-county assignment), you need to conduct a Staff Search from the Assign window to complete the assignment process.

<table>
<thead>
<tr>
<th>Step-by-Step: Conducting a Staff Search from the Assign Window</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Click on the WORK button on the CONNECTIONS Toolbar. <strong>The Assigned Workload displays.</strong></td>
</tr>
<tr>
<td>2. Click on a stage to select it.</td>
</tr>
<tr>
<td>3. Click on the Assign… button. <strong>The Assign window displays.</strong></td>
</tr>
<tr>
<td>4. Click on the Options menu and select Staff Search Criteria. <strong>The Staff Search Criteria window displays.</strong></td>
</tr>
<tr>
<td>5. Enter the name of the staff person in the appropriate fields in the Person section; enter the Agency code if it is different from your own.</td>
</tr>
<tr>
<td>6. Click on the Search button. <strong>The Staff List displays with the results of the search. (Only case-assignable staff will display.)</strong></td>
</tr>
<tr>
<td>7. Click on the staff person’s name to select it and click on the OK button. <strong>The Assign window displays with the selected staff person included in the Available Staff list at the top of the window.</strong></td>
</tr>
</tbody>
</table>

**Step-by-Step: Assigning a Stage After a Staff Search**

1. On the Assign window, select the role of the staff member (previously selected from the Staff List) by clicking on the Case Manager, Case Planner, Caseworker or CPS Worker/Monitor button, as appropriate. (If the stage being reassigned is a CPS Intake or Investigation stage, or a FAD stage, click on the Primary or Secondary button, as appropriate.) **The selected staff name and role display in the Assignments section of the window.**

2. If you select Primary (CPS Intake and Investigation stages), Case Manager or Case Planner (Family Services Stages), the following message displays: **“This action will remove the current <Primary worker, Case Manager or Case Planner>. Do you wish to continue?”**

3. Click on the Yes button to proceed with the reassignment.

4. If you wish to assign additional staff and/or roles, repeat Steps 4 through 7 in “Conducting a Staff Search from the Assign Window” and Step 1 above.

5. To save the assignment(s), click on the Save button; to close the Assign window without saving, click on the Cancel button. **The Assigned Workload displays.**

6. To exit the Assigned Workload, click on the Close button.
Conducting a Staff Search from the To-Do Detail Window

If you need to send a To-Do to another staff person (e.g., a Reminder To-Do regarding an upcoming court date or a Task To-Do to enable the staff person to assist you with a case), you must conduct a Staff Search from the To-Do Detail window. This window can be accessed from a number of windows, including the Task List and the Assigned Workload. The following instructions open the To-Do Detail window from the Staff To-Do List.

Step-by-Step: Conducting a Staff Search from the To-Do Detail Window

1. Click on the TO-DO button on the CONNECTIONS Toolbar.  
   The Staff To-Do List displays.
2. Click on the New… button.  
   The To-Do Detail window displays.
3. Click on the Staff… button in the upper right corner of the To-Do Detail window.  
   The Staff Search Criteria window displays.
4. Conduct your search.  
   For details about using the Staff Search Criteria window, see “Conducting a Staff Search” on page 1-42.
5. To save the To-Do, click on the Save button; to close the To-Do Detail window without saving, click on the Cancel button.  
   The Staff To-Do List displays.
6. To exit the Staff To-Do List, click on the Close button.
Module 2:  
Family Services Intake

The Family Services Intake (FSI) standardizes Intake documentation as the path to open all services cases.

Information must be recorded in CONNECTIONS before a Family Services Stage (FSS) can be opened. Local District and Voluntary workers who have the proper security rights can record Family Service Intakes. Once a worker records all the required information, the FSI may be stage-progressed by the Local District and a Family Services Stage (FSS) may be opened; or, alternatively, the FSI stage may be closed if services are not to be provided.

Information captured in the FSI includes the following:

- Source of the Intake
- People in need of services
- Type(s) of services being requested
- Presenting concerns
- Issues requiring emergency services  
  (for non-Protective Child Welfare Services)
- Actions necessary to deal with emergency situations  
  (for non-Protective Child Welfare Services)
- A decision concerning the provision or denial of services
- Programmatic Eligibility for Mandated Preventive Services
- Behavioral Concerns and Family Issues (BCFI)  
  (for non-Protective Child Welfare Services)

Navigation

There are different navigational paths to create an FSI. The paths available are contingent on the worker’s role and assigned Business Functions, and whether the stage is originating from a CPS Investigation or a non-Protective Child Welfare request for services. A CPS worker can open an FSI during the Investigation of a CPS report (via the Assigned Workload); an FSI automatically opens upon the approval of a CPS Investigation Conclusion when the CPS stage is closed with an open for services Closure Reason. For non-Protective cases, a worker can create an FSI from the CONNECTIONS Toolbar.

Automatic opening is based on an Investigation Conclusion with one of the following Closure Reasons:

**Unfounded CPS Report:**

- Case Open-Services

**Indicated CPS Report:**

- Case Open-CPS not required
- Case Open-CPS required

A **Record Family Services Intake** event is added to the **Event List** in view-only mode. (For more information about events, see “The Event List” in Module 1: CONNECTIONS Basics.)
### Step-by-Step: Creating the FSI from an Open CPS Investigation

1. Click on the **WORK** button on the CONNECTIONS Toolbar. *The Assigned Workload displays.*
2. Select an INV stage for which you will create an FSI.
3. Click on the **Options** menu and select **Record Family Services Intake**. *The Family Services Intake stage displays on the Assigned Workload.*

### Step-by-Step: Creating an FSI from the CONNECTIONS Toolbar

1. Click on the **Intake** menu.
2. Select the **Record Family Services Intake** command. *The Family Services Intake window displays with the **Intake Source** tab active. You must select an Intake method in order for the source demographic information to enable.*

### Step-by-Step: Viewing an FSI from the Case List

1. Conduct a Case Search to find the case. *The Case List displays.*
2. Select the case from the **Case List**.
3. Click on the **Events** button to open the **Event List** for the selected case.
4. Select the **Record Family Services Intake** event.
5. Click on the **Detail…** button. *The FSI displays in view-only mode with the **Decision Summary** tab active.*

---

For details about the Case Search functionality, see “Case Search” in Module 1: CONNECTIONS Basics.
FSI Security

A Local District or Voluntary Agency worker may initiate an FSI, but the final authorization to provide services requires action by the Local District. Only one worker can be assigned to an FSI at a time. A worker’s role in the stage and assigned Business Functions determine his/her ability to create, modify and/or view an FSI:

<table>
<thead>
<tr>
<th>Create</th>
<th>Maintain</th>
<th>View</th>
</tr>
</thead>
<tbody>
<tr>
<td>• A worker assigned the CREATE FSI Business Function</td>
<td>• The worker assigned to the FSI stage, or in the worker’s hierarchy, or with proper security</td>
<td>• Any worker in the same agency with the VIEW ALL Business Function</td>
</tr>
<tr>
<td>—OR—</td>
<td>—OR—</td>
<td>—OR—</td>
</tr>
<tr>
<td>• A CPS Worker assigned to that CPS Investigation, or anyone with access to that worker’s Assigned Workload</td>
<td>• Any worker with maintain access to the Assigned Workload of the worker signed to the FSI stage</td>
<td>—OR—</td>
</tr>
<tr>
<td></td>
<td>• If the FSI originated from a CPS Investigation, any worker with a historical role in the FSI (CPS worker with a role in the CPS Intake [INT] or INV stage)</td>
<td></td>
</tr>
</tbody>
</table>
The Family Services Intake Window

The FSI is the method by which workers document the reasons for opening a services case (FSS). For both CPS and non-Protective (non-CPS) Child Welfare cases, workers need to explain the family's presenting needs and circumstances that warrant the provision of services and the progression of an FSI to an FSS. For CPS cases, the person demographic information recorded in the CPS Investigation stage carries forward to the FSI, whether the Investigation is Indicated or Unfounded. The Intake Source is system-populated with the Primary worker’s information from the CPS stage (or the Secondary worker, if s/he creates the Intake during an in-process Investigation).

The Family Services Intake window features a standard header, four tabs and various buttons within each tab. The header is always visible when the FSI window is open, regardless of which tab displays. The header includes the Case Name and Sensitive Case indicator, if applicable. The Stage ID and Case ID display in the title bar.
The FSI window contains the following four tabs, which are view-only when the FSI is accessed through the Event List:

**Intake Source**
This tab supports the recording and modifying of demographic information regarding the individual or agency that referred the family for services.

**Narrative**
The Narrative tab captures information supporting the request for services. This tab features an evaluation of behavioral concerns and family issues that were presented or identified.

**Person Demographics**
This tab provides for the recording/modifying of demographic information concerning the individuals/family for whom services are being requested. This tab includes address and phone updates, and the addition or removal of people in the FSI. Workers should conduct person maintenance for data integrity purposes.

**Decision Summary**
This tab is used to record a recommendation regarding whether a Family Services Stage should be opened or if the FSI stage should be closed without opening an FSS. This tab includes a statement about Programmatic Eligibility, application dates, etc.

Within certain FSI tabs (see each respective tab’s section for details), the footer contains standard Save, Cancel and Close buttons; these commands can also be accessed from the File menu. Once an FSI is submitted for review (using the Submit for Review function), the reviewer can modify information in the FSI except for the Intake Source tab and the Narrative. (The Narrative can be added to, but any previous Narrative entries cannot be modified.) When the FSI is submitted to the Local District for acceptance, it cannot be modified unless the Local District worker accepts the FSI; once that occurs, information in the FSI can be modified except for the Intake Source tab and the Narrative. As with the Submit for Review function, the Narrative can only be added to, not modified. If the FSI is reassigned back to a worker by a supervisor or a Local District for more information, the fields are again modifiable.

**The Intake Source Tab**

The Intake Source tab is active when the Family Services Intake window opens. This tab provides for the recording and modifying of demographic information regarding the source of an FSI for non-Protective cases. The source is the person contacting the Local District or Voluntary Agency indicating that a family may require services. This person could be a CPS worker, some other concerned individual, or a member of the family/household.

If the FSI originates from a CPS Investigation, the source is pre-filled based on the worker creating the FSI; this is not modifiable. If the FSI was created from a CPS report, the Name
field pre-fills with the name of the CPS worker who originated the FSI; this information cannot be modified. If the FSI is created at the approval of a CPS Investigation, the Primary worker is the Intake Source.

The worker needs to record as much relevant information (demographics, etc.) about the source as is available, in case any further questions arise with which the source may be able to assist.

Source information captured on this tab includes the following:

- Name, address and phone number
- Agency name (if the source works for a voluntary or other legal agency)
- Intake Method (phone, walk-in, mail/fax or other)
- Source Type

The **Intake Source** tab contains the following fields:

**Date**
This required field indicates the date the Intake was received. The date is populated by the system with the date that the FSI was created. The date is modifiable only if the FSI did not originate from a CPS Investigation.

To change the date, click on the drop-down arrow and select a date from the resulting calendar or record the date in a valid format by clicking in each section (m/dd/yy). It cannot be a future date or earlier than 60 days before the entry date. The date should not pre-date the date that the source requested services.

**Time**
This optional field indicates the time the Intake was received. Time is populated by the system based on the time the FSI was created. The time is modifiable if the FSI did not originate from a CPS Investigation. To record a time, click on the up and down arrows or type the time directly in the field.

**Method**
This required field allows the selection of only one method. Possible choices are phone, walk in, mail/fax or other. If the FSI originated from CPS, this field is populated with “Other” and cannot be modified.

Unless otherwise noted, fields are pre-filled and not modifiable if the FSI originated from a CPS Investigation.
Source Information Section:

**Source Type**
This is a general description of the source. It is a required field and only one type can be selected. If the Intake originated from a CPS Investigation, the **Source Type** is a system-populated field.

Source Types are selected from a drop-down list:
- Attorney/Court/DA
- Concerned Citizen/Neighbor
- Clergy
- CPS Worker/Monitor
- Day Care Provider/Facility
- Family Member
- Foster Parent
- Law Enforcement
- Medical Staff
- Probation Officer
- Therapist/Psychologist/ Psychiatrist
- School Personnel
- Self
- Substance Abuse Counselor
- Other

“CPS Worker/Monitor” pre-fills in this field when the FSI is created from a CPS Investigation while under investigation or at the time of approval. This field cannot be modified.

If “Self” is the Source Type, the source is automatically added to the Person List on the **Person Demographics** tab. (See “The Person Demographics Tab” on page 2-26 for details.)

**Agency Name**
This optional field contains the name of the agency (for which the source works) that is requesting the FSI. When an FSI is generated from a CPS Investigation, the **Agency Name** field is pre-filled with the name of the CPS caseworker’s Local District. This field cannot be modified.

**Sex**
This required field is used to indicate the gender of the Intake Source. When an FSI is generated from a CPS Investigation, this field pre-fills with “Unknown” and is not modifiable.

**Name**
A worker must record the Last and First names of the source, with the option to record “Unknown”; the entry of a Middle name and a Suffix (e.g., Jr., Sr.) are optional. An example of when “Unknown” could apply would be that the source did not reveal a full name or the source is anonymous.

When an FSI is generated from a CPS Investigation, the **Name** field is pre-filled with caseworker information (e.g., the CPS caseworker’s name) and cannot be modified.
Address Section:

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>The worker records the Intake Source’s street address in this field. The worker must record an address in order to submit or close the FSI with an “Application Denied-Ineligible” Closure Reason (on the Decision Summary tab). If necessary, “Unknown” can be recorded in this field to reflect situations in which the source’s address was not provided or captured. All source address fields are disabled until the Intake Method, Source Type and source’s Name are recorded. The worker can record a street address or record a post office box/apartment number. If the FSI originated from a CPS Investigation, the source address fields are populated by the system based on the address of the CPS caseworker who originated the FSI. Workers can modify the Source Address, if necessary. CONNECTIONS performs address validation to verify address information and formats it to comply with U.S. Postal Service standards. All addresses recorded in CONNECTIONS must be run through address validation. If there is a discrepancy between the validated address and the address you recorded, a message displays showing both addresses for comparison. If a message displays stating that the address is invalid, click on the OK button, correct the address information and run the address validation again by clicking on the Validate button.</td>
</tr>
<tr>
<td>PO Box/Apt</td>
<td>If applicable, use this field to record the post office box or apartment number for the source address.</td>
</tr>
<tr>
<td>City State ZIP</td>
<td>The City, State and ZIP Code are recorded in these respective fields. To complete the State field, click on the drop-down arrow and select from the resulting list. The State field defaults to “New York.”</td>
</tr>
<tr>
<td>County</td>
<td>The County field contains a list of counties currently maintained in CONNECTIONS. This field enables only if “New York” is selected in the State field. If another state is selected, the County field is system-populated with “Out of State.” Complete the County field by clicking on the drop-down arrow and selecting from the resulting list.</td>
</tr>
<tr>
<td>CD</td>
<td>The Community District (CD) field is populated automatically during address validation for New York City addresses only, based on the county of the source.</td>
</tr>
<tr>
<td>Type</td>
<td>This required field is used to indicate the type of address (e.g., Business, Residence). Click on the drop-down arrow for the Type field and select from the resulting list.</td>
</tr>
</tbody>
</table>
Validate

Clicking on this button performs address validation to verify the address and to format it in accordance with current U.S. Postal Service standards. The Validate button enables once an address Type is selected. All addresses must be run through the address validation process. When an FSI originates from a CPS Investigation, the worker is not required to validate the address, unless the address has been modified.

Source Phone Information:

**Phone**

The worker records the Intake Source’s phone number in this field. All source phone information fields are disabled until the Intake Method, Source Type and source’s Name are recorded.

The Source Phone Information section includes the Type and Extension fields.

If the FSI originated from a CPS Investigation, the Source phone fields are populated by the system with the phone number of the CPS worker who originated the FSI; these fields are modifiable.

Clicking on the Phone button (or the Maintain Phone command in the Options menu) opens the Maintain Phone window.

Intake Source Tab Buttons:

**Save**

Click on the Save button to save all new or changed data on the Intake Source tab and enable the remaining tabs on the Family Services Intake window. The following message displays:

“Changes have been saved.”

- Click on the OK button to close the message.

**Cancel**

The Cancel button enables when there are unsaved changes on the window. Clicking on the Cancel button displays the following message:

“Do you want to cancel? Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard all changes made since the last save; all other tabs enable.
- Click on the No button to close the message; the window remains open with all changes remaining pending.

Step-by-Step: Recording the FSI Source Information

1. From the CONNECTIONS Toolbar, click on the **Intake** menu and select the **Record Family Services Intake** command. The **Intake Source** tab displays.

2. In the **Date** field, record the date the Intake was received. *Date is automatically populated with the date the FSI is created. The date is modifiable, unless it originated from a CPS Investigation. You can change the date by clicking on the drop-down arrow and selecting from the resulting calendar OR by clicking in each section (m/dd/yy) to record the date directly in the field.*

3. In the **Time** field, record the time the Intake was received. *Time is automatically populated with the time the FSI is created. You can modify the time only if the FSI did not originate from a CPS Investigation. Click on the up and down arrows or type the time directly in the field to record a time.*

4. Click on the drop-down arrow for the **Method** field and select from the resulting list. *You can select only one Intake Method.*

5. Click on the drop-down arrow for the **Source Type** field and select a type from the resulting list. *You can select only one Source Type.*

6. In the **Agency Name** field, record the Agency Name of the Intake Source. *When an FSI is generated from a CPS Investigation, the Agency field pre-fills with the Agency Name of the CPS caseworker. If the FSI did not originate from a CPS Investigation, you can record an Agency Name in this field.*

7. Click on the drop-down arrow for the **Sex** field and select from the resulting list. *You can select only one Sex.*

8. In the **Last, First and Middle** name fields, record the Intake Source’s name. *You can record “Unknown,” as appropriate, for each of these fields.*

9. Click on the drop-down arrow for the Intake source’s **Suffix** and select a suffix (Sr., Jr., etc.) from the resulting list. *You are not required to select a Suffix; select one only if applicable.*

10. Record an address to include **City** and **County**. *Record any known source address information. The State field defaults to “New York”; to record a different state, click on the drop-down arrow for the State field and select from the resulting list.*

11. Click on the drop-down arrow for the **Type** field and select from the resulting list.
12 Click on the **Validate** button.

*The address validation window displays. (See the tip boxes on pages 2-8 and 2-11 for details.)*

13 Click on the **Accept** or **Reject** button.

14 In the **Phone** fields, record the Intake Source’s phone number, including the **Type**;

*click on the drop-down arrow for the **Type** field and select from the resulting list.*

*If you wish to record additional phone numbers, click on the **Phone** button.*

15 Click on the **Save** button.

*This saves your data and creates an event on the stage Event List. Once you save data, all other tabs in the FSI enable, unless you modify data on the **Intake Source** tab.*

---

**Address Validation**

When you click on the **Validate** button, CONNECTIONS launches a search to verify the validity of the address and format it to comply with U.S. Postal Service standards. The address validation window displays, containing a side-by-side comparison of the address you recorded and the validated address in standardized postal format. Compare the address you recorded to the address provided.

If the validated address is **the same as or more complete than** the address you recorded, click on the **Accept** button; otherwise, click on the **Reject** button.

If the address provided does not match your entry, verify the address. If the address you have is correct, **do not accept** the replacement. If a message displays stating that the address is invalid, it may be that the address you recorded is new and has not yet been recorded in the U.S. Postal Service database. It is also possible that the address is invalid and needs to be verified and corrected.

If a different address (or an address that is not as complete as the address you recorded) is returned and you are **certain that the address information you recorded is correct**, click on the **Reject** button.

If a message displays indicating that the address information you recorded is invalid (e.g., "The house number is invalid" or "The street is invalid"), click on the **OK** button to close the message. Be sure to verify that the address you recorded is correct. If it is not correct, record the correct address in the appropriate fields.

The CD is populated upon validation, if the source address is in New York City.

*All addresses must be run through the validation process in CONNECTIONS.*
The Narrative Tab

The Family Services Intake Narrative tab captures information supporting the request for services. In the Narrative field, the worker must select a Type of Service being requested and record information supporting that request.

Once the worker selects a Type of Service, presenting problems, concerns and contributing factors must be recorded in a narrative format. For Unfounded CPS stages, the worker describes why this case is being opened for services. It is important to provide as much detail as possible, since there will be no link to the Safety Assessment and Risk Assessment Profile. However, it is important to describe the reasons for the referral in terms of the family’s situation and needs without explicitly mentioning the CPS report or Investigation once the Unfounded conclusion has been made. Unfounded Investigations are legally sealed in order to preserve the confidentiality of those persons named in a CPS Investigation. Therefore, the worker should clearly summarize the presenting needs of the individual/family and document the corresponding need for services in the FSI Narrative. Investigation stage activities, outcomes and conclusions should not be included in the FSI Narrative. The worker must record a narrative entry before the FSI can be submitted for Local District review or acceptance.

Once you save a narrative entry, it is view-only. You cannot perform a partial save on this window; once the information is saved, it is frozen.

The Save function on the Narrative tab in the FSI works the same as the Save as Final function in Progress Notes.
The **Narrative** tab contains the following fields:

**Type of Services Being Requested**

This required field contains a drop-down list of the services available for selection in CONNECTIONS:

- Child Welfare Services (CWS)
- Out of Town Inquiries (OTI)
- Court Ordered Investigations (COI)
- Interstate Compact for the Placement of Children (ICPC) – for use when an ICPC request is *incoming* to New York State
- Advocates – Preventive Only (ADVPO)

If the FSI did *not* originate from a CPS Investigation, the worker can change the Type of Services selected at any time until the Intake is closed. If the FSI originated from a CPS Investigation, the Type defaults to “Child Welfare Services.”

**Narrative**

A narrative entry documenting the need for services is required before the FSI can be submitted for review or acceptance and subsequently stage-progressed. Information recorded in this field must be saved before leaving the **Narrative** tab. Before the narrative is saved, the Text Control tools can be used to edit and format; available controls include boldface, underlining and Spell Check.

A worker with a role in the stage can add to the narrative at any time until the Intake is closed. Each narrative entry freezes once it is saved. After a narrative has been saved, each new narrative entry is appended to the previous entries. The system automatically inserts a line above the narrative entry indicating the author of the entry, and the date and time it was recorded. The cursor is automatically positioned below the last line of text to allow for new entries.

The following buttons display at the bottom of the **Narrative** tab:

**Behavioral Concerns and Family Issues**

This button opens the **Behavioral Concerns and Family Issues (BCFI)** window. (See “The Behavioral Concerns and Family Issues Window” on page 2-14 for details.)

**Requested Services**

This button (or the corresponding **Options** menu command) opens the **Requested Service** window. This button enables if the **Type of Services Being Requested** is “Child Welfare" or if a BCFI has ever been started for this Intake. This window is used to record services that the client/source specifically requested. (See “Requested Services” on page 2-20 and Appendix A1 for details.)

**For ACS:**

Requested Services must be completed for any case for which ACS is the Case Manager.
Sensitive Case  This button opens the *Sensitive Case* window, which can be accessed at any time. This window is also available from the **Options** menu on the *Family Services Intake* window. (See “Sensitive Case” on page 2-23 for details.)

Spell Check  Using this button, which is available from the Text Control toolbar, a worker can check the spelling of recorded comments.

Save  Clicking on this button saves all new or changed data on the tab and enables all other tabs on the window.

Cancel  Clicking on this button displays the following message:

“Do you want to cancel?  
Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard all changes made since the last save; all other tabs enable.
- Click on the **No** button to close the message; the window remains open and all changes remain pending.

---

**Step-by-Step:**

**Recording the FSI Narrative and Type of Services**

1. On the *Family Services Intake* window, click on the **Narrative** tab.

2. Click on the drop-down arrow for the **Type of Services Being Requested** field and select a type from the resulting list.  
   *You must record a Type of Service.*  
   *For non-Protective stages, a list of service types displays. CWS is automatically selected for CPS-originated FSI stages and cannot be modified.*

3. In the **Narrative** field, record comments regarding presenting problems and factors about the type of services the client/source specifically requested.

4. Click on the **Save** button.

---

**The Behavioral Concerns and Family Issues Window**

The BCFI is a non-Protective Intake screening tool used to document any behavioral concerns and/or family issues, requested services, immediate service needs, appropriate referrals and emergency services provided, if applicable. The BCFI provides a single, consistent structure for Local District and Voluntary Agency workers to record important information about the presenting needs of children, youth and families. This information assists workers who are providing services to families to begin their assessment and to follow up on any
emergency needs that were addressed by the Intake worker/agency.

The BCFI features a two-tiered decision making process incorporating more than one window and functionality. First, workers select the behavioral concerns and/or family issues requiring services; from that list, they select services to address those concerns or issues.

The BCFI is enabled if the **Type of Services Being Requested** is “Child Welfare,” or if a BCFI has ever been started for this Intake, and the FSI did not originate from a CPS Investigation. The BCFI is disabled if the Type of Service is COI, OTI, ADVPO, or ICPC and a BCFI has never been started.

Workers can access the BCFI window from the **Family Services Intake Narrative** tab (via the **Behavioral Concerns and Family Issues** button), from the **Case Update** tab (Views B and C) in a Family Services Stage (view-only), or from the **Options** menu on the FSI window.

---

### Step-by-Step: Opening the Behavioral Concerns and Family Issues Window

1. From the **Narrative** tab on the **Family Services Intake** window, click on the **Behavioral Concerns and Family Issues** button.

   *This button enables after saving a recorded narrative. The Behavioral Concerns and Family Issues window displays with the Child Issues tab active.*

---

The BCFI window contains the following elements:

- A tabbed section (including a list of behavioral concerns and/or family issues, as well as a comment field)
- A critical concerns list section in the lower half of the window
- The **Emergency Services Required**, **Spell Check**, **Save** and **Cancel** buttons along the bottom of the window
The tabbed section contains three tabs: **Child Issues**, **Caretaker Issues** and **Family Issues**. When a worker selects a tab, a list displays with behavioral concerns and/or family issues that are unique and relevant to each tab. Each tab contains a list and a comments field. The selection of behavioral concerns and/or family issues and the manner of recording comments is the same on each tab. Workers must identify any behavioral concerns and/or family issues that currently exist by selecting from the list of items displayed on each specific tab. Comments are required if one or more behavioral concerns and/or family issues are identified; comments are specific to each tab and should include supportive examples and/or statements that address each selected item.

There is a 500 character limit in each tab’s comment field. Workers can record/modify comments until the FSI is closed. Workers can also spell-check comments. These features operate identically on all three tabs.

If an issue or concern is selected on the **Child Issues**, **Caretaker Issues** or **Family Issues** tabs, it displays at the bottom half of the window in one complete list. Each selected behavioral concern or family issue is prefixed with “Child-” “Caretaker-” or “Family-” to identify the tab from which it was selected. If a selected behavioral concern or family issue is later deselected on the tab, the system deletes it from the list in the bottom half of the **BCFI** window.

The list at the bottom of the **BCFI** window displays all selected behavioral concerns and/or family issues. This list is used to evaluate the critical nature of any identified behavioral concerns or family issues by selecting those items, if any, that require emergency services and/or interventions. If any items are identified as requiring emergency services, the **Emergency Services Required** button (and the **Emergency Services Required** command in the **Options** menu) enables. Clicking on this button displays the **Emergency Services Required** window. (See “Emergency Services Required” on page 2-20 for more details.)

Once required information is recorded on the **BCFI** window, the worker may close the BCFI by saving recorded work (or cancel out of the window without saving recorded information), which then returns the worker to the **Narrative** tab.
The Child Issues Tab

The Child Issues tab contains the following list of Behavioral Concerns and/or Family Issues:

- Aggressive or defiant behavior
- Alcohol Misuse
- Destruction of personal or community property
- Developmental status or cognitive ability impaired
- Drug misuse
- Fire setting
- Illegal activity, harmful relationships or groups
- Medical or mental health concerns exist
- Physically threatening or harming animals
- Physically threatening or harming family or non-family members
- Runaway or current whereabouts unknown
- Sexually acting out
- Sexually offending
- Suicidal or self-destructive behavior
- Supervision needs are unmet
- Truancy
- Victim of a criminal assault, may include sexual assault
Step-by-Step: Recording the BCFI Child Issues

1. From the Child Issues tab on the Behavioral Concerns and Family Issues window, select one or more Child Issues from the Behavioral Concerns and/or Family Issues list, if applicable. A check box displays next to each selected item on the list. The first time you select at least one item from the list, the comments field highlights in yellow, indicating that comments are required.

2. Record associated comments in the relevant behaviors and/or circumstances comments field, if applicable.

3. Click on the Save button to save the information you recorded to the database. The FSI Narrative tab displays.

Where am I?
FSI > Narrative tab > BCFI button > Child Issues tab

---

The Caretaker Issues Tab
The Caretaker Issues tab contains the following list of Behavioral Concerns and/or Family Issues that may pertain to the caretaker(s):

- Alcohol Misuse
- Developmental status or cognitive ability impaired
- Domestic Violence
- Drug Misuse
- Illegal activity, harmful relationships or groups
- Medical or mental health concerns exist
- Suicidal or self-destructive behavior

---

Step-by-Step: Recording the BCFI Caretaker Issues

1. On the Behavioral Concerns and Family Issues window, click on the Caretaker Issues tab.

2. Select one or more Caretaker Issues from the Behavioral Concerns and/or Family Issues check list, if applicable. A check mark displays next to each selected item on the list. The first time you select at least one item from the list, the comments field highlights in yellow, indicating that comments are required.

3. Record associated comments in the relevant behaviors and/or circumstances comments field, if applicable.

4. Click on the Save button to save the information you recorded to the database. The FSI Narrative tab displays.

Where am I?
FSI > Narrative tab > BCFI button > Caretaker Issues tab

—OR—
Click on another tab on the BCFI window to navigate to that tab.
The Family Issues Tab

The Family Issues tab contains the following selections:

- Appearance or reappearance of a dangerous individual in the household
- Food, clothing or shelter needs unmet
- Family crisis; death of a family member, fire or other catastrophic event
- Income inadequate to meet family’s basic needs
- Multiple family stressors affecting care of child
- Unsafe or unsanitary living conditions/substandard housing
- Other, specify in narrative

Step-by-Step:
Recording the BCFI Family Issues


2. Select one or more Family Issues from the Behavioral Concerns and/or Family Issues check list, if applicable. A check mark displays next to each selected item on the list. The first time you select at least one item from the list, the comments field highlights in yellow, indicating that comments are required.

3. Record associated comments in the relevant behaviors and/or circumstances comments field, if applicable.

4. Click on the Save button to save the information you recorded to the database. The FSI Narrative tab displays.

—OR—
Click on another tab on the BCFI window to navigate to that tab.

Critical Concerns List

Once Behavioral Concerns and/or Family Issues are selected for the child(ren), caretaker and/or family, workers should designate which items, if any, are considered critical and require emergency services, immediate interventions or immediate referrals for crisis intervention. This second level of decision making will assist workers in determining the urgency of providing services or initiating interventions to address any immediate safety concerns and/or prevent the placement of a child into foster care. For example, a worker selected “Aggressive or defiant behavior” and “Destruction of personal or community property” on the Child Issues tab; the worker may determine that the child is in need of an emergency psychiatric evaluation.
As items are identified and selected on each tab, they display at the bottom of the Behavioral Concerns and Family Issues window. From the list, the worker can select all identified issues that are critical and require emergency services:

- Each item selected from the Child Issues tab is prefixed with “Child –” when it displays on the list.
- Each item selected from the Caretaker Issues tab is prefixed with “Caretaker –” when it displays on the list.
- Each item selected from the Family Issues tab is prefixed with “Family –” when it displays on the list.

Step-by-Step: Selecting Critical Concerns

1. On the Behavioral Concerns and Family Issues window, click on the corresponding check box to select any issues that are critical concerns and require emergency services.
   A check mark displays in the check box for each selected Critical Concern.

2. Click on the Save button.
   The FSI Narrative tab displays.

Emergency Services Required
The Emergency Services Required window displays a list of emergency services that may be provided to address the critical behavioral concerns and/or family issues that were identified on the BCFI window (e.g., Detox Services, Order of Protection). From this list, the worker selects the emergency services that have been initiated or provided to address the critical issues that were identified. (For example, a worker has identified that a family’s immediate food and shelter needs are unmet. The family is homeless and they have no financial or supportive resources. The family is determined to be in immediate need of food and shelter, which requires immediate intervention and the provision of emergency services.) Comments should be recorded in the comment field to document any emergency services provided, immediate interventions taken or immediate referrals made for crisis intervention. Workers also need to include in this documentation any identified family strengths and/or family, neighborhood or community resources that are available. Comments are required if one or more emergency services are selected.
The Emergency Services Required window contains a list of the following services:

- Adoption Surrender
- Crisis Response Services
- Detox Services
- Domestic Violence Services
- Emergency Food, Cash, Goods
- Emergency Health Related Services
- Emergency Housing
- Emergency Mental Health Services/Evaluation
- Family Preservation Services (Intensive Home based)
- Foster Care Services for Children
- Order of Protection
- Respite Care
- Other (Specify in narrative)

Workers use the Emergency Services Required comments field to document which emergency services were offered and what immediate actions were taken, including any community resources. Workers must record comments if they select one or more emergency services to address the critical issues previously identified on the Behavioral Concerns and Family Issues window. A maximum of 4,000 characters can be recorded in the comments field. Workers can modify comments until the FSI is closed. Workers can also spell check recorded comments. The Text Control tool feature is not available for this window.

Follow-up questions are displayed in the Initial FASP if a worker selects Emergency Services.

### Step-by-Step: Recording Emergency Services Required

1. On the Behavioral Concerns and Family Issues window, click on the Emergency Services Required button. The Emergency Services Required window displays.

2. Click on the corresponding check box(es) to select one or more emergency services that address the critical concerns you identified.

   A check mark displays in the check box for each selected emergency service. Once you select at least one emergency service, the comments field highlights in yellow, indicating that comments are required.

---

The Emergency Services Required button enables only if critical concerns/issues were identified on the BCFI window.
3 Record associated comments in the Emergency Services comments field to document which services were offered and what actions were taken, if applicable.

4 Click on the **OK** button.
   *The OK button stores the data and closes the Emergency Services window; this information is not saved until you click on the **Save** button on the BCFI window. The OK button enables when you have selected at least one item from the **Emergency Services Required** list and recorded comments.*

5 Click on the **Save** button.
   *The **FSI Narrative** tab displays.*

---

**Requested Services**

Workers describe the services the source or family has requested from their agency on the *Requested Service* window, which is accessed from the **Narrative** tab. In the process of service planning for a family, this could help determine what services an agency will provide.

Some districts require the completion of the Requested Services check list for all Family Service Intakes with a “Child Welfare Services” Type of Service Requested (one that did not originate from a CPS Investigation). This check list is required if the Local District mandates completion or if the Voluntary Agency that is completing the FSI contracts with a Local District that requires completion of the check list.

Workers select the services the source or family has requested by clicking the **Requested Services** button on the **Narrative** tab to display the *Requested Service* window.
The worker must complete this window if **all** of the following conditions are present in the FSI:

- The Local District has opted to require the completion of this window by its own staff or by staff in a Voluntary Agency that contracts with that Local District.
- The Type of Service is Child Welfare.
- The FSI *did not* originate from a CPS Investigation.

**Step-by-Step: Recording Requested Services**

1. On the **Narrative** tab, click on the **Requested Services** button. The Requested Service window displays. *(Refer to the section above to determine whether you must complete this window.)*

2. Click on the check box for each requested service on the **Requested Services** list, if applicable. *(Multiple services may be selected.)* A check mark displays for each selected service.

3. Click on the **Save** button to save the information you recorded. The FSI **Narrative** tab displays.

**Sensitive Cases**

A case is usually marked sensitive if it contains allegations of suspected child abuse or maltreatment by an employee of the State Central Register (SCR) or a Local District or Voluntary Agency child welfare services worker. Occasionally, a Local District may choose to mark a high-profile case as sensitive (such as a case involving a celebrity or other public figure). Workers need to treat sensitive cases with special handling to guard confidentiality.

Marking a case as sensitive designates the *entire case* (not just the stage) as sensitive. The **Sensitive Case** button, accessed from the **Narrative** tab or from the **Options** menu on the FSI window, provides the ability to mark a case as sensitive. Workers select the **Sensitive Case** check box and record comments. If the case from which the FSI originated (e.g., CPS Investigation) is already marked as sensitive, the sensitive check box is automatically selected and any existing comments display.
The following table defines the required criteria with regard to Sensitive Cases:

<table>
<thead>
<tr>
<th>Role in Case</th>
<th>View</th>
<th>Designate as Sensitive</th>
<th>Remove Sensitive Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>任何工人（LDSS或VA）与案件中的角色或在工人的层级中可以查看敏感案件。</td>
<td>任何工人（LDSS或VA）与案件中的角色或在工人的层级中可以标记案件为敏感。</td>
<td>任何工人具有案件中的角色或在工人的层级中可以标记案件为敏感。</td>
<td>任何工人在案件中的角色（或在工人的层级中）且具有MARK SENSITIVE业务功能可以移除敏感标识，如果FSI是唯一阶段。</td>
</tr>
<tr>
<td>(No Role in Case) MARK SENSITIVE Business Function</td>
<td>任何工人必须被分配VIEW SENSITIVE业务功能才能查看敏感案件。</td>
<td>LDSS工人被分配MARK SENSITIVE业务功能可以标记案件为敏感。</td>
<td>A工人不具有在案件中的角色，但被分配MARK SENSITIVE业务功能可以移除敏感标识。</td>
</tr>
<tr>
<td>(No Role in Case) VIEW SENSITIVE Business Function</td>
<td>LDSS工人被分配VIEW SENSITIVE业务功能可以查看敏感案件。 LVIS工人不能，因为它们没有被分配这个业务功能。</td>
<td>A工人必须被分配正确的业务功能才能标记案件为敏感。</td>
<td>A工人必须分配正确的业务功能才能移除敏感标识。</td>
</tr>
</tbody>
</table>

一旦案件被标记为敏感，“敏感案件”显示在FSI窗口的主要标题中。如果“敏感案件”复选框被取消选择，该“敏感案件”指示器将从FSI窗口标题中移除，并清除评论字段。敏感标识仍然适用于FSS；如果FSI和FSS被后续解链，两者的案件将仍然敏感。（请参阅上述表格，查看可以标记案件为敏感或移除敏感标识的人员。）
A sensitive case may only be reassigned by someone in the hierarchy who accessed the stage from the Unit Summary window. If accessing the stage by the access set up with Agency Access, the worker must be assigned the VIEW SENSITIVE Business Function to view or re-assign the stage.

### Step-by-Step: Marking an FSI Case as Sensitive

2. Select the Sensitive Case check box. *The Comments field highlights in yellow, indicating that it is a required field.*
3. Record associated comments in the comments field.
4. Click on the Save button to save your information to the database. *The FSI Narrative tab displays.*

### Step-by-Step: Removing a Sensitive Case Indicator

2. Click in the check box to deselect the Sensitive Case indicator. *Any previously recorded comments regarding the sensitive case designation are discarded.*
3. Click on the Save button to save your data. *The FSI Narrative tab displays.*
The Person Demographics Tab

On the Person Demographics tab, workers can record/modify demographic information concerning the individuals or family requesting services, record/modify address and phone information, perform person searches, maintain the Family Relationship Matrix, split the FSI into two separate Intakes (if the FSI originated from a CPS Investigation stage), and add the FSI stage to an existing case (if the FSI did not originated from a CPS Investigation stage). With these options, workers can maintain an accurate and up-to-date case record.

The Person Demographics tab contains the following fields:

First, Middle, Last name

These fields display the person’s full name, with the option to record a middle name, when an individual is selected from the grid. The person’s name must be recorded before the individual can be added.

Ethnicity

This is a required field to indicate the ethnic background of the person. You must select an Ethnicity in order to add a person to the system. “Not Reported” is the system default, but you can modify the selection.

To record ethnicity, click on the drop-down arrow for the Ethnicity field and select Hispanic or Latino Origin, Non-Hispanic or Latino Origin or Not Reported. If you select Hispanic or Latino Origin, a list enables in which you can select one or more Hispanic or Latino origins.

The background of the field is blue, indicating that it is an NCANDS/AFCARS-required element.
Race  Click on the corresponding check box in the Race field to select one or more races from the list; “Not Reported” can be selected. This is a required field; “Not Reported” must be changed to an actual race before the stage can be progressed. If more than one race is selected, “Multiple” displays in the Race field in the grid at the bottom of the window.

Sfx.  If applicable, click on the drop-down arrow and select a suffix from the resulting list (e.g., Sr., Jr.).

Sex  This required field indicates the gender of the person. You must click on the drop-down arrow and select a sex from the resulting list (i.e., male, female or unknown).

DOB  This required field signifies the person’s date of birth. You must record an exact birth date (or approximate indicator) in a valid date format (mm/dd/yyyy); this cannot be a future date.

A DOB must be recorded if you are submitting an FSI for closure with an “Application Denied-Ineligible” Closure Reason.

DOB Approx (check box)  If you do not know the exact date of birth, the DOB Approx check box must be selected if the person’s date of birth is only an approximation.

Age  This field translates to the age of the person; this must be a valid number between 0 and 120. This field is system calculated if a DOB is recorded.

Marital  This is an optional field to indicate the marital status of the person. Click on the drop-down arrow and select a marital status from the resulting list.

Language  This optional field designates the language the person speaks. Click on the drop-down arrow and select a language from the resulting list.

DOD  This indicates the date of death for a person, if applicable. The exact DOD (or approximate indicator) is an optional field and must be in a valid date format (mm/dd/yyyy). DOD cannot be a future date.

DOD Approx (check box)  Select this check box if the person’s date of death is estimated (i.e., the exact DOD is not known).

SSN  Use this optional field to record a person’s Social Security number, using the number format 999-99-9999.

Religion  This optional field is used to record the religion the person practices. Click on the drop-down arrow and select a religion from the resulting list.

Street  In this required field, record the street address for the person.

PO Box/ Apt  Use this optional field to record a post office box or apartment number where the person resides or receives mail.

City  In this field, record the city in which the person resides.

State  Record the state in which the person resides in this field by clicking on the drop-down arrow and selecting from the resulting list.
ZIP Record the ZIP Code for the person’s address in this field.

County This field reflects the county that corresponds to the person’s address. Click on the drop-down arrow and select from the resulting list. This field contains a list of counties currently maintained in CONNECTIONS.

Type The type of address (business, residence, etc.) being recorded. Click the drop-down arrow and select a type from the resulting list. If a type is selected, the Validate button enables.

CD A Community District code for NYC only. This view-only field is calculated during the address validation process using the county corresponding to the individual’s address, if it is in NYC.

Validate Click on this button to perform address validation. The Validate button enables once you record an Address Type. All addresses must be run through address validation in CONNECTIONS.

Address validation verifies address information and formats it to be compatible with U.S. Postal Service standards. If there is a discrepancy between the validated address and the address you recorded, a message displays showing both addresses for comparison. If a message displays stating that the address is invalid, click on the OK button, correct the address information and run address validation again by clicking on the Validate button. You can choose to reject the validated address and store the address as originally recorded.

Address This button opens the Maintain Address window to record multiple addresses for a person.

Phone The phone number of the person. This field is optional and must be in the correct format [(area code)-phone number].

The Phone button opens the Maintain Phone window. You can use this window to record multiple phone numbers for each person.

Ext. Use this field to record a person’s phone extension, if any.

Type The type of phone number (business, residence, etc.) for the person. Click on the drop-down arrow and select a type from the resulting list. If you record a phone number, you must select a Phone Type.

Person List This list contains a record for each person involved in the FSI. The Person List displays demographics as they currently exist for each person.

Search A button to display the search results for the person selected on the Person Demographics tab.

(See “Person Maintenance/Person Search” on page 2-30 for details.)

Add Person A button to add a new person to the Person List.

(See “Adding New People” on page 2-32 for more details.)
Modify Person

This option is used to change demographic information for a person in an FSI. The Modify Person button enables once you select a person from the Person List and make a change in any of the fields. The Modify Person command is also available from the Options menu on the Family Services Intake window.

You can modify all demographic information if the person was copied to the FSI from a CPS Investigation.

Delete Person

This button is used to delete a person from an FSI. The Delete Person button enables once you select a person on the Person List. Once you click on the Delete Person button, the following message displays:

“Deleting this person will delete him/her from the stage. Continue?”

- Click on the Yes button to remove the person from the FSI.
- Click on the No button to keep the person on the Person List.

The Delete Person command is also available from the Options menu on the FSI window.

If the person selected is a child (a person younger than 21 years of age), and there are no other children in the stage, the following error message displays:

“This child may not be deleted because he/she is the only child in the stage.”

- Click on the OK button to close the message.

If the person selected is older than 21, the following message displays:

“You are about to delete this person from the FSI. Continue?”

- Click on the OK button to delete the person from the FSI.
- Click on the Cancel button to close the message without deleting the person from the FSI.

Once you have completed the deletion process, the Family Relationship Matrix updates automatically if relationships were recorded for the deleted person. (See “Family Relationship Matrix” on page 2-42.) All relationships between the deleted person and other people in the FSI (including the implied relationships) are automatically deleted by the system. All FSI database records in which the deleted person was a member are also deleted. (See “Deleting People from the FSI” on page 2-33 for more details.)

Incoming Detail

This button opens the Incoming Detail Information window, which displays demographic information originally recorded for that individual during this FSI. The button is only enabled if the person selected in the Person List was related during the FSI.

(See “Relating People” on page 2-31 for more details.)
The Cancel button displays the following message:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard all changes made since the last save; all other tabs enable.
- Click on the No button to close the message without discarding changes; the window remains open and all changes remain pending.

**Person Maintenance/Person Search**

The Person Demographics tab displays the Person List of FSI members. Workers can add/relate people, record/modify demographics, or delete people.

A Person Search may be conducted at any time on an individual until the FSI is closed. Any worker with the proper security may add, delete or modify data on this tab until the FSI is closed. Future modifications will be made in the FSS if the case is opened for services.

Workers can modify all demographics if the person was copied to the FSI from a CPS Investigation. Any person not copied to the FSI from a CPS stage may be related to a person already in CONNECTIONS. People are added to the Person List in the FSI via the Person Demographics tab.

Person Search is a tool for locating information about people in CONNECTIONS. Person Searches are used to:

- find out if a person is known to CONNECTIONS; and
- find specific information about a person in CONNECTIONS.

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*If an FSI needs to be opened and stage progressed to an FSS for a pregnant mother (no other children), use “Unborn” as the child’s first name with the mother’s last name. Do not enter a DOB; enter “0” in the Age field. This will set an approximate DOB with January 1st of the current year.*
From the FSI, the Search Type default is “Phonetic Name.” An automatic Phonetic Name search initiates based on the information recorded on the Person Demographics tab.

If a person is known to CONNECTIONS, a worker may be able view a list of previous cases related to that person, depending on the worker’s security rights (e.g., role, Business Function). Contract Preventive Services and Voluntary Foster Care Agency staff have no access to current or historical CPS Investigation stages.

Relating People
A person search must be conducted on all persons in an FSI, except those individuals the system carried forward from a CPS Investigation. Person demographics generated from a CPS Investigation stage populate automatically; workers should verify this information. In this case, the entry fields at the top of the tab are blank, and the Person List at the bottom is filled with the demographic information of the Principals from the CPS Investigation. The primary address and phone are also listed for each person.

A Person Search is initiated by clicking on the Search button or by selecting the Search command from the Options menu. The Search button enables whenever a person is selected on the Person List. All individuals in the FSI (except those copied over from a CPS Investigation) may be related to people already stored on the CONNECTIONS database via the Person Search results list. When an individual is related, the demographic information recorded in the FSI is viewable via the Incoming Detail button. Incoming Detail may also be viewed from the Options menu on the FSI window. The Relate function in CONNECTIONS links an individual’s pre-existing records to the current stage. In some instances, the address and phone information for the related person will be updated with the incoming person information. The demographics already stored in CONNECTIONS for that related person display on the Person Demographics tab.

The related person’s address/phone information will not be updated with the incoming address/phone information if any of the following conditions are met:

- The person is in an open FAD stage.
- “Unknown” is recorded for one of the following incoming address fields: Street Line 1, City, or County.
- All of the following fields for the related person’s Primary address match exactly to that of the incoming Primary address: Address Type, Street Line 1, Street Line 2, City and State.
If a Date of Death is recorded in the FSI for a child, and that child is related, the incoming Date of Death will be copied to the related child's Date of Death, only if the related child's date of death is blank.

The related person's previous Primary address and phone number will be automatically end-dated by the system using the current date. The related person's information will be updated on the database when the related person is saved to the FSI.

When a Relate is conducted, the existing person demographics (except those stated previously) display in the Person List for that individual; this is a precaution to prevent the creation of duplicate person records. Keep in mind that the Relate button disables when a worker opens the Person Search window from the CONNECTIONS Toolbar. Information on the Intake Source tab is frozen; demographics do not change for a source recorded as “Self.” The Intake Source tab displays the original information recorded for that individual.

**Step-by-Step: Relating a Person**

1. On the Person Demographics tab, select a person from the grid.
2. Click on the Search button.
   
   *The Person Search window displays. The fields at the top of the window are pre-filled with the information recorded on the Person Demographics tab for the person selected from the list. A Phonetic Name search automatically initiates and the results pre-fill in the grid at the bottom of the window.*
3. Select the appropriate individual from the search results grid.
4. Click on the Relate button.
   
   *The person displays in the Person Demographics tab with an R (Relate) in the Sch (Search) column.*

**Adding New People**

In an FSI, workers have the option of adding a person directly to the case. This person is then added to the CONNECTIONS database. This feature is of importance with an FSI that did not originate from a CPS Investigation. After adding a person, a worker must conduct a Person Search to determine that the person does not already exist in the database.
Workers may add a new person to the FSI by recording the information in the entry fields on the top portion of the tab. Once all the information for an individual has been recorded, that person is added to the Person List at the bottom of the tab by clicking on the **Add Person** button. A person may also be added by accessing the **Add Person** command from the **Options** menu. That person is added to the Person List, and the entry fields, except **Last** name, address and phone number, are cleared out. In order to reduce the amount of repetitive information being recorded, the **Address** and **Phone** fields do not clear after a new person is added to the Intake. These fields remain filled with the data recorded for the previous person, so the same data does not need to be re-entered for the next person.

<table>
<thead>
<tr>
<th>Step-by-Step: Adding a New Person</th>
</tr>
</thead>
</table>
| **1** | On the **Person Demographics** tab, record person demographic information in the fields.  
*Once you begin recording the **First** name, the **Last** name and **Sex** fields highlight in yellow, indicating that they are required. All other fields are optional.* |
| **2** | Click on the **Add Person** button.  
The person is added to the Person List and the entry fields (except **Last Name**, **Address** and **Phone Number**) are cleared. |
| **3** | Select the individual from the grid. |
| **4** | Click on the **Search** button.  
A search initiates based on the demographics you recorded. If the system finds results, those results display. The **Address** and **Phone** fields clear. |
| **5** | Click on the **Cancel** button to close the **Person Search** window.  
The **Person Demographics** tab displays. “V” displays in the **Search** column for the individual you added. |

**Deleting People from the FSI**

Workers can delete people from the FSI for whom services are neither necessary nor required, as well as for those individuals who are no longer involved with the family. Those identified individuals should not be listed in the Family Services Stage and therefore should be deleted from the FSI Person List.

An FSI that originated from a CPS Investigation carries forward all people in the CPS stage. Workers do not need to re-record person demographics; however, an agency may not be providing services to all of the people listed. For example, at the time of the CPS stage, there were several people residing in the household. Since the creation of the FSI, the family has moved; now there are only three people in the household, not the original seven. Instead of having these people carry forward to the FSS, they are deleted so they will not appear in the FSS.

When a worker clicks on the **Delete Person** button (or the corresponding command in the **Options** menu), the person is deleted from the FSI only, not from the CONNECTIONS database. Workers can delete a person from the FSI at any time until the FSI is closed. Once the person is deleted from the list, that person no longer appears on the FSI **Person Demographics** tab and will not be brought forward into the FSS. (The person is deleted from the FSI immediately.) If the Family Relationship Matrix was completed, the relationships for the
deleted person are also deleted. Once an FSS is opened, people can only be end-dated (not deleted).

### Step-by-Step: Deleting a Person

1. On the **Person Demographics** tab, select a person from the grid.
2. Click on the **Delete Person** button.
   - The following message displays: "Deleting this person will delete him/her from the stage. Continue?"
     - Click on the **Yes** button to remove the person from the FSI.
     - Click on the **No** button to keep the person on the Person List.

Any changes made to Person Demographics are saved by clicking on the **Add**, **Modify** or **Delete Person** buttons.

### Recording Address Information
Workers must record address information for each person in the FSI stage. Once an address is recorded, workers can make any needed modifications.

The **Address** button on the **Person Demographics** tab opens the **Maintain Address** window. Workers must mark one address as the primary address, which then displays on the Person List. “Primary” is used to designate the location where the person is most often found. This is beneficial to identify different household members on the stage Person List who may be resources for the child(ren). Only one active address may be the primary address, and if an address is marked as “Primary,” any other active primary address is automatically end-dated by the system. Comments can be recorded with an address; there is a 300-character limit in the comments field.
The **Maintain Multiple Addresses** command on the **Options** menu opens the *Maintain Primary Address and Phone* window. Workers can modify any recorded address information and record an address for multiple people. Addresses must be validated to conform to current U.S. Postal Service standards. Workers must record an address type in order to validate an address. (See the tip box on page 2-11 for information about address validation.)

### Step-by-Step: Maintaining an Individual’s Address in the FSI

1. On the **Person Demographics** tab, select a person in the Person List.
2. Click on the **Address** button.
   —OR—
   Click on the **Options** menu and select the **Address** command.
   *The Maintain Address window displays in modify mode.*
3. Record an address to include **Street**, **City**, **State**, **Zip**, and **County**. Fields highlighted in yellow are required. The **State** field defaults to “New York”; to record a different state, click on the drop-down arrow for the **State** field and select from the resulting list.
4. Click on the drop-down arrow for the **Address Type** field and select a type from the resulting list.
5. Click on the **Validate** button.
   *The address validation window displays.* (See the tip boxes on pages 2-8 and 2-11 for details.)
6. Click on the **Accept** button to accept the validated address.
7. Click on the **Add** button.
   *The validated address displays in the address list.*
8. Click on the **Save** button.
   *The following message displays: “Changes have been saved.”*
9. Click on the **OK** button.
   *The FSI window displays with the **Person Demographics** tab active.*

If you click on the **Cancel** button when unsaved changes are pending, the following message displays:

"Do you want to cancel? Unsaved data and/or narrative(s) will be lost."

- Click on the **Yes** button to discard the changes.
- Click on the **No** button to close the message box; the window remains open and unsaved changes remain pending.
1. On the Person Demographics tab, click on the Stage Maintenance menu and select the Maintain Primary Address/Phone command. The Maintain Primary Address and Phone window displays in modify mode.

2. Right-click (click with the right mouse button) on an individual from the list whose address you want to copy. A shortcut menu displays with the following commands:
   - Use Primary Address
   - Use Primary Phone
   - Use Both Address and Phone

3. Click to select a command from the shortcut menu. The Address and/or Phone information (depending on the command you selected) displays in the detail fields in the upper half of the window. This information can be modified if it is not applicable to the person to whom it will be applied.

4. If you selected either Use Primary Address or Use Both Address and Phone from the shortcut menu, click on the Validate button. The address validation window displays. (See the tip boxes on pages 2-8 and 2-11 for details.)

5. To link this address to one or more individuals listed in the lower section, click on the box to the left of each individual's name. To select more than one individual, press and hold the Ctrl key while clicking on the box to the left of the person's name. Selected individuals highlight.

6. Click on the Save button. The following message displays: “Changes have been saved.”

7. Click on the OK button. The Maintain Primary Address and Phone window refreshes, displaying the modifications.

8. Click on the Cancel button to close the Maintain Primary Address and Phone window. The Person Demographics tab displays.
Step-by-Step: Adding a New Address on the *Maintain Primary Address and Phone* Window

1. On the **Person Demographics** tab, click on the **Stage Maintenance** menu and select the **Maintain Primary Address/Phone** command.
   *The Maintain Primary Address and Phone window displays in modify mode.*

2. Record an address in the **Street** field.

3. Record a **City** and **ZIP Code** in the respective fields. *Leave the remaining address fields as they are.*

4. Click on the drop-down arrow for the **Address Type** field and select from the resulting list.

5. Click on the **Validate** button.
   *The address validation window displays.*

6. Click on the **Accept** button to accept the validated address.

7. Click on the gray box to the left of an individual’s line to select him/her from the list. —OR—
   - To select more than one individual, hold down the **Ctrl** key and click on the gray box to the left of each remaining individual on the list to select one individual at a time.
   - OR—
   - To select **all** individuals in the list, select the first person, hold down the **Shift** key and select the last person on the list.
   *As individuals are selected, their respective lines highlight. The **Save** button enables.*

8. Click on the **Save** button.
   *The following message displays: “Changes have been saved.”*

9. Click on the **OK** button.

10. To close the **Maintain Primary Address and Phone** window, click on the **Cancel** button.
    *The **Person Demographics** tab displays.*

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**Recording Phone Information**

Workers can record phone information in CONNECTIONS and can also record multiple phone numbers for each person.

The **Phone** button (or the **Phone** command from the **Options** menu) opens the **Maintain Phone** window. Workers can add additional phone information, if applicable. Perhaps a family member has a cell phone and work phone number for alternative contact in case of an emergency; workers can have both numbers display in the phone list.

Workers must indicate one phone number as “Primary.” The primary phone number displays in the Person List with that person. Only one active number may be primary, and if a phone number is marked as primary, any other active primary number is automatically end-dated by the system.
Step-by-Step:
Maintaining Phone Information in the FSI

1. On the **Person Demographics** tab, select a person from the Person List.
2. Click on the **Phone** button.
   —OR—
   Click on the **Options** menu and select the **Phone** command. 
   *The Maintain Phone window opens in modify mode.*
3. Record a phone number.
4. Click on the drop-down arrow for the **Type** field and select from the resulting list.
5. Record a phone extension, if applicable.
6. Click on the **Primary** check box to designate a phone number as Primary, if applicable.
7. Click on the **Add** button.
   *The newly recorded phone number displays on the Person Phone Information list.*
8. Click on the **Save** button.
   *The following message displays: “Changes have been saved.”*
9. Click on the **OK** button.
   *The Person Demographics tab displays.*
**Linking an FSI to a Case**

Upon conducting a Person Search, a worker may learn that a family is also associated with a previous CONNECTIONS stage. The worker wants to know about any other stages that may exist in the case, as well as other cases with which an individual may be involved. In the FSI, the worker can link the current FSI with any previous case information to include past involvement as part of the overall case history.

Workers can link the FSI stage to an active or closed case. A worker may recommend that a new FSI stage, which did not originate from a CPS Investigation, be added to an active or closed CONNECTIONS case. The worker selects a person (who is at least 18 years old) from the FSI Person List, and selects the **Link this FSI Stage to Active or Closed Case Number** command from the **Stage Maintenance** menu. The **Link This FSI Stage to Active or Closed Case Number** command opens the **Link This FSI Stage to Active or Closed Case Number** window.

If an FSI is not currently linked to an active or closed case, this command is enabled when all of the following conditions are met:

- The FSI originated from the CONNECTIONS Toolbar and not from a CPS Investigation.
- A row is highlighted on the Person List at the bottom of the **Person Demographics** tab.
- The person selected on the Person List is at least 18 years old.

If the FSI has already been linked to an existing case, this command is always enabled.

The **Link This FSI Stage to Active or Closed Case Number** window lists all the cases which have the person selected from the FSI Person List as a member. A worker selects a case to link to the new FSI. A system edit prevents a worker from selecting a case that already has an open FSI stage or Family Services Stage in the same jurisdiction. If the case already has an open FSI or FSS, the following error message displays and the linkage is not allowed:

"Open FSI or FSS Stage in this District."

If the edit passes, the recommended Case ID displays on the **Decision Summary** tab. The FSI does not actually become part of the existing case until the FSI is closed and progressed to the Family Services Stage. If workers wish to change or remove the recommended Case ID, they must again select the **Link this FSI Stage to Active or Closed Case Number** command. Then...
they must click on the **Remove Link** button on the *Link This FSI Stage to Active or Closed Case Number* window.

When the FSI is stage-progressed, the Case ID number will be the same as the Case ID that the worker selected. The Voluntary Agency must send all FSIs to a Local District for review and acceptance. The link does not take effect until stage progression is complete. FSI stages added to an existing case must be accepted by the Local District. If the LDSS disapproves, the LDSS worker can remove the link.

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### Step-by-Step: Linking an FSI stage

1. On the **Person Demographics** tab, select a person from the Person List.
2. Click on the **Stage Maintenance** menu and select the **Link This Stage to an Existing Case** command.
   
   *The Link This FSI Stage to Active or Close Case Number window displays, listing all cases in which that person is a member.*

3. Select the case to which the new FSI will be linked.
4. Click on the **Link to Case** button.
   
   *The following message displays: Upon opening the Family Services Stage, the case number for this FSI stage and the new FSS stage will be ###. Do you want to continue?*

5. Click on the **Yes** button to continue.
   —OR—
   Click on the **No** button to cancel the link function.

6. Click on the **Close** button.
   
   *The Person Demographics tab displays.*

---

### Removing an FSI Link

The case that an FSI has been linked to may be changed (or the link removed entirely) by using the same **Link This Stage to an Existing Case** command on the **Stage Maintenance** menu; it is not necessary to select a person from the Person List to update the Case ID.

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### Step-by-Step: Removing an FSI Link

1. On the **Person Demographics** tab, select a person from the Person List.

2. On the **Stage Maintenance** menu, select the **Link This Stage to an Existing Case** command.
   
   *The Link This FSI Stage to Active or Close Case Number window displays, listing all cases in which that person is a member.*

   *The Remove Link button enables.*

3. Select the case to which the FSI is currently linked.

---

**Where am I?**

*FSI > Person Demographics tab > Stage Maintenance menu > Link This FSI Stage to Active or Closed Case Number window*
4 Click on the Remove Link button.
   *The link to that Case Number is removed.*

5 Click on the Close button.
   *The Person Demographics tab displays.*

**FSI Split Intake**
A worker may encounter an FSI that originated from a CPS Investigation, in which it is not necessary to have all of the Principals remain part of a single FSI. For example, a worker has a case with two adult sisters living together, each of whom has a child. One of the sisters is moving out of the household with her child. Services need to be provided to both sisters and their children, but not as part of one household. With the Split Intake option in the FSI, a worker can create two FSIs from the existing Case Composition.

If an FSI originated from a CPS Investigation and the current FSI has never been split, the Split Intake command enables in the Stage Maintenance menu. When an FSI is created from a CPS Investigation, all of the Principals in the Investigation are automatically copied to the FSI. A CPS worker may determine that all of the persons who carried over should not be members of the same FSI stage. In these instances, a worker may split the FSI into two separate Intakes.

The Split Intake functionality allows the removal of one or more people from the FSI and the creation of a separate FSI. The individuals are moved into a new FSI without having to re-record demographic information. This is completed by selecting the Split Intake command from the Stage Maintenance menu. When a worker selects the Split Intake command; a list of all the people in the stage displays. The worker selects the individual(s) to be moved into the new Intake and clicks on the Create New Intake button. The Create New Intake button enables once the worker selects at least one person by clicking on the corresponding check box in the Split column.

This process creates a new FSI stage with a new Stage ID and a new Case ID. The demographic information for the selected individuals is copied automatically to the new FSI stage. These individuals are deleted from the original FSI, which retains the original Case ID.
and Stage ID. Both FSI stages remain on the Assigned Workload of the worker completing the Split Intake process, unless that worker reassigns the stage to another worker.

**Step-by-Step: Splitting an Intake**

1. From the Person Demographics tab, click on the Stage Maintenance menu and select the Split Intake command.  
   *The Split Intake window displays with a listing of all people in the stage.*

2. Click on the corresponding check box in the Split column to select each person who is to be moved to the new FSI.

3. Click on the Create New Intake button.  
   *The following message displays: “You are about to remove the selected individuals from the Intake, and move them to a new Intake. Do you wish to continue?”*

4. Click on the Yes button.  
   *The following message displays: “A new case and stage of service have been created. Case ID=##, Stage ID=##.”*

5. Click on the OK button.  
   *The Person Demographics tab displays.*

**Family Relationship Matrix**

In order to understand family dynamics, it is important to determine how the individuals in a case are related to one another. This helps every worker with a role in the case keep track of people who affect a child’s permanency, safety and risk of harm or reduction of risk to the child.

Family dynamics vary greatly from case to case; clearly, some families have very complex constructs. If a worker were to describe in a narrative how all of the family members are related to each other, the information could potentially be rather extensive, depending on the family’s unique dynamics.

Workers also need to be able to capture resource information for children and individuals who have an impact on that child’s safety and risk status. Since this information can change throughout the life of a case, it is crucial that workers keep this information up to date.

CONNECTIONS supports this need through the Family Relationship Matrix window, which is accessed via the Relationship Matrix command in the Stage Maintenance menu. The matrix provides a number of case recording benefits:

- Organizing information about people who are involved in the family’s services case
- Capturing information about resources for children and individuals who affect that child’s safety and risk status
- Clearly and concisely identifying all of the relationships and reciprocal relationships in the family
Using the *Family Relationship Matrix* window, a worker can create, modify or invalidate relationships. This helps the worker keep the matrix current, which is particularly important for future case planning and service plan documentation.

The Family Relationship Matrix functionality in CONNECTIONS provides system efficiencies to support workers in completing the matrix. These efficiencies include the following:

- When a relationship is established, the system automatically creates the implied (or “reciprocal”) relationship. An implied relationship is one that can be deduced from a previously recorded relationship. For example, if Jean is the mother of William, the implied relationship is that William is the child of Jean.

- Once an individual’s relationships have been established with everyone in the household, that individual’s name is disabled (grayed out) on the *Family Relationship Matrix* window.

The *Family Relationship Matrix* window contains a header, person lists, a relationships values selection field, the Relationships grid and a footer.

- The header contains the Stage Name and Stage ID.

- The **Person One** list contains the name and age of each person listed on the **Stage Composition** tab. The **Person Two** list contains the same information as the **Person One** list; however, the person who is selected on the **Person One** list will not display on the **Person Two** list.

- Between the two person lists, a field enables workers to select a relationship from a drop-down list. The worker selects a person from the **Person One** list, selects a relationship from the drop-down list, and selects a person from the **Person Two** list.

- The Relationships grid in the lower half of the window displays all of the relationships and implied relationships that have been established. There are two display modes.
within this grid: The Full List (default view) displays all of
the relationships recorded for all of the people in the FSI
(or the FSS, if the matrix is created or accessed during
the FSS). The Individual list (which is displayed by
clicking on the Individual List button in the footer)
displays one individual on the Person One list and all of
that person’s relationships with members of the Person
Two list.

The Relationships grid contains the following fields:
- Person One
- Relationship
- Person Two
- Close Date
- Age (Person One)
- Transaction (TX) Date
- Age (Person Two)
- Status

The following buttons display in the footer of the window:
Modify, Invalidate, Individual List, Save, Cancel and Close.

Step-by-Step:
Maintaining the Family Relationship Matrix

1. From the Person Demographics tab, click on the Stage Maintenance menu and
   select the Relationship Matrix command.
   The Family Relationship Matrix window displays.

2. Select a person in the Person One list by clicking on the person’s name.

3. Click on the drop-down arrow for the Relationship field and select a relationship
   from the resulting list.

4. Select one or more persons from the Person Two list by clicking on the
   corresponding check box next to each person’s name.

5. Click on the Add button to add the new relationship.
   The assigned relationship(s) then display in the Relationships grid with a status of
   “New.” Once a “New” relationship is saved, the status of this new relationship
   changes to “Active” and displays in the Relationships grid. “Active” is the status of all
   current saved relationships.

6. Click on the Save button to save the information you recorded to the database.
   You must save after recording each relationship.

7. Click on the Close button to close the Family Relationship Matrix window.
   The Person Demographics tab displays.
Step-by-Step: Modifying a Relationship in the Family Relationship Matrix

1. From the Person Demographics tab, click on the Stage Maintenance menu and select the Relationship Matrix command.
   The Family Relationship Matrix window displays.
   If all relationships have been completed, the following message displays:
   “All Stage Relationships are complete.”

2. Click on the OK button.

3. In the Relationships grid, select the relationship you wish to modify.

4. Click on the Modify button.

5. Click on the drop-down arrow for the Relationship field and select a relationship from the resulting list.

6. Click on the Add button.
   You cannot add multiple relationships. For example, if you already recorded a parental relationship for a child (e.g. Mother and you want to select Stepparent), the following message displays:
   “Child (##) is already child of (Parent). Multiple relationships may not exist.”

7. Click on the Save button.
   The following message displays if all stage relationships have been completed:
   “All Stage Relationships are complete.”

8. Click on the OK button.

9. Click on the Close button.
   The Person Demographics tab displays.

Step-by-Step: Invalidating a Relationship in the Family Relationship Matrix

1. From the Person Demographics tab, click on the Stage Maintenance menu and select the Relationship Matrix command.
   The Family Relationship Matrix window displays.
   If all relationships have been completed, the following message displays:
   “All Stage Relationships are complete.”

2. Click on the OK button.

3. In the Relationships grid, select the relationship you wish to invalidate.

4. Click on the Invalidate button.

5. Click on the OK button.
   The following message displays:
   “The Relationship Matrix is no longer complete. Enter a new relationship to replace the invalidated relationship(s). Failure to do so will disable FASP launching and approval processes.”

Invalidate a relationship only if it was never correct.
6 Click on the **Save** button.  
*The invalidated relationship, including its implied/reciprocal relationship(s), no longer displays in the Relationships grid.*

7 Click on the **Close** button.  
*The **Person Demographics** tab displays.*
The Decision Summary Tab

Workers record a recommendation on the Decision Summary tab regarding whether the Family Services Stage should be opened or if the FSI should be closed with no further action. As part of the decision to provide services, workers must determine Programmatic Eligibility for cases opened exclusively for Preventive Services.

The top half of the Decision Summary tab relates to determining Programmatic Eligibility. Workers can also record information about the Application for Services. On the lower half of the tab, workers record a decision regarding whether the FSI will close or be progressed to an open FSS.

The footer displays six buttons:
- Submit for Review
- Submit for LDSS Acceptance
- Create Family Services Stage (Stage Progression)
- Close FSI Stage
- Save
- Cancel
**Programmatic Eligibility**

A step in the process of determining Programmatic Eligibility is to indicate whether the case is being evaluated for Preventive Services Only. Programmatic Eligibility defines the standards of the need for services related to a child’s and/or family’s circumstance or condition. Workers must make this determination if an FSS is being opened for Preventive Services.

This section enables if the FSI did not originate from a CPS Investigation and if “Child Welfare” is selected as the Type of Services Being Requested on the Narrative tab. Workers are not required to make a Programmatic Eligibility determination if the FSI is opened from a CPS Investigation, or if the FSI is a COI, OTI, ICPC or ADVPO stage type.

The first field in the Decision Summary tab requires workers to select a Yes or No radio button in response to the following question:

“Is this case being evaluated for Preventive Services ONLY?”

If a worker selects the Yes radio button, a list of “needs” for Mandated Preventive Services displays. The worker must select the needs that support the provision of Preventive Services, as well as identify the need for Mandated Preventive Services to children at risk of placement.

Programmatic Eligibility for Preventive Services contains the following list of needs:

- Health and Safety of the child
- Parental Refusal or Surrender
- Parental Unavailability
- Parent Service Needs
- Child Service Needs
- Pregnancy
- Family Court-Ordered Services
- None of the Above

A worker must select one or more items from the list. If one or more needs are selected from the list, the None of the Above check box disables. If you select any item other than None of the Above, the following message displays in the upper right corner of the tab:

“This family is eligible for mandated preventive services.”

Click on the None of the Above check box if none of the needs on the list apply to the FSI. The following message displays in the upper right of the tab:

“This family is not eligible for mandated services, but is eligible for non-mandated services.”

Even though a case is not eligible for Mandated-Preventive Services, it is still eligible for Non-Mandated Preventive Services and an FSS can be opened. A Programmatic Eligibility determination is part of the case opening process to determine what funds will pay for provided services.
Step-by-Step: Recording Programmatic Eligibility Information on the Decision Summary Tab

1. From the Family Services Intake window, click on the Decision Summary tab.
2. To record Programmatic Eligibility, click on the Yes or No radio buttons.
3. If the case is being evaluated for Preventive Services only, click on the Yes radio button. Otherwise, click on the No button and skip to Step 5.
   *A list of Programmatic Eligibility standards displays.*
4. From the list of Programmatic Eligibility standards, identify the need for Mandated Preventive Services to Clients at Risk of Placement by clicking on the corresponding check box.
5. Click on the Save button.

Recording a Decision Close the FSI or Open the FSS

At this point in the stage of the FSI, workers must record a decision regarding whether this case will remain open for services (FSS stage) or if the FSI will be closed. Workers must record this decision in the bottom half of the Decision Summary tab.

The right side of the Decision Summary tab contains the following fields:

- **Date Application Sent**
  - This is the date the Application for Services was sent or provided to the client.

- **Date LDSS Received Application**
  - This is the date that the Local District received the application signed by either the parent or client; this field enables for Local District workers.
  
  *If you record a date in this field and the Application signed by CPS worker check box is currently selected, CONNECTIONS automatically deselects the check box.*

- **Application Signed by CPS Worker (check box)**
  - This check box indicates that the CPS worker, not the client, actually signed the application when the CPS stage is Indicated. The CPS report must be Indicated in order for the CPS worker to sign the application. OCFS regulations provide that the application process must be initiated by the applicant, the applicant’s authorized representative or someone acting responsibly for the applicant. (See 18 NYCRR 404.1(c)(4).) The completion of an application is required for CPS only when the report is Indicated. (See 18 NYCRR 404.1(c)(8)(ii).)
  
  *This check box enables if the FSI originated from a CPS Investigation and the worker is from a Local District and the Date LDSS Received Application Signed by Parent field is blank.*

  *If you record a date in the Date LDSS Received Application Signed by Parent field:*
Signed by Parent field, the system automatically deselects the Application signed by CPS worker check box.

If a worker recommends that a Family Services Stage be opened, s/he can record the date that an Application for Services was provided to the client. The worker must record the Date LDSS Received the Application Signed by Parent/Client field if the Type of Services Being Requested is “Child Welfare” (except for those Intakes that originated from CPS). Only the Local District may complete this field, because it indicates the date the responsible Local District received the signed application.

If the Type of Services is OTI, COI or ICPC, the Date Application Signed field disables. This field enables for ADVPO stages, and this date is used as the WMS case opening date.

If the FSI originated from a CPS Investigation, a CPS worker may sign the application. For these cases, the worker may select a check box indicating that s/he signed the application. If a Local District worker wishes to record a date in the Date LDSS Received the Application Signed by Parent/Client field, the check box indicating that the CPS worker signed the application is automatically deselected by the system.

Before the FSI can be stage progressed or closed, workers must select a decision from a drop-down list of choices. They can modify the decision until the FSI is closed. The following choices display in the Decisions field’s drop-down list:

- Open Family Services Stage
- Close Family Services Intake – Application Signed by Parent (client)
- Close Family Services Intake – Application NOT signed by Parent (client).

Workers must select a Closure Reason if the decision is to close the FSI; decisions are selected by clicking on the drop-down arrow for the Closure Reason field and selecting a decision from the resulting list. This is a supportive tool to document the reason why an FSI is being closed without the provision of services.

The Closure Reason field contains the following choices:

- Client’s request
- Out of Jurisdiction/Moved
- Family Services Intake or Services Stage Exists
- Insufficient Information
- Application Denied-Ineligible
- Opened in Error
- Other

Workers describe the reasons an FSI stage is recommended for closure in the Closure Comments window, which is opened from the Comments button. Workers can record comments for any Closure Reason, but they must record comments if the Closure Reason is “Application Denied-Ineligible.” If a worker selects the decision “Close – application signed by parent,” the Closure Reasons “Opened in Error” and “Insufficient Information” disable. If
“Application Denied” is the Closure Reason, a Local District worker can generate a Denial Letter. (See page 2-61 for information about the FSI Denial Letter.)

<table>
<thead>
<tr>
<th>Step-by-Step: Recording a Decision to Open an FSS</th>
</tr>
</thead>
</table>
| 1. On the **Decision Summary** tab, select the **Date Application Sent** and/or **Date LDSS Received Application** signed by Parent/Caretaker check boxes and record a date.  
  *If you record a date in the **Date LDSS Received Application Signed by Parent/Caretaker** field and the **Application signed by CPS worker** check box is currently selected, CONNECTIONS automatically deselects the check box.  
  —OR—  
  On the **Decision Summary** tab, select the **Application Signed by CPS Worker** check box.  
  *This check box enables if the FSI originated from a CPS Investigation and the worker is from a Local District and the **Date LDSS Received Application Signed by Parent** field is blank. If you record a date in the **Date LDSS Received Application Signed by Parent** field, the system automatically deselects the **Application signed by CPS worker** check box.*  |
| 2. Click on the **Save** button. |

**Submitting for Review**
At this phase in the process, workers are reaching the final stages of completing an FSI. Before they submit the FSI stage to be progressed to an FSS or to close the FSI, Voluntary Agency and Local District workers can submit an FSI to another worker or supervisor for review. This can be especially helpful for Voluntary Agency workers, since they must submit requests for an FSS to a Local District for final acceptance, or for an FSI closure when an Application for Services has been signed.

The **Submit for Review** button at the bottom of the tab (or the **Submit for Review** command from the **File** menu) opens the **Family Services Assign** window. The option to **Submit for Review** is always enabled. Workers must record all required information before an FSI can be submitted for review (see Appendix A3). If the FSI was created by a Voluntary Agency, it can be reviewed by a supervisor in the worker’s hierarchy before it is sent to a Local District for acceptance. Once submitted, the Local District can review the FSI (in view-only mode) and decide to accept or reject it.

The FSI is placed on the **Assigned Workload** of the person creating the Intake, as per common CONNECTIONS functionality. From the **Family Services Assign** window, a worker selects the person to review the FSI. This removes the FSI from the **Assigned Workload** and places it on the **Assigned Workload** of the worker selected as Caseworker on the **Family Services Assign** window.
CONNECTIONS does not require Local District workers to submit an FSI to their supervisor for approval and stage progression; however, local policy may require a review. The **Submit for Review** function supports this process. Voluntary Agency workers also may submit an FSI to their supervisor using this process prior to submitting the FSI to the Local District for approval.

<table>
<thead>
<tr>
<th>Step-by-Step: Submitting the FSI for Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  On the <strong>Decision Summary</strong> tab, click on the <strong>Submit for Review</strong> button. If all required fields are complete, the following message displays: “Submit for Review successful. This action will close the window. Do you want to continue?” —OR— If all required fields are not complete, a message with a list of unmet requirements displays. Click on the <strong>OK</strong> button, complete the required fields and repeat Step 1.</td>
</tr>
<tr>
<td>2  Click on the <strong>Yes</strong> button to continue. The <strong>Family Services Assign</strong> window displays. The Available Staff list contains the assignable staff members from all units of which the logged-in worker is a member. To add other workers to the Available Staff list, use the <strong>Staff Search</strong> function.</td>
</tr>
<tr>
<td>3  Select a worker from the Available Staff list, and then click on the <strong>Case Worker</strong> button. The selected worker’s name displays in the Assignments list.</td>
</tr>
<tr>
<td>4  Click on the <strong>Save</strong> button. The <strong>Assigned Workload</strong> displays. The FSI stage you submitted for review no longer displays on your Assigned Workload. The reviewer receives a system-generated <strong>Alert To-Do</strong> that the stage has been submitted for review.</td>
</tr>
</tbody>
</table>

For details on the Staff Search process, refer to the **Search Techniques Step-by-Step Guide**, which is available on the OCFS CONNECTIONS Intranet site. Please be advised that this process differs slightly as it is not initiated from the **Staff** button.
Submitting the FSI for LDSS Acceptance

Once the Voluntary Agency worker has recorded all of the required information (see Appendix A3), the FSI must be submitted for acceptance by the Local District if it will be stage progressed to an FSS or if the FSI is closed with an Application signed by parent/caretaker. An agency can choose to require supervisory review prior to submission.

The Submit for LDSS Acceptance button (or the Submit for LDSS Acceptance command on the File menu) enables for Voluntary Agency workers. This button is disabled for Local District workers, since no review for acceptance is necessary; they can skip this step and simply select the Stage Progression command.

Once the submission is processed, the FSI window closes and the Family Services Assign window displays. The available staff list defaults to the Local District staff in the family’s primary address county. The Voluntary Agency worker then selects the Local District worker/supervisor from the list and clicks on the Save button. The FSI stage is then reassigned to that worker’s Assigned Workload. Once the information has been reviewed by the Local District, the Local District worker must click on the Accept or Reject button to continue processing the FSI. If s/he clicks on the Reject button, the FSI returns to the Voluntary Agency worker’s Assigned Workload. If s/he clicks on the Accept button, the FSI can be stage progressed.

Voluntary Agency workers are not required to receive Local District acceptance of Intakes that are closed without opening an FSS, unless a signed application for services was received by the worker. For example, a Voluntary Agency worker had a client sign an Application for Services but the client decided not to proceed. If the client signed an application, the worker must select Close Family Services Intake–Application Signed by Parent (client) in the Closure Reason field. In this situation, the recommendation to close the Intake without opening an FSS must be reviewed and approved by a Local District.

Once an FSI has been submitted for review or acceptance, the data on the Intake Source tab is frozen. If an Intake is reassigned back to the original worker for more information, the data on the Intake Source tab becomes modifiable by that worker.

If the FSI is accepted, the reviewer can modify or reassign the stage. Once the stage is accepted, the Local District worker can determine if the stage should be opened as an FSS. An FSI can also be rejected, if it is incomplete, if additional work is needed, or if there is an incorrect jurisdiction. The Local District also has the option of recording comments during the process of rejecting the FSI. If the FSI is rejected, it returns to the submitting worker’s Assigned Workload.

When the FSI is closed, either by stage progression or without providing services, the information in the FSI is frozen (with the exception of the person demographics). Demographics cannot be maintained within that closed Intake but will be updated if the person is known in other open stages and changes are recorded.
**Step-by-Step:**
**Submitting the FSI for LDSS Acceptance**

1. On the **Decision Summary** tab, click on the **Submit for LDSS Acceptance** button.  
   —OR—  
   Click on the **File** menu and select the **Submit for LDSS Acceptance** command.  
   *The Family Services Assign window displays. The Available Staff list contains the assignable staff members from all units of which the logged-in worker is a member. To add other workers to the Available Staff list, use the Staff Search function.*

2. On the **Family Services Assign** window, click on the name of the Local District worker to whom the FSI is being submitted.

3. Click on the **Case Worker** button.

4. Click on the **Save** button.
Creating a Family Services Stage

Stage Progression Overview
Stage Progression is the process that allows for an FSI stage to be closed and a Family Services Stage (FSS) opened. A new FSS is created within the existing case and is reflected on the workload of the Local District worker who initiated the progression as an assignment of Case Manager.

The only CONNECTIONS role available in an FSI is Caseworker; only one person is assigned to an FSI at a time, but it can be reassigned. This person is the worker who created the FSI (assigned the CREATE FSI Business Function) or to whom the FSI was reassigned; this is not necessarily reflective of a specific job title (e.g., clerical worker). Once the Local District worker stage progresses the FSI to FSS, the Local District worker automatically becomes the Case Manager in the FSS; however, the Case manager role can be reassigned if necessary.

Before an FSS can be created, a Local District worker reviews the FSI and determines if opening an FSS is warranted and/or appropriate based on the information gathered at Intake and contained in the FSI. An Intake created by a Voluntary Agency must be accepted by the Local District in order to be progressed to an FSS. A Voluntary Agency worker may first submit the FSI to a Voluntary Agency supervisor for review or reassign the Intake to another Voluntary Agency worker for review. When submitted for review, the FSI is removed from the assigning worker’s Assigned Workload. The reviewer is assigned the role of Caseworker, with the ability to modify (except for the Intake Source tab) or reassign the stage. Either the Voluntary Agency worker or the supervisor may then submit the FSI to a designated Local District worker for acceptance.
Once the FSI is accepted by the Local District worker, s/he can close the FSI and open an FSS (a process known as “stage progression”) so that services may be provided to the family. Only a Local District worker can stage progress an FSI to an FSS. When the FSS is created, it is placed on the Assigned Workload of the Local District worker who performed the stage progression. That worker is automatically assigned as the Case Manager, but s/he can reassign the Case Manager role for that FSS to another Local District worker. The Case Manager can assign a Local District or Voluntary Agency worker as Case Planner or Caseworker.

CONNECTIONS deletes all To-Dos for the closed FSI and creates all required events and To-Dos for the newly opened FSS. All people and relationships in the FSI are copied to the FSS.

During the Intake process or once the FSI has been assigned to the Local District, a worker can recommend that the FSS should be linked to an existing CONNECTIONS case. If this has been done, the FSS information is saved to the CONNECTIONS database with the existing Case ID. If there is no existing Case ID, the FSS is saved to CONNECTIONS with the Case ID that was generated during the FSI.

More than one district may be providing services for a family at the same time, leading to an open FSI stage in other districts under the same Case ID. If an open FSI stage exists in another district, an Alert To-Do is sent to the Case Manager and the Case Planner to notify them that the family is requesting services in a different district.

**Progressing an FSI Stage to an FSS**

A Family Services Intake is stage-progressed to a Family Services Stage from either the Assigned Workload or from the Decision Summary tab of the FSI. It can only be stage-progressed by the Local District worker.

**Step-by-Step:** Progressing an FSI Stage to an FSS from the Assigned Workload

1. Select the FSI stage to be progressed.
2. Click on the Options menu and select Create Family Services Stage.  
   If all required fields are complete, the following message displays:  
   “This FSI will be closed and an FSS stage will be created. Do you want to continue?”  
   —OR—  
   If all required fields are not complete, a message with a list of unmet requirements displays. Click on the OK button to access the FSI stage to complete the required fields and then return to Step 1.
3. Click on the Yes button to create the new stage.  
   The following message displays:  
   “Create Family Services Stage successful.”
4 Click on the OK button.
   The new FSS displays on the Assigned Workload of the worker who initiated the stage progression. This worker is automatically assigned as the Case Manager.

---

Step-by-Step:
Progressing an FSI Stage to an FSS from the FSI Window

1 On the Decision Summary tab, click on the drop-down arrow for the Decision field and select Open Family Services Stage from the resulting list.
2 Click on the Save button. 
   In order to complete the progression, you cannot have any unsaved changes.
3 Click on the Create Family Services Stage (Stage Progression) button. 
   If all required fields are complete, the following message displays: “This FSI will be closed and an FSS stage will be created. Do you want to continue?” 
   —OR—
   If all required fields are not complete, a message with a list of unmet requirements displays. Click on the OK button, complete the required field, and repeat Step 3.
4 Click on the Yes button to create the new stage. 
   The following message displays: “Create Family Services Stage successful.”
5 Click on the OK button. 
   The new FSS is sent to the Assigned Workload of the worker completing the stage progression.

---

Closing an FSI

If a worker has decided not to provide services for a family, the FSI may be closed. In the worker's thorough decision making process, s/he has continually consulted his/her supervisor to assess the situation. The worker has made an informed decision based on his/her assessment of safety and risk that continued services are not necessary.

The Close FSI Stage button and the Close FSI Stage command from the Options menu are enabled whenever a Closure Decision and a Closure Reason have been selected.

To close an FSI, a worker must select (in addition to a Closure Reason) one of the two closure types/decisions:

- Close Family Services Intake – Application Signed by Parent (client)
- OR—
- Close Family Services Intake - Application NOT signed by parent (client)
Since only Local District workers can deny an Application for Services, only a Local District can generate a Denial Letter if the request for services is denied. No approval is necessary in this situation, so long as there is not a signed Application for Services.

Workers must complete the Decision and Closure Reason fields for all Closure Reasons. Depending on the Closure Reason selected, a worker may be required to complete other fields.

The Comments button enables when a Closure Decision is selected. Comments may be recorded for any Closure Reason, but are required if the Closure Reason is “Application Denied-Ineligible.” Clicking on the Comments button opens the Comments window. Once comments are recorded or modified, the OK button enables on the Comments window. Click on the OK button to store the recorded information and close the Comments window.

The Cancel button is always enabled. If you click on the Cancel button when changes have not been saved, the following message displays:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the changes.
- Click on the No button to close the message; unsaved changes remain pending.

If you select Close - application signed by parent in the Decision field and Application Denied-Ineligible in the Closure Reason field and the FSI originated from a Voluntary Agency, the FSI must be submitted to a Local District worker for acceptance. Once the FSI stage is closed, it is removed from the submitting worker’s Assigned Workload. If the FSI is the only open stage in the case, the case is also closed. If the family is denied services, the Local District may generate a Denial Letter.

### Step-by-Step: Closing an FSI

1. On the Decision Summary tab, click on the drop-down arrow for the Decision field and select Close – Application Signed by Parent (client) or Close Family Services Intake - Application NOT signed by parent (client), as appropriate, from the resulting list. The Closure Reason field highlights in yellow, indicating it is a required field.

2. Click on the drop-down arrow for the Closure Reason field and select from the resulting list.

3. Click on the Comments button to open the Reason(s) for Closing Intake window and record any applicable comments.

4. If you record comments, click on the OK button to retain the comments and close the Reason(s) for Closing Intake window.

5. Click on the Save button.

In order to complete the closure process, no unsaved changes can exist.
Click on the **Close FSI Stage** button. The button disables if any unsaved changes exist.

- If you selected **Close – Application Signed by Parent** as the **Closure Reason** and the FSI originated from a Voluntary Agency, you must submit the FSI to a Local District worker for acceptance. (See the Tip Box to the right.)

- If you selected **Application Denied-Ineligible** as the **Closure Reason** and the FSI originated in a Voluntary Agency, you must submit the FSI to a Local District worker for acceptance. (See the Tip Box to the right.)

If all required information has been recorded, the following message displays:

“**You are about to close this FSI stage and remove it from your workload. Do you want to continue?**”

—OR—

If the FSI is the only stage in the case, the following message displays:

“**You are about to close this FSI stage and the associated case. This FSI will be removed from your workload. Do you want to continue?**”

Click on the **Yes** button to close the FSI stage. The following message displays:

“Close FSI stage successful.”

Click on the **OK** button. The stage is removed from the Assigned Workload.

---

**Submitting the FSI for LDSS Acceptance:**

1. On the **Decision Summary** tab, click on the **Submit for LDSS Acceptance** button. —OR—
   Click on the **File** menu and select the **Submit for LDSS Acceptance** command. The Family Services Assign window displays. The Available Staff list contains the assignable staff members from all units of which the logged-in worker is a member. To add other workers to the Available Staff list, use the Staff Search function.

2. On the Family Services Assign window, click on the name of the Local District worker to whom the FSI is being submitted.

3. Click on the **Case Worker** button.

4. Click on the **Save** button.
Changing the Case/Stage Name and/or Community District

An FSI that originated from a CPS Investigation may have been created under the name of a family member who will not be part of the FSS composition. You can change the Case/Stage Name/CD from within the Decision Summary tab. You can also modify this by selecting a stage on your Assigned Workload, clicking on the Options menu and selecting the Case (Stage) Name/CD command. The Case/Stage Name can be modified by clicking on the drop-down arrow for the New Name field and selecting a name from the resulting list. The list displays the names of every person in the current stage.

The Community District (CD), which is applicable for New York City (NYC) only, can also be changed via the Options menu on the Decision Summary tab. NYC workers can update or record the stage CD. This functions as it currently does in CONNECTIONS.

Step-by-Step: Changing a Case/Stage Name

1. On the Decision Summary tab, click on the Options menu and select the Change Case/Stage Name command. The Case (Stage) Name/CD window displays.
2. Click on the drop-down arrow for the New Name field and select a name from the resulting list.
3. Click on the drop-down arrow for the New CD field and select a Community District from the resulting list. This field enables only for NYC workers.
4. Click on the Save button. The Decision Summary tab displays.
Information and Referral

A worker can document on the Information and Referral window the fact that a request for information about services was received. This is helpful in assessing what types of services are being requested in a particular agency or by geographic area. The request for services could have been resolved by providing information to the requestor, referring the requestor to another agency or facility, or informing the requestor that the service requested was unavailable.

Recording an Information and Referral is not required in CONNECTIONS. Any worker with the CREATE FSI Business Function can record an Information and Referral.

A list of Service Types (e.g., Adoption Services, Employment) displays on the Information and Referral window, followed by three actions that may be taken in response to the request. A worker can select multiple Service Records and an action relating to each request. The following actions may be selected:

- Referral Information Provided to Requestor
- Referral Made by Worker
- Service Unavailable

No person-specific demographics are captured. A worker may also record the amount of time spent on this request for services.

An Information and Referral is not an FSI; once a worker completes all required fields, the Information and Referral window closes and no approval is required. The recording of an Information and Referral does not open an FSI or an FSS.

After a worker selects any appropriate services, data is saved to CONNECTIONS. The Information and Referral window is then cleared, allowing the worker to record information relating to another request for services, if desired.

Once Information and Referral data is saved to the database, the information is not viewable in CONNECTIONS again. Data can only be viewed from aggregate management reports in the OCFS Data Warehouse.
The *Information and Referral* window is accessed from the CONNECTIONS Toolbar. Required information includes services discussed during the referral and actions taken by the worker (e.g., Referrals).

### Step-by-Step: Recording an Information and Referral

1. From the CONNECTIONS Toolbar, click on the **Intake** menu and select the **Record Family Services I&R** command.  
   *The Information and Referral window displays.*

2. Select a service from the **Service** list by clicking on one or more corresponding check boxes.  
   *You must select at least one of the action types relating to a Service Type (i.e., Referral Made by Worker, Referral Information Provided and/or Service Unavailable). You may select multiple Service Types and more than one action for each Service Type.*

3. Click on the drop-down arrow for the **Time Spent on Referral** field and select a time from the resulting list, if applicable.  
   *This drop-down list enables once an action has been selected for at least one Service Type.*

4. Click on the **Save** button to save the information to the database.  
   *The window remains open for you to record another referral.*

5. Click on the **Close** button to exit the *Information and Referral* window.
FSI Reports

The Family Services Intake Report

The Family Services Intake Report command generates the Family Services Intake Report (FSI Report), which displays the information that was recorded in CONNECTIONS as part of an FSI. This report can be generated from an FSI, an FSS or from the Assigned Workload.

The report is divided into nine sections. Each section of the report relates to a tab or window within the Family Services Intake (except the Caseworker Information section). For open FSI’s, the report displays the information that is currently contained in the FSI. For closed FSI’s, the report displays the information that was present in the FSI at the time of its closure.

The Intake Report contains the following sections:

- Standard heading
- Intake Source
- Person Demographics
- Reported Address Information
- Narrative
- Behavioral Concerns and Family Issues
- Sensitive Case Issues
- Requested Services
- Decision Summary

Step-by-Step: Generating a Family Services Intake Report

1. From the Assigned Workload, select the desired FSI stage.
2. Click on the Reports menu and select the Family Services Intake Report.
   *The FSI Intake Report displays in the report viewer. To print the report, click on the Print button.*
3. Click on the Close button.
   *The Assigned Workload displays.*

The FSI Denial Letter

The FSI Denial Letter command generates the Denial Letter. This letter can be printed and mailed to the individual(s) who have applied for services, notifying them that their request for services has been denied. If generating the FSI Denial Letter from an FSI stage, this must happen before the FSI stage is closed. Workers can also print this letter after the stage is closed by conducting a Case Search.

Step-by-Step: Generating a Denial Letter from an Open Family Services Intake Stage

1. From the Assigned Workload, select the FSI stage.
2. Click on the Tasks... button.
   *The FSI window displays.*
3 Click on the **Person Demographics** tab.
4 Select an individual from the Person List.
5 Click on the **Forms** menu and select the **Denial Letter (English)** or **Denial Letter (Spanish)**, as appropriate.

   *The Denial Letter displays in the report viewer. To print the letter, click on the **Print** button.*

6 Click on the **Close** button.

   *The **Person Demographics** tab displays.*

---

**Step-by-Step: Generating a Denial Letter from a Closed Family Services Intake Stage**

1 Click on the **CASE** button to conduct a Case Search.

   *The Case Search Criteria window displays. You can search by the Stage ID, Case ID or Case Name.*

2 After entering search criteria, click on the **Search** button.

   *The Case List displays with the case(s) that match the search criteria. If no cases match the search criteria, the following message displays (instead of the Case List): “No match was found for the criteria specified in your search.” Click on the OK button to close the message.*

3 Select the appropriate case (which contains the FSI stage) from the **Case List**.

4 Click on the **Events** button.

5 Select the event with the following description: “Record Family Services Intake.”

6 Click on the **Detail…** button.

7 Click on the **Person Demographics** tab.

8 Select an individual from the Person List.

9 Click on the **Forms** menu and select the **Denial Letter (English)** or **Denial Letter (Spanish)**.

   *The Denial Letter displays in the report viewer. To print the letter, click on the **Print** button.*

10 Click on the **Close** button.

   *The **Person Demographics** tab displays.*
The Family Services Face Sheet
The standardized FSI Face Sheet gives a quick overview of worker and Stage Composition information. The Face Sheet can be a tool to assist in the completion of the Common Application, LDSS 2921, used by the Welfare Management System (WMS). The Face Sheet contains identifying information, which can be attached to the WMS/CCRS Common Application. A worker can generate the FSI Face Sheet after information relative to the first person in the stage is recorded and saved on the Family Services Intake window. The Face Sheet command generates the standardized Family Services Intake Face Sheet, as needed.

There are two sections of information on the FSI Face Sheet: The Stage Composition section lists all of the individuals and their respective addresses; the Workers Information section lists the worker assigned to the stage.

Step-by-Step: Generating a Family Services Face Sheet from the Assigned Workload

1. From the Assigned Workload, select the FSI stage.
2. Click on the Reports menu and select the Family Services Face Sheet command. The following message displays:
   “The report has been launched. Check the report list window.”
3. Click on the Close button. The Assigned Workload displays.
4. Click on the RPRTS (Reports) button.
5. Select the Family Services Face Sheet report.
6. Click on the Open button. The Family Services Face Sheet displays in Microsoft Word.
7. To print the Family Services Face Sheet, click on the Print ( ) button.
   —OR—
   Click on the File menu and select the Print command.

Step-by-Step: Generating an Family Services Face Sheet from a Family Services Intake Stage

1. On the Family Services Intake window, click on the Reports menu and select Family Services Face Sheet. The FSI Face Sheet displays in the report viewer.
2. To print the Family Services Face Sheet, click on the Print ( ) button.

The Family Services Intake Log
The FSI Log enables workers to locate Family Services Intakes. This log lists Intake activity within a specified time period. Workers can perform a search of Family Services Intakes that were generated within their agency or assigned to their agency. The system returns results that match the search criteria entered.

Once the search is successfully completed and results have been returned, the worker selects the FSI Log Report command from the Reports menu. If the search parameters selected return no results, the FSI Log Report command is disabled.
The report displays on the Report List for viewing online.

The **FSI Log Report** is available to Voluntary Agency or Local District workers with the following security access:

**Voluntary Agency**

Workers with the CREATE FSI Business Function can access the Family Service Intake Log and search the log for Intakes that were assigned from or to their agency.

**Local District**

Workers with the CREATE FSI Business Function can access the Family Service Intake Log and search the log for Intakes that were assigned from or to their district.

The process allows a search of open and closed Intakes based on search criteria entered on the **FSI Log Report** window. Reasons for rejecting an FSI can be viewed in the log.

### Step-by-Step: Generating an FSI Log Report

1. On the CONNECTIONS Toolbar, click on the **Intake** menu and select the **Family Services Intake Log** command.  
   *The Family Services Intake Log window displays.*

2. Enter required search criteria, including **Date From** and **Date To** and specify either a Voluntary Agency or Local District search. Enter any other search parameters, if desired, and click on the **Search** button.  
   *The search results display in the lower half of the window.*

3. Click on the **Reports** menu and select the **FSI Log Report** command.  
   *The report displays in the report viewer.*

4. To print the report, click on the **Print** button.

The following search criteria are available for the Family Services Intake Log Report:

- **Name**
- **Stage Type**
- Choice to view Active FSI stages or All (including closed) FSI stages
- **Date Range**
  * (Searches are limited to a one month span and cannot include a future date.)
- **Unit Information**

The Family Services Intake Log Report displays the search results from the **Family Services Intake Log** window. This includes Rejection Reasons, if applicable. You can navigate to view the details of the FSI stage by selecting a stage and clicking on the **FSI** button.

A search returns 500 records at a time. If more than 500 records are found to meet the search criteria, click on the forward and backward buttons to retrieve the previous or next 500 records.

When printing, only the results that are displayed on the screen are included in the print. If more than 500 records are found to meet the search criteria, workers need to page forward and print the next set of results.
Module 3: The Family Services Stage

Information recorded about children and families in CONNECTIONS is organized into electronic case records. Once a Family Services Intake (FSI)—whether from a CPS or non-CPS source—is progressed to a Family Services Stage (FSS), workers in both the Local District and Voluntary Agency involved in that stage document their casework activities in that electronic case record. (For more information about the FSI, refer to Module 2: Family Services Intake.) With all child welfare professionals working from the same electronic case record, a comprehensive view of the services development and delivery process is maintained regarding the children and adults involved in the case.

The FSS provides for the documentation of casework activities, including progress notes, safety and risk assessments, as well as services that have been requested, determined to be needed and/or provided. CONNECTIONS supports the child-centered, family-focused Case Management model for Child Welfare practice in New York State by providing the documentation framework in the FSS. The FSS contains all documentation related to the Family Assessment and Service Plan (FASP), to which all of the workers involved in the case contribute. This practice requires coordinated efforts among child welfare professionals in Local Districts and Voluntary Agencies, as appropriate.

An FSS can be one of the following Types:

- **Child Welfare Services (CWS)**
  This is the most commonly used type of Family Services Stage. It includes adoption, foster care, preventive and long-term protective services.

- **Child Case Record (CCR)**
  The Child Case Record is created when a child is legally freed for adoption. This is a completely separate type of FSS; every child who has been freed, including those who might not be placed in an adoptive setting, has a separate CCR. Each CCR will also have its own corresponding Welfare Management System (WMS) case.

- **Out-of-Town Inquiry (OTI)**
  There are two types of Out-of-Town Inquiry (OTI): out-of-state and county-to-county. An out-of-state OTI is a written request for assistance or follow-up on a specific matter that usually involves a family (or family members) now residing in New York State. A county-to-county OTI is a request made by one Local District to another Local District for assistance or follow-up on a specific matter that involves a family (or family members) residing outside the requesting district. The request usually requires an action that cannot be completed by the requesting district.

- **Court Ordered Investigation (COI)**
  This type is used for a case that was initiated by a court-ordered investigation, rather than by a CPS investigation.
• **Interstate Compact for the Placement of Children (ICPC)**
  This type is used for cases where the Local District or Voluntary Agency is receiving a child from another state. All children who were in foster care in New York State and are being placed via ICPC in another state already have an open FSS/CWS in CONNECTIONS and will continue to be tracked in that stage.

• **Advocates Preventive Only (ADVPO)**
  The Advocates Preventive Only (ADVPO) type is used exclusively for Family Services Stages in New York City when ACS is the Case Manager for a preventive services case and the Voluntary Agency that will be directly providing only preventive services to the family is exempt from the responsibility of recording the FASP online, in accordance with the conditions of the Advocates Preventive lawsuit settlement.

Your ability to access and maintain the FSS depends on a variety of factors:

- Your current or historical role in the stage
- The Business Functions that have been assigned to you
- The Agency Access and Organizational Hierarchy your district/agency has established in CONNECTIONS

If you have a role in the stage, you can access the FSS from your Assigned Workload and maintain all necessary components of that stage that are appropriate for your role. You may be assigned one of four roles in an FSS:

- **Case Manager**
  Every FSS has a Case Manager, who must be a Local District worker. An FSS can have only one Case Manager at any given time. The Case Manager provides oversight of the case and approves the FASP. When the Case Manager acts as the Case Planner, the Case Manager’s supervisor must approve the FASP.

- **Case Planner**
  The FSS may have a Case Planner, who may be either a Local District or Voluntary Agency staff person. An FSS can have only one Case Planner at any given time. The Case Planner is responsible for coordinating work with the family, as well as completing and submitting the FASP in a timely fashion; this includes reviewing the work of all other workers who have contributed to the FASP and accepting or revising that information accordingly.

  The Case Planner submits the FASP to the Case Manager for approval and alerts the CPS Worker/Monitor in circumstances where that individual needs to complete or review the FASP.
Caseworker

One or more Caseworkers (who can be either Local District or Voluntary Agency staff) may be assigned to an FSS. The Caseworker role in an FSS stage may be assigned cross-district by a Local District Case Manager or a Local District Case Planner. Caseworkers who are assigned to an FSS complete work within the FASP, such as the Family Scales. A Caseworker may be responsible for a specific child, multiple children or no children in the FSS. A Caseworker can also be Associated to a specific child or children. A Caseworker who has been Associated to a specific child can complete the Child Scales and Foster Care Scales for that child. Associating a Caseworker to a specific child does not prevent other workers from working with that child or completing other parts of the FASP that may relate to that child in the overall Service Plan. (See “The Associate Worker Tab” in Module 6: Tracked Children Detail.)

CPS Worker/Monitor

The CPS Worker/Monitor is responsible for overseeing case activities when:

1. the case was opened from an Indicated CPS Investigation stage; and
2. the CPS worker is not the primary service provider for the case; and
3. ongoing protective concerns have been identified.

These activities include reviewing safety-related and risk-reduction actions and activities, determining that appropriate services are being provided, and modifying the service plan when the child’s or family’s progress is not sufficient to meet the desired outcomes identified in the plan.

Aside from your role in an FSS, you can also access the FSS in any of the following circumstances:

- If you have an historical role in a CPS Intake (INT), CPS Investigation (INV), or Administrative Review (ARI) stage that is currently closed, you can view all of the FSS stages associated with the case that existed before your assignment ended.
- If your district or agency has established Agency Access that permits view-only or maintain access to FSS stages, you can access those stages until Agency Access is changed to remove such access.
- If you have been assigned the ACCESS ALL DIST (Access All in District) or ACCESS ALL AGY (Access All in Agency) Business Function, you can view all of the FSS stages in your district or agency.
- If you have an Implied role in the FSS (because you have a role in a separate case that shares a person in common with the FSS), you can view all of the information for the case in which you have an Implied role. If you are a Voluntary Agency worker, you will not be able to access any information in the CPS Intake or Investigation stage.
- If you are in the unit hierarchy of a worker who has a role in the FSS and you have been assigned the UNIT SUM ACCESS Business Function, you can access information in that FSS via the Unit Summary window.
You can access the FSS through:

- the *Assigned Workload* (if you have a role in the case or access to the Assigned Workload of a worker with a role in the case); or
- the *Event List* (view-only).

### Step-by-Step: Opening the FSS from the *Assigned Workload*

1. Click on the **WORK** button on the CONNECTIONS Toolbar.
   
   *The Assigned Workload displays.*

2. Click on the FSS you want to access.
   
   *The Tasks… button enables.*

3. Click on the **Tasks…** button.
   
   *The Family Services Stage window displays.*

### Step-by-Step: Opening the Family Services Stage from the *Event List*

1. After conducting a Case Search (see the tip box at right), select the appropriate case from the *Case List*.
   
   Where am I?
   
   For step-by-step instructions on conducting a Case Search, see “Case Search” in Module 1: CONNECTIONS Basics.

2. Click on the **Events** button.
   
   *The Event List displays.*

3. Select the Event you want to view by clicking on it.

4. Click on the **Detail** button.
   
   *The FSS displays for the selected event.*
The Family Services Stage Window

The Family Services Stage window is divided into three sections:

- Header
- Tabs
- Footer

The Stage Name, Case ID number and Stage ID number display in the title bar.

**Header**

The header is only visible when the *Stage Composition* tab displays. The information contained in the header is system-generated and cannot be modified.

- **Case Name**
  - The Case Name is the name by which the case is identified in CONNECTIONS. Cases are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. In an FSS/CCR stage, the Line 1 person is the solitary child in the CCR.

- **Case Initiation Date**
  - The Case Initiation Date (CID) is the first day of a Family Services Stage. The CID is the *earliest* of the following events:
    - 1 Date of CPS indication
      - (The approval date of the CPS Investigation Conclusion when a report is Indicated)
    - 2 Date of application for services
      - (The date an application for services that has been signed by a parent/client was received)
• 3 Date of placement
   (The date on which a child is placed in foster care)

• 4 Date of court order
   (The date of the court order for preventive services, commitment of care and custody, or custody and guardianship to the LDSS commissioner for placement)

App Reg/Ver
This field displays the WMS-assigned Application Registration/Verification number for a new services case in the Welfare Management System (WMS). The App Reg/Ver button displays once a Primary Caretaker has been selected and the Family Relationship Matrix is completed. The button remains enabled until the worker clicks on it. If the WMS services case has not yet been created, this field will be blank.

The header also includes the App Reg/Verify button, which enables you to create a new WMS services case. When you click on this button, the Application Registration process will run in the background. An Application Report and Clearance Report will be sent automatically to the Legacy printer associated with the Local District worker performing the App-Reg. When the Application Registration process is complete, any changes you make to the FSS Stage Composition tab in CONNECTIONS will be sent automatically to WMS. You will continue to perform all subsequent processing associated with the WMS services case directly in WMS.

Once an identification number is generated and displayed in the App Reg/Ver field in the FSS header, the button will change to a WMS Synch button. If changes are made to person information in an Investigation or FAD stage that contains people in common with an FSS, the WMS Synch button enables, alerting the Local District or Voluntary Agency worker that demographic information is no longer synchronized in CONNECTIONS and WMS. Click on the button to send the updated information to WMS. If there is non-services information in the WMS hierarchy, the services demographics will not synchronize with CONNECTIONS; non-services information is above services information in the hierarchy. (For detailed information about synchronization, see the Build 18 Interfaces Job Aid, available on the OCFS CONNECTIONS intranet site.)

In order to avoid duplicate CINs for a Preventive Services case opened to a pregnant woman who has no other children and is also receiving non-services, once the child is born the worker should contact the non-services worker to update the WMS record. The unborn child has a record (and a CIN) in WMS for the non-services case, and the child’s record in WMS must be updated.
Tabs
The majority of the information on the *Family Services Stage* window is divided into six file tabs:

<table>
<thead>
<tr>
<th>Tab</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Stage Composition**        | The *Stage Composition* tab is the “home” tab; it is always the active tab when you access the FSS from the *Assigned Workload*. This tab lists all of the individuals involved in the FSS, as well as their demographics, identifiers, address and phone information. You can maintain most of the information directly on the tab.  

*(For more information, see Module 4: Stage Composition.)* |
| **Family Assessment and Service Plan** | This tab provides access to the *Family Assessment and Service Plan window*, from which you can access all current and historical Family Assessment and Service Plans (FASPs) for the FSS. The FASP contains the electronic documentation of assessments and service planning for the case. You use this window to record the main components of assessment and service planning for the FSS.  

*(For more information, see Module 8: The Family Assessment and Service Plan.)* |
| **Service Plan Review**      | This tab provides access to the *Service Plan Review window*, which allows you to record or view the results of the Service Plan Reviews for all FASPs associated with the stage. The Service Plan Review is a meeting of key participants to develop and review the Service Plan, including Outcome and Activity statements. Key participants include individuals involved in the FSS, assigned workers and/or outside participants (such as foster parents and service providers). Service Plan Review documentation is important for keeping everyone, including the family, on the same page toward achieving the goals and outcome.  

*(For more information, see Module 18: Service Plan Review.)* |
| **Progress Notes**           | In order to maintain a contemporaneous and comprehensive view of the activities occurring in an FSS, workers need to record and view Progress Notes. This tab provides access to the *Progress Notes window*, which workers use to create, modify, copy, search, sort, view, print and record addenda to Progress Notes. (Workers can also delete “Draft” notes.) This window is also useful for monitoring required casework contacts and creating reports.  

*(For more information, see Module 7: Progress Notes.)* |
**Key Dates**

This tab is only enabled for stages that were closed prior to the implementation of Build 18.7 (December 16, 2005). The Key Dates window no longer receives updates from CCRS and instead displays the last data received from CCRS prior to the implementation of Build 18.7.

**Case Summary**

This tab provides access to the Case Summary window, which displays all of the stages (open or closed) that are part of the case. This window also displays the names of workers who are currently assigned to active stages (or historical workers if the stage is closed). However, CPS Intake and Investigation stages will not display for Voluntary Agency workers.

The Case Manager or Case Planner uses the Case Summary window to initiate the stage closing process and, in certain situations, to change the stage type.

*(For more information, see Module 20: Case Summary.)*

For some FSS types (OTI, COI, ICPC and ADVPO), the following tabs are disabled:

- Family Assessment and Service Plan
- Service Plan Review
- Key Dates

As a result of the New York City Advocate lawsuit, there is no system requirement to record progress notes in CONNECTIONS for FSS/ADVPO stages.
Module 4:  
Stage Composition

Stage Composition captures information about the members of the family being served. It includes demographic and locating information, such as address and telephone numbers. During the timeframe in which a Family Services Stage (FSS) is open, the composition of the household may change. For example, spouses may divorce and/or re-marry, step-children may become part of the household, biological children may be born, older children may reach the age of maturity and leave the household, or extended family members may be associated with the stage. As information changes about one or more individuals, or about the family as a whole, it is important for assigned workers to keep the information up-to-date in the electronic case record. The individuals listed in the Stage Composition represent the people with whom the Caseworker is working. The Stage Composition provides a consistent and ready reference for important information and may be used for concurrent planning purposes as the case progresses (e.g., to assist in identifying and locating family members who may possibly be considered resources for a child who is in foster care).

If the information was previously recorded elsewhere in CONNECTIONS (e.g., in a CPS Investigation stage or non-CPS Family Services Intake stage), the Stage Composition populates automatically in the FSS. If the Stage Composition information was not known previously, you need to record it in the FSS as soon as it becomes available. As the household composition changes, you need to make sure the current information is reflected in CONNECTIONS.

Stage Composition Tab

The Stage Composition tab allows you to add to or modify the composition of the Family Services Stage, including person demographics, person identifiers, address and phone information for all persons already associated with the stage. In addition, you can do the following from this tab:

- Select Primary/Secondary Caretakers
- Maintain Multiple Primary Address information
- End Date stage involvement of persons in the stage
- View and/or maintain the Family Relationship Matrix
- Retrieve the Historical Stage Composition
- Change the Final Adoptive Name

In order to view and/or maintain information on the Stage Composition tab, you must have a role in the stage (Case Manager, Case Planner, Caseworker, CPS Worker/Monitor). If you previously had (but no longer have) a role in the FSS stage, you can view current and historical information until the point at which you ceased having a role in the stage.
Aside from your assigned role in an FSS, you can also access the FSS in any of the following circumstances:

- If you have an historical role in a CPS Intake (INT), CPS Investigation (INV), or Administrative Review (ARI) stage that is currently closed, you can view all of the FSS stages associated with the case that existed before your assignment ended.
- If your district or agency has established Agency Access that permits view-only or maintain access to FSS stages, you can access those stages until Agency Access is changed to remove such access.
- If you have been assigned the ACCESS ALL DIST (Access All in District) or ACCESS ALL AGY (Access All in Agency) Business Function, you can view all of the FSS stages in your district or agency.
- If you have an Implied role in the FSS (because you have a role in a separate case that shares a person in common with the FSS), you can view all of the information for the case in which you have an Implied role. If you are a Voluntary Agency worker, you will not be able to access information in CPS Intake or Investigation stages.
- If you are in the unit hierarchy of a worker who has a role in the case and you have been assigned the UNIT SUM ACCESS Business Function, you can access the FSS from that worker’s Assigned Workload.

While much of the information that displays on the Stage Composition tab can be modified directly on the tab (when it is accessed in modify mode), some information is read-only on the tab:

- Person ID
- M/S (Merge/Split indicator)
- Sch (Search indicator)
- PC/SC (Primary/Secondary Caretaker indicator)
- CIN (WMS Client Identification Number)
- Date Added (to the Stage)
- Date End-Dated
Phone information is not modifiable directly on the tab, but can be modified on windows that are accessed from this tab.

The **CIN** information is brought over from the Welfare Management System (WMS) to CONNECTIONS; most of the remaining read-only information is brought over from the Family Services Intake (FSI) stage in CONNECTIONS. The **PC/SC** field can only be recorded on the **Primary/Secondary Caretaker** window, which is access from this tab; this information cannot be recorded in the FSI. The **Date Added** and **Date End-Dated** fields are system-populated on this tab only in the FSS.

The **Stage Composition** tab can be accessed in view-only mode via the **Event List** for a specific FSS. To open the tab in modify mode, you must access it via the **Assigned Workload**. Whenever you access the FSS in this manner, the **Stage Composition** tab is the first tab displayed (“home”).

### Step-by-Step: Accessing the Stage Composition Tab

1. From the **Assigned Workload**, click on the **Tasks…** button. The Family Services Stage displays. The **Stage Composition** tab is active. If you attempt to access the FSS when a stage closure event is pending, the following message displays after the FSS window opens:

   “Stage is pending closure. You will be entering in browse mode. Contact the approver.”

   - Click on the **OK** button to close the message; the FSS displays in view-only mode.

The **Stage Composition** tab is comprised of Person List and Person Identifiers grids, the **Race** and **Ethnicity** fields and seven buttons.

The Person List grid contains the following columns of information for each person associated with the stage:

- **First Name**
- **Last Name**
- **Middle Name**
- **Person ID**
- **M/S**

The person’s full name
The person’s unique, CONNECTIONS system-generated identification number
The Person Merge/Split indicator; denotes that the person’s record was involved in a merge (to combine two person records) or a split (to separate erroneously combined person records)
### Sch

The Person Search indicator: “V” in this column denotes that the Person Search results were viewed (but not related); “R” denotes that the person was related to the FSS (See “Adding or Relating a Person to the FSS” on page 4-13 for more information about the relate function.)

---

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOB</td>
<td>The person’s date of birth</td>
</tr>
<tr>
<td>Approx (DOB)</td>
<td>The Approximate Date of Birth flag (indicates that the DOB displayed is approximate, not exact)</td>
</tr>
<tr>
<td>Age</td>
<td>The person’s age (typically calculated from the DOB; may be recorded directly, which automatically updates the <strong>DOB</strong> field)</td>
</tr>
<tr>
<td>PC/SC</td>
<td>The Primary/Secondary Caretaker indicator; denotes that the individual has been selected as either the Primary Caretaker or Secondary Caretaker of the child(ren) in the stage (See “Maintaining Caretaker Information” on page 4-28 for details about Primary and Secondary Caretakers.)</td>
</tr>
<tr>
<td>Marital</td>
<td>The person’s marital status</td>
</tr>
<tr>
<td>Sex</td>
<td>The person’s sex</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>The person’s ethnicity (modifiable by selecting the person from the grid and recording information in the <strong>Ethnicity</strong> field in the lower right corner of the tab)</td>
</tr>
<tr>
<td>Race</td>
<td>The person’s race (modifiable by selecting the person from the grid and recording information in the <strong>Race</strong> field in the lower right corner of the tab); displays “Multiple” if more than one race is selected</td>
</tr>
<tr>
<td>Language</td>
<td>The person’s language; only one language may be selected</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td>The person’s religion (modifiable by clicking on the cell, clicking on the resulting drop-down arrow and selecting from the list)</td>
</tr>
<tr>
<td><strong>DOD</strong></td>
<td>The person’s date of death, if applicable</td>
</tr>
<tr>
<td><strong>Approx (DOD)</strong></td>
<td>The Approximate Date of Death flag (indicates that the DOD displayed is approximate, not exact)</td>
</tr>
<tr>
<td><strong>Reason</strong></td>
<td>The reason for the person’s death (e.g., Accidental, Drug Related, Natural Causes); “A/N” indicates that the cause of death was related to abuse or neglect (in an open case, a closed case, or no prior case)</td>
</tr>
<tr>
<td><strong>Phone Number and Extension (Extn)</strong></td>
<td>The person’s primary phone number and extension, if any</td>
</tr>
<tr>
<td><strong>Type</strong></td>
<td>The type of phone number listed in the Phone Number field (e.g., Residence)</td>
</tr>
<tr>
<td><strong>Date Added</strong></td>
<td>The date the person was added to the Family Services Stage (If the person was associated with the stage at the time the FSS was progressed from the FSI, the FSS stage creation date displays here.)</td>
</tr>
</tbody>
</table>

In order to see all of these columns, you need to use the horizontal scroll bar at the bottom of the Person List grid. When you scroll to the right, the name fields will “lock”; they display constantly regardless of what other columns you view. An asterisk (*) preceding a field’s name on the window denotes information required by the Adoption and Foster Care Analysis and Recording System (AFCARS) or the National Child Abuse and Neglect Data System (NCANDS). This is data that New York and all other states must provide to the Federal government.

The Person Identifiers grid is used for recording specific identification numbers other than the CONNECTIONS system-generated Person ID (PID). Commonly recorded identifiers include the Social Security number or Family Album number. Some Person Identifiers are generated by systems outside of CONNECTIONS, such as the WMS Case Number or the WMS Services Client Identification Number (CIN). This grid is comprised of the following fields, which display information for the individual selected in the Person List grid:

| **INV (ID invalid tag)** | This field indicates whether the selected individual’s identification number for the Type field (see below) has been marked as “Invalid” in the system. “Invalid” in CONNECTIONS typically means that the number was never correct—that it was recorded in CONNECTIONS incorrectly—and a worker marked it as invalid in CONNECTIONS. However, with respect to a Person Identifier, marking it as “Invalid” is the only way to end date it. |
Type

This field denotes the type of person identifier (e.g., Social Security number, WMS Client Identification Number) that is recorded.

The following Person Identifier types are available:

- Arrest #
- Family Album #
- Driver’s License #
- Medicaid #
- Medicare #
- NYC Non-Services CIN†
- Other #
- Parole #
- Prisoner #
- Probation ID
- SCRID #
- Services CIN†
- SSN
- WMS Case Number†

Number

This field contains the identification number for the selected person. The information you record in this field is formatted automatically by the system, based on the Type you selected. For example, if you selected “SSN” (Social Security number) in the Type field and recorded the nine-digit Social Security number (123456789) in the Number field, CONNECTIONS automatically inserts the hyphens in the appropriate locations (123-45-6789).

If you don’t record the correct information (e.g., too many or too few digits for the Social Security number), the following message displays when you click on the Save button:

“Invalid Data entered for <Type>”

- Click on the OK button, then correct the information in the field.

If you click on the Cancel button, the following message displays:

“Do you want to cancel? Unsaved data and/or narratives will be lost.”

- Click on the Yes button to discard the changes.
- Click on the No button to close the message without discarding changes; changes remain pending.

Start Date

The date on which the information is first applicable; this field defaults to the system date.
**End Date**
When the identifier was valid at one time, but is no longer valid, you “end date” the information in this field by marking the identifier as “Invalid”; CONNECTIONS records the current date as the End Date of the identifier for which the information expired or was no longer applicable. (In other areas of CONNECTIONS, information is marked as “Invalid” only if the information was never correct; however, the End Date cannot be recorded manually for Person Identifiers, so the information needs to be marked as “Invalid” to generate an End Date.) For example, if you need to record an end-date for a child’s Family Album number to reflect the child’s removal from the Adoption Photo Listing because s/he was discharged to a relative or “aged out” of foster care at the age of 21, mark this identifier as “Invalid.” The date this was recorded automatically populates in the **End Date** field.

**Comment**
Use this field to record any comments relevant to the recording of Person Identifiers. This field allows a maximum of 40 characters and spaces. For example, if you wanted to record a comment indicating that an adult’s identifier comes from a case in which that adult was then a child, you could record, “As a child, Case Name Jane Jones.”

The Person Identifiers grid also contains a horizontal scroll bar, which you will need to use to see the **Comment** field.

You can modify the information in these grids by clicking on the cell you need to modify and either (a) typing directly in the cell or (b) clicking on the field’s drop-down arrow and selecting from the resulting list. You can only modify one row at a time. Keep the following information in mind regarding the ability to change information “in place” on the grid:

- The information in the **PC/SC** column cannot be modified directly (“in place”) on the grid; you need to modify this information on the **Primary/Secondary Caretaker** window. (See “The Primary/Secondary Caretaker Window” on page 4-29.)
- The phone number cannot be modified directly on the grid; you need to modify this information on the **Maintain Phone** or **Maintain Primary Address/Phone** window.
- You cannot modify the **Person ID**, **Merge/Split indicator**, **Search indicator**, **End Date**, **Date Added to the stage or CIN**; this information is system-generated (by CONNECTIONS or, in the case of the CIN, by WMS) and read-only.

Federal standards require that an accurate representation of race and ethnicity be captured for federal reporting. These standards include the ability to record multiple races for a single person and define ethnicity categories. To modify a person’s **Race** and **Ethnicity** information, select the person from the Person List grid and modify the information in the fields in the lower right corner of the tab.
Race

The **Race** field contains a list of races and sub-groups that can be recorded in CONNECTIONS. More than one race can be selected from the list. Available selections are:

<table>
<thead>
<tr>
<th>Race (or Race Sub-Group)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black or African American</td>
</tr>
<tr>
<td>Caribbean</td>
</tr>
<tr>
<td>Haitian</td>
</tr>
<tr>
<td>Native African</td>
</tr>
<tr>
<td>Other – Black or African American</td>
</tr>
<tr>
<td>Alaskan Native</td>
</tr>
<tr>
<td>American Indian</td>
</tr>
<tr>
<td>Asian</td>
</tr>
<tr>
<td>Chinese</td>
</tr>
<tr>
<td>Indian</td>
</tr>
<tr>
<td>Japanese</td>
</tr>
<tr>
<td>Korean</td>
</tr>
<tr>
<td>Other – Asian</td>
</tr>
<tr>
<td>Pacific Islander/Native Hawaiian</td>
</tr>
<tr>
<td>White</td>
</tr>
</tbody>
</table>

**Why isn’t “Hispanic or Latino” listed in the Race field?**

CONNECTIONS supports the recording of complete and accurate race and ethnicity information. Hispanic or Latino Origin can exist within any race.

Ethnicity

The **Ethnicity** field is used to indicate the ethnic background of the selected individual. An Ethnicity must be selected in order to add a person to the system. “Not Reported” is the system default, but this selection can be modified.

To record ethnicity, click on the drop-down arrow for the Ethnicity field and select **Hispanic or Latino Origin**, **Non-Hispanic or Latino Origin** or **Not Reported**. If you select **Hispanic or Latino Origin**, a list enables in which you can select one or more Hispanic or Latino origins.
Seven buttons display at the bottom of the **Stage Composition** tab:

**Address**

This button opens the *Maintain Address* window, where you can update address information for the selected person. The button enables when you select a person from the Person List grid. You can also access this window via the **Address** command in the **Options** menu. (See “The Maintain Address Window” on page 4-23 for details about this window.)

If you need to change the primary address of several or all individuals in the household (e.g., when the family moves to a new address), use the *Maintain Primary Address and Phone* window. (See “The Maintain Primary Address and Phone Window” on page 4-25.)

**Phone**

This button opens the *Maintain Phone* window, where you can update phone information for the selected person. The button enables when you select a person from the Person List grid. You can also access this window via the **Phone** command in the **Options** menu. (See “The Maintain Phone Window” on page 4-24 for details about this window.)

If you need to change the primary phone number for several or all individuals in the household (e.g., when the family’s home phone number changes), use the *Maintain Primary Address and Phone* window. (See “The Maintain Primary Address and Phone Window” on page 4-25.)

**Relationship Matrix**

This button opens the *Family Relationship Matrix* window, where you can view and maintain the Family Relationship Matrix for the stage.

**Add/Relate**

This button opens the *Add/Relate* window, where you can conduct a Person Search for individuals in the CONNECTIONS database. After conducting the search, you need to *relate* individuals to the stage if they are known to CONNECTIONS, or *add* individuals to the stage if they are *not* known to CONNECTIONS. This button enables for the following FSS types:

- Child Welfare Services (CWS)
- Court Ordered Investigations (COI)
- Interstate Compact on the Placement of Children (ICPC)
- Out of Town Inquiry (OTI)
- Advocates Preventive Only (ADVPO)

This button is disabled for FSS stages with a type of “Child Case Record” (CCR) or when the **Stage Composition** tab is accessed in view-only mode.
You can also access this window via the **Add/Relate** command in the **Options** menu. (See “Adding or Relating a Person to the FSS” on page 4-13.

In order to avoid duplicate CINs for a Preventive Services case opened to a pregnant woman who has no other children and is also receiving non-services, once the child is born the worker should contact the non-services worker to update the WMS record. The unborn child has a record (and a CIN) in WMS for the non-services case, and the child’s record in WMS must be updated.

---

**Caretaker**

This button opens the **Primary/Secondary Caretaker** window, where you can select a Primary Caretaker and a Secondary Caretaker for the individual selected in the Person List grid. You can also access this window via the **Select Primary/Secondary Caretaker** command in the **Options** menu.

This button enables for the following FSS types:

- Child Welfare Services (CWS)
- Court Ordered Investigations (COI)
- Interstate Compact on the Placement of Children (ICPC)
- Out of Town Inquiry (OTI)
- Advocates/Preventive Only (ADVPO)

This button is disabled for any stage with “CCR” (Child Case Record) as the Type. (See “The Primary/Secondary Caretaker Window” on page 4-29 for details about this window.)

**Save**

This button saves changes made to the information on the tab since the last save. The **Save** button is disabled until you make a change.

You can save only one row at a time. If you attempt to proceed to another row without saving changes you have made, the following message displays:

> “Please save the Person Demographics information.”

- Click on the **OK** button to close the message.
This button cancels any changes made to the information on the tab since the last save. The **Cancel** button is disabled until you make a change. When you click on the **Cancel** button, the following message displays:

"Do you want to cancel? Unsaved data and/or narrative will be lost."

- Click on the **Yes** button to cancel the changes and have all information revert to its state after the last save.
- Click on the **No** button to end the cancellation request and return to the window for additional modifications (or to enable the **Save** button).

Most of the functions available from the buttons are also accessible from the **Options** menu on the **Stage Composition** tab (these are noted above where applicable); some functions are accessible on this tab only from the **Options** menu:

**Maintain Primary Address/Phone**
This command opens the **Maintain Primary Address and Phone** window, where you can add or update the primary address or phone number for multiple individuals. (See “The Maintain Primary Address and Phone Window” on page 4-25 for details.)

**End Date Stage Involvement**
This command opens the **End Date Reason** window, where you can select the reason why the selected individual is no longer involved in the Stage Composition (e.g., no longer programmatically eligible for services or moved out of the district). (See “End-Dating a Person’s Involvement in the FSS” on page 4-31.)

**View Historical Stage Comp**
This command opens the **Historical Stage Composition** window, which displays the names of all individuals who have been end-dated from the stage.

This command enables for the following FSS types:
- Child Welfare Services (CWS)
- Court Ordered Investigations (COI)
- Interstate Compact on the Placement of Children (ICPC)
- Out of Town Inquiry (OTI)
- Advocate/Preventive Only (ADVPO)

This command is disabled for any stage with a **Type** of “CCR.” (See “The Historical Stage Composition Window” on page 4-33.)

**View Family of Origin**
This command opens the view-only **Family of Origin** window. When a child is freed for adoption, s/he is end-dated in the FSS/CWS stage and established in a separate FSS/CCR stage. The child’s name still displays on the FSS/CWS **Stage Composition** tab, but his/her involvement in the FSS/CWS stage is end-dated. The **Family of Origin** window always displays current information, which may have changed since the child was end-dated in the FSS/CWS stage.

This command enables only for an FSS/CCR stage. It is
disabled for the following FSS types:

- Child Welfare Services (CWS)
- Court Ordered Investigations (COI)
- Interstate Compact on the Placement of Children (ICPC)
- Out of Town Inquiry (OTI)
- Advocates Preventive Only (ADVPO)

(See “The Family of Origin Window” on page 4-35.)

**Finalize Adoption**

This command opens the *Finalize Adoption* window, which displays the Legally Freed Child Information. Use this window to record a new name and address, if applicable, for the child and to record the new WMS Case Number and CIN for adoption subsidy payments. Saving the *Finalize Adoption* window generates a new Person ID number for the child.

The link between the legally freed child’s pre-adoption information and post-adoption information is “sealed” in CONNECTIONS. In order to view this information (and all historical case information associated with that child), you need to be assigned a specific Business Function.

The *Finalize Adoption* command enables only if the FSS Type is “Child Case Record” (CCR) and:

- you accessed the *Stage Composition* tab via the *Assigned Workload* —AND—
  you are the Case Manager;
  —OR—

- you accessed the *Stage Composition* tab via the *Event List* —AND—
  you have been assigned the ACC SEALED ADOP (“Access Sealed Adoption”) Business Function.
  *(When accessing information from the Event List, all windows and tabs are view-only.)*

Once you save information on the *Finalize Adoption* window, the following message displays:

> “Child has been finalized for adoption.
> Person ID = <xxxxxxxx>. Family Services Stage should be closed immediately.”

The Family Services Stage referred to in the message is the child’s FSS/CCR stage, not the family’s FSS/CWS stage.

- Click on the *OK* button to close the message.

Once you have saved the information on the *Finalize Adoption* window, you should close the FSS/CCR as soon as possible in order to seal the record in CONNECTIONS and help preserve the confidentiality rights of the adopted child. (See “The Finalize Adoption Window” on page 4-36.)
Adding or Relating a Person to the FSS

When you click on the Add/Relate button to add or relate a person to a Family Services Stage, the Add/Relate Person window displays. From this window, CONNECTIONS automatically requires you to conduct a Person Search to determine whether or not that individual is already known to the CONNECTIONS database.

If, after conducting a thorough Person Search, you determine that an individual is not known to the CONNECTIONS database and you need to add that person to the FSS; the Add/Relate functionality allows you to add the individual to CONNECTIONS and establish a unique, system-generated Person ID for that individual. If you determine that the person is already known to CONNECTIONS, you need to relate that individual’s existing person record to the FSS. (See “Person Relate” on page 4-19 for more information.)

The process of conducting a thorough Person Search helps you avoid creating duplicate person records. This affects not only system data integrity but, more importantly, the accuracy, currency and completeness of a person’s historical record in the system. It is imperative that child welfare workers have as much complete, accurate and current information as possible when making decisions that affect children and families. The CONNECTIONS system is dependent on the accuracy of case data in order to present accurate information about the family.

In order to avoid duplicate CINs for a Preventive Services case opened to a pregnant woman who has no other children and is also receiving non-services, once the child is born the worker should contact the non-services worker to update the WMS record. The unborn child has a record (and a CIN) in WMS for the non-services case, and the child’s record in WMS must be updated.
The Add/Relate Person Window
The Add/Relate Person window is divided into three sections:

- Search fields
- Person Search List
- Buttons

The search fields provide a variety of informational categories for conducting and refining a Person Search. The following search fields are available on this window:

**Search Type**

You can conduct a Person Search for individuals in CONNECTIONS using different Search Types:

- Phonetic Name
- Phonetic Address
- Exact

The Search Type defaults to “Phonetic Name.”

A Phonetic Name Person Search returns matches that sound similar to the search criteria; this usually produces the largest pool of results. You can use Phonetic Name search even if the name you are searching for may not be spelled correctly.
Phonetic Address Person Search returns results that sound similar to the information entered in the Address section.

An Exact Person Search returns results that match the search criteria character for character and space for space. This type of search is typically used with Person ID numbers or Client Identification Numbers (CINs).

To change the search type, click on the drop-down arrow for the Search Type field and select from the resulting list.

You can use one or more of these fields (when enabled; see the tip box on page 4-14) to enter search criteria. Keep in mind that the broader you make your search criteria, the more likely you are to find a potential match in CONNECTIONS.

For detailed information about these fields or the detailed Person Search process, see the Search Techniques Step-by-Step Guide, which is available on the OCFS CONNECTIONS intranet site.

The Person Search List displays the results of the search. The columns in the Person Search List contain the same information for which you can search via the search fields in the upper half of the window. Not all of the fields in the search section are included as columns in the Person Search List. Names that have been marked as “Invalid” will not return in a Person Search.

The Person Search List includes the following columns, which are not included in the search fields:

<table>
<thead>
<tr>
<th>Column</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Match Name</td>
<td>This is the name of an individual who is recorded in CONNECTIONS. The Match Name can be a Primary name or an end-dated name.</td>
</tr>
<tr>
<td>Primary Name</td>
<td>This is the Primary name of an individual who is recorded in CONNECTIONS. Only names that have been recorded as “Primary” display in this column.</td>
</tr>
</tbody>
</table>
| Match | This column denotes the type of Person Search that was conducted (and for which search results display):
  * Phonetic Name Person Search: “NAME”
  * Phonetic Address Person Search: “ADDR”
  * Exact Person Search: “EXCT” |
| Score | This column indicates the relative accuracy of a particular search result (compared to the search criteria) on a scale of 0 to 100. The Score for an Exact Person Search will always be “100.” |
The following buttons display at the bottom of the Add/Relate Person window:

- **Search**: This button activates the search, based on the search criteria. The button enables only when you have entered the minimally required search criteria (based on the Search Type you selected).

- **Case List**: This button opens the Case List, displaying all current and historical cases with which the selected person has been associated.

- **Relate**: This button opens the Add Person window, displaying person information currently recorded for the individual in CONNECTIONS.

- **New**: This button opens the Add Person window, where you record complete demographic information about the person you are adding to the FSS. (See “The Add Person Window” on page 4-17.)

- **Clear**: This button clears the search criteria fields, enabling you to enter new search criteria.

- **Cancel**: This button closes the Add/Relate Person window, returning you to the Stage Composition tab.

---

**Step-by-Step:**
**Conducting a Person Search to Add or Relate a Person**

1. On the Stage Composition tab on the Family Services Stage window, click on the Add/Relate button. The Add/Relate Person window displays.

2. In the First and Last name fields on the Add/Relate Person window, enter the name of the person for whom you are searching.

3. Click on the Search button. The search results display in the Person Search List at the bottom of the Add/Relate Person window. If no matches are found, the following message displays in the Person Search List title bar: “No Results Returned.”

Search results may include more than one possible match for your search criteria. Explore all possible matches. The individual you are searching for may be listed more than once in the database. Review the information in the Person Search List to determine if the person you are searching for matches one or more of the results on the list. Look at the demographics listed in the Person Search List to help you make this determination. If you don’t have enough information to determine whether or not you have found a proper match, you can access more information about a person in the Person Search List by looking at other cases with which that person has been involved. This process is sometimes called “drilling down.”
Viewing Associated Cases for a Person

Once you have conducted a Person Search, you can navigate to the Case List to see the cases with which that person is (or has ever been) involved, provided you have the appropriate security to do so (e.g., an assigned role in the case). If you are a Voluntary Agency worker, you will not be able to access information in CPS Intake or Investigation stages. From the Case List, you can also view the Case Composition window to help you determine whether you have found the appropriate person record in CONNECTIONS before relating that individual to the FSS.

**Step-by-Step:**
**Viewing Case Composition via the Person Search List**

1. From the Person Search List on the Add/Relate Person window, click on the gray box to the left of the person’s name for whom you want to view a list of associated cases.

2. Click on the Case List button.  
   *The Case List displays, listing all cases with which the selected individual is involved.*

3. Select a case from the Case List by clicking on the gray box to the left of the case.

4. Click on the Comp button.  
   *The Case Composition window displays with the list of individuals involved in the selected case.*
The Add Person Window

If you determine, after conducting a thorough Person Search, that the individual you are searching for is not known to the CONNECTIONS database, click on the New button at the bottom of the Add/Relate Person window to open the Add Person window.

Use the Add Person window to record complete and accurate person demographic information. The following fields display on this window:

- Suffix
- Approx DOB
- Sex
- SSN
- DOD (Date of Death)
- Reason
- Race
- Address section (Street, PO Box/Apt, City, State, Zip, County, Type, CD)
- DOB (Date of Birth)
- Age
- Marital
- Language
- Approx DOD
- Ethnicity
- Phone section (Phone, Ext., Type)
Step-by-Step: Adding a Person to a Family Services Stage

1. On the **Stage Composition** tab, click on the **Add/Relate** button. (You can also click on the **Options** menu on the **Stage Composition** tab and select the **Add/Relate** command.) The Add/Relate Person window displays. The Search Type defaults to “Phonetic Name.”

2. In the **First** name field, enter the first name of the person you need to add to the FSS.

3. In the **Last** name field, enter the last name of the person you need to add to the FSS. The **Search** button enables.

4. Click on the **Search** button. The search results display in the Person Search List at the bottom of the window. Review the search results carefully to determine whether any individual on the Person Search List is the same individual you need to add to the FSS. If so, you need to relate, not add, that person. (See “Relating a Person to a Family Services Stage” on page 4-21.)

5. If the person is not known to the CONNECTIONS database, click on the **New** button. The Add Person window displays. The name you entered in the search criteria displays automatically in the name fields; you cannot modify this information on this window.

6. Record complete demographic information for the person in the detail section in the upper half of the window.

7. Record the person’s address in the Address section, then click on the **Validate** button. See the tip box on page 4-22 for details about the address validation process. An address must be recorded. You can record “Unknown” in the **Street** and **City** fields, if necessary (e.g., if the person is homeless). The **Save** button will not enable until you have recorded an address. It is preferable to use the Agency address for the person if s/he is homeless.

8. Click on the **Accept** button to accept the validated address.

9. Record the person’s phone information in the Phone section, including the **Type**.

10. Click on the **Save** button. The **Stage Composition** tab displays.

When the Add Person window displays, the **DOB** field defaults to today’s date. To change this date:

- Click on the check box to the left of the date field to make the date “active.”
- Click in the Month, Day and Year segments of the field and change the dates, as appropriate. (The Month, Date and Year segments are independent of each other, so each needs to be changed individually.)

OR

- Click on the drop-down arrow for the **DOB** field and select the correct date from the resulting calendar. Click on the Month heading and select the appropriate month from the resulting list. Finally, click on the Year heading, then click on the up and/or down arrow, as necessary, to select the appropriate year.

When a person is added to the FSS stage, CONNECTIONS sends an Alert To-Do to the **Staff To-Do List** of all workers assigned to the stage. The description of the Alert To-Do reads:

“Name <PID> was added to Stage Name <Stage ID>”

In addition, if the FASP is in process, the following message displays:

“A new person has been added. The Relationship Matrix must be updated.”

CONNECTIONS Case Management Step-by-Step Guide:
Stage Composition

(v1.5 rev 05/05/2006)
**Person Relate**

After you have conducted a thorough person search and verified that the individual you are searching for is known to the CONNECTIONS database, select that person from the Person Search List and click on the **Relate** button at the bottom of the Add/Relate Person window to open the Add Person window.

To minimize the occurrence of misrelates when you attempt to relate two people in the system, CONNECTIONS generates warnings when you click on the **Save** button on the Add Person window, if any of the following conditions are present:

- There is a DOB/age discrepancy of more than five years between the two persons.
  
  The following warning displays:
  
  “DOB varies by >5 years between Individuals. Do you wish to continue?”

- There is a gender mismatch between the two persons.
  
  The following warning displays:
  
  “Sex Mismatch between Individuals. Do you wish to continue?”

- The relationship/interest is Foster Parent (FP) for one person and not the other.
  
  The following warning displays:
  
  “Relating Individuals with a different Rel/Int. Do you wish to continue?”

- There is a role mismatch between the two persons being related.
  
  The following warning displays:
  
  “Relating a FAD and CPS Individual. Do you wish to continue?”

- There is a county mismatch between the two persons.
  
  The following warning displays:
  
  “Individuals do not reside in the same district. Do you wish to continue?”

- If the system recognizes more than one condition, the following warning displays:
  
  “More than one relate mismatch. Do you wish to continue?”

These warnings display to alert you of potential conflicts; you need to evaluate the information carefully and determine if it is appropriate to proceed with Relating the individual. These warnings do not prevent you from completing the Relate function.
Step-by-Step: Relating a Person to a Family Services Stage

1. On the **Stage Composition** tab, click on the **Add/Relate** button. 
   *The Add/Relate Person window displays. The **Search Type** defaults to “Phonetic Name.”*

2. In the **First** name field, enter the first name of the person you need to add to the FSS.

3. In the **Last** name field, enter the last name of the person you need to add to the FSS. 
   *The **Search** button enables.*

4. Click on the **Search** button. 
   *The search results display in the Person Search List at the bottom of the window. Review the search results carefully to determine whether any individual on the Person Search List is the same individual you need to add to the FSS. If not, you need to add, not relate, that person. (See “Adding a Person to a Family Services Stage” on page 4-19.)*

5. Select the person who is to be related to the FSS, then click on the **Relate** button.

6. Complete any missing demographic information for the person in the detail section in the upper half of the window.

7. If necessary, record the person’s address in the Address section, then click on the **Validate** button. 
   *See the tip box on page 4-21 regarding address validation.*

8. Click on the **Accept** button to accept the validated address.

9. If needed, record the person’s phone information in the Phone section, including the **Type**.

10. Click on the **Save** button. 
    *Warnings and/or error messages may display on the Add Person window. Warnings do not prevent the Person Relate from proceeding; error messages do. Be sure to verify the demographic information and address any warning messages that display.*
Address Validation

When you click on the Validate button, CONNECTIONS launches a search to verify the validity of the address and format it to comply with U.S. Postal Service standards. The address validation window displays, containing a side-by-side comparison of the address you recorded and the validated address in standardized postal format. Compare the address you recorded to the address provided.

If the validated address is the same as or more complete than the address you recorded, click on the Accept button; otherwise, click on the Reject button.

If a different address (or an address that is not as complete as the address you recorded) is returned and you are certain that the address information you recorded is correct, click on the Reject button.

If a message displays indicating that the address information you recorded is invalid (e.g., “The house number is invalid” or “The street is invalid”), click on the OK button to close the message. Be sure to verify that the address you recorded is correct. If it is not correct, record the correct address in the appropriate fields.

All addresses must be run through the validation process in CONNECTIONS.
Maintaining Address and Phone Information

The Maintain Address Window

The Maintain Address window enables you to view and record multiple addresses for an individual. Address records are distinguished by type, such as residence, business and mailing. Each address also includes a start date and (if applicable) end dates, allowing you to view both current and historical address information. In addition, an address record can be designated as “Primary” or as “Invalid.” A primary address is the address where the person physically lives and/or is most often found; an invalid address is an address that was never correct. Only one valid Primary address can exist for a person at one time. When you add a new Primary address for a person; the old Primary address end-dates automatically.

In order to maintain address information, the following must be true:

- The Family Services Stage is open.
- You have a role in the stage (or can access the Assigned Workload of a worker who has a role in the stage).

This window is arranged in two main sections: the detail section at the top of the window and the list section at the bottom of the window. The detail section contains the following fields:

- **Street**
- **PO Box/Apt**
- **City**
- **State**
- **ZIP**

Record the address information in these fields. Type the information directly in the fields. For the **State** field, click on the drop-down arrow and select the appropriate state from the resulting list.

Addresses should be invalidated only if they were never correct.

Addresses that were correct but have changed are end-dated.
<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CD</td>
<td>The system-generated Community District (CD) code displays only for New York City addresses. This field cannot be modified.</td>
</tr>
<tr>
<td>County</td>
<td>Click on the drop-down arrow for this field and select the appropriate county from the resulting list. If you selected any state other than New York in the State field, the County field defaults to “Out of State” and disables.</td>
</tr>
<tr>
<td>Type</td>
<td>This field enables you to indicate whether the address is a residential address or another type of address (e.g., a business address).</td>
</tr>
<tr>
<td>Primary</td>
<td>Select this check box to indicate that the associated address is the primary address. The primary address is the location where the individual resides.</td>
</tr>
<tr>
<td>Invalid</td>
<td>Select this check box to indicate that the associated address was never correct. If the address was previously (but is no longer) correct, end-date the address; do not mark it as “Invalid.”</td>
</tr>
</tbody>
</table>

The Type field is required for every address. Once an address has been recorded and saved, the type cannot be changed. For example, if you recorded and saved the person’s home address, inadvertently selecting Business in the Type field’s drop-down list, you must invalidate that address and record the address again (with the appropriate address type) in the detail section.

The Start Date is the date on which the address was first recorded in the system. The End Date is the date on which the address is no longer applicable. When you invalidate an address, the End Date reflects the date when you invalidated the address; when you change the primary address, the End Date displays for the former primary address, indicating the date when the primary address change was recorded in CONNECTIONS. The Start Date and End Date fields are not modifiable; the Start Date is recorded automatically when you add an address, while the End Date field is recorded automatically when you record a new primary address or, for previously saved non-primary addresses, when you click on the Set End Date button.

**The Maintain Phone Window**

The Maintain Phone window enables you to view and record multiple phone numbers for an individual. Phone records are distinguished by type, such as residence, business and cellular. Each phone record also includes a start date and, if applicable, an end date, allowing you to view both current and historical phone information. In addition, a phone record can be designated as “Primary” or as “Invalid.” A primary phone record is the phone number where the person can most often be contacted; an invalid phone record is a phone number that was never correct. Only one valid Primary phone record can exist for a person at one time. When you add a new Primary phone record for a person; the old Primary phone record end-dates automatically.

Phone numbers should be invalidated only if they were never correct.

Phone numbers that were correct but have changed are end-dated.
The Maintain Primary Address and Phone Window

During the course of a services case, a family may move to a new address or may change their phone number. In order to maintain an accurate case record, you need to update this information in CONNECTIONS. Use the Maintain Primary Address and Phone window to accomplish this task.

Unlike the Maintain Address or Maintain Phone windows, the Maintain Primary Address and Phone window enables you to apply an address or phone number to multiple individuals without having to retype information.

The Maintain Primary Address and Phone window is organized into two main sections:

- The detail section in the upper half of the window (comprised of the Primary Address Information and Primary Phone Information sections)
- The person grid in the lower half of the window
The fields included in the Primary Address Information and Primary Phone Information sections are the same as those listed for the Maintain Address and Maintain Phone windows, respectively. (See pages 4-23 and 4-24.) The Person grid lists the individuals involved in the FSS stage and their respective address and phone information.

You can maintain address and/or phone information on this window using one of the following methods:

- Record the new address and/or phone information in the fields in the upper half of the window, then select the individuals to whom the new primary address and/or phone information should apply. (See the step-by-step instructions for “Direct Entry Method” on page 4-26.)

—OR—

- Link an individual to a pre-existing case address. (See the step-by-step instructions for “Linking Method” on page 4-27.)

### Step-by-Step: Maintaining Primary Address and/or Phone Information for Multiple Individuals (Direct Entry Method)

1. From the Stage Composition tab, click on the Options menu and select **Maintain Primary Address/Phone**.
   The Maintain Primary Address and Phone window displays.
2. Record the new address information in the Primary Address Information section.
   The Validate button enables.
3. Click on the Validate button.
   The address validation window displays.
4. Click on the Accept button to accept the validated address.
5. Record the new phone information in the Primary Phone Information section, including the Type.
6. Click on the name of the individual whom you want to apply the new address and/or phone information.
   To select multiple individuals, hold down the Ctrl key while you click on each person’s name.
7. Click on the Save button.
   The following message displays: “Changes have been saved.”
8. Click on the OK button.
9. Click on the Cancel button to exit the Maintain Primary Address and Phone window.
   The Stage Composition tab displays.
Step-by-Step: Maintaining Primary Address and/or Phone Information for Multiple Individuals (Linking Method)

1. From the Stage Composition tab, click on the Options menu and select Maintain Primary Address/Phone. The Maintain Primary Address and Phone window displays.

2. Click to select the individual who is associated with the pre-existing case address and/or phone information. An arrow displays to the left of the selected person’s name.

3. Right-click to open the shortcut menu, then select Use Address or Use Phone or Use Both Address and Phone, as applicable.

4. If you selected Use Address or Use Both Address and Phone in Step 3, click on the Validate button to validate the address.

5. Click to select the individual to whom you want to link this pre-existing case address and/or phone information. To select multiple individuals, hold down the Ctrl key while you click on each person’s name.

6. Click on the Save button. The following message displays: “Changes have been saved.”

7. Click on the OK button.

8. Click on the Cancel button to close the Maintain Primary Address and Phone window. The Stage Composition tab displays.
Maintaining Caretaker Information

In order to launch a FASP, you must first record the Primary Caretaker information; if a Secondary Caretaker exists, you must also record the Secondary Caretaker information. Caretaker information affects several other components of the FSS, including the parent/caretaker scales, the Risk Assessment and the FASP. It is important to record this information as early as possible in the family services process, since changing this information later will clear any existing in-process Risk Assessment responses.

Depending on the specifics involved in a particular FSS, it may not always be easy to determine who should be identified as the Primary or Secondary Caretaker. The following definitions are intended to provide clarity:

**Primary Caretaker**

The Primary Caretaker is an adult (usually the mother) who resides with and is legally responsible for the child(ren). When more than one person who is legally responsible for the child(ren) resides in the household, the biological mother is presumed to be the Primary Caretaker. If the mother does not physically reside with the child(ren), the Primary Caretaker is the adult who resides in the child(ren)’s home and assumes primary responsibility for the care of the child(ren). **There can only be one Primary Caretaker.**

**Secondary Caretaker**

The Secondary Caretaker is:

- an adult who lives in the child(ren)’s home and assumes some responsibility for the care of the child(ren); or
- an adult who does not reside in the child(ren)’s home, but cares for the child(ren) on a regular basis.

Use the following order to identify the Secondary Caretaker:

- If the mother has a spouse or intimate partner who is the subject of a CPS Investigation (whether alleged or confirmed), select this person as the Secondary Caretaker.
- If two or more potential candidates exist and one of them is the subject of a CPS Investigation (whether alleged or confirmed), select this adult as the Secondary Caretaker.
- In all other situations, select the adult who assumes the most responsibility for the care of the child(ren), either within or outside of the home.

There will not necessarily be a Secondary Caretaker in a particular family unit. If one exists, however, this needs to be documented fully in the FSS.
The Primary/Secondary Caretaker Window
This window is used to maintain current information regarding the Primary Caretaker (and, if applicable, the Secondary Caretaker) for the FSS.

The Primary and Secondary Caretaker information can be maintained by any worker who has a role in the stage unless the FASP is in process; in that instance, only the Case Planner can maintain this information. Caretaker information cannot be changed while the FASP is pending approval.

You can maintain the following information on this window:

**Primary Caretaker**
- Select a Primary Caretaker
- Change the existing Primary Caretaker

**Secondary Caretaker**
- Select a Secondary Caretaker
- Change the existing Secondary Caretaker
- Remove the Secondary Caretaker

The drop-down list for the **Primary Caretaker** field contains the names of all people from whom the Primary Caretaker can be selected for the FSS. In order to be included in the drop-down list for either the **Primary Caretaker** or **Secondary Caretaker** field, a person:

- must not have a Date of Death (DOD);
- must not have an active PPG or Program Choice; and
- must have a valid address, which cannot be “Unknown/Unknown.” (If the person is homeless, use the agency’s address.)

If the person who should be designated as the Primary Caretaker is not included on the drop-down list, that person needs to be added to the FSS before s/he can be selected as the Primary Caretaker. (See “Adding or Relating a Person to the FSS” on page 4-13.)

There can be only one Primary Caretaker and only one Secondary Caretaker (if applicable) for a stage; the Primary and Secondary Caretakers cannot be the same person. The Primary Caretaker must be selected on this window before the Secondary Caretaker can be selected.
When you change the Primary or Secondary Caretaker (or remove the existing Secondary Caretaker) while the FASP is in process, the following message displays:

“FASP is in process. Changing Primary or Secondary Caretaker will clear all Risk responses. Do you wish to continue?”

- Click on the Yes button to remove the caretaker indicator from the original caretaker and apply it to the newly selected caretaker. All responses to any in-process Risk Assessment/RAP within the FSS will clear.
- Click on the No button to cancel the modification process without making any changes.

In extremely rare circumstances (e.g., if the parents are deceased or the children are abandoned), there is no Primary caretaker for the stage. On those infrequent occasions when this is applicable, click on the No Primary Caretaker Exists check box. This check box enables only for the Case Manager and Case Planner. If the check box is selected, no Secondary Caretaker can be selected. If a Primary Caretaker exists, the check box enables; when you select the check box, the Primary Caretaker and Secondary Caretaker (if one exists) are removed.

If the Stage Type is OTI, COI, ICPC or ADVPO, you can record a Primary Caretaker, but CONNECTIONS does not require you to do so.

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**Step-by-Step: Recording the Primary and Secondary Caretakers**

1. On the Stage Composition tab, click on the Caretaker button. The Primary/Secondary Caretakers window displays.
2. On the Primary/Secondary Caretakers window, click on the drop-down arrow for the Primary Caretaker field and select from the resulting list.
3. If applicable, click on the drop-down arrow for the Secondary Caretaker field and select from the resulting list.
4. Click on the Save button. The Stage Composition tab displays.
End-Dating a Person’s Involvement in the FSS

During the course of an FSS, an individual may need to be end-dated from the stage; for example, the biological mother ended her relationship with her live-in boyfriend (who has no biological children in the household) and he has moved out of the home. Individuals who are no longer a part of the stage composition cannot be deleted from the stage; they must be end-dated. This process preserves an historical record of the individual’s involvement in the stage.

Caseworkers cannot delete individuals directly in WMS when the case is linked to CONNECTIONS. This process is initiated from CONNECTIONS when an individual is end-dated in the FSS with the applicable Reason Code. Conditions are identified and information is sent to WMS to delete the individual, changing the status of the individual to DEL (Deleted) on the WMS case.

When a Voluntary Agency caseworker end-dates an individual in CONNECTIONS, an Alert To-Do is sent to the Local District Case Manager’s Staff To-Do-List notifying the Case Manager that an individual has been end-dated or that there has been a change to demographic information. WMS is not updated until the Local District worker clicks on the WMS Synch button or makes a change to any individual in the Stage Composition tab and clicks on the Save button. The Case Manager navigates from the Alert To-Do to the FSS window and clicks on the WMS Synch button.

The End Date Reason window is used to end-date a person’s involvement in a Family Services Stage; any worker with a role in the stage can maintain this window.

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Step-by-Step: Opening the End Date Reason Window

1. From the Stage Composition tab, click to select the individual to be end-dated.
2. Click on the Options menu and select the End Date Stage Involvement command. The End Date Reason window displays.

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Progress Notes for which the person would have been selected as a Family Participant or Focus should be recorded before end-dating that person.
When end-dating a person, you must record a reason. The drop-down list for this window contains the following available End Date Reasons:

- Services no longer needed
- Services no longer accepted
- Programmatically ineligible
- Death
- Moved out of district
- Agency cannot locate client
- End of court ordered services
- Adulthood attained
- Related/Added in Error
- CCR Created
  (may display historically; cannot be selected)

When you have selected a reason, the **Save** button enables. Clicking on the **Save** button saves the information you recorded. If you click on the **Cancel** button, the following message displays:

"Do you want to exit?
Unsaved data and/or narratives will be lost."

- Click on the **Yes** button to close the window without saving the information.
- Click on the **No** button to return to the window.

Individuals cannot be end-dated while a FASP is pending approval. If you attempt to do so, the following error message displays:

"Persons may not be end dated while a FASP is pending approval.
Contact Case Planner."

- Click on the **OK** button to close the message.

If the individual you are attempting to end date is a Secondary Caretaker and the FASP is in process, the following warning message displays:

"FASP is in process. End dating Secondary Caretaker will clear all Risk responses. Do you wish to continue?"

- Click on the **Yes** button to end-date the Secondary Caretaker. You must navigate to the Risk Assessment/RAP and re-record all of the non-system-generated risk responses before the Case Planner can submit the FASP for approval.
- Click on the **No** button to cancel the end-dating process and return to the **End Date Reason** window.

If the individual you are attempting to end date is a Primary Caretaker, you must first select a new Primary Caretaker (or select the **No Primary Caretaker Exists** check box [enabled only for the Case Manager]) on the **Primary/Secondary Caretakers** window. If you try to end-date the Primary Caretaker, the following message displays:

"A new Primary Caretaker must be selected (or you must indicate that no Primary Caretaker exists) prior to end-dating this person."

- Click on the **OK** button to close the message.
Once a person is end-dated in an FSS, his/her name will no longer appear in the Family Participants list for Progress Notes. Therefore, you should record Progress Notes for which the person would have been selected as a Family Participant or Focus before end-dating that person.

When a child in an FSS/CWS stage is freed for adoption, a Child Case Record (CCR) is created and the child is end-dated in the FSS/CWS stage. Progress Notes, as well as the FASP, are affected by the end-dating of the only child in an FSS/CWS stage:

- All Progress Notes applicable to the FSS/CWS stage should be recorded prior to creating the CCR.
- Any in-process FASP for the FSS/CWS stage must be completed and submitted for approval in the FSS/CWS stage prior to the creation of the CCR. If a Comprehensive or Reassessment FASP is in progress for the FSS/CWS stage when the CCR is created, the FASP cannot be submitted in the FSS/CWS stage. The FASP must then be completed in the FSS/CCR stage as a Reassessment FASP.

When you record an end date reason and save the information to the database, the information for the person you end-dated moves to the Historical Stage Comp window (see below); the end-date for the person reflects the system date on which you recorded the End Date Reason. All relationships for that individual are also end-dated.

The Historical Stage Composition Window
This window displays a list of all individuals who have been end-dated from the FSS. The information on this window is view-only. Like the FSS Stage Composition tab, the name fields “lock” when you scroll to the right, enabling the person’s name to remain visible when you scroll across.

From this window, you can access address and phone information for end-dated individuals, as well as the Family Relationship Matrix to see the relationships for an end-dated person.
Step-by-Step: Viewing the Historical Stage Composition Window

1. From the Stage Composition tab, click on the Options menu and select the View Historical Stage Comp command. The Historical Stage Comp window displays.

2. To view historical address, phone or Family Relationship Matrix information for an end-dated person, click to select the person’s name from the list, then do one of the following, as appropriate:
   - Click on the Address button.
   - Click on the Phone button.
   - Click on the Relationship Matrix button.

3. Click on the Close button to close the Historical Stage Comp window. The Stage Composition tab displays.
Maintaining Information About Freed Children

Once a child has been legally freed for adoption, it is necessary to maintain this child’s information as a separate case, since the child’s family relationship has been legally severed. While creating a separate case for the freed child, it is also crucial to preserve and maintain the child’s family history. For example, it is typically desirable for a child to retain sibling relationships. CONNECTIONS provides functionality to record specific information for the legally freed child.

The Family of Origin Window

This window displays the current FSS Stage Composition from the FSS/CWS (Child Welfare Services) stage in which the freed child was end-dated. You can access this view-only window only from the Stage Composition tab for an FSS/CCR (Child Case Record) stage.

As with the Stage Composition tab, the name columns “lock” when you scroll to the right, enabling you to keep individuals’ names in view when looking at other information about them. From this window, you can view address and phone information, as well as the Family Relationship Matrix, for the FSS/CWS stage from which the child was freed.

Step-by-Step: Viewing Family of Origin Information

1. From the Stage Composition tab, click on the Options menu and select the View Family of Origin command. The Family of Origin window displays.

2. To view address, phone or Family Relationship Matrix information from the FSS/CWS stage from which the child was freed for adoption, click to select the person’s name from the list, then do one of the following, as appropriate:
   - Click on the Address button.
   - Click on the Phone button.
   - Click on the Relationship Matrix button.
3 Click on the Close button to close the Family of Origin window.

The Stage Composition tab displays.

The Finalize Adoption Window
Once an adoption is finalized, use the Finalize Adoption window to change the adopted child’s name, indicate whether that child will be receiving an Adoption Subsidy and, if so, record the new WMS Case number and Client Identification Number (CIN) for that child.

In order to maintain information on the Finalize Adoption window, you must be the Case Manager (or a person with access to the Case Manager's Assigned Workload). The Finalize Adoption functionality is not available within an FSS that has a Type of “Child Welfare Services” (CWS).

When you open this window, the Legally Freed Child Information is pre-filled from the person grid on the Stage Composition tab for the FSS/CCR stage. You can record a new name and/or address, if applicable. If an Adoption Subsidy exists for this child, you need to record the new WMS Case number and the new WMS Client Identification Number (CIN) manually for that child; there is no interface functionality between CONNECTIONS and WMS for this information.

Changing the child’s name through this functionality seals all links to the child’s former name. This process creates a new person record for the child, recognizing the child’s new status. This process differs significantly from the functionality on the AKA Names List/Detail window elsewhere in CONNECTIONS. When the child’s name is changed on the Finalize Adoption window, future searches on the child’s original name will not return the child under his/her new name.

Once you complete the Finalize Adoption window and click on the Save button, the information you recorded is stored in the CONNECTIONS database in order to provide a link between the child both prior and subsequent to the finalization of the adoption. When you save the information on this window, CONNECTIONS generates and displays a new Person ID for the child. You cannot perform a “partial” save on this window. Once you save this window, the information “freezes.” Only individuals who are assigned the ACC SEALED ADOP Business Function will be able to view the information on this window once it has been saved to the database, if the CCR stage is closed.

It is imperative that you complete all necessary documentation before completing and saving the Finalize Adoption window, since the information cannot be saved in process. Furthermore, you should close the CCR stage as soon as possible in order to preserve the confidentiality rights of the legally freed child.
If you click on the **Yes** radio button for the question, “Will an Adoption Subsidy Exist for this Child?” the WMS Case ID and WMS CIN fields will display. Enter the appropriate information in these fields. (For information regarding the CONNECTIONS-WMS interface, see the *Build 18 Interfaces Job Aid*, which is available on the OCFS CONNECTIONS intranet site.)

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**Step-by-Step:**
**Recording a Finalized Adoption in CONNECTIONS**
*(Only accessible by the Case Manager)*

1. On the FSS **Stage Composition** tab, click on the **Options** menu and select the **Finalize Adoption** command.  
   *The Finalize Adoption window displays.*

2. In the Adoption Finalized Child Information section, enter the child’s new legal name in the **Last Name**, **First Name** and **Middle Name** fields.  
   —OR—
   Click on the **Use Existing** button to use the name information displayed in the Legally Freed Child Information section.

3. In the **Will an Adoption Subsidy Exist for this Child** field, click on the appropriate radio button.  
   *If you click on the **Yes** radio button, the **WMS Case ID** and **WMS CIN** fields display.*

4. If you clicked on the **Yes** radio button in **Step 3**, record the **WMSN Case ID** and **WMS CIN** directly in those respective fields.

5. In the Address section, record the child’s new address information.  
   —OR—
   Click on the **Use Existing** button to use the address information displayed in the Legally Freed Child Information section.

6. If you recorded an address in **Step 5**, click on the **Validate** button, then accept the validated address, if appropriate. (See the tip box on page 4-22.)
7 Click on the **Save** button.  
*The following message displays:*  
“Child has been finalized for adoption. PID=(PersonID). Family Services Stage should be closed immediately.”

8 Click on the **OK** button.  
*The **Stage Composition** tab displays.*
Merge and Split Functions

Duplicate and accidentally combined records are corrected in CONNECTIONS with the Merge and Split functions. A Merge joins two separate Person IDs or Case IDs into the same record. A Split separates people or cases that were merged in error. The ability to perform Merge/Split functions is dependent on the worker’s role and level of security access.

CONNECTIONS information needs to be maintained in a secure, accurate and reliable manner, as well as being readily available for use by workers needing information. The process of merging and splitting records is complicated and cannot always be fully undone. Notify your supervisor if you notice records that should be merged or split so that necessary corrections can be made.

Person Merge/Split Functions

In your work with CONNECTIONS, you may come upon multiple records for the same person, or records for two separate persons that have been accidentally combined into one.

Duplicate records can be created during Intake if an Intake worker has limited or unknown demographics on a person and therefore, cannot relate that person to an already existing person in CONNECTIONS. Duplicates can also result if a worker misses a potential match during a Person Search; the worker would then add this person to the case rather than relating him/her to the existing person in the system. The opposite situation—accidentally combined records—can result if a worker merges records for two individuals who seem to be the same person but in fact, are not. Regardless of the reason, duplicate records and accidentally combined records pose problems for accurate case management and need to be corrected once they are identified.

The individual authorized to perform the Person Merge/Split function is subject to local district policy and procedure. This task may not fall under the scope of the individual worker’s responsibilities.

In order to perform a Person Merge or Split in a closed stage, the worker must be assigned the MERGE/SPLIT Business Function and:

- be the historical Primary worker, Secondary worker or Case Manager; or
- be the historical Unit Approver (or have a role above that of the Unit Approver in the unit of the Primary worker or Secondary worker) and be assigned the CASE/PERS SRCH Business Function; or
- be assigned the ACCESS ALL DIST and CASE/PERS SRCH Business Functions (allowing access through a Case Search).

To perform a Person Merge or Split in an open stage, the worker must be assigned the MERGE/SPLIT Business Function and:

- have a role in the stage; or
- be the Unit Approver (or have a role above that of the Unit Approver in the worker’s unit) and be assigned the UNIT SUM ACCESS Business Function.

WARNING!
Since it is not always possible to correct errors you may make when Merging and Splitting records, be sure to:
1. Talk with your supervisor before proceeding.
2. Be careful when merging and splitting records.

You should never merge an Employee Person ID with any person in a stage.
The Person Merge Function
Before completing a Person Merge, a decision must be made regarding which person will be carried forward to further stages (the **Merged Forward Person**) and which person will be “retired” after the merge (the **Merged Closed Person**). The Merged Forward Person should be the person with the most history. This is generally the one with the Person ID number that has been in the system longer. It is important to understand how the merge affects each of these roles in CONNECTIONS.

The **Merged Forward Person**:
- is carried forward to subsequent CONNECTIONS stages;
- appears on the Person List in the current open stage, any closed stages and any future stages; and
- is identified by a check mark in the M/S column of the Person List on the **Stage Composition** tab.

The **Merged Closed Person**:
- is “retired” after the merge and information of the new Merged Forward Person is used in all open and closed stages;
- cannot be related to a new stage; and
- cannot be involved in future system events.

A Person **Merge** results in the following system changes:
- The Merge List on the **Person Merge/Split** window is updated to reflect the action taken.
- The **Merged Forward Person** inherits the demographics that have been selected and appear in all stages.
- The **Merged Closed Person** is no longer linked to any of the stages that were open at the time of the merge. These are now linked to the Merged Forward Person.
- System-generated Alert To-Do’s are sent to the **Staff To-Do List** of the Primary and Secondary workers for any open stages that involve the Merged Forward Person or Merged Closed Person.

A Person **Split** results in the following system changes:
- The previously Merged Closed Person becomes active again in the database, but is not re-associated with any stages.
- The previously Merged Closed Person’s pre-merge demographics remain available in CONNECTIONS.
- The events/activities associated with the reactivated person (and approved prior to the merge) require data maintenance to again be associated with that person.
- Events that occurred while the merge was in effect are **not** associated with the reactivated person.
- System-generated To-Do’s are sent to workers assigned to open stages associated with the previously merged person.
The Person Forward Selection Window
The Person Forward Selection window enables you to select specific person information that is applied to the Person Forward. The type of information you select—and which person you select it from—affects the information that is retained for the Person Forward.

If you select information from the Person Closed, the primary information for the Person Forward is end-dated and the information from the Person Closed is copied to the primary record.

Valid person identifier, Language and Religion information is retained from the Person Forward, unless the field is blank. If the Person Forward does not have this information recorded, the information from the Person Closed is copied to the Person Forward.

If you have been given approval to merge person records, perform the following steps to complete this task:

Step-by-Step: Completing a Person Merge from the Assigned Workload

1. On the Assigned Workload, select the stage containing the person information that requires merging.
2. Click on the Options menu and select Person List. The Person List displays.
3. Select the person to be merged.
4. Click on the Options menu and select Person Merge/Split. The Person Merge/Split window displays with the selected person’s name and ID pre-filled in the Merged Persons Closed section.
5. Enter the Person ID of the Merged Forward person in the ID field of the Merged Persons Forward section.
6. Click on the Validate button. The system checks for an open case and a valid Person ID. When the check is complete, the Merge button enables.

   **NOTE:** Several warning or error messages may display after selecting the Validate button. For warning or error messages that display, click on the Close button. The Person Merge/Split window displays. For error messages the Merge button is disabled. For warning messages the Merge button is enabled.

Person Merge Warnings and Error Messages:
When completing a person merge, you may see warnings and/or error messages. Warnings do not prevent you from completing a merge, but error messages do.

Reasons for Warnings:
- Both persons must be the same sex (if it is recorded).
- Both people must have a DOB that is within 5 years (if recorded).
- One of the persons is involved in a fatality report.
- The Merged Closed Person is in an open stage.

Reasons for Error Messages:
- Social Security numbers do not match.
- Medicaid number does not match.
- Entered ID is not found, verify ID.
- Services CIN must match.
- NYC Non-Service (NS) CIN’s must match (NYC only).
- Merge will cause person to be a subject and MA/AB child in the same Investigation stage.
- The ID Person entered has the status of person closed from a prior merge.
7 Click on the Merge button.
If the person to be closed is in an open stage, the following message displays:
“The closed person is in open stages. Merge with extreme caution. Continue?”

8 Click on the Yes button.
The following message displays:
“Merge ID# into ID#?”
The first ID number listed is for the Merged Closed Person. The second ID number is for the Merged Forward Person.

NOTE: If you realize that you have made a mistake in selecting your persons, click on the No button.
The Person Merge/Split window remains open until you close it.

9 Click on the Yes button.
The Person Forward Selection window displays with the following information for both the Person Forward and the Person Closed:
- Full Primary Name (First, Middle, Last, Suffix)
- Marital Status
- Sex
- Ethnicity
- Race
- DOB (including Approximate indicator, if applicable)
- DOD (including Approximate indicator and reason, if applicable)
- Primary Address
- Primary Phone

10 Select information from the Person Forward Selection window by clicking on the radio button next to each applicable field.
The type of information you select—and which person you select it from—affects the information that is retained for the Person Forward. See “The Person Forward Selection Window” on page 4-41 for details.

11 When you have made all of your selections from the Person Forward Selection window, click on the OK button.
The name of the person logged on and the date of the merge displays in the Staff NM Merge and Date Merge fields.

12 Click on the Save button.
The change is saved in the system and the Person List displays with a check mark in the M/S column of the person who was merged.

13 Click on the Close button.
The Assigned Workload displays.
Step-by-Step: Completing a Person Merge from the CONNECTIONS Toolbar

1. Click on the PERS button on the CONNECTIONS Toolbar. The Person Search window displays.
2. Perform a Person Search.
3. In the Person Search List, click on the person who is to be listed in the Merged Persons Closed section of the Person Merge/Split window.
4. Click on the Options menu and select Case List. The Case List displays.
5. Select the applicable case.
6. Click on the Summary button. The Case Summary window displays.
7. Select the applicable stage.
8. Click on the Options menu and select Person List. The Person List displays for the selected stage.
9. Select the applicable person.
10. Click on the Options menu and select Person Merge/Split. The Person Merge/Split window displays with the selected person’s name and ID pre-filled in the Merged Persons Closed section.
11. Review the name and ID information in the Merged Persons Closed section for accuracy.
12. Enter the Person ID of the Merged Forward person in the ID field of the Merged Persons Forward section.
13. Click on the Validate button. The system checks for an open case and a valid Person ID. When the check is complete, the Merge button enables.

**NOTE:** Several warning or error messages may display after selecting the Validate button. For warning or error messages that display, click on the Close button. The Person Merge/Split window displays. For error messages the Merge button is disabled. For warning messages the Merge button is enabled.

14. Follow Steps 7-13 in “Completing a Person Merge from the Assigned Workload” on page 4-41.
1 On the Assigned Workload, select the stage which contains the person information that was merged in error.

2 Click on the Options menu and select Person List. The Person List displays.

3 Select the person who was merged in error.

4 Click on the Options menu and select Person Merge/Split. The Person Merge/Split window displays. The system pre-fills the person’s name into the Merged Persons Closed section.

5 In the list section at the top of the window, select the merge you want to split. The system fills the merge information into the detail section of the window.

6 Click on the Split button. The following message displays: “Split ID# from ID#?” The first ID number listed is for the Closed Person. The second ID number is for the Forward Person.

7 Click on the Yes button.

8 Click on the Save button. The change is saved in CONNECTIONS. The Person List displays.

Things to Consider Before Splitting:
The Merge Forward Person cannot be deleted from the stages that were open at the time the Person Merge took place. The Merged Closed Person’s pre-merge information is not "reattached" by completing a Split. Follow-up demographics and case/stage maintenance are necessary to complete the process.

You need to record that person's demographic information again and re-associate the person with the appropriate case(s)/stage(s).

The Person Data report contains the current and historical information of a person.

To run the report:

1 Select the person on the Person List.

2 Click on the Reports menu and select the Person Data command. The following message displays: “The report has been launched. Check Report List window.”

4 Click on the OK button.

5 Click on the RPRTS button.

6 Select the Person Data Report and click on the Open button.

This provides a hard copy of all information stored in CONNECTIONS about a specified person including merge/split history and demographic changes.
Case Merge/Split Functions

The Case Merge/Split function allows you to merge two separate cases into one case, sharing the same CONNECTIONS Case ID, or to split a case that was previously merged. The Case Merge/Split window is accessed via the Case Summary window through the Assigned Workload.

The individual authorized to perform the Case Merge/Split function is subject to local district policy and procedure. This task may not fall under the scope of the individual worker’s responsibilities. Voluntary Agency workers are not permitted to perform any case Merges or Case Splits.

In order to perform Case Merges and Case Splits:

- a worker must be assigned the MERGE/SPLIT Business Function and:
  - have a role in the case; or
  - have an implied role in the case; or
  - be assigned the ACCESS ALL IN DISTRICT Business Function.

AND

- the case county must be the same as the worker’s county.

If the above conditions are not met, the Case Merge/Split option on the Case Summary window is disabled. If a worker does not have the appropriate Business Function, s/he will be able to access the Case Merge/Split window in view-only mode.

Merges and splits are pending until after the batch update is run overnight. At that time, a series of edits and checks are performed by CONNECTIONS to verify that the two cases can be merged or split.

If a pending split fails the edit checks in the batch run, the worker needs to process the split again. DUP or ADD Intake stages that are split are re-opened and placed on the Assigned Workload of the Primary worker.

You can identify whether a merge is still pending from the Merge/Split window or the Case List. “PF” indicates the Pending-From case and “PT” indicates the Pending-To case for merges that are pending batch update. After the batch update, the case that is Merged-From displays “MF” in the Merge column on the Case List; the case that is Merged-To displays “MT” in the same column.

The Merge To Case is the case that will remain after the merge has taken place. The Merge From case is merged into the Merge To case and will have the attributes (such as the Case ID) of the Merge To case. Both Case IDs, when searched, point to the Merge To case.

Specific rules exist regarding the merging of cases and stages in CONNECTIONS where FSI and/or FSS stages are involved. Keep in mind that “Open case” denotes that there is at least one open stage in a case and “Closed case” denotes that all stages in a case are closed.

- The following cannot be merged:
  - FSI stages
  - FAD stages
  - FSS/CCR stages
  - CPS IABs

- There must be at least one common principal in the cases to be merged.
You cannot merge to or from any FSI stages, whether open or closed. Instead, FSIs can be “linked” to an open or closed CONNECTIONS case where the person who is or will be named as the Primary Caretaker is the same person in both cases. There must be at least one adult in common in two stages in order to link them. Linking is an immediate transaction, unlike merging, which requires an overnight batch.

**FSS Merge Rules**

<table>
<thead>
<tr>
<th>Merge From Case</th>
<th>Merge To Case</th>
<th>Merge Allowed</th>
<th>Merge Not Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open FSS</td>
<td>Open INT</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Open INT</td>
<td>Open FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open FSS</td>
<td>Closed INT</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Closed INT</td>
<td>Open FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open FSS</td>
<td>Open INV</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open INV</td>
<td>Open FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open FSS</td>
<td>Open or closed INT, open or closed INV and open FSI</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open or closed INT, open or closed INV and open FSI</td>
<td>Open FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Open FSS</td>
<td>Open or closed INT, open or closed INV, closed FSI and open FSS</td>
<td>✓ (unless the open FSS exists in a different county or jurisdiction)</td>
<td></td>
</tr>
<tr>
<td>Open or closed INT, open or closed INV, closed FSI and open FSS</td>
<td>Open FSS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open FSS</td>
<td>Closed INT, closed INV, closed FSI and closed FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Closed INT, closed INV, closed FSI and closed FSS</td>
<td>Open FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Closed FSS</td>
<td>Any open or closed CPS stage</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Any open or closed CPS stage</td>
<td>Closed FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Closed FSS</td>
<td>Closed FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Any open or closed IAB</td>
<td>Any open or closed FSS</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Any open or closed FSS</td>
<td>Any open or closed IAB</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
**Step-by-Step: Completing a Case Merge from the Assigned Workload**

1. Click on the **WORK** button.  
   *The Assigned Workload displays.*

2. Select the case to be Merged To.

3. Click on the **Options** menu and select **Case Summary**.  
   *The Case Summary window displays.*

4. Click on the **Options** menu on the Case Summary window and select **Case Merge/Split**.  
   *The Case Merge/Split window displays with the Merged Cases To section pre-filled.*

5. Enter the **Case ID** number for the case you wish to merge in the **ID** field of the Merged Cases From section.

6. Click on the **Validate** button.  
   *The system checks to see if the merge is possible and may display error messages or warnings (see the tip box above). When the check is complete, the Merge button enables.*

7. Click on the **Merge** button.  
   *In the list at the top of the window, the merge displays with a red check mark in the Pending column.*

   **NOTE:** If you realize that you have made a mistake in selecting your cases, click on the **Cancel** button and then click on the **Yes** button at the prompt asking if you wish to exit without saving. The Case Merge/Split window closes and the merge is canceled.

8. Click on the **Save** button.  
   *The Case Summary window displays.*

9. Click on the **Close** button.  
   *The Assigned Workload displays.*
Step-by-Step: Completing a Case Split

1. Click on the WORK button. The Assigned Workload displays.

2. Select the case to be split.

3. Click on the Options menu and select Case Summary. The Case Summary window displays.

4. Click on the Options menu on the Case Summary window and select Case Merge/Split. The Case Merge/Split window displays.

5. From the list section at the top of the window, click on the Case Name that was merged in error. The merge information for the selected case displays in the detail section at the bottom of the window.

6. Click on the Split button. A red check mark displays in the Pending column in the list section.

   **NOTE**: If you realize that you have made a mistake in selecting the case to be split, click on the Cancel button. The following message displays: “Do you want to cancel? Unsaved data and/or narrative(s) will be lost.” If you click on the Yes button in response to the message, the Case Merge/Split window closes and the split is cancelled.

7. Click on the Save button. The Case Summary window displays.

8. Click on the Close button. The Assigned Workload displays.

When splitting cases, warnings and/or error messages may display. Warnings do not prevent you from completing a merge, but error messages do. Carefully review and consider both error messages and warnings before proceeding.
Module 5: Programmatic Eligibility

All services to children and families must be provided in accordance with the statutory and regulatory standards that define the circumstances and conditions qualifying the child and family to receive the particular services. This qualification process must be documented through the determination of Programmatic Eligibility. This determination is specifically required for Mandated Preventive Services and placement. (Inherent eligibility for child protective services is assumed by virtue of an Indicated CPS report.)

Programmatic Eligibility is different from Funding Eligibility. Funding Eligibility determines which funding stream(s) will provide reimbursement from the appropriate federal, state and local funds allocated to pay for part or all of the service cost. This determination is currently made by applying criteria specific to the funding source (see the Eligibility Manual for Child Welfare Programs) and then entering the appropriate code in WMS. This process will be automated with CONNECTIONS Build 19.

The determination of Programmatic Eligibility is supported as part of the FASP. Workers are presented with the standards that would qualify children and families for Preventive or Foster Care Services. As part of completing the FASP, workers must select the standard(s) that apply to the case, at the point in time during which the FASP is being completed, adding detail regarding the specific case circumstances.

Workers must record Programmatic Eligibility for FSS/CWS and FSS/CCR stages. In FSS/CWS stages, workers must determine Programmatic Eligibility for Program Choices of “Placement” or “Preventive-Mandated.” A Permanency Planning Goal (PPG) and an Anticipated Completion Date (ACDE) must be recorded for each child for whom Child Welfare Services are authorized in the Family Assessment and Service Plan (FASP). In an FSS/CCR stage, workers do not complete Programmatic Eligibility if the child has a Program Choice of “Placement.” In this case, a child has been legally surrendered or parental rights have been terminated; therefore, programmatic eligibility is assumed by the system.

For Preventive Services, eligibility is determined at the family level; it is not child-specific. If Placement Services are provided, a worker can select more than one child on the Placement tab. Placement eligibility is child-specific and must be completed for each child with a Program Choice of “Placement.” For both Placement and Preventive Services, the worker records an explanation regarding why s/he selected particular eligibility standards.

Programmatic Eligibility is a step in FASP completion that must be determined at each FASP cycle (i.e., Initial, Comprehensive and each Reassessment FASP). A worker must complete Programmatic Eligibility in order for the Case Planner to submit a FASP for Case Manager approval.
Programmatic Eligibility can be completed by anyone assigned a role in the Family Services Stage (FSS), or anyone who can access that worker’s Assigned Workload from the Unit Summary window.

Workers access the Programmatic Eligibility window from the Assigned Workload.

**Step-by-Step: Opening the Programmatic Eligibility Window**

1. From the FASP tree, select the In-process FASP.
   *Select the Initial, Comprehensive or Reassessment FASP.*

2. Click on the **Programmatic Eligibility** node.
   *The Programmatic Eligibility window displays.*

**Determining Programmatic Eligibility**

The Programmatic Eligibility window displays two tabs:

- **Placement**
  Use this tab for an FSS/CWS when at least one child has a Program Choice of “Placement.” If no child has this Program Choice, this tab is disabled.

- **Preventive**
  Use this tab for an FSS/CWS or FSS/CCR when at least one child has a Program Choice of “Preventive Mandated.” If no child has this Program Choice, this tab is disabled.
Each tab contains a set of eligibility standards that must be completed for every FASP pertaining to each selected Program Choice. The Program Choice selected on the Tracked Children Detail window determines which tab is enabled. If the worker selects “Placement” and “Preventive – Mandated,” both tabs are enabled and require completion. The worker must select at least one of the four Eligibility Standards on either the Placement or Preventive tab. Once the worker selects an Eligibility Standard, further eligibility criteria display that correspond to the selected standard. In some instances, when the worker selects certain Eligibility Criteria, s/he must select further sub-criteria. For example, when the worker selects the (Continuing) Need for Mandated Preventive Services to Hasten Return to Parent or Caretaker check box and then selects Preventive Housing Services from the resulting list, the worker must select sub-criteria related to Preventive Housing.

Once a worker selects valid standards and criteria, s/he must describe the relevant behaviors and/or circumstances supporting the selections. Once Eligibility Criteria have been selected, the comments field highlights in yellow, indicating that comments are required; this field has a 4,000-character limit. Workers should record comments to reflect the reasons for selecting particular standards. Detailed documentation requirements for each standard are contained in the regulations listed in Appendix B1.

After a worker makes a modification, the Cancel button enables and the other Programmatic Eligibility tab disables (assuming that it was previously enabled). The Save button enables once the worker selects one of the check boxes. The worker must click on the Save button to save all changes. Clicking on the Save button validates that the correct Eligibility criteria and sub-criteria have been selected for the chosen Eligibility standard.
The following error messages display if valid criteria have not been met:

- “The Eligibility Criteria for a (Continuing) Need for Mandated Preventive Services to Clients at Risk of Placement have not been met.”
- “The Eligibility Criteria for a (Continuing) Need for Mandated Preventive Services to Hasten Discharge to Parent or Caretaker have not been met.”
- “The Eligibility Criteria for a (Continuing) Need for Mandated Preventive Services to Prevent Replacement have not been met.”
- “The Eligibility Criteria for a (Continuing) Need for Housing Services to Clients with a Goal of Discharge to Independent Living have not been met.”

If you click on the **Cancel** button when unsaved changes exist on the window, the following message displays:

> “Do you want to cancel?  
> Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard the unsaved changes and close the tab on the **Programmatic Eligibility** window; the **Family Assessment and Service Plan** window displays.
- Click on the **No** button to keep the **Programmatic Eligibility** window open without discarding the unsaved changes.

Clicking on the **Close** button in the lower right corner of the window closes the **Programmatic Eligibility** window and displays the **FASP** window. If unsaved modifications exist, clicking on the **Close** button displays the following message:

> “Do you want to exit?  
> Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard the unsaved changes and display the **FASP** window.
- Click on the **No** button to keep the **Programmatic Eligibility** window open without discarding the unsaved changes.
**The Preventive Tab**

In an FSS/CWS or an FSS/CCR stage, a worker must complete Programmatic Eligibility if a Program Choice of “Preventive Mandated” has been selected for at least one child.

Mandated Preventive Services include:

- Case management
- Parent training
- Case planning
- Transportation services
- Casework contacts
- Emergency cash or goods
- Day care services
- Emergency shelter
- Homemaker services
- Housing services
- Housekeeper/chore services
- Intensive, home-based, family preservation services
- Family planning services
- Outreach activities
- Home management services
- Respite care and services
- Clinical services
- Specialized rehabilitative services
- Parent aide services
- Supportive services
- Day services
- Probation services

Detailed information about these Preventive Services is contained in Appendix B2.
On the **Preventive** tab, corresponding Preventive-Mandated Eligibility Standards display once a worker selects the check box to the left of at least one of the categories:

![Programmatic Eligibility Preventive Standards](image)

**Programmatic Eligibility Preventive Standards**

**Programmatic Eligibility Preventive Standards**

**Programmatic Eligibility Preventive Standards**

**Programmatic Eligibility Preventive Standards**

**Programmatic Eligibility Preventive Standards**

**Programmatic Eligibility Preventive Standards**

This check box is available for FSS/CWS stages.

Select this check box if the FSS/CWS stage includes one or more children at risk of placement in Foster Care. If you select this check box, you must select **at least one** reason why the child(ren) are at risk of placement; you must also select **at least one** of the following Eligibility Standards:

- Health and safety of child
- Parental refusal or surrender
- Parent service needs
- Child service needs
- Pregnancy
- Parent unavailability
- Diagnostic evaluation
- Court-Ordered Placement

**Programmatic Eligibility Preventive Standards**

This check box is available for FSS/CWS stages. Under unusual circumstances, this check box is also available for FSS/CCR stages. Select this check box if the FSS/CWS or FSS/CCR stage includes a plan to return the child(ren) to the custody of the parent(s) or caretaker(s). The child(ren) could have been in Foster Care for some length of time and it is now the responsibility of your agency to facilitate reuniting the child(ren) with the parent(s). Once you select this check box, you must indicate how your agency will
hasten the return of the child(ren) to the parent(s) or caretaker(s).

If you select this check box, you must select one of the following Eligibility Standards:

a. **Preventive Services Other Than Housing**
   If you select this standard, you must select all three of the following sub-criteria:
   - Service Appropriate to Reason for Care
   - Discharge Planned within Six Months
   - Safe and Appropriate Plan for Discharge

b. **Preventive Housing Services**
   If you select this standard, you must select all three of the following sub-criteria:
   - Housing is the Primary Factor Preventing Discharge
   - Discharge is Planned within Two Months
   - Safe and Appropriate Plan for Discharge

c. **Preventive Services For Children Placed in Designated Emergency Foster Boarding**
   If you select this standard, you must select the following sub-criterion:
   - Discharged Planned within 60 Days

(Continuing) Need for Mandated Preventive Services to Prevent Re-placement

This check box is available for FSS/CWS stages. Select this check box if the FSS/CWS stage includes one or more children at risk of re-placement in Foster Care. The provision of Preventive Services shall be considered Mandated when such services are essential to prevent the re-placement of a child into foster care. Once you select this check box, you must select at least one reason why the child is at risk of placement.

If you select this check box, you must select at least one of the following Eligibility Standards:

- Health and Safety of Child
- Parental Refusal
- Parent Unavailability
- Parent Service Needs
- Child Service Needs
- Pregnancy
- Family Court Contact
- Unplanned Discharge
Need for Housing Services for Clients with a Goal of Discharge to Independent Living

This check box is available for FSS/CWS and FSS/CCR stages. The goal for the child is not to return to his/her parent(s), but to discharge the child to Independent Living. Once you select this check box, you must indicate how your agency will facilitate this goal. If you select this check box, you must select all four of the following Eligibility Standards:

- Housing Services Necessary and Authorized
- Youth has been in care for at least 90 days
- Youth is prepared for Independent Living and Housing is Necessary for Discharge
- Discharge Planned Within Two Months

Once all four Eligibility Standards have been selected, the comments field on the right side of the window highlights in yellow, indicating that comments are required. When you have recorded comments, the Save button enables.

---

**Step-by-Step:**

**Recording Programmatic Eligibility for Preventive Services**

1. From the FASP tree, select the In-process FASP. Select the Initial, Comprehensive or Reassessment FASP.
2. Select the Programmatic Eligibility node. The Programmatic Eligibility window displays.
3. Click on the Preventive tab, if it is not already the active tab on the window. Programmatic Eligibility selections for Preventive Services display.
4. Click on the check box to select the appropriate category.
5. Record comments as needed for each selected standard.
6. Click on the Save button.
**Placement Tab**

Workers must complete Programmatic Eligibility when at least one child in an FSS/CWS stage has a Program Choice of “Placement.”

In an FSS/CCR stage, workers do not complete Programmatic Eligibility if the child has a Program Choice of “Placement.” In this case, a child has been legally surrendered or parental rights have been terminated; therefore, Programmatic Eligibility is assumed by the system.

Placement of a child in foster care shall occur when removal from the home is essential for ensuring the child receives proper care, nurturance or treatment. For each foster care placement, the district shall provide Preventive Services to the family and child prior to placement, unless the offer of Preventive Services has been refused or the placement is a result of a court order or due to the circumstance described as health and safety of the child.

![Placement Tab Diagram]

The **Placement** tab displays the names of all children in the FSS/CWS who have a Program Choice of “Placement.”

After the worker selects a child, the following list of Eligibility Standards displays in the **(Continuing) Need for Placement Services** field:

- Health and Safety of Child
- Parent Unavailability
- Child Service Needs
- Diagnostic Evaluation
- Parental Refusal or Surrender
- Parent Service Needs
- Pregnancy
- Court-Ordered Placement
If the information recorded for one child is the same for another child in the FSS use the Copy to Other Children command from the Options menu (or click on the Copy button) to copy the information recorded for one child and have it apply to other children in the stage.

---

**Step-by-Step: Recording Programmatic Eligibility for Placement Services**

1. From the FASP tree, select the In-process FASP.  
   Select the Initial, Comprehensive or Reassessment FASP.
2. Select the Programmatic Eligibility node.  
   The Programmatic Eligibility window displays.
3. Click on the Placement tab, if it is not already the active tab on the window.  
   The Placement tab displays Programmatic Eligibility selections for Placement Services.
4. Select a child from the Placed Children grid.
5. Select one or more Placement Eligibility Standard(s) from the list.
6. Record comments as needed for each selected standard.  
   The Save button enables when at least one eligibility standard is selected and comments are recorded.
7. Click on the Save button.

---

**Step-by-Step: Copying Child Information**

1. To copy information to another child, reopen the Programmatic Eligibility window and select the child (from whom you are copying information) in the Placed Children field.
2. Click on the Copy button.  
   The Copy to Child window displays, allowing you to select the child(ren) to whom you want the eligibility standard copied from the first child’s recorded information.
3. Click on the corresponding check box for each child to whom the information is to be copied.
4. Once each applicable child has been selected, click on the Save button.
5. Click on the Cancel button to close the Copy to Other Children window.
Module 6:  
Tracked Children Detail

A tracked child is defined as a child in a Family Services Stage with a Type of “Child Welfare Services” (FSS/CWS) or “Child Case Record” (FSS/CCR) and who has an active Program Choice and Permanency Planning Goal (PPG) and who is receiving Child Welfare services. The Tracked Children Detail window provides for the recording of critical information about children related to their respective PPGs and the programs and services they are receiving to achieve that outcome. The Tracked Children Detail window ensures that the information recorded remains with the child as that child moves from one stage to another in CONNECTIONS, creating an historical record. A child can only be tracked in one CONNECTIONS Family Services Stage at a time and will be tracked from the time an active Program Choice and PPG is selected for that child until both the Program Choice and PPG are end-dated. The child will appear on the Tracked Children Detail window unless the child is actively being tracked in another stage or the child is a parent under the age of 18-years-old and is designated as the primary or secondary caretaker of the stage.

This window also allows users to Associate specific Caseworkers to specific tracked children. CONNECTIONS also provides system-generated Alert To-Do’s to Case Planners and Case Managers when a Program Choice or PPG is added or changed for a tracked child.

CONNECTIONS uses Tracked Children Detail information to determine which Family Assessment and Service Plan (FASP) components are required. At least one Program Choice and one PPG must be recorded for at least one child before an Initial FASP can be launched.

Any worker with a role in the FSS/CWS or FSS/CCR, as well as any user with access to that worker’s Assigned Workload, may view and modify (depending on the security set elsewhere in the system) the information on the Tracked Children Detail window, with the following exceptions:

- CCRS/CONNECTIONS Placement Information (on the Placement Information tab) may be viewed for any child with a Program Choice of “Placement,” but may not be modified on this window.
- The Completely Freed for Adoption checkbox (on the Placement Information tab) is only visible to the Case Manager and can only be selected by the Case Manager.

The Tracked Children Detail window is accessed through the Tracked Child Detail button on the FASP window for an FSS/CWS or FSS/CCR stage. The Tracked Children Detail window can be accessed from: the CONNECTIONS Toolbar through a Case Search; via the Assigned Workload; or through the Unit Summary window. (See the step-by-step instructions, starting below, for each route of access.) Upon opening the Tracked Children Detail window, the Program Choice/PPG tab is active and the Associate Worker tab enables. The Placement Information tab enables if at least one child has a Program Choice of “Placement.” The Removal Information tab enables when at least one child has a Program Choice of “Placement” or “Non-LDSS Custody,” or historical removal information exists for the stage.
### Step-by-Step: Opening the *Tracked Children Detail* Window via the *Assigned Workload*

1. Click on the **WORK** button on the CONNECTIONS Toolbar.  
   *The Assigned Workload displays.*
2. Click to select the appropriate FSS stage.  
   *The Tasks… button enables.*
3. Click on the **Tasks**… button.  
   *The Family Services Stage window displays. The Stage Composition tab is active.*
4. Click on the **Family Assessment and Service Plan** tab.  
   *The FASP window displays.*
5. Click on the **Tracked Children** button.  
   *The Tracked Children Detail window displays with the Program Choice/PPG tab active.*

### Step-by-Step: Opening the *Tracked Children Detail* Window via the *Unit Summary* Window

1. Click on the **UNIT** button on the CONNECTIONS Toolbar.  
   *The Unit Summary Window displays.*
2. Type your agency code in the **Agency ID** field.
3. Click on the **Search** button.  
   *A list of workers within your agency displays.*
4. Select a worker from the list.
5. Click on the **Workload**… button at the bottom of the window.  
   *The selected worker’s Assigned Workload displays.*
6. Follow **Steps 2 – 5** of the previous step-by-step instructions to open the *Tracked Children Detail* window.

### Step-by-Step: Opening the *Tracked Children Detail* Window via a Case Search

1. Click on the **CASE** button on the CONNECTIONS Toolbar.  
   *The Case Search Criteria window displays.*
2. Type the Case ID into the **Case ID** field.
3. Click on the **Search** button.  
   *The Case List displays.*
4. Click on the case to select it from the **Case List**.
5. Click on the **Summary** button.  
   *The Case Summary window displays.*
6. Click on the Family Services Stage.

*You can also conduct a Case Search by entering search criteria in the Stage ID or Case Name field.*
7 Click on the **Events** button.  
*The Event List displays for the selected stage.*

8 Click on the Family Services Stage Open event.

9 Click the **Detail**… button.  
*The Family Services Stage window displays in view-only mode.*

10 Click on the **Family Assessment and Service Plan** tab.  
*The Family Assessment and Service Plan window displays.*

11 Click on the **Tracked Children** button.  
*The Tracked Children Detail window displays.*
The Tracked Children Detail window contains four tabs:

**Program Choice/PPG**

This tab allows the Case Manager, Case Planner and Caseworkers to view and modify Program Choice and Permanency Planning Goal (PPG) information for children in an FSS/CWS or FSS/CCR stage.

**Placement Information**

This tab displays placement data from CCRS for a selected child. This information may not be modified in CONNECTIONS. The tab also allows workers to record the name of the Discharge Resource for a selected child, if this information is known. This tab is active only if one or more children in the stage have been assigned a Program Choice of “Placement”; otherwise, the tab is disabled. The discharge resource information recorded on this tab in CONNECTIONS does not update CCRS.

You can also conduct a Case Search by entering search criteria in the Stage ID or Case Name field.
**Associated Caseworker**

This tab is used to Associate Caseworkers to children in the current FSS/CWS or FSS/CCR. The purpose of having a Caseworker Associated to a child is to allow for key components of the FASP to be completed by a Caseworker designated as responsible for assessment and planning for that particular child. An Associated Caseworker is responsible for Foster Care Issues documentation and Child Assessment Scales documentation on the FASP related to a specific child or children. Caseworkers may Associate themselves to any child who currently is not Associated to another worker; they may Un-Associate themselves from children at any time. Case Planners may Associate (or Un-Associate) any Caseworker to any child. A child may be Associated to only one Caseworker at a time.

If a Caseworker leaves an agency while Associated to a child, that Caseworker's assignments can be block re-assigned; the Associations are automatically re-created as well. If the re-assignments occur one stage at a time, the Associations need to be re-created one at a time.

**Removal Information**

This tab provides for the tracking of information related to the physical removal of a child who is placed in foster care or direct care with a relative or other suitable person under Article 10 of the Family Court Act. Any worker with a role in the stage can access this tab; however, it is only enabled when at least one child in the stage has a Program Choice of “Placement” or “Non-LDSS Custody,” or historical removal information exists for the stage. This tab is view-only for closed stages. For stages closed prior to December 16, 2005, the Removal Information tab is disabled.
Program Choice/PPG Tab

Assigned workers use the Program Choice/PPG tab to view and modify Program Choice and Permanency Planning Goal (PPG) information for children in an FSS/CWS or FSS/CCR stage. As the needs of the children change, workers may need to add new Program Choices or modify the effective dates and end dates of existing Program Choices. This tab is also used to make changes to the service program being provided to the children to ensure that the information about these children is up-to-date and accurate. The information continues to follow them throughout the life of the stage.

The Program Choice(s) selected for the child(ren) determines which PPG choices are available. If Program Choices are modified or new choices are added, you may be required to change the currently active PPG. The PPG represents the most desirable and most realistic permanent living arrangement for the child(ren). Only one PPG may be set for each child.

When the Tracked Children Detail window opens, the Program Choice/PPG tab is active. The tab consists of four sections:

- Select Children grid
- Program Choice Information
- Permanency Planning Goal (PPG) Information
- Footer

The Select Children grid contains the following columns:

- **Child**: The name(s) of the child(ren) in the Family Services Stage (FSS/CWS or FSS/CCR)
- **Age**: The age of the corresponding child associated with the FSS/CWS or FSS/CCR (based on the FASP due date)
The name of the Caseworker who has been Associated to the corresponding child on the Associated Caseworker tab.

The Select Children grid also contains the All checkbox, which allows you to select all children on the list.

The Program Choice Information section contains the following columns:

<table>
<thead>
<tr>
<th>Program Choice</th>
<th>A list of Program Choice(s) for the selected child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eff Date</td>
<td>The date that the corresponding Program Choice became effective</td>
</tr>
<tr>
<td>End Date</td>
<td>The date that the corresponding Program Choice ended (if it is not the current Program Choice, which continues to be valid)</td>
</tr>
</tbody>
</table>

These columns can be sorted by any column (in ascending or descending order) by clicking on the column name.

The Program Choice Information section also contains the following fields:

<table>
<thead>
<tr>
<th>Program Choice</th>
<th>This field allows you to select a new program, which will be added to the child’s record.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective Date</td>
<td>This field contains a calendar from which you can set the effective date of an existing or new Program Choice. The Effective Date cannot precede the stage’s opening date and cannot be later than the current system date. By default, the Effective Date for new programs is set to the current system date. The Effective Date cannot be modified if:</td>
</tr>
<tr>
<td></td>
<td>• the Program Choice is “Placement” for an FSS/CCR stage; or</td>
</tr>
<tr>
<td></td>
<td>• the Program Choice is “Protective” and an open CPS Investigation is associated with the FSS/CWS stage.</td>
</tr>
<tr>
<td>End Date</td>
<td>This field contains a calendar from which you can set the end date for an existing program. The End Date is not required, but may be recorded at any time. The End Date may not precede the effective date and cannot be set to a date in the future. By default, the End Date is set to the current system date, but this date does not become active unless you select the checkbox in this field or click on the drop-down arrow and select a date from the resulting calendar.</td>
</tr>
<tr>
<td></td>
<td>For individuals who are over 18 years of age and have a program choice of placement whose effective date is greater than the birth date of the individual, workers are able to add a preventive program choice, or end-date the existing program choice.</td>
</tr>
<tr>
<td></td>
<td>For individuals who are over 18 years and have an active program choice, or have a date of death (DOD) recorded, the only action</td>
</tr>
</tbody>
</table>
allowed is the end-dating of the program choice and PPG.

The End Date cannot be modified if:

- the Program Choice is “Placement” for a FSS/CCR stage; or
- the Program Choice is “Protective” and an open CPS Investigation is associated with the FSS/CWS stage.

Three buttons display at the bottom of the Program Choice Information section:

- **Add**: Allows you to add a Program Choice to the Program Choice Information
- **Modify**: Changes the Effective Date and/or End Date for the selected Program Choice
- **Clear**: Clears any additions or modifications and returns the section to its original state

The Permanency Planning Goal (PPG) Information section contains the following columns:

- **PPG**: Displays the current Permanency Planning Goal for the corresponding child
- **Eff Date**: Displays the date that the corresponding PPG became effective
- **End Date**: Displays the date that the corresponding PPG ended as the current PPG
- **AnticipComp Date**: Displays the anticipated date that the PPG will be achieved.

This section also has five fields:

- **PPG**: This field allows you to select a new Permanency Planning Goal (PPG). If an active PPG already exists, the existing PPG end dates automatically with the effective date of the new PPG when you click on the Add button.
- **Sub Category**: This field allows you to specify a sub-category of the selected PPG. This field enables only if you selected “Return to Parent,” “Referral for Legal Guardianship/Custody” or “Place in Another Planned Living Arrangement” as the Permanency Planning Goal.
- **Effective Date**: This field contains a calendar selector, from which you can set the Effective Date of an existing or new PPG. The Effective Date cannot
precede the date of the last approved FASP or the Case Initiation Date (if no approved FASP exists), and cannot precede the End Date of any previous PPG choice. The Effective Date cannot be a future date or be set past the due date of the next due FASP.

### End Date

This field contains a calendar selector, from which you can set the End Date for an existing PPG. The End Date is not required, but may be recorded at any time. The End Date may not precede the Effective Date. By default, the End Date is set to the current system date, but this date does not become active unless you select the checkbox in this field or click on the drop-down arrow and select the date from the resulting calendar.

### Anticipated Completion Date

This field contains a calendar selector, from which you can select the date when you anticipate that the selected PPG will be achieved. The default date is the date of the next due FASP.

Four buttons display at the bottom of this section:

**Comments**

After selecting an existing Permanency Planning Goal, click on this button to open the PPG Change window, in which you can view or modify the reasons for the last change in PPG. This button is disabled if no comments have been recorded.

**Add**

After selecting a new PPG and Subcategory, click on the Add button to add the new selections. If another PPG already exists for the child, the previous PPG is end-dated with the Effective Date of the new PPG, and the new PPG displays. This also opens the PPG Change window, where you must explain the reasons for changing the PPG. The Add button is disabled until a new PPG and Subcategory are selected.

**Modify**

Click on the Modify button to update the Effective Date and/or End Date for the selected PPG. In order for this button to enable, the date field(s) must be selected or active.

**Clear**

Click on this button to clear any additions or modifications and return the section to its original state. The PPG or one of the date fields must be selected in order to enable the Clear button.

The footer of the Program Choice/PPG tab consists of the View field (with its corresponding radio buttons) and two buttons:

**View**

When you click on the Active radio button, only currently active Program Choice and PPG information are displayed on the Program Choice/PPG tab for the selected child(ren). This radio button is selected by default when the Tracked Children Detail window opens, and is only available when one or more children with historical Program Choices and/or historical PPG information are selected in the Select Children grid.

When you click on the All radio button, all active and historical Program Choices and PPG information are displayed on the Program Choice/PPG tab for the selected child(ren). This radio
button enables only when one or more children with historical Program Choices and/or historical PPG information are selected in the Select Children grid.

**Save**
The **Save** button saves work that has been recorded on the tab. Information on the **Program Choice/PPG** tab cannot be saved unless the selected child has been assigned at least one valid Program Choice and a valid PPG.

**Cancel**
Clicking on this button cancels all changes made to the tab since the last save. The following message displays:

"Do you want to Cancel? Unsaved data and or narratives will be lost."

- Click the **Yes** button to discard all changes made since the last save.
- Click the **No** button to close the message; all changes remain pending.

**The PPG Change Window**
The **PPG Change** window opens automatically if you change the currently active Permanency Planning Goal (PPG) or change the sub-category of the active PPG and then click on the **Add** button. You must document the reason for the change.

**Step-by-Step: Viewing Program Choice and PPG Records**

1. On the **Tracked Children Detail** window, select a child from the Select Children grid by clicking on the box to the left of the child’s name.

2. In the **View** field, click on the **Active** radio button.
   The grid populates with only active Program Choice(s) and PPG(s) for the child. The information displays in End-Date order.

3. In the **View** field, click on the **All** radio button.
   The grid populates with all records for the selected child in descending end-date order.
Adding a Program Choice

As workers are assessing the needs of one or more children, it may become necessary to add new Program Choices. A worker may also be adding a Program Choice to a child within a stage for the first time. When it is necessary for a Program Choice to be selected, the worker completes the work on the Program Choice/PPG tab by adding a Program Choice. Any worker with a role in the Family Services Stage can add or modify the Program Choice for any child(ren) being tracked in the FSS/CWS or FSS/CCR. In order to launch a FASP, a Program Choice and Permanency Planning Goal must be selected for at least one child within the Family Services Stage.

Any time a Program Choice is added or modified for a child, the Case Planner and Case Manager receive system-generated Alert To-Do’s notifying them of the change. Program Choices cannot be added for any child if the FASP is in Pending approval status.

Five valid services Program Choices are available for selection in an FSS/CWS stage:
- Preventive Non-Mandated
- Preventive Mandated
- Placement
- Protective
- Non-LDSS Custody-Relative/Resource Placement

Only two valid Program Choices exist for a child in an FSS/CCR:
- Placement (required to generate an FSS/CCR)
- Preventive Mandated (the only available Program Choice to add if the child is younger than 18)

Step-by-Step: Adding a Program Choice~

1. On the Tracked Children Detail window, select a child from the Select Children grid by clicking on the box to the left of the child’s name.
2. Click on the drop-down arrow for the Program Choice field and select from the resulting list.
3. Click on the drop-down arrow for the Effective Date field and select a date from the resulting calendar.
4. Click on the Add button. The Program Choice is added to the Program Choice grid.
5. Click on the Save button.
You can select all children from the grid by clicking on the Select All Children checkbox. You can use this feature when all children in the FSS/CWS have the same Program Choice.

By clicking on the Add button to add the new Program Choice to the child’s record, the system automatically verifies that there are no more than three active Program Choice records for any one child.

If the Program Choice that has been selected invalidates the active Permanency Planning Goal, the following message displays:

“The addition of this program choice will invalidate the active PPG. Continue?”

- If you click on the Yes button, you need to add a PPG; the active PPG is end-dated.
- If you click on the No button, you are directed back to the Program Choice field on the Tracked Children Detail window.

When you click on the Add button and the selected Program Choice is “Protective,” the following message displays:

“This FSS was not created from a CPS INV. Is a program choice of Protective appropriate?”

- Click on the Yes button to retain the Program Choice.
- Click on the No button to return to the Tracked Children Detail window.

If “Protective” is being added as the Program Choice for a selected child or children in a FSS/CWS and not all children are selected, the following message displays:

“A Program Choice of Protective will be assigned to all children in the case.”

- If you click on the OK button, the Program Choice is added to all children in the stage.
- If you click on the Cancel button, the Tracked Children Detail window displays; the Program Choice is not changed.
Modifying a Program Choice

Once a Program Choice has been recorded and saved, it cannot be deleted. If a Program Choice needs to be modified, the previous Program Choice is end-dated and a new Program Choice is recorded. Any worker with a role in a stage can modify a Program Choice. This process helps workers maintain both a current and historical record of Program Choices for tracked children.

If you select a Program Choice with an End Date that is earlier than the current system date, it is considered an historical record and can no longer be modified. For Program Choices that have no End Dates, if you attempt to modify the End Date to a date that is earlier than the Effective Date, the following message displays:

“Program Choice end date must be greater than its effective date.”

End Dates and Effective Dates cannot be:

- future dates;
- earlier than the stage opening date; or
- later than the system date for the selected child(ren).

Step-by-Step: Modifying Program Choice Dates

1. On the Tracked Children Detail window, select a child from the Select Children grid by clicking on the box to the left of the child’s name.
2. From the Program Choice grid, select a Program Choice.
3. In the Effective Date field, click on the checkbox to accept the system date, or click on the drop-down arrow and select from the resulting calendar.
4. Click on the Modify button.
5. Click on the Save button.
The following table outlines which Program Choice selections are permissible with which PPG selections:

<table>
<thead>
<tr>
<th>Program Choice</th>
<th>PPG Choices Permitted</th>
<th>Permitted Combinations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive</td>
<td>6. Prevent Placement</td>
<td></td>
</tr>
<tr>
<td>(non-mandated)</td>
<td>7. Prevent Return to Placement</td>
<td>Protective</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Placement or Non-LDSS Custody (if either is selected, PPG options 6 and 7 are not available)</td>
</tr>
<tr>
<td>Preventive</td>
<td>6. Prevent Placement</td>
<td></td>
</tr>
<tr>
<td>(mandated)</td>
<td>7. Prevent Return to Placement</td>
<td>Protective</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Placement or Non-LDSS Custody (if either is selected, PPG options 6 and 7 are not available)</td>
</tr>
<tr>
<td>Placement</td>
<td>1. Return to Parent (Parent)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Parent</td>
<td>Preventive</td>
</tr>
<tr>
<td></td>
<td>b. Non-Parent Caregiver</td>
<td>(mandated) or Preventive (non-mandated)</td>
</tr>
<tr>
<td></td>
<td>2. Placement for Adoption</td>
<td>Protective</td>
</tr>
<tr>
<td></td>
<td>3. Referral for Legal Guardianship</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Relative</td>
<td>Placement or Non-LDSS Custody (if either is selected, PPG options 6 and 7 are not available)</td>
</tr>
<tr>
<td></td>
<td>b. Non-relative</td>
<td>Protective Placement or Non-LDSS Custody (if either is selected, PPG options 6 and 7 are not available)</td>
</tr>
<tr>
<td></td>
<td>4. Placement with a fit and willing Relative (Non-Guardianship/Non-Custodian)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Place in another planned living arrangement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Discharge to Independent Living</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Discharge to Independent Living/ Unaccompanied Refugee Minor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Discharge to Adult Residential Care</td>
<td></td>
</tr>
<tr>
<td>Protective</td>
<td>8. Protect Child</td>
<td>Preventive (mandated) or Preventive (non-mandated)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Placement or Non-LDSS Custody</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(PPG option 8 is not available if combined with any other Program Choice)</td>
</tr>
<tr>
<td>Non-LDSS</td>
<td>9a. Reunite with Parent</td>
<td>Preventive (mandated) or Preventive (non-mandated)</td>
</tr>
<tr>
<td>Custody -</td>
<td>9b. Legalize Living Arrangement with Relative/Resource</td>
<td>Protective</td>
</tr>
<tr>
<td>Relative/</td>
<td>9c. Permanent Living Arrangement (Non-Guardianship/Non-Custodian)</td>
<td></td>
</tr>
<tr>
<td>Resource</td>
<td>Placement</td>
<td></td>
</tr>
<tr>
<td>Placement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(This document is a page from a case management guide, specifically detailing permissible combinations under different program choices.)
Adding a PPG

The purpose of adding a Permanency Planning Goal (PPG) is to allow workers to record a new PPG for each child for whom child welfare services have been authorized. A PPG describes the most desirable, realistic, permanent living arrangement for the child.

Any worker with a role in the stage can add a PPG. In order to launch a FASP, a Program Choice and PPG must be selected for at least one child within the Family Services Stage. Adding a PPG may also be executed, as necessary, as part of maintaining details for tracked children in an existing FASP.

Available PPG categories and sub-categories are determined by the Program Choice selections made for the child(ren). When you add a PPG, the available selections display in the drop-down list based on the Program Choice for the selected child. If you modify the Program Choice(s), you may be required to select a different PPG that is consistent with the new Program Choice.

Anytime you change a child’s PPG, you need to explain (in the PPG Change window) the reason for making the change. This window opens automatically when you click on the Add button after selecting a new PPG. Whenever the PPG is changed, the Case Planner and Case Manager receive system-generated Alert To-Do’s, notifying them of the change. Each child can only have one active PPG at a time. Whenever a new PPG is added, the previous PPG is end-dated by the system.

The following PPG selections require that a PPG sub-category be selected:

<table>
<thead>
<tr>
<th>PPG</th>
<th>PPG Sub-Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return to Parent</td>
<td>Parent</td>
</tr>
<tr>
<td></td>
<td>Non-Parent Caregiver</td>
</tr>
<tr>
<td>Referral for Legal Guardianship/Custody</td>
<td>Relative</td>
</tr>
<tr>
<td></td>
<td>Non-Relative</td>
</tr>
<tr>
<td>Place in Another Planned Living Arrangement</td>
<td>Discharge to Independent Living</td>
</tr>
<tr>
<td></td>
<td>Discharge to Independent Living/Unaccompanied Refugee Minor</td>
</tr>
<tr>
<td></td>
<td>Discharge to Adult Residential Care</td>
</tr>
</tbody>
</table>
Step-by-Step:
Adding a Permanency Planning Goal

1. On the Tracked Children Detail window, select a child from the Select Children grid by clicking on the box to the left of the child’s name. The Program Choice Information and Permanency Planning Goal (PPG) Information sections enable.

2. Click on the drop-down arrow for the PPG field and select from the resulting list. This field enables only if a Program Choice has been recorded for the selected child.

3. Click on the drop-down arrow for the Effective Date field and select a date from the resulting calendar.

4. Click on the drop-down arrow for the Anticipated Completion Date field and select from the resulting calendar.

5. Click on the Add button.

6. Click on the Save button.

If all children within the stage have the same Program Choice and the same PPG, you can click on the Select All checkbox to select all of the children in the stage to add their PPG at the same time.

When adding a Permanency Planning Goal, the PPG Effective Date cannot be earlier than the End Date of any previous historical PPG. If the Effective Date you record is earlier than the End Date of a previous PPG, the following message displays:

“The effective date must be greater than or equal to the end date of any previous PPG.”

A PPG may be backdated (in the Effective Date field) to the date of the last approved FASP or the Case Initiation Date (CID), whichever is more recent.
Modifying the PPG

As you work with the children and families to whom services are being provided, it may be necessary to change the Permanency Planning Goal for the child(ren). It is important to change the goal only when it is in the best interests of the child(ren) to have a new plan for a safe and permanent living arrangement. Anytime a change is made to a PPG, you must explain the reason for the change.

Step-by-Step: Documenting the Reason for a PPG Change

1. On the Tracked Children Detail window, select a child from the Select Children grid by clicking on the box to the left of the child's name. The Program Choice Information and Permanency Planning Goal Information sections enable.
2. Click on the drop-down arrow for the PPG field and select from the resulting list.
3. Click on the Add button. The PPG Change window displays.
4. In the narrative field, explain why you are changing the PPG.
5. Click on the OK button. The Tracked Children Detail window displays. A system-generated Alert To-Do is generated and sent to the Case Manager and Case Planner with the following description: “Change in Program Choice/PPG in {stage name} should be reviewed and updated in CCRS.”

If you select a sub-category of “Discharge to Independent Living,” “Discharge to Independent Living/Unaccompanied Refugee Minor” or “Discharge to Adult Residential Care,” you need to record on the PPG Change window the reason for selecting those discharge options. Specifically, you need to document the reason(s) why it is not in the best interest of the child to select “Return to Parent,” “Place for Adoption,” “Refer to Guardianship” or “Place with a Relative.”

Modifying PPG Dates

The purpose of modifying PPG dates is to update the Effective Date, Anticipated Completion Date and/or End Date of a Permanency Planning Goal previously recorded for a tracked child in a Family Services Stage. It is important for workers to be able to modify these dates to keep the tracked child’s recorded information accurate and up-to-date. End Dates and Effective Dates cannot be:

- future dates;
- earlier than the stage opening date; or
- later than the system date for the selected child(ren).
Step-by-Step: Modifying a PPG Date

1. On the Tracked Children Detail window, select a child from the Select Children grid by clicking on the box to the left of the child’s name. The Program Choice and Permanency Planning Goal Information sections enable.

2. On the PPG grid, select the existing PPG (for which you are modifying date information) by clicking on the box to the left of the PPG.

3. In the Anticipated Completion Date field, select a new date. Either click on the checkbox to accept the current system date, or click on the drop-down arrow and select from the resulting calendar.

4. Click the Modify button. The information in the PPG grid updates.

When a child has information recorded in a pending FASP and an attempt is made to change that child’s information, the following message displays:

“There is a FASP in pending approval status. Program Choice and Permanency Planning Goal may not be changed. Contact the Case Planner.”

When the Case Manager makes any changes by adding or modifying Program Choice or PPG, the following message displays:

“CCRS should be updated.”
**Saving Your Work**
Clicking on the **Save** button on the **Program Choice/PPG** tab saves all changes on the tab to the database and verifies that the active PPG corresponds to the active Program Choices.

If you click the **Cancel** button prior to clicking **Save**, the following message displays:

```
“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”
```

- Click on the **Yes** button to discard the changes. The tab refreshes and the *Tracked Children Detail* window remains open.
- Click on the **No** button to remain on the window; unsaved data remains pending.

If you click on the **Close** button prior to clicking on the **Save** button, the following message displays:

```
“Do you want to exit?
Unsaved data and/or narratives will be lost.”
```

- Click on the **Yes** button to close the window. The changes are *not* saved.
- Click on the **No** button to return to the window with the unsaved changes displayed.
The Associate Worker Tab

The **Associate Worker** tab is used to Associate Caseworkers to one or more specific children in the current FSS/CWS or FSS/CCR. Associating a Caseworker to a child indicates that the selected worker is responsible for completing Foster Care Issues documentation and Child Scale information in the FASP. It does not prevent other workers from working with that child or completing other parts of the FASP for that child in the overall Service Plan. Also, the Case Planner may always complete Foster Care Issues documentation and Child Scale information for any child, regardless of whether or not a Caseworker has been Associated to the child. Caseworkers may Associate themselves to any child currently not Associated to another Caseworker, and may Un-Associate themselves from any child at any time. Caseworkers cannot Associate (or Un-Associate) other workers to any child. Case Planners may Associate (or Un-Associate) any Caseworker to any child. No historical information related to past Associated Caseworkers is retained in CONNECTIONS.

![Associate Worker Tab](image)

The top section of the **Associate Worker** tab consists of the Select Children grid, which contains three columns:

- **Child**
  - The name(s) of the child(ren) in the FSS/CWS or FSS/CCR

- **Age**
  - The age of the corresponding child associated with the FSS/CWS or FSS/CCR

- **Caseworker**
  - The name of the Caseworker who has been Associated to the corresponding child on the **Associate Worker** tab

The Select Children grid also contains the **All** checkbox, which allows you to select all children from the list.

The middle section of the tab consists of the **Select Caseworker** list. For the Case Planner, this list displays all workers involved in the FSS/CWS or FSS/CCR stage. For a Caseworker, this list displays only that worker's name.
The bottom section of the tab consists of the following buttons:

**Associate**
This button Associates the selected Caseworker to the selected child(ren).

**Un-Associate**
This button Un-Associates the current Caseworker from the selected child(ren). Caseworkers may Un-Associate themselves from children to whom they are currently Associated; Case Planners may Un-Associate any Caseworker from any child.

**Cancel**
Clicking on the Cancel button displays the following message:

“Do you want to Cancel?
Unsaved data and or narratives will be lost.”

- Click on the Yes button to discard all changes made since the last save.
- Click the No button to close the message; all changes remain pending.

**Associating/Un-Associating Caseworkers**
The Associate Worker functionality gives any worker with a role in the FSS/CWS or FSS/CCR stage the ability to Associate him/herself to one or more children who do not already have an Associated Caseworker. This feature limits who may complete certain portions of the FASP. Any worker with a role in an FSS/CWS or FSS/CCR stage can Associate (or Un-Associate) him/herself to one or more children.

If the worker who is Associating or un-associating Caseworkers is the Case Planner, the Caseworker list contains all Caseworkers in the stage. If the worker logged on is a Caseworker, the Caseworker list is populated with that worker’s name only.

**Step-by-Step:**
**Associating a Caseworker**

1. Click on the Associate Worker tab.
2. Select a child from the Select Children grid by clicking on the box to the left of the child’s name.
3. Click on the name of the Caseworker whom you are Associating to the child.
4. Click on the Associate button.
   *The Select Children grid updates to include the Associated Caseworker.*

---

Multiple children or all children can be selected from the grid as long as they all are not currently Associated to another Caseworker.

**Where am I?**
Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Tracked Children button
Click on the **Associate Caseworker** tab.

2 Select a child from the Select Children grid by clicking on the box to the left of the child’s name.  
*The Associated Caseworker is highlighted in the Select Caseworker list.*

3 Click on the **Un-Associate** button.  
The Select Children grid updates; the previously Associated Caseworker is no longer highlighted.
Placement Information Tab

The Placement Information tab displays placement data for a child from CCRS, which may be modified in CONNECTIONS. It also allows workers to record the name of the discharge resource for a selected child, if this information is known. This tab is active only if one or more children in the stage have been assigned a Program Choice of “Placement”, otherwise, it is disabled. The following placement information is available to any worker with a role in the FSS/CWS:

- Agency Name
- Facility ID
- Facility Type
- Placement Date
- Facility Address
- Name of Discharge Resource

Case Managers also use this window to mark a child as completely freed for adoption by selecting the Completely Freed for Adoption checkbox. This checkbox is only visible to the Case Manager and, therefore, can only be recorded by the Case Manager. By checking this box, a Child Case Record (FSS/CCR) is created automatically for the selected child.

The top section of the Placement Information tab consists of the Select Children grid, which contains the following columns:

- **Child**: The name(s) of the child(ren) in the FSS/CWS or FSS/CCR
- **Age**: The age of the corresponding child associated with the FSS/CWS or FSS/CCR
- **Caseworker**: The name of the Caseworker who has been Associated to the corresponding child on the Associate Worker tab
The CCRS/CONNECTIONS Placement Data section of the tab contains the following fields, which update from CCRS to CONNECTIONS:

- **Agency Name**: The name of the Agency the child is placed with
- **Placement Date**: The date the child was placed
- **Facility ID**: The ID number of the placement facility
- **Facility Address**: The address of the placement facility
- **Facility Type**: The type of placement facility

The bottom section of the tab contains the **Name of Discharge Resource** field, which displays the name of the discharge resource for the selected child, if one has been recorded. You can record a new or updated name for the discharge resource at any time.

The bottom section also contains the **Completely Freed for Adoption** checkbox, which is visible only to the Case Manager. The Case Manager selects this checkbox for a selected child to indicate that the child has been completely freed for adoption and to create the Child Case Record (FSS/CCR) for that child. When the Case Manager saves this information, the child is end-dated in the current FSS/CWS stage and established in the new FSS/CCR. The current Case Manager for the FSS/CWS is automatically the Case Manager for the FSS/CCR; this role may be reassigned as necessary.

Two buttons display at the bottom of the tab:

- **Save**: Clicking on the **Save** button saves the work you have recorded on the tab.

  If the Case Manager has selected the **Completely Freed for Adoption** checkbox, the following message displays:
  
  "{Child’s Name} will be end dated and a Child Case Record created. Continue?"
  
  - Click on the **Yes** button to end-date the child and create the CCR.
  - Click on the **No** button to cancel the end-dating/CCR creation process.

- **Cancel**: If you click on the **Cancel** button, the following message displays:

  "Do you want to Cancel? Unsaved data and or narratives will be lost"
  
  - Click on the **Yes** button to discard all changes made since the last save.
  - Click on the **No** button to close the message; all changes remain pending.
Step-by-Step: Viewing Placement Information

1. On the Tracked Children Detail window, click on the Placement Information tab.
2. Select a child from the Select Children grid by clicking on the box to the left of the child’s name. The child’s placement information displays in the CCRS/CONNECTIONS placement data section.

Record Placement Discharge

Any worker with a role in the FSS/CWS can record the Placement Discharge Resource. This information should be recorded when a child is discharged from foster care. Only one child can be selected at a time in order to record this information.

Step-by-Step: Recording Placement Discharge Resource

1. On the Tracked Children Detail window, click on the Placement Information tab. The Placement Information tab displays.
2. Select a child from the Select Children grid by clicking on the box to the left of the child’s name. The child’s placement information displays in the CCRS/CONNECTIONS placement data section.
3. In the Name of Discharge Resource field, record the name of the Discharge Resource.
4. Click on the Save button.
**Creating an FSS/CCR**

To create a Child Case Record, the Case Manager must select the **Child Completely Freed for Adoption** checkbox after a child has been legally freed for adoption. The child must have a Program Choice of “Placement” and be younger than 21 years of age.

<table>
<thead>
<tr>
<th>Step-by-Step: Recording a Child as Completely Freed for Adoption/Creating a Child Case Record</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. On the Tracked Children Detail window, click on the <strong>Placement Information</strong> tab.</td>
</tr>
<tr>
<td>2. Select a child from the Select Children grid.</td>
</tr>
<tr>
<td>3. Click on the <strong>Completely Freed for Adoption</strong> checkbox.</td>
</tr>
</tbody>
</table>
| 4. Click on the **Save** button.  
   The following message displays:  
   “{Child’s Name} will be end dated and a Child Case Record Created. Continue?” |
| 5. Click on the **Yes** button. |

By completing the steps above the following actions occur:

- A Child Case Record is created.
- The Case Manager from the original FSS/CWS is automatically assigned as the Case Manager of the FSS/CCR. (This role can be reassigned.)
- The Case Name and Stage Name of the new FSS/CCR is the child’s name.
- A link is created from the original FSS/CWS to the FSS/CCR.
- Demographic information from the FSS/CWS is copied to the FSS/CCR for the selected child.
- The current CID is copied from the FSS/CWS to the FSS/CCR.
- The child is end-dated in the original FSS/CWS and established in the FSS/CCR.

If a FASP is in Pending status when the Case Manager selects the **Completely Freed for Adoption** checkbox, the following message displays:

> “The Completely Freed indicator cannot be checked while a FASP is in pending status.”

If a FASP is in process and the Case Manager attempts to create a CCR for the last person remaining in the FSS/CWS stage, the following message displays:

> “Unable to create CCR removing last person from the stage when In Process FASP exists.”
If an FSS/CCR is opened to a minor mother and her infant, and the infant is approved to receive distinct preventive services (e.g. Day Care), an agency currently has two options:

1. *Keep* the FSS/CCR stage open with the minor mother tracked in the FSS/CCR stage, *AND*, open an FSS/CWS stage to track the infant. The minor mother should be identified as Primary Caretaker in the FSS/CWS stage. In this example, the worker would complete the FASP in the FSS/CCR stage *only*.  

   **OR**

2. *Close* the FSS/CCR stage and open an FSS/CWS stage. In this example, adoption-related nodes do not display in the FASP; the worker must record information related to the adoption progress in Progress Notes (*not* the FASP).  

   Note: With the implementation of Build 19, it will be possible to add the infant child to the stage composition in the CCR.
Interfaces
The CCRS/CONNECTIONS data that is retrieved using the CCRS interface displays in “real time” (with a date/time label) on the Placement Information tab on the Tracked Children Detail window. You cannot select multiple children for whom to view placement information. If placement information is available in CCRS for a selected child, an interface retrieves the following information and populates corresponding fields in the CCRS/CONNECTIONS placement information section on the Placement Information tab:

- Placement Date
- Facility ID
- Agency Name where the child is placed
- Facility Address
- Facility Type
- Plan Amendments become available

In order to help workers determine how current this information is, the following label displays above these fields:

“CCRS/CONNECTIONS Placement Data as of mm/dd/yyyy hh:mm:ss AM”

When CCRS is not available, the following message displays:

“CCRS data is not currently available. Try again later.”

See the Build 18 Interfaces Job Aid (available on the OCFS CONNECTIONS intranet site) for detailed information about the CONNECTIONS/CCRS/WMS interfaces.
The Removal Information Tab

This tab provides for the tracking of information related to the physical removal of a child who is placed in foster care or direct care with a relative or other suitable person under Article 10 of the Family Court Act. Any worker with a role in the stage can access this tab; however, it is only enabled when at least one child in the stage has a Program Choice of “Placement” or “Non-LDSS Custody,” or historical removal information exists for the stage. This tab is view-only for closed stages. For stages closed prior to December 16, 2005, the Removal Information tab is disabled.

The Removal Information tab consists of a Select Child grid, Removal Information section (including a History of Removals grid) and various fields and buttons.

Select Child Grid

The Select Child grid lists each active child in the stage with a Program Choice of “Placement” or “Non-LDSS Custody” (and children with historical removal information even if the children no longer have one of these Program Choices), the child’s age, and the Caseworker Associated to the child. Upon opening the Removal tab, the first (or only) child in the grid is selected. Only one child may be selected from the grid at a time. Removal information is modifiable only for children whose current Program Choice is “Placement” or “Non-LDSS Custody”; removal information is view-only for all other children in this tab.

Two view-only fields display next to the Select Child grid: Activity Date and Next Permanency Hearing Date Certain (<Hearing Type>). Upon selecting a child from the grid, these fields populate with the applicable dates for that child, which are
brought into CONNECTIONS through a daily batch interface with CCRS.

Activity Date
The date of the last legal activity pertaining to permanency (e.g., date of removal, approval of voluntary placement, date of last permanency hearing).

Next Permanency Hearing Date
The date of the next permanency hearing for a child (Date Certain), which is set at each relevant court hearing. If no Date Certain has been entered into CCRS, this field is blank.

This field name includes either the word “Initial” for the first permanency hearing or “Subsequent” for all successive permanency hearings.

Various alerts to assigned workers for Service Plan Reviews/Consultations and Permanency Hearing Report submissions are generated based on the Date Certain.

CONNECTIONS compares the Date Certain to the Activity Date (for an initial permanency hearing), or to the date of the prior hearing (for a subsequent permanency hearing) recorded in CCRS. If the Date Certain does not fall within the appropriate timeframes, the worker receives an Alert To-Do on his/her Staff To-Do List. This message does not prevent the worker from completing any work in CONNECTIONS; it simply alerts the worker that the Date Certain does not comply with the timeframes made effective by the Permanency Bill.

Removal Information Section
The Removal Information section is comprised of the History of Removals grid, Date of Physical Removal field and Type of Legal Event Associated with Removal field. The History of Removals grid provides a listing of all removal records for the child selected in the Select Child grid. The following columns display in the grid (all columns are view-only with the exception of the Invalid field):

Invalid
The Invalid checkbox indicates if a removal record is invalid. A worker can invalidate a selected removal record by clicking on this checkbox and clicking on the Save button.

Removal Date
The child’s date of physical removal from the home. This field is populated with the date that was recorded in the Date of Physical Removal field.

Legal Event
The type of legal event that resulted in the removal of the child from the home. This field is populated with the event that was selected in the Type of Legal Event Associated with Removal field. This allows the system to distinguish the cases that are subject to the Permanency Bill and those that are not, so that appropriate alerts are generated.

Date Saved
The system date and time that the removal record was saved.
Upon selecting a removal record in the grid, the **Date of Physical Removal** and **Type of Legal Event Associated with Removal** fields populate with the information recorded for that removal record. These fields can be modified for the most recently recorded (and valid) removal record:

**Date of Physical Removal**

This field is used to record the date of the child’s physical removal from the home. The date recorded cannot be a future date and can be backdated. However, if more than one removal record exists, this date can only be backdated to the most recent valid Date of Physical Removal plus one day. For example, if the Date of Physical Removal for the most recent valid record is 12/27/05, the date recorded in this field must be 12/28/05, or later.

Various alerts to assigned workers for Removal Updates/Plan Amendments, First Service Plan Reviews, and Service Plan Updates are generated based on the Date of Physical Removal.

This field **must** be completed for children removed after September 21, 2005. For children removed before September 21, 2005, historical information can be recorded here. While recording historical removal information for children removed before September 21, 2005 does not generate alerts, it preserves historical information within CONNECTIONS.

**Type of Legal Event Associated with Removal**

This required field is used to record the type of legal event that resulted in the removal of the child from the home. The following options display in a drop-down list:

- Article 10 Abuse/Neglect
- Article 3 JD
- Article 7 PINS
- Voluntary Placement Agreement
- Voluntary Surrender
- Article 651.b Unaccompanied Refugee Minors

CONNECTIONS does not provide alerts for Article 3 JD or Article 7 PINS-related legal activities (unless the child is completely legally freed for adoption), since those populations are not covered by Chapter 3 of the Laws of 2005.
Buttons

Clear  Selecting a record in the History of Removals grid enables the Clear button. Clicking on this button deselects the selected removal record.

Save  This button is enabled when a change is made to the tab and the Type of Legal Event Associated with Removal field is complete. Clicking on this button saves any changes that have been made to the tab. Changes to an existing removal record must be saved before making changes to another record. New removal records must be saved before adding or modifying another removal record.

Cancel  Making a change to the tab enables the Cancel button. Clicking on this button cancels any changes made to the tab since the last save. After clicking on the Cancel button, the following message displays:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Clicking on the Yes button cancels the changes and all information reverts to its state after the last save.
- Clicking on the No button ends the cancellation request and returns to the window for additional modifications.

The Close button displays at the bottom of the Tracked Children Detail window and is always enabled. Clicking on the Close button prior to clicking on the Save button displays the following message:

“Do you want to exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to close the window. The changes are not saved.
- Click on the No button to return to the window with the unsaved changes displayed.

---

Step-by-Step: Accessing the Removal Information Tab

1  On the Tracked Children button, click on the Removal Information tab. The Removal Information tab displays. The first (or only) child in the grid is selected.

Where am I?
Assigned Workload > FSS > Tasks > FASP tab > Tracked Children button > Removal Information tab
Recording a New Physical Removal

New physical removals are recorded directly on the **Removal Information** tab by selecting a child from the grid, completing the **Date of Physical Removal** and **Type of Legal Event Associated with Removal** fields, and clicking on the **Save** button.

### Step-by-Step: Recording a New Physical Removal

1. Select a child in the Select Child grid.  
   *The Activity Date and Next Permanency Hearing Date Certain fields populate (if that data was recorded in CCRS) and any removal records display in the History of Removals grid.*

2. Record the child’s removal date in the **Date of Physical Removal** field.

3. Click on the drop-down arrow in the **Type of Legal Event Associated with Removal** field and select from the resulting list.

4. Click on the **Save** button.  
   *The new removal record displays in the History of Removals grid.*

### Modifying a Removal Record

A removal record should be modified if the Date of Physical Removal and/or Type of Legal Event Associated with Removal were recorded incorrectly. For example, if the actual date of removal was February 2, 2006, but it was accidentally recorded as February 1, 2006, the removal record should be modified to reflect the correct removal date. Only the most recent valid removal record can be modified.

### Step-by-Step: Modifying a Removal Record

1. Select a child in the Select Child grid.  
   *The Activity Date and Next Permanency Hearing Date Certain fields populate (if that data was recorded in CCRS) and any removal records display in the History of Removals grid.*

2. Select the most recent removal record in the **History of Removals** grid.  
   *The Date of Physical Removal and Type of Legal Event Associated with Removal fields populate with the information recorded for the selected removal.*

3. Modify the information in the **Date of Physical Removal** and **Type of Legal Event Associated with Removal** fields, as appropriate.

4. Click on the **Save** button to save your changes.  
   *The changes display in the History of Removals grid.*
Invalidating a Removal Record

A removal record should be invalidated if it was never correct. For example, if the wrong child was selected when recording the removal that record was never correct; the removal record must be invalidated and a new removal record reflecting the correct child must be recorded.

**Step-by-Step: Invalidating a Removal Record**

1. Select a child in the Select Child grid. *The Activity Date and Next Permanency Hearing Date Certain fields populate (if that data was recorded in CCRS) and any removal records display in the History of Removals grid.*

2. Select the appropriate removal record in the History of Removals grid. *The Date of Physical Removal and Type of Legal Event Associated with Removal fields populate with the information recorded for the selected removal.*

3. Click on the Invalid checkbox for the record in the History of Removals grid.

4. Click on the Save button to save your changes.

**Where am I?**

Assigned Workload > FSS > Tasks > FASP tab > Tracked Children button > Removal Information tab
Progress notes are recorded and maintained for all child welfare services cases, providing documentation of all worker activities associated with the provision of child welfare services in an objective and behaviorally specific way. Progress notes document the timely activities of casework staff and the information acquired during these activities. Progress notes record the caseworker’s investigative, assessment and intervention activities in an objective and behaviorally descriptive way, and should support the caseworker’s conclusions about safety, risk, family functioning, and the credible evidence that exists (or fails to exist) to substantiate allegations of child abuse and maltreatment. Additional casework activity that supports decision-making and service and permanency planning is to be documented in progress notes for cases that are opened for services, as well as for cases in which children have been placed in out-of-home care. Progress notes should be recorded contemporaneously with the event, interview, observation or activity to preserve the integrity of the information being recorded.

These activities serve several important functions:

- Recording information related to the child(ren)’s safety serves to document the caseworker’s assessment of whether a child is safe in the home; this includes any identified safety factors, as well as family strengths and/or family, neighborhood or community resources that mitigate or address safety concerns. If it is determined that the child is not safe in the home after considering the safety factors, strengths and mitigating circumstances, caseworkers document the interventions initiated to protect the child(ren).

- Recording the casework activities that have been completed and the dates of services that have been provided enables the caseworker to document compliance with legal requirements pertaining to a specific case.

Clinical notes and information from daily logs are different from progress notes in the level of detail about historic and current events that are shared as part of the therapeutic process and should be kept in the external case record. Clinical details of therapeutic sessions should not be included in progress note entries. For example, details of revealed sexual abuse discussed in a session that is not relevant to child’s safety and permanency should be recorded separately from the CONNECTIONS system in a clinical note. Information that is relevant to the...
child/parents safety, well-being and permanency should be in progress notes and available to others as it may impact the direction of the overall effort.

The FSS is only one element in the life of a case. The people involved in the current stage may be involved in future cases or stages. The information recorded helps provide a complete, contemporaneous record of casework activities.

The Progress Notes functionality in CONNECTIONS enables assigned workers to:

- create and modify progress notes;
- use the Search, Sort and View functions with progress notes;
- add an Addendum to a “frozen” note;
- copy progress notes from one stage to another in the same case (however, they cannot copy notes to a CPS Investigation stage); and
- use the Copy and Paste functions.

Progress notes begin on the Case Initiation Date and continue until the case is closed to all child welfare services. Progress notes should be recorded as soon as possible after an event occurred or information is received, in order to provide an accurate, contemporaneous account of pertinent information.

Progress notes exist in one location within the FSS. Caseworkers are required to document and maintain all progress notes and casework contacts for all Family Services Stages, with the exception of FSS/ADVPO (Advocates Preventive Only) stages. (For more information, see “ADVPO” in the Glossary.)

At times there may be some overlap in the material recorded by each worker or some question regarding in which part of the “record” (i.e., in CONNECTIONS) a progress note should be recorded. A good general principle to keep in mind is that each worker should maintain progress notes on all relevant case activities in which s/he is directly involved or that directly impact the aspect of the case for which s/he is responsible. If workers are uncertain about where material should be recorded in CONNECTIONS, local policies and procedures, as well as supervisors, should be consulted.
Accessing Progress Notes

The ability to access, view and maintain progress notes is dependent on a number of factors. A worker's role in the stage and the need to complete certain tasks determine the security rights that are assigned.

In order to create notes, a worker must be:

• assigned a role in the stage;
• granted modify access to the Assigned Workload of a worker who has a role in the stage;
• within the assigned worker's unit hierarchy;
• assigned the ENTER PROG NOTE Business Function; or
• assigned a Progress Notes Task To-Do (see page 25 for information on how to create a Progress Notes Task To-Do).

In order to modify notes, a worker must be:

• the progress note's Author; or
• the progress note's Entered By person.

If the author is identified as "Other," only the Entered By person can modify notes.

There are times when someone other than an assigned worker or supervisor, such as clerical staff, records progress notes in CONNECTIONS. Those workers are assigned the ENTER PROG NOTE Business Function, which enables them to create and/or modify progress notes for a stage. Workers with this Business Function access Progress Notes from the Case Summary window; only the Progress Notes window is accessible from the Progress Notes tab in the FSS. If anyone other than an assigned worker or supervisor, such as clerical staff, receives a user-generated Task To-Do to complete progress notes, s/he has access only to the Progress Notes Detail window and Progress Notes window (which is accessed via the Progress Notes tab); all other tabs on the Family Services Stage window are disabled.

At times, stage assignments may change during the course of an open case. For example, the Case Planner unassigns Caseworker “A” (who is the author of notes in “Draft” status) from the stage. When the Case Planner clicks on the Save button, the following warning displays:

“You are about to remove a worker who has DRAFT Progress Notes in this stage. Continue?”

• Clicking on the Yes button saves the change in assignment. The Author of the note can no longer access the progress notes for that stage. If the Entered By person is a clerical worker, s/he can still modify progress notes.
• Clicking on the No button cancels the change in assignment; the Assign window remains open.
Accessing Progress Notes to Create or Modify Notes

Within the FSS, there are three ways to access Progress Notes to create or modify notes for a Family Services Stage:

**Assigned Workload**

1. From the Assigned Workload, select an FSS stage.
2. Click on the Tasks… button. The Family Services Stage window displays.
3. Click on the Progress Notes tab. The Progress Notes window displays.

**Task To-Do**

1. Select the Task To-Do from the Case To-Do List or the Staff To-Do List, then click on the Navigate… button. The Progress Notes window displays.

**Case Summary window**

1. Conduct a Case Search to find the case (refer to “Case Search” in Module 1). The Case List displays.
2. Select the case from the Case List.
3. Click on the Summary button. The Case Summary window displays.
4. Select the FSS stage.
5. Click on the Options menu and select the Enter Progress Notes… command. The Progress Notes window displays.

To create progress notes from the Progress Notes window, click on the New Note button. The Progress Notes Detail window displays.

To modify an existing note in “Draft” status, select the note on the Progress Notes window and click on the Edit Note button. Notes in “Final” status cannot be modified; however, a worker can add an addendum to a “Final” note by clicking on the Options menu on the Progress Notes Detail window for the selected note and selecting the Add Addendum command. (For more information, see “Adding an Addendum to a Frozen Note” on page 7-26.)

Workers cannot record progress notes when an approval for stage closure is pending; they must invalidate the pending approval to record the note.
Accessing Progress Notes to View Progress Notes (View Only)

There are three ways to access Progress Notes to view notes for open stages:

**Assigned Workload**

1. From the Assigned Workload, select an FSS stage.
   *The Family Services Stage window displays.*
2. Click on the Tasks… button.
   *The Family Services Stage window displays.*
3. Click on the Progress Notes tab.
   *The Progress Notes window displays.*
4. Select a note from the list and click on the View Note button.

**Case Summary window**

1. Conduct a Case Search to find the case (refer to “Case Search” in Module 1).
   *The Case List displays.*
2. Select the case from the Case List.
3. Click on the Summary button.
   *The Case Summary window displays.*
4. Select the stage.
5. Click on the Options menu and select the Enter Progress Notes… command.
   *The Progress Notes window displays.*
6. Select a note from the list and click on the View Note button.
   *The Progress Notes Detail window displays.*

**Event List**

1. Select the Family Services Stage Opened event and click on the Detail… button.
   *The Family Services Stage window displays.*
2. Click on the Progress Notes tab.
   *The Progress Notes window displays.*
3. Select a note from the list and click on the View Note button.
The Progress Notes Tab

The Progress Notes functionality has two main components: The **Progress Notes** window, which is used to search for and sort notes; and the **Progress Notes Detail** window, which is used to record and modify individual progress notes. (For complete information about the **Progress Notes Detail** window, see page 7-10.)

**The Progress Notes Window**

The **Progress Notes** window is comprised of three sections: the search fields at the top of the window, the progress notes grid in the middle, and the buttons along the bottom. The fields at the top of the window are the search criteria that can be selected. A worker can select one, several or all of the search criteria for a search list. Progress notes can be searched, sorted or both.
**Search Criteria Fields**

These search criteria comprise the bulk of the columns of the progress notes grid located in the middle of the window:

**From Event Date and To Event Date**

Use these fields to search within the range of dates you selected in the search criteria at the top of the window. To search for a specific event date, enter the same date in both fields. To search on an open-ended date, enter the date in the **From Event Date** field and leave the **To Event Date** field blank. All progress notes from that date forward return in the search. Conversely, the same procedure can be performed with the **To Event Date**; all of the notes from that date back return in the search results.

**Type**

Use this field to search by type of contact as selected from the **Type** window. (For a list of possible Type choices, see the list at right.)

**Author**

Use this field to search by the author of the note. Select an author from the field’s drop-down list, which is populated with the name(s) of all individuals who have authored a note in the stage.

**Family Part. (participant)**

Use this field to search by family participant. Select from the drop-down list consisting of all persons in the Stage Composition.

**Other Part. (participant)**

Use this field to search by Other Participant. Select Other Participants or contacts who are involved in the case but who are not included in the Stage Composition. Select the Other Participant’s **category**, not the name, from the drop-down list.

**Purpose**

Use this field to search by the Purpose of the contact.

**District/Agency**

Use this field to search by the Entered By worker’s District/Agency code.

**Focus**

Use this field to search by the person who is the Focus of the note. Focus refers to the individual(s) about whom the contact occurred, but who may or may not have been present. Select from a drop-down list comprised of possible Focuses.

**Location**

Use this field to search by the location of the contact.
The grid displays many of the fields listed above, as well as fields on the *Progress Notes Detail* window. (Many of these fields are listed on both the *Progress Notes* window and the *Progress Notes Detail* window.) For a complete list, see the field descriptions above and on page 7-11. There are three fields that do not display on either the *Progress Notes Detail* window or among the search fields on the *Progress Notes* window, but they do display in the grid:

- **Note Status** indicates whether the note is in “Final” or “Draft” status.
- **Addendum** indicates whether or not an addendum has been added to the note. (For more information, see “Adding an Addendum to a Frozen Note” on page 7-26.)
- **Copied From** indicates the stage from which the note was copied. This information never prints on any of the Progress Notes Data Reports. (For more information, see “Copying Progress Notes” on page 7-28.)

By default, the grid on the *Progress Notes* window displays all of the progress notes for the stage, listed in chronological order with the earliest notes at the top of the list. The list’s display can be changed to display only notes that meet specific search criteria or to display the notes in order by a particular field. (For information about searching for or sorting progress notes, see “Searching for Progress Notes” on page 7-21 or “Sorting Progress Notes” on page 7-22, respectively.)

Several buttons display on the *Progress Notes* window:  

- **Refresh List** This button refreshes the grid to the default display list of notes and removes all search criteria. Once a search has been conducted, this button enables.
- **Search** Click on this button to initiate a Progress Notes search after selecting search criteria.
- **Sort** This button opens the *Sort* window, where you can select up to three sort criteria at a time. (See “Sorting Progress Notes” on page 7-22 for more information.)
- **View Note** Once you have selected a specific note, click on this button to view the details of that note.
- **New Note** This button opens a blank *Progress Notes Detail* window.
- **Edit Note** Once you have selected a specific note, click on this button to open the *Progress Notes Detail* window and modify the note. Only notes in “Draft” status can be edited.
- **Copy Note** This button is used to copy a note that has been selected from the search results. Clicking on this button opens the *Copy Note* button to copy a saved note between stages of the same case.
Select All
Clicking on this button selects all of the progress notes in the grid to print at once.

Print Note(s)
This button opens the Print Notes window for the selected note(s). Notes can be printed to include only the data fields (which generates the Progress Notes Data Report) or both the data fields and narrative. (For more information, see “Printing Progress Notes” on page 7-27.)

Two arrow buttons display at the bottom of the Progress Notes window. When more than 200 progress notes entries are recorded on the window, a new “page” is created; each page holds a maximum of 200 entries. These buttons are used to scroll between pages of progress notes and enable when more than one page of notes exists.

Several fields on the Progress Notes window and Progress Notes Detail window contain the following drop-down lists that are common across all stages:

- Type
- Other Participant
- Location
- Method
- Purpose

Some choices are available on the Progress Notes Detail window only under specific circumstances:

- Review Note and Review Case are only available as choices when the Type is “Supervisor/Managerial Review” for all stage types.
- 24 Hour is available as a choice for Purpose when the Type is “Casework Contact” or “Attempted Casework Contact” only for Investigation (INV) stages.
- Reporter/Source is available as a choice for Other Participant only for CPS Investigation stages. It is not available for Family Services Stages.

### Step-by-Step: Opening the Progress Notes Detail Window

1. On the Progress Notes window, click on the New Note button to open the Progress Notes Detail window to create a new note.
   —OR—
   Click on an existing “Draft” note from the list, then click on the Edit Note button to open the Progress Notes Detail window to view or modify an existing note. (If you select a “Final” note from the list, it can only be viewed, not modified.)
The Progress Notes Detail Window

New notes are created on the Progress Notes Detail window. Modifying, duplicating, saving and printing progress notes can also be completed on this window. The window is separated into two main parts:

- Use the data fields to record contact-specific data, such as who was contacted, when and where the contact was made. Some data fields are system-populated, others are required, and still others are optional. (See Appendix C2.)
- Use the narrative to record clear, descriptive and factual information about the events, conversations and resolutions that took place during the contact. A worker’s impressions or opinions, and relevant information to support these, can also be expressed and should be labeled as such, as well as the participation and perceptions of family members in the planning for services. The narrative has a Text Control tool, which enables workers to use certain Microsoft Word-like formatting and functionality.

The Type, Method of Contact, Author and Narrative fields are required for all notes. Based on the selections made for Type and Method of Contact:

- some fields are required;
- some fields are enabled;
- some fields are enabled and required (highlighted in yellow);
- some fields are disabled; and
- some of the choices in the drop-down lists may change.

<table>
<thead>
<tr>
<th>REQUIRED Field(s)</th>
<th>ENABLED Field(s)</th>
<th>DISABLED Field(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant</td>
<td>Purpose</td>
<td>Unannounced</td>
</tr>
<tr>
<td>Location</td>
<td>Focus</td>
<td></td>
</tr>
<tr>
<td>Event Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Participant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Narrative</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For more information, see the Edit Matrix in Appendix C2.
When the Progress Notes Detail window displays for a new note, the following fields are system-populated and are not modifiable:

- **Entered by**
  The name of the logged on worker

- **Dist/Agy.**
  The code of the logged on worker’s district/agency

- **Entry Date**
  The progress note’s creation date

- **Family Participants/Focus List**
  A list of all of the people identified in the Stage Composition who are part of any concurrently open stages

Workers must first complete the **Type** field in order to enable the **Method of Contact** field. The **Method of Contact** field contains options that correspond to the selected **Type**.

The following fields display on the Progress Notes Detail window (see Appendix C4 for more details on the values in each field):

- **Event Date**
  The **Event Date** reflects the date on which the contact took place. This is a required field for all notes (except those with a **Type** of “Summary”). The **Event Date** field defaults to today’s date. To accept this date, click on its corresponding checkbox. To change the **Event Date** to a date in the past, click on the drop-down arrow and select a date from the resulting calendar. You can also change this date manually by clicking on the checkbox to make the date “active,” then typing directly into each segment (mm/dd/yyyy) in the field. The date recorded cannot be earlier than the Case Initiation Date (CID) for the FSS/CWS or FSS/CCR stage. The date recorded in this field cannot be a future date.
**Time**
This field reflects the time the contact occurred in hours and minutes (with AM and PM [e.g., 1:00 PM], or military time [e.g., 13:00]).

**Type**
This required field indicates the type of contact that was made or attempted. A worker can select one or more Type(s) for a single progress note, but must select at least one type. If the worker selects more than one, “multiple” displays in the field. If a worker modifies the **Type of Contact** field while creating progress notes, the following message displays:

"Changing the TYPE clears all user entered data fields except the Narrative. Continue making changes?"

**Method of Contact**
This required field describes how or by what means the contact was made (e.g., Face to Face, Phone). This field contains a drop-down list of methods available based on the **Type** of contact selected. If a worker modifies the **Method of Contact** field while creating progress notes, the following message displays:

"Changing the METHOD clears all user entered data fields that are inconsistent with the new METHOD selection. Continue making changes?"

**Unannounced Visit checkbox**
Use this checkbox to indicate that contact was made without a prearranged appointment. The checkbox enables only when the **Type** of contact is “Attempted Casework Contact” or “Casework Contact.” If the checkbox is left blank, the contact is documented as an announced visit.

**Location of Contact**
This field identifies the site where the contact took place. Select the location from a drop-down list. There are times when this field is required, enabled or disabled, depending on the responses selected in other fields. (See Appendix C2 for details.)

**Family Participant/Focus**
This field contains the list of people identified in the Stage Composition who are part of any concurrently open stages. It is system-populated and cannot be modified. This field contains two checkboxes for each person:

- Select the **Family Participant (FP)** checkbox to indicate which family participant(s) were present at the contact. A worker may select one or more checkboxes. There are times when this checkbox is required, enabled or disabled, depending on the responses selected in other fields. (See Appendix C2.)
Select the **Focus** checkbox to indicate which individual(s) from the Stage Composition are the subject of (and may or may not be present at) a particular contact. A worker may select one or more checkboxes. There are times when this checkbox is required, enabled or disabled depending on the responses selected in other fields. (See Appendix C2.)

**Family Participant** refers to any family members who are present at the contact (e.g., a phone call from the biological father or a family visitation with the mother); the **Focus** refers to the individual(s) about whom the contact occurred. For example, if the Caseworker, the teacher and the mother met to discuss the child’s Independent Education Plan (IEP), the mother would be the Family Participant and the child would be the Focus (even though he was not present), because the purpose of the meeting was to discuss his IEP. The teacher would be included as an **Other Participant**.

This field also features the **All** button, which enables a worker to select all of the individuals in the family for that note’s contact. This can be a time-saver, since the worker does not need to select each person individually. If, for example, all family members except one or two were present for the contact, a worker can click on the **All** button to select everyone in the family, then click on the corresponding checkbox(es) to **deselect** the few individuals who were not present.

If a worker attempts to save a progress note without selecting a Family Participant (or Other Participant) when one is required, the following message displays:

> “You must select at least one participant or other participant for the type of contact.”

**Other Participant**

This field contains a list (by category, not name) of others outside the Stage Composition who may be participants or other individuals involved in the contact. A worker can select one or more participants on the **Other Participant** window for each note. If a worker selects more than one, “multiple” displays in the field. There are certain situations when this field is required, enabled or disabled; Appendix C2 identifies these circumstances.
**Author**
This required field indicates the person who made the contact or directly acquired the information being documented. The list of choices is comprised of the assigned worker(s) in the district/agency, anyone assigned in or out of that unit, and “Other.” When the Entered By worker is an assigned worker, the Author field defaults to the name of that worker. The worker can select a different Author, if necessary.

**Entered By**
This field contains the system-populated name (based on Person ID) of the worker recording the note in CONNECTIONS. This field cannot be modified.

**Dist./Agy.**
This system-populated field indicates the code of the district/agency of the worker who is identified in the Entered By field. This field cannot be modified.

**Entry Date**
This field reflects the date the Progress Notes Detail window was first accessed. This date is system-populated and cannot be modified.

**Purpose**
Use this field to select the purpose of, or reason for, the contact. A worker can select more than one Purpose for a note. If the worker selects more than one, “multiple” displays in the field. See Appendix C2 for details regarding when this field is enabled or disabled.

**Progress Notes Narrative**
In this required field, the Author or Entered By person documents all of the details pertaining to the note. This field enables when the Progress Notes Detail window displays. This field includes the Text Control tool (containing Word-like functions, including Print, Print Preview, Spell Check, Copy, Cut, Paste, Text Alignment, Zoom and Bullets).

The following buttons display at the bottom of the Progress Notes Detail window:

**Copy Note**
Clicking on this button opens the Copy Note window to initiate the action of copying a saved note between stages of the same case. This button is disabled when a worker opens the Progress Notes Detail window in modify mode and has made modifications. The button enables when:
- a note is selected on the Progress Notes window or displayed on the Progress Notes Detail window; and
- the open “copied to” Investigation stage has the same Case ID as the “copied from” FSS/CWS stage.

For more information, see “Copying Progress Notes” on page 7-28.

**New Note**
Clicking on this button clears the existing fields to allow a worker to create a new note without needing to close the Progress Notes Detail window. This button is disabled on the Progress Notes Detail window, except when viewing an existing note.
**View Existing Notes**
This button enables when a worker opens the Progress Notes Detail window and no changes are made to the note. Once changes are made, this button disables. Clicking on this button displays the Progress Notes window.

**Save as Draft**
This button enables when a worker creates a new note and records all required fields, or when modifying data within an existing note in “Draft” status (in which all of the required fields are populated). Clicking on this button saves the note in “Draft” status. Notes can remain in “Draft” status for a maximum of 15 calendar days from the date of the first save. (See “Saving Progress Notes” on page 7-19.) This button enables even if the Date has not been recorded (but all other required fields have been recorded); however, if a worker clicks on the Save as Draft button under these circumstances, the following message displays:

“Date is required prior to save.”

**Save as Final**
This button enables when a worker creates a new note and records all of the required fields; when a worker modifies data within an existing note in “Draft” status and all of the required fields are populated; or when a worker is recording an Addendum to a note in “Final” status. Clicking on this button saves the note as “Final,” which “freezes” the note. None of the entries can be modified; however, addenda can be added. (See “Adding an Addendum to a Frozen Note” on page 7-25.)

**Cancel**
Clicking on this button cancels the creation of the note. Unsaved information is discarded and the Progress Notes Detail window closes. This button enables only if unsaved changes exist.

**Show Instructions**
This button enables workers to view district-specific Progress Note Instructions. When creating a new progress note, the Show Instructions button disables until the Type, Purpose and Method of Contact fields are completed.

*Note: Progress Notes Instructions are only available for districts that have opted to include these instructions.*

**Hide Instructions**
This button enables workers to hide district-specific Progress Note Instructions. When creating a new progress note, the Hide Instructions button only displays and enables when the Type, Purpose and Method of Contact fields are complete and the Show Instructions button has been selected.
Creating a New Progress Note

Progress notes may be created throughout the course of the services case and after a case is closed (see Adding an Addendum to a Frozen Note on page 26) by the Case Manager, Case Planner, Caseworker(s) and/or CPS Worker/Monitor(s). New notes are created from the Progress Notes Detail window and are used to record all casework activities and data specific to a note or casework contact, such as who was contacted, when and where the contact was made and what occurred during the contact.

Workers cannot record progress notes for a stage when an approval for a stage closure is pending. Workers may only enter progress notes if they first invalidate the pending approval.

<table>
<thead>
<tr>
<th>Upon entering the Progress Notes Detail window, the following data fields are…</th>
</tr>
</thead>
<tbody>
<tr>
<td>…system populated and cannot be modified:</td>
</tr>
<tr>
<td>Name(s) in Family Participant/Focus</td>
</tr>
<tr>
<td>Entered By</td>
</tr>
<tr>
<td>Dist./Agy.</td>
</tr>
<tr>
<td>Entry Date</td>
</tr>
<tr>
<td>…enabled and can be recorded in any order:</td>
</tr>
<tr>
<td>Event Date</td>
</tr>
<tr>
<td>Type of Contact</td>
</tr>
<tr>
<td>Progress Note narrative</td>
</tr>
<tr>
<td>Author</td>
</tr>
</tbody>
</table>

The **Type**, **Method of Contact**, **Author** and **Narrative** fields are required for any note. Depending on the criteria selected for **Type** and **Method of Contact**, other fields may also be required. (See Appendix C2 for details about which fields are required and when.)

The type of contact, such as “Attempted Casework Contact,” is recorded in the **Type** field. Clicking on the ellipsis (...) button to the right of the **Type** field opens the **Type** window, which contains a list of all possible types of contact. There are two buttons at the bottom of the **Type** window: **OK** and **Cancel**. When the worker opens the window, the **OK** button is disabled and the **Cancel** button is enabled. The worker can select one or more valid types by clicking on the corresponding checkbox(es). Once a **Type** is selected, the **OK** button enables. Clicking on the **OK** button closes the **Type** window; the **Method of Contact** field enables on the Progress Notes Detail window.

The **Method of Contact** field contains a drop-down list in which the options available are dependent on what was recorded in the **Type** field. Once these two components are recorded, additional fields are required, conditionally required, enabled or disabled. (See Appendix C2 regarding required fields.)

The person recording the new note must identify the Author of the note by selecting from the drop-down list in the **Author** field. The options in this list are: assigned worker(s) in the district/agency; anyone assigned in or out of the **Author**’s unit; and “**Other**.” When the **Entered By** person is an assigned worker, the **Author** field defaults to the name of that worker; this value is modifiable.
The **Narrative** field, with a limit of 100 pages per note, is blank and can be recorded at any time. The narrative contains a Text Control toolbar with Microsoft Word-like functions:

- Print Preview
- Print
- Spell Check
- Cut
- Paste
- Bold
- Italics
- Copy
- Align Left
- Align Right
- Center
- Underline
- Numbering
- Bulleting
- Zoom
- Justify

When creating a new note, the **Copy Note**, **New Note** and **View Existing Note** buttons are disabled. Once all required fields and the narrative are recorded, the **Save as Draft** and **Save as Final** buttons enable on the Progress Notes Detail window.

If the **Date** is not recorded, the **Save as Draft** and **Save as Final** buttons enable (provided all other required fields and the narrative have been completed), but clicking on either of these buttons displays the following message:

> “Date is required prior to save.”

While creating a note, if the existing **Method of Contact** is modified, the following message displays:

> “Changing the METHOD may clear the user entered data fields that are inconsistent with the new METHOD selection. Continue making changes?”

- Clicking on the **Yes** button clears all recorded data fields (except for the **Type** field, the **Method** field and the narrative) on the Progress Notes Detail window.
- Clicking on the **No** button cancels the action without clearing any of the data fields.

In both situations, the Progress Notes Detail window displays. If the **Method of Contact** has changed, information in the fields that were cleared by CONNECTIONS need to be re-recorded.

Appendix C2 provides an in-depth look at the fields that are enabled, disabled or required, depending on the selection of other fields. The columns indicate the fields on the Progress Notes Detail window; the rows indicate the possible responses to **Type** and **Method** that affect whether the field is enabled, disabled or required.
Step-by-Step: Creating a Progress Note

1. Open a blank Progress Notes Detail window. (For methods of accessing the Progress Notes Detail window, see page 7-4.)
   The Author field pre-populates with the name of the worker who is logged on to CONNECTIONS; to change this information, click on the drop-down arrow for the Author field and select from the resulting list.

2. In the Event Date field, click on the checkbox for the current date to accept that date. To select a different date, click on the drop-down arrow and select from the resulting calendar.

3. In the Type field, click on the ellipsis (...) button to the right of the field. The Type window displays.

4. Select one or more types by clicking on the corresponding checkbox(es).

5. Click on the OK button. The Progress Notes Detail window displays.

6. Click on the drop-down arrow for the Method of Contact field and select from the resulting list.

7. In the Time field, record the time of the contact.

8. Click on the drop-down arrow for the Location of Contact field and select from the resulting list.

9. In the Family Participant/Focus field, select the appropriate individual(s) as the Family Participant(s) and/or Focus(es) of the contact by clicking on their respective checkboxes. (See page 7-12 for more information about Family Participants/Focuses.)

10. In the Purpose field, click on the ellipsis (...) button. The Purpose window displays.

11. Select one or more purposes by clicking on the corresponding checkbox(es).

12. Click on the OK button. The Progress Notes Detail window displays.

13. Record the narrative of the progress note in the Narrative field.

14. Click on the Save as Draft or Save as Final button. (See the tip box at right.)
   The following message displays: “Changes have been saved.”

15. Click on the OK button. The Progress Notes window displays.

If the information recorded in the Type field is changed, the following message displays:

“Changing the TYPE of contact will clear all user entered data fields except the narrative. Continue making changes?”

- Click on the Yes button to discard the data.
- Click on the No button to cancel the action without clearing the data fields.

In both cases, the Progress Notes Detail window remains open. If the Type is modified, fields that were cleared by CONNECTIONS need to be re-recorded.

To allow for modifications to a note during the Draft period, save the note as “Draft.” If no modifications are necessary, save the note as “Final.” Remember that once a note is saved as “Final,” no modifications can be made; only addenda can be appended to the note.
Saving Progress Notes

There are two ways to save a progress note: as “Draft” and as “Final.”

**Save as Draft**
Notes can be saved in “Draft” status for up to 15 calendar days from the date of the first save. Modifications can be made only during the Draft period. If the note has not been saved as “Final” by the end of the 15-calendar-day Draft period, the note automatically saves as “Final.” When the note is saved in “Draft” status, the newly saved note displays in the grid on the **Progress Notes** window. The **Note Status** column populates with “Draft.” When a stage is closed, CONNECTIONS converts any notes in “Draft” status to “Final” status.

**Save as Final**
Progress notes should be saved as “Final” as soon as possible. To save a note as “Final,” click on the **Save as Final** button. The note can be saved as “Final” at any time during the 15-calendar-day “Draft” period. Notes in “Draft” status are automatically saved as “Final” at the end of the 15-calendar-day period. Once a note is in “Final” status, it displays in the grid on the **Progress Notes** window. The **Note Status** column populates with “Final.” A note saved as “Final” freezes; modifications can no longer be made to the note. Only an addendum can be appended to the end of the frozen note.

As part of the nightly batch update, CONNECTIONS identifies any notes that have been in “Draft” status for 15 calendar days and changes the status to “Final.” Each time a note is saved, CONNECTIONS keeps an historical record of when notes are saved and by whom.

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All progress notes must be saved as “Final” prior to providing them to any entity that is legally authorized to receive the record (e.g., family court, district attorney).

When saving a progress note in a stage containing more than 400 entries, workers must perform a search to display the new note in the grid.
Searching for Progress Notes

Workers and supervisors may find it useful to search for notes (e.g., a worker may need to view notes that have been recorded in CONNECTIONS to review what has occurred throughout the course of a case; a supervisor may want to view previously recorded notes when reviewing work). A Progress Notes search can be conducted on the Progress Notes window.

By default, the Progress Notes window displays up to 400 progress notes for the stage.

To view notes that contain certain criteria, use a Progress Notes search to display only those notes that meet the selected criteria (for example, only the notes in which a particular family member is the Focus). Searching retrieves a list of existing progress notes for a stage, based on the selected criteria. When the number of existing notes exceeds search limits (400) the following message displays:

“The number of progress notes found is greater than can be displayed in the grid. Please refine search criteria.”

- Clicking on the OK button allows the worker to search for new notes and/or refine the search criteria to retrieve additional notes beyond the 400 in the initial display.

Once the note is selected, the View Note, Copy Note and Print Note(s) buttons enable. If the note selected is in “Draft” status (and you are the progress note’s Author or Entered By person), the Edit Note button also enables. The Search button enables once search criteria are selected.

Step-by-Step: Searching for Progress Notes

1. On the Progress Notes window, enter search criteria in the data fields in the upper half of the window.
   Multiple fields can be used to search for notes; however, keep in mind that the more search criteria you enter, the more limited your search will be.

2. Click on the Search button.
   The search results display with all notes that match the search criteria.
**Sorting Progress Notes**

By default, progress notes are sorted in descending order by Event Date and Time (i.e., notes with most recent Event Dates and/or Times are listed above notes with older Event Dates and/or Times). However, notes with no Event Date (“Summary” Type are the only progress notes that do not require an Event Date) display above all other notes in the list, sorted based on Entry Date/Time. Along with the default sort, there are two methods available for sorting the notes:

- In the search results list, click on the desired column heading by which you want to sort the notes. The list displays in ascending order.
- Click on the **Sort** button to open the **Sort Notes** window. Select up to three sort fields and ascending or descending order for each sort on the **Sort Notes** window.

Progress notes can be sorted by any column heading on the grid. Sorting also provides the ability to select the **Note Status**, **Addendum** and **Copied From** fields, which are included in the grid but not on the **Progress Notes Detail** window.

---

**Step-by-Step: Sorting Progress Notes**

1. To sort the existing columns in descending order, from the **Progress Notes** window, click on the column heading by which you want to sort. *The column sorts in descending order.*
   —OR—
   To sort notes in ascending order and/or by multiple criteria, click on the **Sort** button. *The Sort Notes window displays.*

2. Select up to three sort criteria in the sort fields by clicking on the corresponding drop-down arrows and selecting from each resulting list.

3. To specify **Ascending** or **Descending** order, click on the corresponding radio button.

4. Click on the **OK** button to complete the sort. *The Progress Notes window displays.*

Within the list of notes, a worker can select one, several or all of the notes. To select one note at a time, simply click on each note to highlight it. To select all of the notes, click on the **Select All** button. Once a note is selected, it can be copied, printed, viewed, modified, saved and/or deleted (depending on the note’s status, i.e., “Draft” or “Final,” and whether or not the worker who created the note is the Author or Entered By person). Copying, viewing, modifying and deleting notes can be performed only when one note is selected. When selecting progress notes for printing, they print as one document, listed from oldest to newest; however, if you sorted the progress notes before printing, they will print in the order listed on the **Progress Notes** window.
**Viewing Existing Notes**

View existing progress notes by clicking on the **View Existing Notes** button on the Progress Notes Detail window. Clicking on this button displays the Progress Notes window.

Once a search of progress notes has been conducted, a note can be viewed by selecting it from the grid and clicking on the **View Note** button on the Progress Notes window. The Progress Notes Detail window displays the note in view-only mode.

While viewing the note, the **Save as Draft**, **Save as Final** and **Cancel** buttons are disabled. Depending on how the worker accessed the note (modify mode or view-only mode) and that worker’s security rights, the **Copy Note** and **New Note** buttons may or may not enable.

---

**Step-by-Step:**
**Viewing an Existing Progress Note**

1. On the Progress Notes window, click on the note to be viewed.
2. Click on the **View Note** button.

   *The Progress Notes Detail window displays with the contents of the selected note.*
Modifying Progress Notes

Progress notes can only be modified while in “Draft” status. Once a note has been saved as “Final,” it can no longer be modified; only an addendum may be made. If the Type of contact is changed, CONNECTIONS clears all of the worker-recorded data, with the exception of the narrative. If the Method of Contact is modified, the system clears all data fields that are inconsistent with the newly selected method.

Step-by-Step: Modifying a Progress Note

1. On the Progress Notes window, click on the note in “Draft” status to be modified.
2. Click on the Edit Note button. The Progress Notes Detail window displays for the selected progress note.
3. Make the necessary modifications. Once all of the required fields are recorded, click on the Save as Draft button. —OR— Click on the Save as Final button. The following message displays: “Changes have been saved.”
4. Click on the OK button. The Progress Notes window displays.
Creating a Progress Notes Task To-Do

Workers can create Progress Notes Task To-Dos for other workers or as reminders for themselves. For example, an experienced worker may create a Progress Notes Task To-Do for a new worker to record a progress note for a home visit they conducted together. Also, a worker whose day is consumed by out-of-office appointments and field work may create Progress Notes Task To-Dos for him/herself to record progress notes for the day’s activities.

Step-by-Step: Creating a Progress Notes Task To-Do

1. On the Progress Notes window, click on the Options menu and select the To Do command.
   The following message displays: “This action will close the window. Do you want to continue?”

2. Click on the Yes button to continue with the Task To-Do.
   The To-Do Detail window displays with your name in the Assigned To field and “Progress Note” in the Short Desc field.
   —OR—
   Click on the No button to keep the Progress Notes window open and cancel the creation of the Task To-Do.
   The Progress Notes window displays.

3. Click on the Staff button to search for the staff person you want to assign the To-Do to.
   The Staff Search Criteria window displays. Proceed to Step 4.
   —OR—
   Click on the Save button to assign the To-Do to yourself.
   The To-Do Detail window closes and the Assigned Workload displays.

4. Enter the name of the desired staff person in the appropriate fields and click on the Search button.
   The Staff List displays.

5. Select the desired staff person and click on the OK button.
   The To-Do Detail window displays with the staff person’s name in the Assigned To field.

6. Click on the Save button.
   The Assigned Workload displays.
Adding an Addendum to a Frozen Note

To modify notes that are in “Final” status, addenda are necessary. Addenda can be added to notes in open stages. In addition, the Closed Stage Addendum function can be used to create a new note in a closed stage. (When recording a Closed Stage Addendum, the note must be saved as “Final.”)

Addenda can be added by the progress note’s Author, by anyone in the Author’s unit hierarchy and by the progress note’s Entered By person. When the Author of a progress note is identified as “Other,” a new addendum may be added by the progress note’s Entered By person, the assigned worker and anyone in the Entered By person’s hierarchy. A person outside of the unit hierarchy cannot amend a progress note when the author is identified as “Other”; a new note must be created.

Addenda are added to the bottom of the narrative of the original note. A progress note can have multiple addenda as long as the stage remains open. The new text is time-stamped with the name and ID of the logged-on worker. All previously recorded text in notes and addenda are locked for edit while a new addendum is being created. Once the narrative recording has been started, the View Existing Notes, Copy Note and New Note buttons disable, while the Save as Final and Cancel buttons enable. Addenda may only be saved as “Final.”

Step-by-Step: Recording an Addendum to a Progress Note

1. On the Progress Notes window, click on a note in “Final” status.
2. Click on the Options menu and select Add Addendum.
   The Progress Notes Detail window displays for the selected progress note. All existing fields and the narrative are locked for edit.
3. Record text at the bottom of the existing narrative.
4. Click on the Save as Final button to save the addendum.
   The following message displays: “Changes have been saved.”
5. Click on the OK button.
   The Progress Notes window displays. Once an addendum has been added to a progress note, the Addendum column of the search grid is flagged with a “Y,” indicating an addendum exists for the note. For notes that do not have addenda, the column is flagged with an “N.”

Since supervisors cannot modify their workers’ notes, they use addenda to add information to or clarify a note completed by one of their workers.

If you click on the Cancel button, the addendum is not added, and the time/date and name are not stamped on the existing progress note.
**Printing Progress Notes**

The *Progress Notes* window provides the availability to view and print one, several or all progress notes in the stage. Notes print as one document, listed from oldest to newest; however, if you sorted the progress notes before printing, they will print in the order listed on the *Progress Notes* window.

The Progress Notes Report displays only the fields for which information was recorded. For example, if information was recorded in the Time field but not in the Other Participant field, the Time field (and its corresponding entry) will display on the report, but the Other Participant field will not.

---

### Step-by-Step: Printing Progress Notes from the *Progress Notes* Window

1. From the *Progress Notes* window, click on each note to be printed.  
   *To select multiple notes, hold down the Ctrl key as you select each note.*  
   —OR—  
   Click on the Select All button to select all notes.

2. Click on the Print Note(s) button.  
   —OR—  
   Click on the File menu and select the Print command.  
   *The Print Notes window displays.*

3. Click on the corresponding radio button to print Data Fields and Narrative or Data Fields Only.  
   *Printing only the data fields generates the Progress Notes Data Report.*

4. Click on the OK button.  
   *The selected note displays in a separate window.*

5. Click on the Print button in the lower left corner of the window.

---

### Step-by-Step: Printing Progress Notes from the *Progress Notes Detail* Window

1. From the *Progress Notes Detail* window, click on the Options menu and select the Print Note command.  
   *The Print Notes window displays.*

2. Click on the corresponding radio button to print Data Fields and Narrative or Data Fields Only.

3. Click on the OK button.  
   *The selected note displays in a separate window.*

4. Click on the Print button in the lower left corner of the window.
**Copying Progress Notes**

Progress notes (in an FSS/CWS stage) in either “Draft” or “Final” status can be duplicated to one or more open stages within the same case. The ability to copy notes improves efficiency by eliminating the need to record the same information more than once for the same case. A note can be copied simultaneously to more than one stage; however, only one note can be copied at a time. Copying a note duplicates all of the data fields, including the narrative.

For FSS/CCR stages, the Copy Note Functionality enables workers to:

- duplicate a progress note in “Draft” or “Final” status when copying from an FSS/CCR to other CCR stages that were created from the same FSS/CWS; and
- copy from a closed stage into open stages within the same case, if all other rules are met.

In order to copy a note, all of the following conditions must apply:

- The worker must have saved the progress note.
- The progress note’s Event Date must be on or after the Intake (INT) Start Date of the Investigation (INV) stage to which the note is being copied.
- The original stage’s District/Agency must be the same as the “copied to” stage’s District/Agency.
- The original note’s Participant(s), including PID, or Focus must be part of the “copied to” Investigation stage.
- The Entered By worker or the Author of the original note must be assigned as the Primary or Secondary worker of the “copied to” Investigation stage, or be part of the unit hierarchy of the worker(s) assigned to the Investigation stage.

System edits prevent copying another worker’s note to a different stage. If you attempt to do so, the following error message displays:

“No open stages meet the criteria to add a copy of the selected note.

Cannot copy Progress Note.”
Step-by-Step:
Copying a Progress Note

1. From the Progress Notes Detail window, click on the Copy Note button.
   —OR—
   From the Progress Notes window, select the note to be copied and click on the Copy Note button. The Copy Note window displays with a list of possible open stages within the case to which you have modify rights.

2. Select the stage(s) to which you want to copy the note by clicking on the corresponding checkbox(es). The Save button enables.

3. Click on the Save button. The note is copied to the selected stage(s) and displays in “Draft” status. The Entry Date field fills with today’s date (the date the note was copied). This is also the first day of the 15-calendar-day draft period. The following message displays: “Progress Note has been copied.”

4. Click on the OK button.

Progress notes that are copied do not retain any system relationship between the original version and the copy. In other words, modifying one note has no effect on the other note.
Deleting Draft Progress Notes

The situation may arise when you determine that it would be more efficient to delete an erroneous note, rather than modify it. Provided the note is in “Draft” status, it can be deleted. Only the note’s Author or Entered By person can delete that note. Only one note may be deleted at a time. Notes can only be deleted from the Progress Notes Detail window.

Step-by-Step: Deleting a Progress Note

1. On the Progress Notes window, click on a note in “Draft” status to select it.
2. Click on the Edit Note button. The Progress Notes Detail window displays for the selected note.
3. Click on the Options menu and select Delete Draft Note. The following message displays: “Are you sure you wish to delete this Progress Note?”
4. Click on the Yes button to delete the note. The following message displays: “Progress Note has been deleted.”
5. Click on the OK button. The Progress Notes window displays; the deleted note is no longer included on the list.

Deleted notes are completely removed from CONNECTIONS and cannot be recovered. There is no historical record of deleted notes.
Copying and Pasting

In CONNECTIONS, as in other Windows-based applications, the Copy and Paste functions are used to duplicate information without retyping it. This is handy for transferring notes from a Microsoft Word document into a Word document within CONNECTIONS, or copying information from one location to another within CONNECTIONS. It is only possible to copy and paste in those windows where specific Business Functions allow information to be maintained. Be careful when using the copy and paste functions so that information is not inadvertently lost or misplaced.

Within the FSS, the Copy and Paste functions can be used to copy information in narrative fields. To copy and paste information in these fields, click and drag the mouse to highlight the narrative text to be copied, then use the hot-key combination (Ctrl-C) to copy the selected text. Once the text has been copied to the electronic clipboard, click on the narrative field into which the information needs to be pasted and use the hot-key combination (Ctrl-V) to paste. (See “The Hot-Key Method for Copying and Pasting” on page 7-25.)

In addition, the Progress Notes window contains the Copy Note functionality, which is described in detail on page 7-28.

Step-by-Step: Copying and Pasting Text

1. Click and hold the mouse button while dragging the mouse over the text you want to copy.
   The text highlights as you drag the mouse.

2. Click on the Edit menu and select Copy.
   The system copies the highlighted text onto a temporary Windows electronic clipboard. It will remain on this clipboard until another selection of text is copied or the application is closed. (If an Edit menu is unavailable on a particular CONNECTIONS window—such as the Progress Notes Detail window for a “Final” note—use the “Hot-Key Method for Copying and Pasting” described at the end of this section.)

3. Click on the location where you want to paste the text.
   If you are copying/pasting from a stand-alone Word document to an open Word document in CONNECTIONS, use Alt+Tab to move from one document to the other, or minimize the first document by clicking on the Minimize button (🗯) in the upper right corner of the window.

4. Click on the Edit menu and select Paste.
   The copied text is pasted next to the cursor.

Save the document from which text is being copied before minimizing and/or switching to another document to paste.

Be careful when using Select All, a command in some Edit menus. It selects everything on the page for copying (including headers, footers and template formatting) and may delete the template style of the document into which text is being pasted.

Make sure the paste location is large enough for the copied text. If it is too small, CONNECTIONS pastes only what fits. The length of CONNECTIONS comments boxes vary, so do not assume what was copied will fit.
The Hot-Key Method for Copying and Pasting

If an **Edit** menu is unavailable on a window where you want to copy and/or paste, use the following “hot key” method to copy and paste.

<table>
<thead>
<tr>
<th>Step-by-Step: Copying and Pasting Text via the “Hot Key” Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Highlight the text you want to copy.</td>
</tr>
</tbody>
</table>
| 2. Press the **Ctrl** and **C** keys on the keyboard at the same time.  
The highlighted text is copied onto the Windows electronic clipboard. |
| 3. Click on the location where the text will be pasted. |
| 4. Press the **Ctrl** and **V** keys on the keyboard at the same time.  
The copied text is pasted next to the cursor. |
Module 8: The Family Assessment and Service Plan

The Family Assessment and Service Plan (FASP) provides a uniform and effective method for you to document your assessment of family and child functioning, strengths and needs. Ongoing assessment of family and child functioning, needs and strengths is important in achieving the goals of safety, permanency and well-being for children. These assessments form the basis for determining what aspects of family functioning need to change in order to support the desired outcomes. These assessments also establish a foundation for the service plan.

Therefore, the FASP serves three distinct roles:

- As a record of past and current family functioning, including the identification of individual and family strengths, behaviors or conditions that indicate the risk of future abuse or maltreatment and an overall assessment of the family’s service needs
- As a record of plans to assist the family in meeting the needs and goals of safety, permanency and well-being
- As a guide and tool for casework practice and assessment, including calculation of risk ratings

The FASP is part of the Family Services Stage (FSS) and is accessed via the Family Assessment and Service Plan (FASP) tab on the Family Services Stage window. This tab is enabled for FSS/CWS and FSS/CCR stages. As an assigned worker on an FSS, you need to contribute to FASPs on a periodic basis. The specific requirements for any one FASP are dependent upon multiple factors, including the type of FASP (i.e., Initial, Comprehensive, Reassessment or Plan Amendment), as well as the Permanency Planning Goals (PPG), Program Choices and age(s) of the child(ren) in the service case. Each FASP is customized with respect to these factors. The FASP is dynamic; the “look” of the FASP changes as these factors are updated, utilizing information recorded in different areas of CONNECTIONS. Examples include the following:

- The FASP displays the individuals for whom you need to complete scales.
- The FASP displays the protective version of the Safety and Risk Assessments for cases that have a Program Choice of “Protective.”
- If the PPG is “Adoption,” the FASP presents questions that are compatible with that PPG.

The information pre-filled in the FASP comes forward from:

- the Stage Composition tab (names and dates of birth of family members in the Person Grid);
- the Tracked Children Detail window (Program Choice and PPG); and
- previous FASPs that have been completed.

It is important that the information recorded in these areas is complete and accurate, since CONNECTIONS brings that information forward into the FASP. Workers assigned to the stage should also communicate with each other prior to “launching” (beginning work on) a FASP. The electronic case record in CONNECTIONS emphasizes the need for communication and coordination among all of the workers assigned to the case, since these workers need to view and record case information. This has long been standard casework practice; CONNECTIONS
simply brings this practice need into the electronic case record. Documenting casework activities in CONNECTIONS does not replace the need for the workers assigned to a case to communicate with each other on a regular and ongoing basis. The system flexibility provided by CONNECTIONS was designed to support the corresponding responsibilities for coordinating the Family Assessment and Service Plan.

From the FASP tab you can “launch” (begin work on) a FASP, as well as modify and print it (and, if you are the Case Planner, submit it for approval). You can also navigate to the Tracked Children Detail window to review, record and/or update Permanency Planning Goal (PPG) and Program Choice information in order to track children in the FSS. Tracking children indicates that a child is receiving child welfare services. The Tracked Children Detail window provides for the recording of critical information about the child, the goal and what programs (e.g., placement or protective) the child is receiving. PPG and Program Choice must be recorded for each child who is receiving child welfare services.

Several workers can be assigned a role in the FASP. Each worker is assigned one of the following roles:

- **Case Manager**: The Case Manager has the ultimate authority on all key decisions for the services case. There can only be one Case Manager, who must be Local District staff. The Case Manager approves FASPs submitted by the Case Planner. If the FASP is incomplete, the Case Manager can reject any work submitted, add comments and send it back to the Case Planner. If the Case Manager is also acting as the Case Planner, the Case Manager’s supervisor must approve the FASP.

- **Case Planner**: The Local District or Voluntary Agency staff member assigned as the Case Planner coordinates all service delivery and documentation of all work in the FASP. Only the Case Planner can submit a FASP for approval, and therefore is responsible for coordinating and recording all of the material in the FASP. As the author of the FASP, the Case Planner has full access to all FASP components and is responsible for reviewing work contributed by other workers. Although the Case Planner cannot modify draft entries made by other workers, s/he selects which entries will be included in the FASP that is submitted to the Case Manager for approval. There can be only one Case Planner in the FSS, but this role is not required; if no Case Planner is assigned, the Case Manager also acts as the Case Planner.

- **Caseworker**: One or more Caseworkers (who can be either Local District or Voluntary Agency workers) may be assigned to an FSS. Caseworkers who are assigned to an FSS complete work within the FASP, such as the Family Scales. A Caseworker may also be responsible for a specific child, multiple children or no children in the FSS. In addition to being assigned a role in the case, a Caseworker can also be Associated to a specific child or children. A Caseworker who has been Associated to a specific child can complete the Child Scales and Foster Care Scales for that child. Associating a Caseworker to a specific child does not prevent other workers from working with that child or completing other parts of the FASP that may relate to that child in the overall Service Plan.
CPS Worker/Monitor

The CPS Worker/Monitor is responsible for overseeing case activities when:

- the case was opened from an Indicated CPS Investigation;
  —AND—
- the CPS worker is not the primary service provider for the case;
  —AND—
- ongoing safety and/or risk concerns have been identified.

These activities include reviewing safety-related and risk-reduction activities, determining that appropriate services are being provided, and modifying the service plan when the child’s or family’s progress is not sufficient to meet the desired outcomes identified in the plan.

A person with the role of CPS Worker/Monitor must be Local District staff. The CPS Worker/Monitor may complete specific work within the FASP, such as the Safety Assessment or the RAP. The Case Planner notifies a CPS Worker/Monitor regarding circumstances that require work in the FASP to be completed.

All workers with these assigned roles—Case Manager, Case Planner, Caseworker(s) and CPS Worker/Monitor(s)—can see the FASP and, depending on their respective roles, may be responsible for viewing and/or completing different parts of it. For this reason, it is imperative that regular, ongoing communication and coordination of casework efforts occur.

Accessing the FASP

The FASP tab on the Family Services Stage window is accessed from two paths: the Assigned Workload and the Event List. Navigating to the FASP via the Assigned Workload in modify mode allows you to navigate to the specific component windows (e.g., Foster Care Issues; Strengths, Needs and Risks; and Family Assessment) for an in-process or pending FASP. If you access the FASP via the Event List, the information is always view-only; the manner in which the information displays is dependent on whether the FASP is in-process or pending, or is approved.

- When you navigate to an in-process or pending FASP via the Event List, the FASP displays in view-only mode; you can navigate to the specific FASP component windows, but you cannot maintain any information on those windows.

- When you navigate to an approved FASP via the Event List, the FASP displays in view-only, print preview mode; you cannot navigate to the specific FASP component windows. In print preview mode, the FASP information is the same as what is recorded on the individual windows, but it is arranged in a different format.
Step-by-Step: Accessing the FASP from the Assigned Workload

1. On the Assigned Workload, click on the FSS stage that contains the FASP you need to access. The Tasks... button enables.

2. Click on the Tasks... button. The Family Services Stage window displays, with the Stage Composition tab active.

3. Click on the Family Assessment and Service Plan tab. The FASP window displays in modify mode.

Step-by-Step: Accessing an Approved FASP from the Event List

1. After performing a Case Search, select a case from the Case List and click on the Summary button on the Case List. The Case Summary window displays.

2. Select the FSS stage from the list. The Events... button enables.

3. Click on the Events... button. The Event List displays.

4. Select an Approval FASP event and click on the Detail... button. The FASP displays in print preview mode.

Where am I?

For Step-by-Step instructions on performing a Case Search, see Case Search in Module 1: CONNECTIONS Basics.

You can also access the FASP from the Event List by selecting the Family Services Stage Open event, clicking on the Family Assessment and Service Plan tab and selecting an Approved FASP from the FASP tree.
### FASP Types

Four types of FASPs can be generated:

<table>
<thead>
<tr>
<th>Type of FASP</th>
<th>Launched</th>
<th>Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial</td>
<td>Immediately upon opening the stage</td>
<td>For an Indicated CPS case, the Initial FASP is due 7 days from the date of the approval of the Investigation Conclusion, if the CID is the Date of Indication; for all others, the Initial FASP is due 30 days from the Case Initiation Date (CID)</td>
</tr>
<tr>
<td>Comprehensive</td>
<td>Within 30 days prior to its due date</td>
<td>90 days from the CID</td>
</tr>
<tr>
<td>Reassessment</td>
<td>Within 60 days prior to its due date</td>
<td>210 days from the CID and every 6 months thereafter</td>
</tr>
<tr>
<td>Plan Amendment</td>
<td>Plan Amendments are completed throughout the life of an FSS when significant changes occur between FASP cycles. A Plan Amendment can only be launched for an approved FASP, but if the next coming due FASP can be launched, the status change information should be recorded within that FASP, rather than creating a Plan Amendment. A Plan Amendment may be launched in an FSS/CCR, even if there is no approved FASP.</td>
<td>N/A</td>
</tr>
</tbody>
</table>

The graphic on the next page illustrates the timeframes for the various FASPs.

In addition to completing FASP’s, you may have to complete Permanency Hearing Reports for use in Family Court. Workers must use information in approved FASPs to complete Permanency Hearing Reports; however, if a worker has a FASP In-Process that is either not ready for submission or not within the submission timeframe (it is more than 30 days prior to that FASP’s due date) and a Permanency Hearing Report must be completed, the worker can use the Removal Update process. The Removal Update process extracts the necessary information from the in-process FASP to generate the Removal Update Report, which is then submitted for approval. Once it has been approved, the worker has approved content to include in the Permanency Hearing Report.
FASP Timeline
(not to scale)

Launch Initial
CID

Launch Comprehensive

Launch Reassessment

7 Days
(If the CID is the Date of Indication)

Initial (CPS)
Due

Initial (Non CPS)
Due

30 Days

90 Days

Comprehensive Due

210 Days (and every 6 months thereafter)

Reassessment Due

FASP Statuses

CONNECTIONS generates Alert To-Do’s to inform assigned workers that a FASP is Overdue or Coming Due. A FASP can be in one of six statuses:

- **Not Launched**: The FASP has yet to be launched (started).
- **In Process**: The FASP has been launched and is in the process of being completed. There can only be one In Process FASP at a time. If a FASP was submitted for approval and it was rejected, the FASP’s status will change from “Pending” to “In Process.”
- **Pending**: The FASP has been submitted for approval and is pending that approval.
- **Approved**: The submitted FASP has been approved.
- **Missed**: FASPs marked as Missed were never launched, are now significantly overdue and the currently due FASP has been launched. Once a FASP is marked as “Missed,” it can never be launched.
If a FASP is “In Process” for a very long period of time (considerably overdue) it may cross into the launch period for the next coming due FASP. Keep in mind that the length of time that must transpire in order for a particular type of FASP to be “considerably overdue” is relative to the timeframes for the respective type of FASP in question; the timeframes for an Initial FASP differ from those for a Comprehensive or Reassessment FASP. (For example, an Initial FASP that is due on January 1st becomes “considerably overdue” 60 days after its due date; i.e., March 1st.)

When this situation occurs and you launch the next coming due FASP, the overdue FASP is dropped to “Template Format.” This means it is available only as a Report Viewer/Word document; the information displays in a different context and format than on the individual FASP windows, and the windows themselves are not available. The Template Format FASP may be updated for 60 days, enabling you to document information and case activity related to that plan period. After 60 days, CONNECTIONS “freezes” it. A Template Format FASP cannot be submitted for online approval and does not carry information forward to future FASPs.

If multiple FASPs exist that have not been completed (e.g., at the time that the Reassessment is due, the Initial is in template form and the Comprehensive remains “In Process”; the Reassessment is launched, causing the Comprehensive to go to Template Format), workers should complete the Initial in Template Format prior to completing the Comprehensive in Template Format. Workers should select the oldest due FASP and complete any subsequently due FASPs in chronological order.

Since each FASP automatically populates with case-level information, you lose system efficiencies when you allow a FASP to drop to Template Format, because this type of FASP does not write information to the case level.
The Family Services OCI Report
The Family Services Open Caseload Inquiry (OCI) Report is a valuable tool that lists and identifies the status of FASPs for FSS stages on a worker’s caseload.

Step-by-Step: Generating the Family Services OCI Report

1. On the Assigned Workload, click on the Reports menu and select Family Services OCI by Worker. The following message displays: “The Report has been launched. Check Report List Window.”

2. Click on the OK button.

3. Click on the Close button to close the Assigned Workload. The CONNECTIONS Toolbar displays.

4. Click on the RPRTS button on the CONNECTIONS Toolbar. The Report List displays.

5. Select the OCI Report you just generated. Make sure the value in the Status column is “DONE.” If the status is “PEND” or “RUN,” click on the Refresh button.

6. Click on the Open button. The report opens as a Microsoft Word document.

7. To print the report, click on the Print button. —OR— Click on the File menu and select the Print command.

8. To close the window, click on the File menu and select Close. The Report List displays.

9. To close the Report List, click on the Close button.

The Open Caseload Inquiry Report in CONNECTIONS does not include coming due Plan Amendments or Removal Updates; however, it is anticipated that this will be a future enhancement of the system.
The FASP window is organized into the FASP tree, a series of fields and buttons, and the Person List grid.

**FASP Tree**

All FASPs are listed in a directory tree structure on the left side of the FASP window. These FASPs are organized into nodes and sub-nodes. Nodes are determined based on the FASP type, as well as the Program Choice(s), PPG(s) and age(s) of the tracked child(ren). A node or sub-node can be expanded to display sub-nodes if there is a ‘+’ sign next to the node title. After expanding a node, click on the ‘-’ next to the node title to compress that node.

- **Nodes** display the type, status and approval date for each FASP (e.g., Initial – Approved 1/22/2003).

- **Sub-nodes** within a specific FASP provide access to the applicable component detail windows. CONNECTIONS customizes the FASP to include specific components, depending on the Program Choice, the PPG and the age(s) of the tracked child(ren). The FASP tree displays only the components that are applicable to that particular case. In the example shown above, the **Safety (CPS)** is a sub-node of the **Family Assessment** node of the Initial – In Process FASP].

When you access the FASP window, the tree is fully compressed with no sub-nodes displaying. (See the graphics on page 8-10.) FASPs are arranged in descending chronological order, with
the oldest on top. For those FASPs that have a future due date, only the FASPs that can be launched are displayed.

Several standard nodes are included in all FASPs, such as the assessment and the service planning portion of the FASP, as well as several possible nodes and sub-nodes that display on the FASP tree depending on the type of child welfare services the child and family are receiving. For example:

- If any child is placed in foster care or an alternative placement, the **Foster Care Issues** node displays in the tree.
- If no children are in placement, the **Foster Care Issues** node is not applicable, so it does not display in the tree.
- If “Protective” is a Program Choice, the FASP presents the **Safety (CPS)** and **Risk Assessment** Profile nodes.
- If “Protective” is *not* a Program Choice, the FASP presents the **Safety (Non-CPS)** and **Risk** sub-nodes. (The **Risk** sub-node displays only for the Initial FASP.)

FASP Tree Compressed

FASP Tree Expanded

Once you have selected a node, the corresponding window displays. Sub-nodes display only for FASPs in Pending or In Process status. (See the table on the next page.)
<table>
<thead>
<tr>
<th>Node</th>
<th>Sub-Nodes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Assessment</strong> (required)</td>
<td><strong>Family Assessment: Protective Program Choice</strong></td>
</tr>
<tr>
<td></td>
<td>• Safety (CPS)</td>
</tr>
<tr>
<td></td>
<td>• Risk Assessment Profile</td>
</tr>
<tr>
<td></td>
<td>• Risk Assessment Profile (Comprehensive or Reassessment)</td>
</tr>
<tr>
<td></td>
<td><strong>Family Assessment: Non-Protective Program Choice</strong></td>
</tr>
<tr>
<td></td>
<td>• Safety</td>
</tr>
<tr>
<td></td>
<td>• Risk</td>
</tr>
<tr>
<td></td>
<td><strong>All Family Assessments (Regardless of Program Choice)</strong></td>
</tr>
<tr>
<td></td>
<td>• Family Update</td>
</tr>
<tr>
<td></td>
<td>• Strengths, Needs and Risks</td>
</tr>
<tr>
<td></td>
<td>▶ Family</td>
</tr>
<tr>
<td></td>
<td>▶ Parent/ Caretaker</td>
</tr>
<tr>
<td></td>
<td>▶ Child</td>
</tr>
<tr>
<td></td>
<td>• Analysis (required)</td>
</tr>
<tr>
<td><strong>Foster Care Issues</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Appropriateness of Placement</td>
</tr>
<tr>
<td></td>
<td>• Adjustment and Functioning</td>
</tr>
<tr>
<td></td>
<td>• Permanency Progress/Concurrent Planning</td>
</tr>
<tr>
<td></td>
<td>• Life Skills Assessment <em>(required for children in placement who are 14 years of age or older)</em></td>
</tr>
<tr>
<td></td>
<td>• Family/Child Visiting Plan</td>
</tr>
<tr>
<td></td>
<td>• Family/Child Visiting Grid</td>
</tr>
<tr>
<td></td>
<td>• Discharges</td>
</tr>
<tr>
<td><strong>Programmatic Eligibility</strong></td>
<td>(no sub-nodes)</td>
</tr>
<tr>
<td><strong>Service Plan</strong> (required)</td>
<td>(no sub-nodes)</td>
</tr>
<tr>
<td><strong>Non-LDSS Custody – Relative/Resource Placement</strong></td>
<td>• Placement and Planning Issues</td>
</tr>
<tr>
<td></td>
<td>• Life Skills Assessment</td>
</tr>
<tr>
<td></td>
<td>• Family/Child Visiting Plan</td>
</tr>
<tr>
<td><strong>Plan Amendment</strong></td>
<td><em>(The nodes that display are dependent on the type of Plan Amendment and the number of status changes selected.)</em></td>
</tr>
<tr>
<td></td>
<td>• Preventive Services Started</td>
</tr>
<tr>
<td></td>
<td>• Preventive Services Ended</td>
</tr>
<tr>
<td></td>
<td>• Child Entering/Reentering Foster Care</td>
</tr>
<tr>
<td></td>
<td>• Child Entering/Reentering Direct Placement with a Relative/Resource</td>
</tr>
<tr>
<td></td>
<td>• Child Discharged to Home, Relative or Other Caretaker</td>
</tr>
<tr>
<td></td>
<td>• Child Moved From One Foster Care Setting to Another</td>
</tr>
<tr>
<td></td>
<td><strong>Child Legally Freed</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Child Discharged to Adoption</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Child Returned Home from Non-LDSS Placement</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Visitation Plan Changed</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Case Open to CPS</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Case Closed to CPS</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Other Status Change</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Update Service Plan</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Adolescent Discharged to Independent Living</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Child Discharged to Adult Residential Care</strong></td>
</tr>
</tbody>
</table>
**CID Trigger Dates**

The Case Initiation Date (CID) for an FSS is calculated using the *earliest* of four trigger dates (listed below). The CID determines the due date for the Initial and all subsequent FASPs. Any time one of the four trigger dates changes, the CID is recalculated until the CID is frozen, which occurs once the FASP is approved. When the CID has been recalculated, the FASP due dates are also recalculated. If the CID has yet to be established, there is an interim default due date for the Initial FASP, based upon the date the FSS was opened. You may begin work on the Initial FASP with this interim date, but it cannot be submitted until one of the four CID trigger dates is filled in (either recorded by you or carried over from the FSI), establishing a genuine CID. The CID is modifiable until the Initial FASP is approved. If no CID exists, the Comprehensive and Reassessment FASPs cannot be launched. (See “Secondary Edits” on page 8-15.)

<table>
<thead>
<tr>
<th>CID Trigger Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Application: [7/1/04]</td>
</tr>
<tr>
<td>Date of Indication:</td>
</tr>
</tbody>
</table>

The following fields display in the CID Trigger Dates section:

- **Date of Application**: This is the date the application for services (signed by the parent or, if the parent refuses to sign, the Caseworker) was received by the Local District/ACS. Any worker with a role in the stage can modify this date prior to the approval of the Initial FASP, unless this date was recorded during the FSI.

- **Date of Indication**: This view-only field displays the date the Indicated CPS Investigation Conclusion was approved.

- **Date of Court Order**: This field represents the date of the court order for services. Any worker with a role in the stage can modify this date until the approval of the Initial FASP.

- **Date of Placement**: This case-specific field reflects the date the first child initially entered a foster home or facility. Any worker with a role in the stage can modify this date until the approval of the Initial FASP. This field should not be confused with the **Date of Placement for this Episode** field (which is child-specific) on the Key Dates window.

Two fields display below the CID Trigger Dates section:

- **Next FASP Due Date (based on the CID)**: This view-only field, which reflects the due date of the next FASP, is system-populated when you access the FASP.

- **Next SPR Meeting Date**: This view-only field displays the date of the next scheduled Service Plan Review. If multiple future Service Plan Reviews are scheduled, the earliest date displays. If no future SPR meeting dates are scheduled, this field is blank.
**FASP Person List Grid**
The FASP Person List grid lists all individuals currently listed on the Stage Composition tab, along with some of the demographic, assessment and service planning information available for each person. Use the horizontal scroll bar at the bottom of the grid to view columns located to the left and right. The name field is stationary and always in view (i.e., “locked”) when you scroll to the right. A vertical scroll bar may display on the side of the grid in order to view all of the people listed.

<table>
<thead>
<tr>
<th>Name</th>
<th>DOB</th>
<th>Age</th>
<th>PPG</th>
<th>Program Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hill, John</td>
<td>8/18/70</td>
<td>33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hill, William</td>
<td>3/26/95</td>
<td>3</td>
<td>Protect Child</td>
<td>Protective</td>
</tr>
</tbody>
</table>

The grid displays the persons in the same order as the Stage Composition tab. You can sort the grid by clicking on the title of any column on the grid. If you leave the FASP window and then reenter it, the Person List grid returns to its original order.

Demographic information:
- Name (Last, First)
- DOB (Date of Birth)
- Age (calculated based on the current date)

Assessment and Service Planning information:
- PPG
- Program Choice 1
- Program Choice 2
- Program Choice 3
- Caseworker

**Launch New FASP**
The Launch New FASP section contains the Launch button and a field with a drop-down list of FASP types available for launch (Initial, Comprehensive, Reassessment and Plan Amendment). See “Launching a FASP” on page 8-14 for more information.

**Buttons**
Several buttons display at the bottom of the tab:

- **Tracked Children**: Clicking on this button (which is always enabled) opens the Tracked Children Detail window.
- **Removal Update**: Clicking on this button provides access to the Removal Update process which pulls a sub-set of information from the Foster Care Issues (or Non-LDSS Custody), Visiting Plan and Service Plan components of an in-process FASP into a Removal Update Report. The button enables when a FASP is in-process and at least one child in the stage has a Program Choice of “Placement” or “Non-LDSS Custody” with a removal date within the last 90 days.

When a worker clicks on the Removal Update button and there are no children in the stage with a Program Choice of “Placement” or “Non-LDSS Custody” who have a removal date within the last 90 days, the following message displays:

“No children have been removed within the last 90 days. Removal Update cannot be generated.”

- Click on the OK button to close the message and return to the FASP window.
Check FASP

Clicking on this button displays the Check FASP Detail Component Status window and starts a process to determine if all of the required FASP components are ready to submit for approval. The process checks each required FASP component for completion to a sub-node level of detail; if information is missing from a particular sub-node, only the name of the sub-node displays, not the specific window within that sub-node in which information needs to be recorded. This button enables when the FASP window is in modify mode and an In Process FASP is in the FASP Tree.

Save

Clicking on this button saves any new or changed information on the FASP window.

Cancel

Clicking on this button displays the following message:

“Do you want to Cancel?

Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard all changes.
- Click on the No button to close the message; all changes remain pending.

Close

Clicking on this button closes the Family Assessment and Service Plan window.

Launching a FASP

A new FASP is launched via the Launch New FASP section in the lower left corner of the FASP window. Any worker with a role in the stage can launch a FASP. This system flexibility emphasizes the importance of clear communication and coordination among the Caseworker(s), Case Planner, and, as appropriate, the Case Manager. In particular, the Case Planner should be consulted before a FASP is launched. The Launch button enables once a FASP type has been selected. For all FSS/CWS stages, the Family Relationship Matrix must be completed prior to launching a FASP. Only one FASP (including a Plan Amendment FASP) can be In Process or Pending at a time. If you attempt to launch another FASP, CONNECTIONS performs three levels of launch edits that are designed to allow you to continue your current work without losing work that is in process or pending approval. Once the FASP has been launched (the edits are successfully completed), the FASP status is updated to In Process.

Every FASP must successfully proceed through each of these successive edits in order to be launched. For example, if the conditions for the FASP fail any of the Preliminary Edits, the process stops and Secondary and Final Edits are not considered. Each level of edits provides warnings or error messages, as appropriate, to guide you through the process.

- Warnings simply raise a “flag” about a particular issue; you can override the message and continue your work, but you should be mindful of the consequences of proceeding.
- Error messages, however, prevent you from proceeding until the issue that prompted the error message is resolved.

In order to launch the FASP, all three successive levels of edits must be completed:

See Appendix D1 for detailed information about each level of edits.
Preliminary Edits These first-level edits are in place to ensure that the preliminary information necessary [e.g., to populate the scales, determine the primary caretaker and tracked child(ren)] is in place.

Secondary Edits These edits are in place to ensure that a Case Initiation Date has been set, enabling CONNECTIONS to establish when to open the launch window and notify you of the next coming due activity. These Secondary Edits are performed for every FASP launched except a Plan Amendment FASP. To launch a Plan Amendment FASP, an alternative set of edits are performed.

Final Edits With this final level of edits, CONNECTIONS checks to see if any other FASP work is in process or pending approval. You are presented with choices if those conditions exist. Remember that only one FASP can be open and worked on at a time.

Step-by-Step: Launching a FASP

1. From the FASP window, click on the drop-down arrow for the Launch New FASP field and select from the resulting list.
2. Click on the Launch button. The preliminary launch edits begin.
3. Once the edits have been completed, the status of the FASP is updated to “In Process” on the FASP Tree.

Adding a FASP Component

The components that display for In Process and Pending FASPs is determined by the FASP type, Program Choice(s) and PPG(s) in effect, as well as the age of the tracked child(ren). At times, you may wish to record information on components that are not presented on the FASP Tree based on the rules in effect. For example, the Rivera family has a 13 year-old child recently placed in foster care. You want to assess his life skills to determine if he is appropriate for a certain placement. Because the child is under 14, the Life Skills Assessment sub-node will not display under the Foster Care Issues node. You will need to add the Life Skills Assessment component to the FASP. This option is available for an FSS/CWS and an FSS/CCR. It is not available for Plan Amendments. The FASP must be either an In Process FASP or a Pending FASP.
Step-by-Step:
Adding a FASP Component

1. From the FASP window, click on the desired In Process or Pending FASP from the FASP Tree.
   *The selected FASP displays several nodes and sub-nodes.*

2. Click on the Options menu and select **Add a Component**.
   *The Add a Component sub-menu displays the following selections (if they are not already part of the selected FASP):*
   - Safety (CPS)
   - Risk Assessment Profile
   - Foster Care Issues (All)
   - Foster Care Issues (Life Skills)
   - Foster Care Issues (Discharges)
   - Non-LDSS Custody – Relative/Resource Placement

3. Select the desired component to add.
   *If you are a Case Planner and the FASP you selected is “Pending,” the following message displays:*
   “Continuing will invalidate the pending approval.”

4. Click on the **Yes** button.
   *The selected component is “built” onto the FASP tree. This component is designated as “Added” in the FASP header record. If you selected the **No** button, the component would not have been added.*
Submitting a FASP for Approval

When a FASP is complete, it is the Case Planner’s responsibility to submit the FASP to her/his Unit Approver and to the Case Manager for approval. If the Case Manager is also acting as the Case Planner (i.e., when no Case Planner is assigned), s/he submits the FASP to her/his Unit Approver for approval. Only individuals with these roles can submit the FASP. There are several “behind-the-scenes” processes that take place when a FASP is submitted. Because the FASP is comprised of multiple components, these processes review each FASP component for completeness. If a required tab or field was not completed, the FASP submission process suspends. The Case Planner is presented with a list of the incomplete components; this enables the Case Planner to return to each component and complete the necessary information.

The FASP is submitted from the Family Assessment and Service Plan window (accessed via the Family Assessment and Service Plan tab on the Family Services Stage window). The Case Planner selects an In-Process FASP from the FASP Tree and clicks on the Check FASP Detail button. This initiates the process whereby CONNECTIONS reviews the FASP for completeness. Two types of submission edits take place: standard edits, which are performed regardless of FASP type or stage type (with the exception of Plan Amendments) and edits specific to each component (node or sub-node) based on FASP type, stage type and Program Choice. These processes are invisible to the worker.
The standard submission edits display below:

- All required FASP components must be complete.
- The CID must be established.
- The worker must be the Case Planner or Case Manager.
- The FASP due date must be less than 30 days from the date the FASP was submitted. (If it is 30 days or more, the Submit button disables on the Check FASP Detail window.)
- If a required tab or field was not completed, or if any of the standard submission edits failed, the FASP submission process suspends and the Submit button on the Check FASP Detail Component window will not enable.

When the FASP type is Plan Amendment, clicking on the Check FASP Detail button initiates a slightly different process. A Plan Amendment is comprised of the status change(s) selected by the worker when it was launched. Each status change selected builds a sub-node on the FASP Tree below the Plan Amendment. Only these sub-nodes are checked for completeness. The standard submission edits are not initiated for Plan Amendments. (See Appendix L7 for Plan Amendment submission edits.)

OCFS regulations require the Case Planner's Unit Approver (or the Case Manager's Unit Approver, if the Case Manager is acting as the Case Planner—i.e., no Case Planner is assigned) to review and approve the completed FASP prior to submitting it to the Case Manager (assuming the Unit Approver is not the Case Manager) for final approval. CONNECTIONS supports this requirement within the approval process.

CONNECTIONS reviews the entire FASP for completeness. When this process is complete, the Case Planner is presented with a list of all incomplete areas. The following window displays the incomplete FASP Components as they are identified:

In Initial FASPs, if no CID is established, CONNECTIONS looks in the database for an associated Indicated Investigation stage that is in Pending status. If one exists, the submission process continues. However, if the Case Manager attempts to approve the FASP before the pending INV stage is approved, the following error message displays:

“Approval of the Investigation stage must precede the approval of the Initial FASP.”

In order to proceed, either the INV approval must be completed, or the Case Manager must add another type of CID.

All workers with assigned roles can see the FASP and may be responsible for viewing and/or completing different parts of it. Some districts/agencies may require workers to retain copies of draft entries; therefore, regular ongoing communication and coordination of casework efforts should occur.
Below the list of incomplete FASP Components, the window displays the following buttons:

**Close**  
This button is always enabled. Clicking on it closes the window. You can then navigate to the desired FASP component to record missing information.

**Submit**  
This button enables only when all FASP components are complete and the FASP is ready for submission.

Once all of the FASP components are reviewed and found to be complete, an Approval To-Do is created. The Case Planner saves this To-Do and the FASP is submitted to the Unit Approver and Case Manager for approval. They are notified of the submission by a Task To-Do on the **Staff To-Do List**.

The following Alert To-Do is also created and sent to the Case Planner and Case Manager at this time:

“Update CCRS for FS stage ID XXXXXXXX.”

A view-only event with a status of “PEND” is created on the **Event List** upon the successful submission of the FASP. This event is not navigable from the **Event List** while it is pending; it can only be accessed via the **To-Do Detail** window for the Approval To-Do. Once it is approved, it is navigable via the **Event List**.
If the worker accesses the FASP in modify mode after it has been saved and submitted for supervisory approval (PEND status), the following message displays:

“Saving will invalidate the pending approval. Continue in modify mode?”

- Clicking on the Yes button opens the FASP in modify mode; any changes the worker saves to the FASP invalidates the pending approval.
- Clicking on the No button opens the FASP in view-only mode.

The Case Planner must resubmit the FASP if a pending approval is invalidated.

---

### Step-by-Step: Submitting a FASP for Approval

1. On the Family Assessment and Service Plan window, select the appropriate In-Process FASP from the FASP Tree. The selected FASP displays several nodes and sub-nodes.

2. Click on the Check FASP Detail button. *The Check FASP Detail Component Status window displays. If there are any incomplete FASP components, they display on the window. If all FASP components are complete, the window is clear.*

3. If there are incomplete FASP components, click on the Close button and navigate to the component(s) to complete the required information. *Once you complete the information, return to Step 2.* —OR—
   - If all FASP components are complete, click on the Submit button. *The following message displays: “This action will close this window. Do you want to continue?”*

4. Click on the Yes button. *The To-Do Detail window displays with the approver’s name in the Assigned To field; this field cannot be modified.*

5. Click on the Save button. *The following message displays: “Approval To-Do created for Case Manager and Case Planner’s Unit Approver. Do you wish to add another approver?”*
   - Click on the No button to submit the FASP without adding another approver. *Skip the remaining instructions in this step-by-step section.* —OR—
   - Click on the Yes button to add another approver. *The Staff Search Criteria window displays.*

6. On the Staff Search Criteria window, enter the approver’s name in the First and Last Name fields.

7. Click on the Search button. *The Staff List displays with the results of your search.*
8 Select the approver and click on the **OK** button.

The following message displays:

"Approval To-Do created for <Name>. Do you wish to add another Approver?"

- Click on the **No** button to submit the FASP without adding another approver.
- **OR**
- Click on the **Yes** button to add another approver.

CONNECTIONS prohibits the Case Manager from approving the FASP until the Unit Approver (as well as any DRS workers, if applicable) has approved it. In order for the approvers to approve the FASP, they must first review it. Upon submission, an in-process FASP report is created; the approver navigates to this report (rather than to the individual FASP windows) via the Approval Task To-Do that s/he received on the **Staff To-Do List**. The format of the report is different from the layout of the information on the windows, but it contains the same content that is contained in each window of the FASP, including all case, stage and worker identifying information. Until the FASP is approved, the FASP report can only be accessed via the Approval Task To-Do. However, all assigned workers may still view the FASP information online in the window format until the FASP is approved. It is the responsibility of the Unit Approver and the Case Manager (and any other approvers who have been assigned) to review the FASP report thoroughly.

If **any** approver rejects the FASP, s/he must advise the Case Planner (via the **Comments** field on the **Approval** window) what must be changed or completed for the FASP to be approved. Once the Case Planner makes these changes, s/he must resubmit the FASP.

**Step-by-Step:**
**Resubmitting a Rejected FASP for Approval**

1. As the Case Planner, click on the **TO-DO** button on the CONNECTIONS Toolbar. The **Staff To-Do List** displays.

2. Select the appropriate Task To-Do with a status of “REJT.” The **Detail…** button enables.

3. Click on the **Detail…** button to read the Unit Approver’s or Case Manager’s comments. The **To-Do Detail window** displays.

4. Click on the **Cancel** button. The **Staff To-Do List** displays.

5. Click on the **Navigate…** button. The **FASP window** displays.

6. Make the required changes to the FASP. When you are done, resubmit the FASP to the Case Manager. (See “Step-by-Step: Submitting a FASP for Approval” on page 8-20 for instructions.)

Once the Case Manager reviews and approves the FASP, the information previously recorded on the various FASP components can now only be found on the Final FASP report document. Workers can no longer access the FASP windows or components. The only information
available via the FASP Tree (other than the Final FASP report) is the header information (e.g., Case Name, Case ID, Stage ID, Worker Name, CID). Additionally, the FASP report only displays the Case Planner Summary narratives, not the individual worker entries.

For Initial FASPs with a Program Choice of "Protective," Case Level Information is mapped to any In-Process Risk Assessment Profiles (RAPs) in the case upon approval of the FASP. This information can be modified as needed. Upon approval of the Initial FASP, the date of the RAP becomes the date the FASP was approved.

The following example considers how case-level information can be affected: Tom is the Case Planner for the Smith case. He completed the Initial FASP on August 20th and submitted it to his Unit Approver and the Case Manager for approval. Sue is a CPS caseworker in another unit and she received a Subsequent report on the Smith case. Sue marked her RAP complete on August 24th. Tom’s Unit Approver and Case Manager approved the Initial FASP on August 25th. The RAP in the FASP is now considered “complete” on August 25th, therefore writing the information to the case level. When Sue opens her RAP in the Subsequent stage and deselects the “Complete” check box, she will receive a system message informing her that more recent RAP information exists; she will have the option of overwriting the information in her RAP with the case-level information.

In the example above, it is Sue’s responsibility to review the RAP information carefully to verify that the most recent information is being saved to the case level. If there is any discrepancy in the RAPs, she should contact Tom to determine which information is more recent.

All FASP Outcomes and Activities with statuses of “Achieved” and “Discontinued” are marked “Inactive” by CONNECTIONS at this time.

The Case Planner will receive a system-generated alert on his/her Staff To-Do List notifying him/her that the approval is complete. At this time, the status of the approval event changes to “COMP” on the Event List.
Printing a FASP

The following FASPs and FASP components can be printed through CONNECTIONS:

- Full FASPs in Approved or Template Format, including Plan Amendments
- Full FASPs in Pending Approval/Draft Status
- FASP Components both in process or pending approval

Information included in FASP reports varies depending on the type of FASP being printed. Component Reports and Template Format FASPs contain draft worker entries and Case Planner Summary information. Full FASPs (Pending and Approved) contain only the Case Planner Summary and not the draft entries. Add a Component pieces are displayed at the end of the report. If a worker completes additional work which is not required in a required section, that additional work will appear in that section.

Full FASPs
Each full FASP report has the common header and the following sections:

- FASP type, status and due date
- Worker information
- Stage Comp information, Caretaker, Program Choice and PPG
- Placement information*
- Assessment Information
- Foster Care Issues*
- Non-LDSS Custody/Relative Resource Placement*
- Service Plan information
- SPR information*
- Programmatic Eligibility
- Add a Component*
- Signature page

* Included if required by Program Choice or if added as “Add a Component.”

Step-by-Step: Printing an Approved Full FASP

1. From the FASP window, double-click the desired Approved FASP from the FASP Tree.
   
   *The FASP report appears in the Print window for the selected Approved full FASP.*

2. Click on the Print button on the lower left corner of the window.
Step-by-Step: Printing a Full FASP in Pending Approval/Draft Status

1. From the Staff To-Do List, click on the desired Pending/Draft FASP from the FASP Tree.
2. Click on the Navigate.. button.  
   *The FASP report appears in the Print window for the selected Approved full FASP.*
3. Click on the Print button on the lower left corner of the window.

**FASP Components**

Sections of the FASP called “Components” can be printed while the FASP is in process or pending approval. Component Reports can only be printed prior to FASP approval or conversion to Template Format. At least one save of the data in that section must have been completed prior to printing. Component reports will print out all questions, whether or not they have been addressed.

Component Reports will include the standard FASP header and the following sections:

- FASP type, status and due date and/or FASP being amended, if Plan Amendment
- Worker information
- Stage Comp information, Caretaker, Program Choice and PPG
- Placement information*
- The component selected by the worker
- Included if required based on the Program Choice

Step-by-Step: Printing a FASP Component

1. From the FASP window, click on the Reports menu.
2. Click on the FASP component you wish to print.  
   *The FASP Component report appears in the Print window.*
3. Click on the Print button on the lower left corner of the window.

*Placement information includes the address, phone number, and emergency contact information.*
Submitting a Plan Amendment for Approval

Upon submission of the Plan Amendment, an in-process Plan Amendment Report is created; the approver navigates to this report (rather than to the individual windows) via the Approval Task To-Do that s/he received on the Staff To-Do List. The format of the report is different from the layout of the information on the windows, but it contains the same information that is in each window of the Plan Amendment. Until the Plan Amendment is approved, the Plan Amendment report can only be accessed via the Approval Task To-Do. However, all assigned workers may still view the Plan Amendment information online in the window format until the Plan Amendment is approved.

Once the Case Manager reviews and approves a Plan Amendment, the information previously recorded on the various components can only be found in the Plan Amendment Report; workers can no longer access the Plan Amendment windows or components.

Step-by-Step: Printing an Approved Plan Amendment

1. From the Family Assessment and Service Plan window, double-click the desired approved Plan Amendment from the FASP tree. The Plan Amendment Report displays in the Print window.

2. Click on the Print button on the lower left corner of the window.
The Removal Update Process

As a result of the Permanency Bill, launch and due dates for FASPs may no longer coincide with due dates for Permanency Hearings and Permanency Hearing Reports. These hearings and reports are based on the date of a child’s physical removal instead of the Case Initiation Date. Beginning December 21, 2005, courts set a “Date Certain” for each permanency hearing for all children placed in foster care under Article 10 of the Family Court Act (FCA), children placed directly with a relative or other suitable person under Article 10 of the Family Court Act (Non-LDSS Custody/direct care), children voluntarily placed in foster care, children surrendered for adoption, children completely freed for adoption (including completely freed children subject to Article 3 JD and/or Article 7 PINS proceedings) and children subject to Article 651.b Unaccompanied Refugee Minors. (Permanency Hearing and Reports for Article 3 JD and Article 7 PINS children who are not completely freed for adoption are unaffected by the Permanency Bill.)

The Date Certain set by the court for the first permanency hearing after a non-freed child is removed must commence within eight (8) months of the Date of Physical Removal, not the Case Initiation Date. The first permanency hearing for a child completely freed for adoption must occur no later than 30 days after the hearing that completely freed the child, but preferably immediately following an approval of a Voluntary Surrender or a Termination of Parental Rights disposition that completely frees a child for adoption. Subsequent permanency hearings for completely freed and non-freed children must be held at least every six months thereafter for as long as the child remains in foster care or direct care with a relative or other suitable person. A Date Certain for the next hearing will be set at each hearing; the Judge may set the next permanency hearing at a date earlier than six (6) months from the date of the current hearing, but no later.

Permanency Hearing Reports must be prepared for each permanency hearing. These reports are the means used to notify the court of a family’s progress. The Permanency Hearing Report must be mailed with the Permanency Hearing Notice to required parties 14 days prior to the Date Certain; it must also be filed with the court. If the Permanency Hearing Report is due while a FASP is unavailable for launch, or the FASP is in-process and cannot be completed or approved in time, workers can use the Removal Update process to obtain current, approved information for use in the Permanency Hearing Report.

The Removal Update Report

The Removal Update Report displays during the approval process when an approver navigates to the report from his/her Staff-To-Do-List. The Removal Update Report contains information pulled from the in-process FASP, including the name of the child and removal information. This report is similar in format to the FASP Report, but with some differences:

• “Removal Update” appears in the report header.
• The data contained in the report is only for the child selected on the Select Child window.
• A section titled “Removal Update” displays after the Stage Composition section of the report. This new section lists the selected child, the child’s Date of Physical Removal and Type of Legal Event Associated with Removal.
• For a child with a Program Choice of “Placement,” the information from the Appropriateness of Placement component (of Foster Care Issues) appears in the report.

See Module 17, Plan Amendments, for more information about Removal Update Reports.
For a child with a Program Choice of “Non-LDSS Custody,” the information from the Non-LDSS Custody, **Appropriateness of Alternative Setting** tab appears in the report.

- Information from the Service Plan component appears in the report.
- Information from the Visiting Plan component appears in the report.

**Submitting a Removal Update Report for Approval**

When the Case Planner (or Case Manager when no Case Planner is assigned) clicks on the **Submit** button on the **Check FASP Detail Component Status** window, the **To-Do Detail** window displays and the Removal Update Report is submitted for approval according to the following system rules:

- If the Case Planner is submitting the Removal Update Report, an Approval Task To-Do is sent to the Case Planner’s Unit Approver and the Case Manager. The Case Planner’s Unit Approver must approve the Removal Update Report before the Case Manager can approve or reject it. If the Case Planner’s Unit Approver rejects the Removal Update Report, it must be corrected and resubmitted for approval. If the Case Planner is the Unit Approver, the **Staff Search Criteria** window displays and the Case Planner must select another worker within his/her agency to perform the approval.

- If the Case Manager is submitting the Removal Update Report, an Approval Task To-Do is sent to the Case Manager’s Unit Approver. If the Case Manager is the Unit Approver, the **Staff Search Criteria** window displays and the Case Manager must select another worker within his/her agency to perform the approval.

The **To-Do Detail** window displays the following descriptions for the Approval Task To-Do:

- **Short Desc** field: “Approve Removal Update Report for Person <child’s name>”
- **Description/Notes** field: “Removal Update Report has been submitted for approval for Family Services stage: <Stage Name>, Case: <Case ID>, Stage: <Stage ID>, Person: <person’s name, Person ID>”

### Step-by-Step: Submitting a Removal Update Report for Approval

1. Click on the **Removal Update** button on the Family Assessment and Service Plan window. The Select Child window displays.

2. Select the appropriate child from the grid and click on the **Check Removal Detail** button. Submission edits are initiated and the Check FASP Detail Component Status window displays.
If there are incomplete components, click on the **Close** button and navigate to the component(s) to complete the required information. 

Once you complete the information, return to **Step 1**.

—OR—
If all components are complete, click on the **Submit** button. 

The following message displays:

“This action will close this window. Do you want to continue?”

Click on the **Yes** button.

The To-Do Detail window displays with the approver’s name in the **Assigned To** field; this field cannot be modified.

Click on the **Save** button.

If you are the Case Planner, the following message displays:

“Approval To Do created for Case Manager and Case Planner’s Unit Approver. Do you wish to add another approver?”

- Click on the **No** button to submit the Removal Update Report without adding another approver. Skip the remaining instructions in this step-by-step section. 
  —OR—
- Click on the **Yes** button to add another approver. The Staff Search Criteria window displays. Proceed to **Step 6**.

If you are the Case Manager, the following message displays:

“Case Manager submitted this approval. Approval To Do created for Case Manager’s Unit Approver. Do you wish to add another approver?”

- Click on the **No** button to submit the Removal Update Report without adding another approver. Skip the remaining instructions in this step-by-step section. 
  —OR—
- Click on the **Yes** button to add another approver. The Staff Search Criteria window displays. Proceed to **Step 6**.

On the **Staff Search Criteria** window, enter the approver’s name in the **First** and **Last Name** fields.

Click on the **Search** button.

The Staff List displays with the results of your search.

Select the approver and click on the **OK** button.

The following message displays:

“Approval To-Do created for <Name>. Do you wish to add another Approver?”

- Click on the **No** button to submit the Removal Update Report without adding another approver. 
  —OR—
- Click on the **Yes** button to add another approver. Repeat **Steps 6 – 8**.
Approving a Removal Update Report

Completing an approval for a Removal Update Report follows the same process as approving any submitted work within CONNECTIONS.

If the in-process FASP used to populate a Removal Update Report is approved while the Removal Update Report is pending approval, the Approval Task To-Do’s for the Removal Update Report are deleted along with the Removal Update Report since the approved FASP contains the most recent removal information. When making the final approval for an in-process FASP while a Removal Update Report is pending approval, the following message displays:

“All pending Removal Updates for this stage will be deleted. Do you wish to continue?”

- Click on the Yes button to delete the Removal Update Report and approve the FASP.
- Click on the No button to close the message and return to the Approval Status window.

Throughout the Removal Update process, all sections of the in-process FASP remain modifiable so that it can be completed and submitted for approval within the required timeframe.

Step-by-Step: Approving a Removal Update Report

1. Click on the TO DO button on the CONNECTIONS Toolbar. The Staff To-Do List displays.

2. Select the Approval Task To-Do “Approve Removal Update Report for Person <Person’s name> - <Person ID>” and click on the Navigate… button. The Removal Update Report displays.

3. Review the information contained in the report. Click on the Close button when finished. The Approval Status window displays.

4. Click on the Approve button. The following message displays: “Approval will freeze events. Do you wish to add another approver?”

5. Click on the No button to complete the approval without adding another approver. Skip to Step 11. —OR— Click on the Yes button to add another approver. The To-Do Detail window displays.

6. Click on the Staff… button. The Staff Search Criteria window displays.
7 On the Staff Search Criteria window, enter the approver's name in the First and Last Name fields.

8 Click on the Search button.
   The Staff List displays with the results of your search.

9 Select the approver and click on the OK button.
   The Approval Status window displays, with the selected person listed in the Assigned To field.

10 Click on the Save button.
    The Approval Status window displays.

11 Click on the Save button.
    The Staff To-Do List displays.
Module 9: FASP Safety Assessment

The CONNECTIONS Case Management system provides for the continuity of assessing and planning for children’s safety, permanency and well-being. Safety refers to the immediate danger of serious harm.

Safety
- Safety deals with present or impending danger.
- Safety factors pose a threat of immediate harm.
- Safety factors pose a threat of serious harm.
- In order to control for safety, there must be an assessment of the need for immediate interventions, as well as strengths, resources or protecting factors present in the home.

The Safety Assessment is used to document the safety factors present in a child's home, as well as to record the safety decision and any intervention(s) to provide a safe environment for the child(ren) involved in the stage. The Safety Assessment, which is completed as part of the CPS response to the SCR report of suspected abuse or maltreatment, is documented during the CPS Investigation stage. The Safety Assessment is also completed in the FASP for a Family Services Stage (FSS).

The Safety Assessment node in the FASP provides for the continuity from the CPS Investigation (INV) to the FSS for Child Welfare Services (CWS) stage types. A non-CPS Safety Assessment displays when “Protective” is not the Program Choice. There is no Safety Assessment for a Child Case Record (CCR).

This module focuses on documenting the Safety Assessment in the FASP. The Safety Assessment is accessed from the FASP Tree. Depending on the Program Choice, either the Safety (CPS) or Safety (Non-Protective) node displays.
Step-by-Step: Accessing the CPS Safety Assessment from the Assigned Workload

1. From the FASP window, click on the ‘+’ next to the desired FASP on the FASP Tree. *The selected FASP displays several nodes and sub-nodes.*
2. Click on the ‘+’ for the Family Assessment node.
3. Click on the Safety (CPS) sub-node. *The Safety Assessment displays.*

Step-by-Step: Accessing the Safety Assessment (Non-Protective) from the Assigned Workload

If a Safety Assessment does not display in the FASP Tree for your completion, you can add this as a component:

1. From the Assigned Workload, select the FSS.
2. Click on the Tasks… button.
3. Click on the Family Assessment and Service Plan tab.
4. Click on the Options menu and select the Add Component command.

The ability to view or modify the Safety Assessment depends on the type of Safety Assessment being accessed and the worker’s security rights:

<table>
<thead>
<tr>
<th>Safety Assessment (CPS)</th>
<th>Safety Assessment (Non-Protective)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modify</td>
<td></td>
</tr>
<tr>
<td>• Case Planner</td>
<td>• Case Planner</td>
</tr>
<tr>
<td>• CPS Worker/Monitor</td>
<td></td>
</tr>
<tr>
<td>View</td>
<td></td>
</tr>
<tr>
<td>• Any worker with a role in the stage</td>
<td>• Any worker with a role in the stage</td>
</tr>
<tr>
<td>• Any worker with access to that worker’s Assigned Workload</td>
<td></td>
</tr>
</tbody>
</table>

Workers *cannot* assign Task To-Do’s for another worker to complete the Safety Assessment.
FSS/CWS Safety Assessment (CPS)

The FSS/CWS has two distinct formats for Safety Assessments: The Safety Assessment (CPS), which is similar to the Safety Assessment for investigations; and the Safety Assessment (Non-Protective), which is a directed narrative.

Safety Assessment (Non-Protective)

For non-CPS cases, the Safety Assessment focuses on the safety of the child, family members and/or community regarding non-CPS issues (e.g., child behavior, serious family crisis resulting in loss/incapacity of a caretaker). The focus of attention and concern expands beyond the child, extending to other family members, caretakers and/or the community. The threat is not thought to be associated with a parent’s or caretaker’s abusive or neglectful behavior or living conditions; the child could even pose the safety threat. Non-CPS assessment looks beyond immediate danger of serious harm to life or health; it also includes serious threats to emotional, physical and developmental well-being.

The Safety Assessment (Non-Protective) is a tool for documenting any current safety issues and concerns the worker has identified. To complete the Safety Assessment (Non-Protective) for a FASP, the worker describes the key protecting factors that support the present safety of the child(ren), family or community members. Even though a case did not originate from CPS, nor is there a “Protective” Program Choice, the worker may have some concerns regarding safety.
For all non-CPS cases, the worker identifies and records those strengths, attributes, circumstances and/or resources of the child’s current living arrangement that serve to promote and support the safety of the child, family and/or community members. This concept applies equally to the child’s own home, foster boarding home, kinship foster home or foster care facility, depending on where the child is living at the current time of the assessment. When applied to a foster care setting, the question focuses on safety of the foster care setting itself, not how well the placement protects the child from conditions in his/her home.

If safety issues are present, the worker describes the specific steps/interventions taken, including any legal activity. The worker clearly identifies who is responsible for implementing/maintaining any safety intervention(s), specifically what each person must do to ensure its effectiveness, and how these steps protect the children, caretakers, family members and/or community members from serious harm.

Examples of non-CPS safety issues include a suicidal child, a child abusing substances, a violent child, gang involvement or a parent’s serious illness. Possible safety responses are a suicide prevention plan, substance abuse treatment, increased adult supervision, employing the assistance of an alternative caretaker and/or foster care. For example, a child is expressing suicidal thoughts, but his parents are meeting his emotional needs and providing close supervision; however, the worker feels the child may not be safe without a risk to himself, his parents and/or his community. Some additional precautions are needed in the home (e.g., removing any weapons, controlling access to medications); without these restrictions and the parents’ cooperation, the child would not be in a safe environment.

The Safety Assessment (Non-Protective) can only be accessed from the FASP tree in the FSS/CWS. A Safety node is created on the FASP tree when there are no children in the case who have a Program Choice of “Protective.” Clicking on the Safety node on the FASP tree is the only path to create or modify a Non-Protective Safety Assessment for the FASP. Only the Case Planner can complete a Safety Assessment (Non-Protective).

The Safety Assessment (Non-Protective) does not pre-populate with any data. The same format of the Safety Assessment continues unless “Protective” is added as a Program Choice. Each time a new Safety Assessment (Non-Protective) is started, a worker is presented with a blank narrative. The worker records a narrative, identifying any current safety issues and concerns and describing the key protecting factors that support the present safety of the child, family and/or community members.

The Text Control tools, featuring Spell Check, are provided for the narrative. (See page 9-19 for more details about the Text Control tools.) The Safety Assessment (Non-Protective) window also contains Save and Close buttons.

The Safety Assessment (Non-Protective) for a FASP is not submitted separately for approval; it is approved as part of the overall FASP approval process.
CPS Safety Assessment

A Safety (CPS) node is created on the FASP Tree when children in the Family Services Stage have a Program Choice of “Protective” or when a worker manually adds the node using the Add A Component command. Clicking on the Safety (CPS) node on the FASP Tree is the only path to create or modify a CPS Safety Assessment for the FASP. This assessment can be updated only by the Case Planner or the CPS Worker/Monitor.

Contract Preventive Services and Voluntary Foster Care Agency staff will have no access to current and historical CPS Intake and Investigation stages. For all Family Services Stages that are initiated from a CPS Investigation stage, the Safety Assessment completed at the time of the Investigation Conclusion (and the Risk Assessment Profile completed prior to the determination) will be brought forward to the FSS and incorporated into the Family Assessment and Service Plan (FASP), to be available to all Contract Voluntary Foster Care and Preventive Services staff for review.

If an Initial FASP is launched within seven (7) days of an approved Safety Assessment that was completed in the CPS Investigation stage, information pre-fills from the last approved Safety Assessment into the Initial FASP’s Safety Assessment. For example, if the Investigation Conclusion Safety Assessment was approved within the seven (7) days prior to the launch of the Initial FASP, the Safety Assessment information will carry forward to the initial FASP. (The FSI/FSS originated from an open Investigation and a worker launches the Safety node within seven days of the approval of the Safety Assessment.) This presentation of the CPS Safety Assessment continues until the “Protective” Program Choice is removed or the stage is closed.

The CPS Safety Assessment for a FASP is completed much like the Investigation Safety Assessments within the Child Protective Record Summary (CPRS). A worker is not required to record a Reason (Type) or Date for the CPS Safety Assessment, but all other steps, including the recording of Safety Factors, immediate dangers (if they exist), Mitigating Strengths/Resources, Safety Decision, and Safety Interventions must be completed. Once a Safety Assessment is complete, the worker marks it as “complete” by clicking on the Ready For FASP Submission check box. The CPS Safety Assessment for a FASP is not submitted separately for approval; work is submitted as part of the FASP approval process. (See Module 8: The Family Assessment and Service Plan for details.)
The Safety Assessment window is divided into a tabbed section, a narrative field and a footer.

The tabbed section contains the following four tabs:

**Safety Factors**

Use this tab to record safety issues now present, or which would be present if the current safety interventions were no longer in place (i.e., evaluate the child’s home situation with the absence of safety interventions). For a child in foster care, this means assessing the child’s home of origin to which s/he is expected to return. This section contains a list of safety factors pertaining to the current situation in the child’s home environment that are used to assess a child’s safety. Workers describe the specific individuals, behaviors and/or circumstances associated with that particular safety factor in the associated Comments field.

(See “The Safety Factors Tab” on page 9-8 for details.)

**Mitigating Strengths/Resources**

In the narrative on the Mitigating Strengths/Resources tab, workers describe any family strengths and/or family, neighborhood or community resources available and how they mitigate or address safety concerns for the child(ren).

(See “The Mitigating Strengths and Resources Tab” on page 9-10 for details.)
Safety Decision

The Safety Decision documents a worker’s conclusion of whether the child is safe if remaining in the home. All of the other components of the Safety Assessment are used by the worker to support this decision: the assessment of immediate danger of serious harm, family strengths and/or family, neighborhood or community resources that mitigate or address safety concerns, and safety interventions that have been initiated.

(See “The Safety Decision Tab” on page 9-11 for details.)

Safety Interventions

Within the context of a child safety response or plan, safety interventions are the specific actions or services employed to control the situation until a more permanent change can take place. Safety Interventions are intended to protect the child from serious harm.

(See “The Safety Interventions Tab” on page 9-15 for details.)

The footer contains the following elements:

- **Ready For FASP Submission check box**
  - Select this check box to verify whether all elements have been completed.

- **Save**
  - Click on this button to save the recorded information and close the Safety Assessment window. The following message displays:
    
    “Changes have been saved.”
  
    - Click on the OK button to close the message.

- **Close**
  - If you click on the Close button prior to clicking on the Save button, the following message displays:
    
    “Do you want to exit? Unsaved data and/or narratives will be lost.”
  
    - Click on the Yes button to close the window. The changes are not saved.
  
    - Click on the No button to return to the window with the unsaved changes displayed.

The footer is always visible, regardless of which tab is open.

In modify mode, a worker can navigate to every tab and record information in any order. In view-only mode, the worker can freely navigate among the tabs, but cannot record information in the fields.
The Safety Factors Tab
A worker conducts an assessment for the presence of safety factors in the child’s environment. The worker must first select from the list any safety factors that are present in the child’s environment and record comments for each selected safety factor to support the worker’s decision. The worker must record comments when the Comments field highlights in yellow, describing any relevant behaviors and/or circumstances. The worker needs to record comments for every selected Safety Factor. The worker can navigate to other tabs, but the Safety Assessment cannot be submitted for approval until s/he has recorded comments for each selected safety factor to support his/her decision.

If the worker selects any safety factor other than No Safety Factors Identified, s/he needs to determine which factors, if any, place the child(ren) in immediate danger of serious harm by selecting them from the Immediate Dangers list at the bottom of the Safety Factors tab. This list is populated with each safety factor selected from the list at the top of the tab. If a factor is present in the home, and this places the children in immediate danger of serious harm, the factor should also be selected in the Immediate Dangers list. In addition, the worker needs to record comments explaining how the selected factors place the child(ren) in immediate danger of serious harm.
Safety Factors
(See Appendix G1 for definitions.)

1. Caretaker(s) previously committed or allowed abuse or maltreatment of a child(ren), and the caretaker’s prior response to that incident was not commensurate with the severity of the abuse or maltreatment.

2. Caretaker(s) currently abuses alcohol, to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

3. Caretaker(s) currently abuses drugs, to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

4. Child(ren) has experienced or is likely to experience physical or psychological harm, as a result of domestic violence in the household.

5. Caretaker(s)’s apparent or diagnosed mental health status or developmental disability seriously affects his/her ability to supervise, protect or care for the child(ren).

6. Caretaker(s) is violent and appears out of control.

7. Caretaker(s) appears unwilling and/or unable to meet the child(ren)’s basic needs for food, clothing, shelter and/or medical care.

8. Caretaker(s) appears unwilling and/or unable to provide adequate supervision of the child(ren).

9. Caretaker(s) likely caused serious physical harm to the child(ren) or has made a plausible threat of serious harm.

10. Caretaker(s) views, describes or acts toward the child(ren) in predominantly negative terms and/or has extremely unrealistic expectations of the child(ren).

11. Child(ren)’s current whereabouts cannot be ascertained and/or there is reason to believe the family is about to flee or refuses access to the child(ren).

12. Child(ren) has been or is suspected of being sexually abused and the caretaker(s) is unable or unwilling to provide adequate protection of the child(ren).

13. The physical living conditions are hazardous.

14. Child(ren) is afraid of and/or extremely uncomfortable around people living in or frequenting the home.

15. Other (specify in comments)

16. Child Has Positive Toxicology for drugs and/ or alcohol (NYC Required)

17. Child(ren) is on Sleep Apnea Monitor (NYC Required)

18. Weapon noted in CPS report or found in the home (NYC Required)

19. No Safety Factors Identified
Step-by-Step:
Recording Safety Factors

1. From the Safety Factors tab on the Safety Assessment window, select the Safety Factors that apply by clicking on the corresponding check boxes.
   The Safety Factors selected display in the Immediate Dangers list.
   —OR—
   Select the No Safety Factors Identified check box.
   The Safety Factors disable.

2. In the Comment field, record comments regarding behavior or circumstances associated with the selected Safety Factors.

3. In the Immediate Dangers list, review the Safety Factors and select those, if any, that place the child(ren) in immediate danger of serious harm by clicking on the corresponding check box.

4. To save the information you recorded to the database and return to the FASP window, click on the Save button.
   The FASP window displays.

The Mitigating Strengths and Resources Tab
This tab provides a narrative to record strengths and resources of the family or community in the child's environment. Workers identify any family strengths, protecting issues, and/or family, neighborhood or community resources available and describe how they mitigate or address safety concerns for the child(ren).

A worker can record this narrative at any time during the safety assessment. This field has an unlimited amount of space to record comments and also features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check. (See “The Text Control Tool” on page 9-19.)

If a worker selects Safety Decision #2 (see “The Safety Decision Tab” on page 9-11), s/he must record a narrative explaining the Mitigating Strengths and Resources for the current home environment.

If the narrative is not recorded, the Safety Assessment is incomplete and the worker cannot submit the Safety Assessment for approval. If the worker selects any Safety Decision other than Safety Decision #2 (see “The Safety Decision Tab” on page 9-11), s/he can record Mitigating Strengths and Resources.
On the Mitigating Strengths/Resources tab, record a narrative regarding the strengths and resources of the family.

To save the information you recorded to the database and return to the FASP window, click on the Save button. The FASP window displays.

The Safety Decision Tab
Once the Safety Factors tab is complete, the worker can then complete the Safety Decision tab. If the worker attempts to navigate to the Safety Decision tab before completing the Safety Factors tab, the following message displays:

“You must first select at least one Safety Factor before selecting a Safety Decision.”

The worker must identify a safety decision based upon the assessment of immediate danger of serious harm, family strengths and/or family, neighborhood or community resources that mitigate or address safety concerns, and safety
interventions that have been initiated. The worker must select one and only one of the provided choices.

<table>
<thead>
<tr>
<th>Check</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No safety factors were identified at this time. Based on currently available information, there are no child(ren) likely to be in immediate danger of serious harm.</td>
<td></td>
</tr>
<tr>
<td>2. One or more safety factors are present, however, these factors do not place a child in immediate danger of serious harm and the existence of family strengths, resources or other mitigating circumstances utilized prior to DSS involvement has effectively removed the threat of immediate danger for the child(ren).</td>
<td></td>
</tr>
<tr>
<td>3. One or more safety factors are present, which place a child in immediate danger of serious harm, and controlling safety interventions have been initiated. Based on the controlling safety interventions, the child(ren) will remain in the home at this time.</td>
<td></td>
</tr>
<tr>
<td>4. One or more safety factors are present, which place a child’s life or health in imminent danger and removal to foster care or alternative placement (or continued placement) is the only controlling safety intervention possible for one or more of the children.</td>
<td></td>
</tr>
<tr>
<td>5. One or more safety factors are present, which place a child in immediate danger of serious harm, but caretaker(s) has refused access to the child or fled, or child’s whereabouts are unknown. Appropriate legal/investigative actions are being taken.</td>
<td></td>
</tr>
</tbody>
</table>

Safety Decisions are presented as follows:

1. No safety factors were identified at this time. Based on currently available information, there are no child(ren) likely to be in immediate danger of serious harm.

2. One or more safety factors are present, however, these factors do not place a child in immediate danger of serious harm or the existence of family strengths, resources or other mitigating circumstances utilized prior to DSS involvement has effectively removed the threat of immediate danger for the child(ren).

3. One or more safety factors are present, which place a child in immediate danger of serious harm, and controlling safety interventions have been initiated by DSS. Based on the controlling safety interventions, the child(ren) will remain in the home at this time.

4. One or more safety factors are present, which place a child’s life or health in imminent danger and removal to foster care or alternative placement (or continued placement) is the only controlling safety intervention possible for one or more of the children.

5. One or more safety factors are present, which place a child in immediate danger of serious harm, but caretaker(s) has refused access to the child or fled, or child’s whereabouts are unknown. Appropriate legal/investigative actions are being taken.

On this tab, workers must select **one and only one** Safety Decision from the list.

- If the **No Safety Factors Identified** check box was selected on the Safety Factors tab, the **No Safety Factors Identified** check box will automatically be selected on the Safety Decision tab; all other Safety Decisions will be disabled.
- If the worker selects any Safety Factor **other than No Safety Factors Identified**, Safety Decision #1 will be disabled.
• If the worker selects Safety Decision #4 (see Safety Decisions above), the Placement window will open automatically. (See “The Placement Window” on page 9-13.) The Placement window must be completed in this situation.

The following conditions apply to the Safety Decision tab:

• The worker must select at least one Safety Factor (or the No Safety Factors Identified check box) on the Safety Factors tab before selecting a Safety Decision on the Safety Decision tab. If s/he attempts to select a Safety Decision without selecting at least one Safety Factor (or the No Safety Factors Identified check box), the following message displays:

“You must select at least one Safety Factor before selecting a Safety Decision.”

• A system edit will only allow one Safety Decision to be selected. The worker may change the selected Safety Decision by clicking on a different one, which will clear the check box for the previous choice. A Safety Decision must be selected before the Safety Assessment can be submitted for approval.

• The worker is required to select at least one safety intervention if s/he selects Safety Decision #3. Specifically, the worker must select at least one Safety Intervention other than “Placement - Foster Care” or “Placement - Alternate Caregiver.”

### Step-by-Step: Recording the Safety Decision

1. On the Safety Decision tab, select one of the available Safety Decisions by clicking on its corresponding check box. (You cannot select Safety Decision #1; its check box populates automatically if you select the No Safety Factors Identified check box on the Safety Factors tab.)

2. Complete the required fields and any window(s) that display based on the selected Safety Decision.

3. To save the information you recorded to the database and return to the FASP window, click on the Save button. The FASP window displays.

### The Placement Window

The Placement window allows a worker to select, from a list of all children in the stage, the children who have been placed in an alternative home. If any children remain in the home (are not placed), the worker must record comments explaining how the children can remain safe in their home. This window is accessed via the Placement button on the Safety Decisions tab; this button enables only if Safety Decision #4 is selected.
The Placement window is divided into two sections:

- The left side lists all of the children in the stage with corresponding check boxes.
- The right side contains a text field where the worker must identify the protecting factors that allow each unselected child to remain safely in the home. To indicate that a child has been removed from the home, select the child’s name by clicking on his/her corresponding check box, as appropriate.

Three buttons display at the bottom of the Placement window:

- **Spell Check** The Spell Check button allows a worker to check the narrative for spelling errors.
- **OK** The OK button closes the Placement window and returns the worker to the Safety Decision tab on the Safety Assessment window. The information recorded on the Placement window is not saved until the worker clicks on the Save button on the Safety Assessment window.
- **Cancel** The Cancel button discards any unsaved changes, closes the Placement window and returns the worker to the Safety Decision tab on the Safety Assessment window.

To review or change the placement information, click on the Placement button on the Safety Decision tab. If any children remain in the home, record comments explaining why the child(ren) can remain safely in the home.

If a worker selects Safety Decision #4 ("One or more safety factors are present, which place a child’s life or health in imminent danger and removal to foster care or alternative placement (or continued placement) is the only controlling safety intervention possible for one or more of the children"), the Placement window displays automatically.
Step-by-Step: Opening the Placement Window

1. On the Safety Decision tab, if you select Safety Decision #4, the Placement window displays automatically.
   —OR—
   With Safety Decision #4 already selected, click on the Placement button on the Safety Decision tab.
   The Placement window displays.

2. Select the child(ren) from the list on the left side who are in placement by clicking on the corresponding check box(es).
   A check mark displays for each selected child.

3. Record comments regarding why the children who are not in placement can safely remain in their home.
   The Comments field highlights in yellow when comments are required.

4. Click the OK button.
   The Safety Assessment window displays with the Safety Decision tab active.

The Safety Interventions Tab

On this tab, a worker selects one or more interventions from the list, indicating which intervening action(s) were taken to control for the safety of the child(ren) based on the safety factors and safety decisions selected. Safety interventions must control for the immediate health and safety of the children.
The Safety Interventions tab is divided into two sections:

- The left side contains a list of interventions designed to control for the immediate health and safety of the child(ren). A worker may select one or more interventions, as applicable.
- The right side contains a narrative field for recording comments that describe how the selected interventions control for the immediate health and safety of the child(ren).

If a worker selects one or more interventions, s/he must record comments. The worker can save the window without comments, but the Safety Assessment is not complete and cannot be submitted (as part of the FASP) for approval. The comments need to address how all of the selected Safety Interventions control for safety.

If a worker selected Safety Decision #3 on the Safety Decision tab ("One or more safety factors are present, which place a child in immediate danger of serious harm, and controlling safety interventions have been initiated. Based on the controlling safety interventions, the child(ren) will remain in the home at this time"), at least one safety intervention is required. In the Comments field, the worker documents the appropriateness of the selected intervention(s).

Safety Interventions

1. Intensive Home Based Family Preservation Services
2. Emergency Shelter
3. The non-offending caretaker is moving to a safe environment with the children.
4. Authorization of emergency food/cash/goods
5. Judicial Intervention
6. Law Enforcement Involvement
7. Emergency Medical/Mental Health Services
8. Immediate and regulated in-home supervision/monitoring
9. Emergency Alcohol Abuse Services
10. Emergency Drug Abuse Services
11. Correction or removal of hazardous/unsafe living conditions
12. Placement - Foster Care
13. Placement - Alternate Caregiver
14. Use of family, neighbors or other individuals in the community as safety resources (specify in comments)
15. Alleged perpetrator has left the home voluntarily, current caretaker will appropriately protect the victim with CPS monitoring
16. Alleged perpetrator has left the home in response to legal action
17. Other (specify in comments)
Step-by-Step: Recording Safety Interventions

1. On the Safety Interventions tab, select an intervention by clicking on its corresponding check box. 
   "More than one Safety Intervention can be selected."

2. In the Comments field, record comments regarding the interventions you selected and how those interventions control for the safety of the child(ren).

3. To save the information you recorded to the database and return to the FASP window, click on the Save button. 
   "The FASP window displays."

Checking for Completion

CONNECTIONS provides a way for a worker to see if a Safety Assessment is complete and ready for submission. In the FSS, when the worker clicks on the Ready for FASP Submission check box, the system verifies whether all required Safety Assessment components are complete. If the Safety Assessment is complete, a check mark displays in the check box.

If the Safety Assessment is not complete, a message displays, identifying items needing completion; the check box remains unselected. After completing the work indicated in the message, the worker must click on the Ready For FASP Submission check box again to check for completion until all required Safety Assessment components are complete.

Here are some conditions to check for:

- If any Safety Factors other than No Safety Factors Identified are selected, a worker must record comments.

- If a worker selects Safety Decision #2 (“One or more safety factors are present, however, these factors do not place a child in immediate danger of serious harm or the existence of family strengths, resources or other mitigating circumstances utilized prior to DSS involvement has effectively removed the threat of immediate danger for the child(ren)”), s/he must record the Mitigating Strengths and Resources narrative.

- If a worker selects Safety Decision #3 (“One or more safety factors are present, which place a child in immediate danger of serious harm, and controlling safety interventions have been initiated by DSS. Based on the controlling safety interventions, the child(ren) will remain in the home at this time”), s/he must select at least one Safety Intervention.
• If a worker selects Safety Decision #4 ("One or more safety factors are present, which place a child’s life or health in imminent danger and removal to foster care or alternative placement (or continued placement) is the only controlling safety intervention possible for one or more of the children"), s/he must complete the Placement window.

• If any children on the Placement window remain unselected, a worker must record comments.

• If a worker selects any safety interventions, s/he must record comments.

Step-by-Step:
Checking an FSS Safety Assessment for Completeness

1 On the Safety Assessment window, click on the Ready For FASP Submission check box.
   A check mark displays if the Safety Assessment is ready for submission. If a check mark does not display, you will not be able to submit the Safety Assessment for approval. CONNECTIONS lists the components that are incomplete.

Marking a Safety Assessment Ready for FASP Submission

A worker can save the Safety Assessment at any point without needing to mark it as ready for FASP submission. In an FSS, the worker cannot submit a Safety Assessment for approval separately, since it is approved with the FASP.

Step-by-Step:
Saving the FSS Safety Assessment

1 Click on the Mark Ready For FASP Submission check box.
   A check mark displays in the check box if the Safety Assessment passes all system edits. If any components are missing, a message displays, listing the missing Safety Assessment components.

2 Navigate to the Safety Assessment window and click on the Save button.
   —OR—
   Click on the File menu and select the Save command.

Click on the Save button (or the Save command in the File menu) to save your changes and close the window.
Printing the Safety Assessment

In a Family Services Stage, a worker can print the Safety Assessment by clicking on the Print command in the File menu on the Safety Assessment window.

Step-by-Step: Printing the Safety Assessment

1. On the Safety Assessment window, click on the File menu and select the Print command.
   The Print window displays.
2. Click on the Print button to print the Safety Assessment.
3. Click on the Close button to close the Print window.

The Text Control Tool

When workers access a window or tab containing the Text Control tool, they can use formatting functions (similar to those available in Microsoft Word) for the text recorded in the narrative field.

Two separate toolbars display at the top of the narrative field. The first toolbar contains buttons for performing the following functions:

- **Print**
  With this function, text is sent to a default printer.
- **Print Preview**
  This allows the text to be viewed on a screen as it will appear when printed.
- **Spell Check**
  Workers can conduct a Spell Check of the text recorded. Workers cannot add items to the dictionary. Spell check is available for the entire document or for a highlighted section within the document.
- **Copy**
  Workers select text to be copied to a clipboard; the clipboard clears when tab/window closes.
- **Cut**
  This option allows selected text to be removed and placed on the clipboard.
- **Paste**
  Text that was saved to the clipboard (via Copy or Cut) can be pasted within the text area.

The second toolbar contains standard text formatting buttons:

- **Bold**
  Selected text is bolded.
- **Italics**
  Selected text is italicized.
- **Underline**
  Selected text is underlined.
- **Align Left**
  This allows left alignment of text.
- **Align Right**
  This allows right alignment of text.
- **Center**
  This allows center alignment of text.
- **Justify**
  This allows full justification of text.
**Numbering**  This function formats selected text as a numbered list.

**Bullets**  This function formats selected text as a bulleted list.

**Zoom**  The view of the text size can be changed from 10% to 400% as it is being typed into the text section. The text will return to the standard Times Roman 12-point font once the window or tab has been saved.
Module 10: Family/Child Update

The **Family Update** and **Child Update** nodes of the Family Assessment and Service Plan provide for the documentation of changing events and circumstances that may affect periodic assessment and service planning for the family and/or child throughout the life of the case. This functionality gives workers the ability to make modifications, as appropriate, to changing circumstances, including consideration of evolving needs, documenting casework activities and legal activities, as they relate to these needs and circumstances. As circumstances change and new needs are identified, it may be necessary to modify the type or level of services provided to the family and/or child.

Your access to the **Family Update** or **Child Update** node depends on your role in the Family Services Stage (FSS). If you are a CPS Worker/Monitor, a Caseworker, or a Case Planner, you can create, view, modify and delete information. If there is no Case Planner assigned to the stage and the Case Manager is acting as the Case Planner, all functionality described in this section as pertaining to the Case Planner will apply to the Case Manager. Otherwise, the Case Manager has view-only access.

The node’s display is dependent on the type of stage (i.e., FSS/CWS or FSS/CCR).

### Step-by-Step: Opening the Family Update or Child Update Window

1. On the FASP Tree, click on the ‘+’ on the **Family Assessment** node.
2. Click on the **Family Update** or **Child Update** sub-node. The **Family Update** or **Child Update** window displays.
Tabs on the Family Update and Child Update Windows

The tabs that display on the Family Update and Child Update windows and the components available within each section are dependent on the type of FSS being accessed. For FSS/CWS stages, the window is labeled Family Update and displays the following tabs:

- **Presenting Needs and Concerns**
  In the Initial FASP, this tab is designed to capture information about the original needs and concerns that triggered the opening of this services case. Identify the areas the family considered most important to address. (For more information, see “Presenting Needs and Concerns” on page 10-3).

- **Family Background**
  Use this tab to describe relevant family background and history. (For more information, see “Family Background” on page 10-5).

- **Case Update**
  Use this tab to summarize the key events, services and casework activities since the last FASP (or since the opening of the case, if this is the Initial FASP). This includes behavioral concerns and/or family issues requiring emergency services that were identified at Intake. (For more information, see “Case Update” on page 10-7).

- **FASP Legal Activity**
  On this tab, document any court-related or legal activity since the last Family Assessment and Service Plan (or since the opening of the case, if this is the Initial FASP). (For more information, see “FASP Legal Activity” on page 10-22).

For FSS/CCR stages, the window is labeled Child Update and contains the following tabs:

- **Child Background**
  Describe relevant child background and history on this tab. (For more information, see “Child Background” on page 10-5).

- **Case Update**
  Use this tab to summarize the key events, services and casework activities since the last FASP (or since the opening of the case, if this is the Initial FASP). This includes concerns or issues requiring emergency services that were identified at Intake. (For more information, see “Case Update” on page 10-7).
FASP Legal Activity

On this tab, document any court-related or legal activity since the last Family Assessment and Service Plan. (For more information, see “FASP Legal Activity” on page 10-22).

Presenting Needs and Concerns

The Presenting Needs and Concerns tab is the first tab displayed when the Family Update window opens. It supports the capture and display of individual and/or family presenting needs and concerns that prompted the opening of a child welfare services case.

It’s possible that a Family Services Stage may remain open for an extended period of time, based on the service needs of the family, and that multiple workers will be assigned a role in the open FSS. This information assists service providers in understanding what brought the family into services and in assessing changes and progress over time. Examples of original concerns include neglect of the children resulting from the father’s substance abuse and/or the mother’s chronic depression. This information provides a starting point for an assessment and helps focus the family and the worker on some of the key issues that need to be addressed. In the examples noted above, the family’s Service Plan could include substance abuse treatment for the father and mental health treatment for the mother. At a later point in the life of the service relationship, different concerns and needs could take precedence and would be recorded in future Family Assessment and Services Plans (FASPs).

The Presenting Needs and Concerns tab contains a Narrative field that is blank when an Initial FASP is launched. Only a Case Planner, Caseworker and CPS Worker/Monitor can create and/or modify this narrative. The Narrative field is modifiable until the FASP is submitted for approval. This information is only recorded during the Initial FASP, since the reason the family originally presented for services doesn’t change. This field can hold an unlimited amount of text and features the Text Control tools, which work similarly to many of the basic formatting tools.
functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check.

The following buttons display at the bottom of the **Presenting Needs and Concerns** tab:

- **Save**
  - Clicking on this button saves work that has been recorded or changes that have been made in the **Narrative** field. The following message displays:
    - "Changes have been saved."
    - Click on the **OK** button to close the message.
  
- **Cancel**
  - Clicking the **Cancel** button discards any unsaved data. The following message displays:
    - "Do you want to cancel? Unsaved data and/or narratives will be lost."
    - Click on the **Yes** button to discard the unsaved changes.
    - Click on the **No** button to leave the tab open without discarding the unsaved changes.

In subsequent FASPs (i.e., Comprehensive, Reassessment), this tab is view-only and the narrative from the last approved in-sequence FASP (in this example, the Initial) is brought forward. An exception is made if the narrative does not exist in the Initial FASP. This occurs when the Initial FASP was never launched or was launched, but not yet approved. In that case, the field is modifiable until the Comprehensive or Reassessment FASP is submitted for approval.

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**Step-by-Step: Recording Presenting Needs and Concerns**

1. On the **Presenting Needs and Concerns** tab, record narrative information in the **Narrative** field.
2. Click on the **Save** button to save the changes.
The Family Background and Child Background Tabs

The Family Background and Child Background tabs support the capture and display of information regarding the family’s or child’s background, particularly how it pertains to the needs and concerns of the family or child. (The Family Background tab displays for FSS/CWS stages, while the Child Background tab displays for FSS/CCR stages.) This information focuses on key events or family dynamics that shaped who the parent (or child) is today. It’s also important to record how any family background issues are likely to affect service provision to the family or child. These are details elicited from the family that provide insight into possible impediments to the child’s or family’s participation in (or ability to benefit from) services.

An example of significant family background information to be recorded in this section would be the knowledge that the parent grew up in a household with an alcoholic parent or with ongoing domestic violence. This family history may affect the parent’s current attitudes and behavior as well as his/her ability to participate fully in some change-support services related to alcoholism, domestic violence and parental responsibilities. This information helps guide the Caseworker in understanding current behavior and developing effective strategies for change. Some other examples of family background information to be captured include knowledge that a parent grew up in foster care, had extended relatives caring for him/her for long periods of time, or had strong cultural or religious allegiances. It is also important to record a concise family history during periods of successful family functioning and the family’s positive response to support services that were previously provided. This is not an assessment; it is factual information about the family’s history, both positive and negative, that is relevant to understanding the current child welfare situation and determining future courses of action for the family and the agency.

The tab layout is exactly like the Presenting Needs/Concerns tab. There is a Narrative field that holds an unlimited number of characters and also has the Text Control tools. Below the Narrative field are the Save and Cancel buttons. (See the description of these fields on page 10-4.)

The first time this tab is opened, the Narrative field is empty as long as there is no prior approved in-sequence FASP. Once this information has been recorded and approved, it will be brought forward into subsequent FASPs (i.e., Comprehensive and/or Reassessment) and workers with a role in the stage will be able to add to or modify this information. The exception to this is if both a Case Manager and a Case Planner are assigned; in this situation, the Case Manager will have view-only access. The narrative remains modifiable once it has been populated.
Step-by-Step: Recording Family/Child Background

1. On the Family Background (or Child Background) tab, record the narrative.
2. Click on the Save button.
The Case Update Tab

The **Case Update** tab provides for the recording of a summary of the key family or child events, as well as services and casework activities completed during the period leading up to the FASP that is in progress. Examples include (but are not limited to) the birth of a child in the family, the addition of an Early Intervention program to the family’s services, a child’s achievement of a GED degree, or the addition/removal of any services to the family.

For the Initial FASP, this tab is customized based on Program Choice and whether critical concerns were identified and emergency services were provided to the family prior to opening the FSS in a non-CPS case. If the FSS was created from an Indicated CPS Investigation or from an open CPS Investigation stage, the protective version of the **Case Update** tab displays. The table on the next page illustrates the three different presentations of this tab.

In order to avoid duplicate CINs for a Preventive Services case opened to a pregnant woman who has no other children and is also receiving non-services, once the child is born the worker should contact the non-services worker to update the WMS record. The unborn child has a record (and a CIN) in WMS for the non-services case, and the child’s record in WMS must be updated.
**View A**

- Program Choice is "Protective" -AND-
- FASP is Initial -OR-
- FASP is Comprehensive or Reassessment

For more information about View A, see page 10-9.

**View B**

- Program Choice is *not* "Protective" -AND-
- Concerns/ Emergency Issues were identified at Intake

For more information about View B, see page 10-11.

**View C**

- FASP is Initial -AND-
- Program Choice is *not* "Protective" -AND-
- No Concerns/ Emergency Issues were identified at Intake

For more information about View C, see page 10-15.
Case Update: View A
If the Program Choice is “Protective” and the FASP is an Initial, or if the FASP is a Comprehensive or Reassessment (regardless of Program Choice), use this tab to summarize and record key family/child events, services and casework activities. If the FASP is Comprehensive or Reassessment, summarize this information since the last FASP.

The grid contains three fields that are system-populated:

- **Date of Entry**: Date the narrative was recorded
- **Author**: System-populated name (based on Person ID) of the worker recording the entry in CONNECTIONS
- **Status**: Status of the narrative entry (“Final” or “Draft”)

The **Narrative** field can hold an unlimited amount of text and features the Text Control tools common to the other tabs. Summarize the key family events, services and casework activities since the last Family Assessment and Service Plan (or since the opening of the case, if this is the Initial FASP) for all Family Services Stages with a stage type of CWS. For an FSS/CCR, the wording is different to emphasize the focus on the child.

The following buttons display at the bottom of this version of the **Case Update** tab:

- **Case Planner Summary** (with **Launched** check box): This button launches the Case Planner Summary functionality. The Case Planner integrates the entries made by assigned workers into a single, coherent narrative that summarizes the various activities and events that have occurred with all of the family members. The **Launched** check box is system-filled once
the Case Planner has launched the Case Planner Summary. Once this check box is selected, no other entries can be recorded on this window.

For a list of all the windows the Case Planner Summary window can be accessed from, see Appendix J.

**Clear**

This button enables if an entry is selected on the grid. Clicking on the button clears the *Narrative* field to permit another entry.

**Save as Draft**

This button enables after a modification has occurred. Work is saved in “Draft” status and only the author may modify it. The entry can be modified until the Case Planner initiates the Case Planner Summary.

**Save as Final**

This button enables after a modification has occurred. Work is saved in “Final” status and therefore cannot be modified.

**Cancel**

Clicking on the *Cancel* button discards any unsaved data. The following message displays:

> “Do you want to cancel? 
> Unsaved data and/or narratives will be lost.”

- Click on the *Yes* button to discard the unsaved changes. *The Case Update* tab remains open.
- Click on the *No* button to keep the focus on the tab without discarding the unsaved changes.

All workers assigned a role in the stage (except the Case Manager, if a Case Planner is assigned) can record information on the *Case Update* tab. Workers must choose to save their entry as “Draft” or “Final.” Choosing to save an entry as “Draft” allows a worker to modify that entry at a later time. Choosing to save as “Final” prohibits further modifications to that entry. At the time the Case Planner is ready to assimilate all of the existing entries, s/he will use the Case Planner Summary functionality to pull the entries together. This functionality is initiated through the *Case Planner Summary* button on the *Case Update* tab.

Individual entries made by all of the workers assigned a role in the stage are retained as long as the FASP is in progress and the Case Planner Summary has not been initiated. Once the Case Planner Summary has been launched, “Draft” entries are no longer modifiable. Workers may print the Family Update portion of the In-Process FASP, which differs from the Approved FASP in that the individual entries made by all workers are included and stamped with the worker’s name, ID number and the date of entry. The Approved FASP includes the Case Planner’s summarization in lieu of the individual entries.

For a list of all the windows the *Case Planner Summary* window can be accessed from, see Appendix J.
Step-by-Step: Recording Case Update with a Program Choice of “Protective”

1. From the Family Update window of a FASP with a Program Choice of “Protective,” click on the Case Update tab.
2. Record any casework activities, family events or changes in services in the Narrative field.
3. Click on the Save as Draft or Save as Final button.

Step-by-Step: Modifying Case Update with a Program Choice of “Protective”

1. From the Family Update window of a FASP with a Program Choice of “Protective,” click on the Case Update tab.
2. From the Narrative grid, select the narrative you want to change. The narrative displays in the Narrative field.
3. Record any changes to casework activities, family events or changes in services in the Narrative field.
4. Click on the Save as Draft or Save as Final button.

Case Update: View B

If the FASP is Initial, the Program Choice of “Protective” has not been selected and critical concerns/emergency issues were identified during the Family Services Intake (FSI), use this tab to record specific actions taken in response to emergency issues, select Emergency Services Provided, and record whether behavioral concerns have been resolved. To review the BCFI, click on the View BCFI button (or access the BCFI through the Family Services Intake for this case). That window will be view-only. If this is a Comprehensive or Reassessment FASP, View A displays.
The following fields can be viewed and/or modified from this window:

**Specific Actions**
If one or more critical concerns/issues requiring emergency services or intervention were selected in the Behavioral Concerns and Family Issues (BCFI) that was completed in the FSI stage, use this field to view and record a narrative documenting the specific emergency actions taken and/or services provided to address these concerns/issues.

Examples may include emergency intervention with a suicidal child or referral to a food pantry. Also include details about any emergency services that were provided at Intake, such as emergency housing provided to the family. It is necessary to complete this section prior to submission of the Initial FASP for approval.

This **Narrative** field holds unlimited characters and any worker with a role in the stage (except the Case Manager, if a Case Planner exists) can record information.

**Emergency Services Provided**
If one or more critical concerns/issues requiring emergency services or intervention were selected in the BCFI and Specific Actions were recorded, document any emergency services provided to the family by selecting from the check list of services. Include all of the services listed in the Specific Actions section of the tab. This checklist is only available within the FASP if:

- the FASP is Initial;
- a Program Choice of “Protective” is not present;
- one or more of the critical concerns/issues requiring emergency services have been selected in the FSI.

The following is the list of emergency services from which to choose:

- Adoption Surrender
- Crisis Response Services
- Detox Services
- Domestic Violence Services
- Emergency Food, Cash, Goods
- Emergency Health Related Services
- Emergency Housing
- Emergency Mental Health Services/Evaluation
- Family Preservation Services (Intensive Home based)
- Foster Care Services for Children
- Order of Protection
- Respite Care
- Other (specify in narrative)

Any worker with a role (except the Case Manager if a Case Planner exists) in the stage can modify what is selected from the list. No emergency services are selected the first time you access the **Case Update** tab.
**Resolved Issues**

If one or more concerns/issues requiring emergency services or interventions were selected in the BCFI, this field provides you with two radio buttons, which you will use to “Yes” or “No” to the following question:

> “Were the previously identified behavioral concerns and/or family issues sufficiently resolved as a result of the emergency services taken?”

This information can be modified by any worker with a role in the stage (except the Case Manager, if a Case Planner is assigned).

**Unresolved Issues**

If you selected the No radio button in the **Resolved Issues** field, you are indicating that all issues were not resolved as a result of emergency services. A narrative is required to document what remains unresolved, the barriers to resolving the issue(s), and what further steps are necessary or in process to address these issues. If you selected the Yes radio button in the **Resolved Issues** field, indicating there are no unresolved issues, you have the option of recording how these issues were resolved through emergency services.

The **Unresolved Issues** field is a narrative field that holds up to 4,000 characters. Any worker with a role in the stage can record information there, except the Case Manager if a Case Planner exists.

The following buttons display along the bottom of the tab:

**Spell Check**

This button performs the Spell Check function on all narratives on the tab. This button is disabled until a narrative is recorded.

**View BCFI**

This button opens the view-only Behavioral Concerns and Family Issues (BCFI) window, recorded during the Family Services Intake. This button is helpful when documenting information in the Specific Actions, Emergency Services Provided, Resolved Issues and Record Unresolved Issues fields. You can use the View BCFI button to refer back to the concerns and/or issues requiring emergency services or intervention that were selected at Intake. The BCFI is only available for viewing in the Initial FASP and is not modifiable.

**Save**

This button saves the work recorded on (or changes made to) the Case Update tab and the focus remains on that tab.
Cancel  Clicking on the **Cancel** button discards any unsaved data. The following message displays:

> “Do you want to cancel? Unsaved data and/or narratives will be lost.”

- Click on the **Yes** button to discard the unsaved changes. The **Case Update** tab remains open.
- Click on the **No** button to leave the focus on the tab without discarding the unsaved changes.

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### Step-by-Step: Recording Case Update (Concerns/Emergency Issues Identified)

1. On the **Case Update** tab, record in the **Specific Actions Narrative** field any emergency actions taken to address the concerns and issues identified at Intake.
2. Click on the drop-down arrow for the **Emergency Services Provided** field and select from the resulting list any emergency services that were put in place.
3. In the **Unresolved Issues** field, click on either the **Yes** or **No** radio button. Select “Yes” if all of the noted concerns and/or issues were resolved; select “No” if they have not been resolved.
4. If you select the **No** radio button in the **Unresolved Issues** field, record a narrative in the **Record Unresolved Issues** field explaining what issues and/or concerns remain unresolved. If you selected the **Yes** radio button in the **Unresolved Issues** field, you are not required to record a narrative.
5. Click on the **Save** button.
Case Update: View C
If the FASP is an Initial and the Program Choice of “Protective” is not selected and no Critical Concerns/Issues were identified during the Family Services Intake (FSI), use this tab to record key family or child events, services and casework activities. It is also possible to navigate from this window to the Behavioral Concerns and Family Issues information that was entered during the FSI.

The grid in the upper half of the window contains three system-populated fields:

- **Date of Entry**: The date the narrative was recorded
- **Author**: The system-populated name (based on Person ID) of the worker recording the entry in CONNECTIONS
- **Status**: The status of the narrative entry (“Final” or “Draft”)

The **Narrative** field holds an unlimited number of characters and features the Text Control tools common to the other tabs. Summarize the key family events, services and casework activities since the last FASP (or since the opening of the case, if this is the Initial FASP) in this field.
The bottom of the tab contains the following buttons:

**Case Planner Summary** (with **Launched** check box)

This button launches the Case Planner Summary functionality. The Case Planner integrates the entries made by assigned workers into a single, coherent narrative that summarizes the various activities and events that have occurred with all the family members. The **Launched** check box is system-filled once the Case Planner has launched the Case Planner Summary. Once this check box is selected, no other entries can be recorded on this window.

For a list of all the windows the Case Planner Summary window can be accessed from, see Appendix J.

**View BCFI**

This opens the view-only *Behavioral Concerns and Family Issues* (BCFI) window, recorded during the Family Services Intake. This button is helpful when documenting information in the **Specific Actions**, **Emergency Services Provided**, **Resolved Issues** and **Record Unresolved Issues** fields. You can use the **View BCFI** button to refer back to the concerns and/or issues requiring emergency services or intervention that were selected at Intake. The button is only available for viewing in the Initial FASP; the BCFI is not modifiable.

**Clear**

This button enables if an entry is selected on the grid. Clicking on the button clears the **Narrative** field to permit another entry.

**Save as Draft**

This button enables after a modification has occurred. Work is saved in “Draft” status and only the author may modify it. The entry can be modified until the Case Planner initiates the Case Planner Summary.

**Save as Final**

This button enables after a modification has occurred. Work is saved in “Final” status and therefore cannot be modified.

**Cancel**

Clicking on the **Cancel** button discards any unsaved data. The following message displays:

“Do you want to cancel?
*Unsaved data and/or narratives will be lost.*”

- Click on the **Yes** button to discard the unsaved changes. The **Case Update** tab remains open.
- Click on the **No** button to keep the focus on the tab without discarding the unsaved changes.

All workers assigned a role in the stage (except the Case Manager, if a Case Planner exists) can record information on the **Case Update** tab. Workers must choose to save their entry as “Draft” or “Final.” Saving an entry as “Draft” allows a worker to modify that entry at a later time; saving as “Final” prohibits further modifications. At the time the Case Planner is ready to integrate all of the existing entries, s/he will use the Case Planner Summary functionality to pull the entries together. This functionality is initiated through the **Case Planner Summary** button on the **Case Update** tab.

For a list of all the windows the Case Planner Summary window can be accessed from, see Appendix J.
Step-by-Step: Recording Case Update (No Critical Concerns/Emergency Issues Identified)

1. On the Case Update tab, record any casework activities, family events or changes in services in the Narrative field.

2. Click on the View BCFI button to review information recorded in the BCFI at Intake. The BCFI window opens in view-only mode. The View BCFI button displays only for the Initial FASP.

3. Once you have reviewed the information, click on the Cancel button.

4. Click on the Save as Draft or Save as Final button.

Step-by-Step: Modifying Case Update (No Critical Concerns/Emergency Issues Identified)

1. On the Case Update tab, select from the Narrative grid the narrative you want to change. The narrative displays in the Narrative field.

2. Record any changes to casework activities, family events or changes in services in the Narrative field.

3. Click on the Save as Draft or Save as Final button.

Case Planner Summary

In any Family Services Stage, there may be several workers who are assigned roles. This might include a Case Manager, Case Planner, a Caseworker or a CPS Worker/Monitor.

An FSS can have only one Case Planner at any given time and s/he may be either a Local District or Voluntary Agency staff member. The Case Planner is responsible for coordinating work with other assigned workers, as well as completing and submitting the FASP in a timely fashion. S/he reviews the work of all other workers who have contributed to the FASP and revises that information to provide an accurate, clear and coherent summary.

The Case Planner submits the FASP to the Case Manager for approval and alerts the CPS Worker/Monitor in circumstances where that individual needs to complete portions of or review the FASP.

The Case Planner Summary functionality is available on several windows within each FASP. This functionality allows the Case Planner to integrate the contributions to case updates and case assessments made by assigned workers. Only the Case Planner can launch the Case Planner Summary. All other workers with a role in the stage can modify their “Draft” entries until the Case Planner initiates the Case Planner Summary. Once it has been launched, these workers can access the Case Planner Summary in view-only mode.
The Case Planner Summary does not eliminate the need for all workers involved with a family (i.e., Caseworkers and the Case Planner) to discuss events and share their thoughts on assessments. Each worker has a perspective that contributes to building a shared, holistic understanding of the family, including the problems they face, the strengths and needs of individual members, and the factors that contribute to maintaining those strengths and needs. The assessment protocol is designed to guide workers in reaching a conclusion about what really needs to change in order to activate existing strengths and stop harmful behavior or conditions from continuing. The system supports each member of the family’s casework team in contributing to that assessment and analysis process; it is the Case Planner who is ultimately responsible for integrating the team’s best ideas into the final FASP.

The Case Planner Summary must be completed in order to submit the FASP for approval. The Case Planner can complete the Case Planner Summary in either of two ways: S/he may use the Case Planner Summary to integrate written contributions of other Caseworkers with his/her own, or record the Case Update (or Assessment Analysis) after discussion with other workers. Prior to launching the FASP, the Case Planner should communicate to other Caseworkers regarding their assessment conclusions so that all relevant aspects of family and child strengths and needs are documented, and, to the extent possible, that the Case Planner and Caseworker(s) have agreed on the underlying conditions and behaviors that need to improve or change. This will increase the likelihood that the contributions to the FASP Assessment Analysis by the Caseworker will be able to be incorporated easily into the Case Planner Summary and that the Analysis will address all important family needs in a holistic way.

The Case Planner Summary functionality appears in six places within each FASP:

- **Case Update tab**
  - (Family Update node)
  - Workers use the Case Update tab to record a summary of the key family or child events, as well as services and casework activities completed during the period leading up to the FASP that is in progress. For the Initial FASP, this tab is customized based on Program Choice and whether critical concerns were identified and emergency services were provided to the family prior to opening the FSS in a non-CPS case. If the FSS was created from an Indicated CPS Investigation, the protective version of the Case Update tab displays. The Case Planner Summary functionality is available in two of the three presentations. The first is when the FASP is an Initial and the Program Choice is “Protective” or the FASP is Comprehensive or Reassessment, regardless of the Program Choice (View A). The second is when the FASP is Initial, the Program Choice is not “Protective” and there were no critical concerns or emergency issues identified at Intake (View C). The Case Planner Summary window that displays follows the general format mentioned below.

- **Family View/Child View tab**
  - (Assessment Analysis node)
  - Use this tab to document the family’s (or child’s) view and what they perceive to be their most pressing needs and concerns. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.
Behavioral Concerns and Contributing Factors tab (Assessment Analysis node)

Use this tab to document (based on the assessment of safety, risk and family functioning) what factors and underlying conditions interact to sustain the behaviors or conditions that warrant child welfare intervention. Integrate the observations and assessments that have been made to determine how these various elements combine and contribute to the need for intervention. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

Strengths tab (Assessment Analysis node)

For an FSS/CWS, use the Strengths tab to identify and focus on the strengths that exist within the family unit and the community that support the family’s ability to meet the child(ren)’s needs for safety, permanency and well-being. For an FSS/CCR, the focus is on the child’s strengths. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

Needed Improvements/Changes tab (Assessment Analysis node)

This tab supports the Case Planner in determining, based on the answers to the Assessment Analysis questions, what improvements and/or changes need to be made to the family’s or child’s situation and/or behavior to promote the child(ren)’s safety and well-being. Although the Case Planner Summary button and Launched check box display on this tab, the Case Planner Summary functionality that exists here is significantly different than on other tabs. Instead of a Narrative field, the Case Planner brings together and summarizes into a list format all of the “Draft” entries made by other workers.

Family Involvement button (Service Plan node)

The purpose of this process is to enable the worker to document the efforts that s/he has taken to involve the family in developing the Service Plan and the actual input and involvement the family has had in the Service Plan’s creation. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

The Case Planner Summary is accessed by clicking on the Case Planner Summary button. This button is displayed in conjunction with a Launched check box. If the check box is populated, this indicates to workers that the Case Planner Summary has been launched and the entries are no longer modifiable. The check box is system-populated once the Case Planner launches and saves the information recorded on the Case Planner Summary window.
The Case Planner Summary Window

When ready to complete the FASP, the Case Planner clicks on the **Case Planner Summary** button on one of the above-mentioned tabs. The **Case Planner Summary** window opens and displays a **Narrative** field that is populated with the individual entries for that window that have been recorded by other workers assigned to the stage. The **Narrative** field holds an unlimited amount of text and features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check.

The following buttons display at the bottom of the **Case Planner Summary** window:

- **Save**
  
  Clicking on this button saves work that has been recorded or changes that have been made on the **Case Planner Summary** window.

- **Cancel**
  
  Clicking on the **Cancel** button discards any unsaved data. The following message displays:

  "Do you want to cancel? Unsaved data and/or narratives will be lost."

  - Click on the **Yes** button to discard the unsaved changes.
  - Click on the **No** button to leave the window open **without** discarding the unsaved changes.

- **Close**
  
  Clicking on the **Close** button closes the **Case Planner Summary** window and displays the tab from which it was accessed. If all of the changes have not been saved prior to clicking on the **Close** button, the following message displays:

  "Do you want to exit? Unsaved data and/or narratives will be lost."

  - Click on the **Yes** button to discard the unsaved changes.
The Case Planner Summary window closes and the previous window displays.

- Click on the No button to return to the Case Planner Summary window with the unsaved changes displayed.

In the Narrative field, the Case Planner summarizes the information recorded by the individual workers into a comprehensive narrative. This can be done by reorganizing (using Cut/Paste) and/or deleting existing entries as well as adding new entries. It is important for the Case Planner to create a narrative that captures all relevant information into a cohesive whole; once the Case Planner Summary is launched, the Case Planner becomes the author of the entry. At that point, the other workers assigned to the stage may no longer add or modify “Draft” or “Final” entries. Individual entries made by all of the workers are retained as long as the FASP is In Process. Only the Case Planner Summary, not the individual entries, is submitted to the Case Manager for approval. The individual entries can still be viewed in the actual FSS windows until the FASP is approved. Once the FASP is approved, “Draft” entries are no longer available. Workers may print a specific portion of the In-Process FASP by selecting the appropriate component’s command (e.g., Family Update) from the Reports menu on the Family Assessment and Service Plan window of the FSS. The In-Process FASP differs from the “Final” FASP in that the individual entries made by all workers are included and stamped with each worker’s name and date of entry. The “Final” FASP includes the Case Planner’s summarization in lieu of the individual entries. With the exception of the Needed Improvements/Changes narrative(s), the Case Planner summaries are not carried forward to subsequent FASPs.

Step-by-Step: Recording the Case Planner Summary

1. Click on the Case Planner Summary button. 
   The Case Planner Summary window opens and displays the entries recorded by assigned workers for the specific window.

2. Record a narrative that integrates the individual entries made by other workers with your own into a coherent summary. You can also modify or delete the existing entries. 
   You can change the order of entries and modify them by using the cut and paste functionality.

3. Click on the Save button.
FASP Legal Activity

The **FASP Legal Activity** tab supports the capture and display of information about any legal activity that pertains to the current FSS/CWS or FSS/CCR stage. The information recorded on this window includes the date, the type of court venue (e.g., Family Court), legal event (e.g., Petition Filed), type of legal event (e.g., Article 10 – Abuse/Neglect), children involved and court outcome (e.g., Court Ordered Supervision). Since this tab provides an ongoing record of any and all court activities in which the family or child(ren) are involved, it provides a central location in the electronic case record for this information. Any worker with a role in the stage, except the Case Manager if a Case Planner exists, can view or record information on this tab for all Initial, Comprehensive and Reassessment FASPs. If no court-related or legal activity has occurred, workers need only indicate this on the tab. In this instance, no other fields in the **FASP Legal Activity** tab are required. Legal activities must still be recorded in CCRS at this time.

For an FSS/CWS stage, the question presented is:

> “Has there been any court related or legal activity since the last Family Assessment and Service Plan (or opening of the case if initial FASP)?”

For an FSS/CCR stage, the question presented is:

> “Has there been any court related or legal activity since the last Family Assessment and Service Plan?”

The wording for the FSS/CCR is different to avoid confusion by referring to the “opening of the case.” Select either the **Yes** or **No** radio button to answer the question; if you select “Yes,” you must complete the remaining fields.
The top section of the tab is a grid comprised of the following fields:

**Legal Event Date**
This field displays the date the legal activity took place. This cannot be a future date. Workers record the date directly into this field.

**Court Type**
This field contains a drop-down list of Court Types:
- Family Court
- Supreme Court
- Surrogate Court

**Legal Event**
This field contains a drop-down list of Legal Events:
- Agreement Signed
- Anticipated Discharge
- Appeal
- Hearing
- Petition Filed
- Removal
- TPR Petition Not Required

**Legal Type**
This field contains a drop-down list of Legal Types, such as “Article 10 – Abuse/Neglect” or “Temporary Removal with Consent - 1021.”

**Children Involved**
For FSS/CWS stages, select from a drop-down list of tracked children for the selected stage. A choice of “all children” is also supported. For an FSS/CCR, the child’s name populates from the Stage Composition, since there is only one individual in the stage.

**Court Outcome**
This field contains a drop-down menu of Court Outcomes, such as “Adjourned in Contemplation of Dismissal” or “Article 10 Remand.”

Below the grid is a Narrative field that holds up to 4,000 characters. Use this field to explain how the legal activity will affect the service plan or the child’s Permanency Planning Goal. This narrative is not required, but it is recommended in situations where legal action will affect the service plan or permanency goal. Beneath this field is a Spell Check button for use in the Narrative. The Save and Cancel buttons, which display at the bottom of the tab, function on the FASP Legal Activity tab as they do on the Case Update tab.
Step-by-Step: Recording FASP Legal Activity

1. On the FASP Legal Activity tab, click on the Yes or No radio button, as applicable, to indicate whether there has been any legal activity since the last FASP or opening of the case. 
   
   *If you choose “Yes,” continue filling out the information on the tab. If you choose “No,” skip to Step 10.*

2. In the Legal Event Date field, record the date in MM/DD/YYYY format (e.g., 11/02/2004).

3. In the Court Type field, click on the drop-down arrow and select from the resulting list.

4. In the Legal Event field, click on the drop-down arrow and select from the resulting list.

5. In the Legal Type field, click on the drop-down arrow and select from the resulting list.

6. Click in the Children Involved field and choose from the drop-down list of all the tracked children for the stage. 
   *If this is FSS/CCR, the child’s name will be populated automatically from the Stage Composition, since there is only one child.*

7. In the Court Outcome field, click on the drop-down arrow and select from the resulting list.

8. Enter a narrative in the Narrative field.

9. Click on the Save button. 
   *The following message displays: “Changes have been saved.”*

10. Click on the OK button.
Module 11: Strengths, Needs and Risks Assessment

The Strengths, Needs and Risks component of the Family Assessment and Service Plan (FASP) is an assessment protocol designed to focus the Case Planner and/or Caseworker(s) on the identification and documentation of individual and family strengths, needs and risks. The Strengths, Needs and Risks (SNR) scales are grouped into three sub-categories: Family scales, Parent/Caretaker scales and Child scales. Scale responses are designed to identify and capture, in descending order, individual/family strengths, attributes, service needs, and/or areas of risk.

The identification of individual/family strengths is essential to the successful development of the Service Plan and the effective engagement of family members in this process.

The SNR scales also help identify areas of individual/family functioning that may indicate a need for services and/or referrals to community resources. Identified service needs and/or referrals are then incorporated into the Service Plan accordingly.

The responses to embedded risk scales will map back to the Comprehensive/Reassessment FASP’s Risk Assessment Profile (RAP). This means that the responses you record for certain Family, Parent/Caretaker and Child scales will populate corresponding fields in the RAP for Comprehensive and Reassessment FASPs. This is a system efficiency designed specifically for Family Services cases containing a Program Choice of “Protective.”

The Strengths, Needs and Risks Assessment is only one component of the full Family Assessment and Service Plan (FASP). The SNR Assessment, Safety Assessment and Risk Assessment formulate the basis for the Assessment Analysis, along with information contained in additional assessment protocols that are enabled based on the Program Choice, Permanency Planning Goal and/or age of child(ren) or are optional. For example, Foster Care Issues will enable for all children placed in foster care or alternative placement and who have a Program Choice of “Placement.”

Each category of scales is represented by a sub-node on the FASP Tree:

**Family Scales**

Workers use the Family Scales to assess the family functioning of each household. Several key areas of family functioning are assessed to identify the existence of strengths, needs and risks. Family scales are not completed in the Initial FASP, but are completed for both the Comprehensive and Reassessment FASPs. A household is defined by physical residence. One household is created for each primary residence in the Stage Composition.

**Parent/Caretaker Scales**

Workers use the Parent/Caretaker Scales to assess the parents or caretakers in several key areas. A parent or caretaker must be identified as one of the following: Primary Caretaker; Secondary Caretaker; a person who has a relationship of “Mother” or “Father” in the relationship matrix; or a person who is 18 years of age or older and does not have an active PPG (e.g., a 19-year-old brother). Parent/Caretaker Scales must be completed for the Primary Caretaker and Secondary Caretaker (if one exists); these scales are optional for other members of the Stage Composition.
Child Scales

Workers use the Child Scales to assess each individual child in several key areas. A child is defined as an individual under 18 years of age with a relationship of “Child,” “Step-child,” “Grandchild,” “Niece/Nephew” or “Ward” within the Family Relationship Matrix, or an individual who is 18-21 years of age with an active Permanency Planning Goal (PPG) (currently a tracked child). A Child Scale is completed for each tracked child.

By completing the Family, Parent/Caretaker and Child Scales, workers document an assessment of overall individual and family functioning. This component of the FASP should be completed in partnership with the family during each FASP cycle. The Family, Parent/Caretaker, and Child scales are part of the ongoing assessment of current individual and family functioning, identified strengths, progress made and areas that require continued services and strengthening. Individual Child scales are completed by the worker who is Associated to that specific child. The Family Strengths, Needs and Risks scales are only completed for an FSS/CWS stage; this set of scales is not completed for FSS/CCR stages.

In order to create, modify and view the Family Strengths, Needs and Risks scales and associated comments, the worker must have a role in the stage. Each role is assigned specific rights:

- **Case Manager**
  - View rights to all categories of scales (unless there is no Case Planner assigned to the stage)

- **Case Planner**
  - View, Create and Modify rights to all categories of scales

- **Caseworker**
  - View rights to all categories of scales
  - Create and Modify rights to the Family Scales and the Parent/Caretaker Scales
  - Create and Modify rights to the Child Scales, if Associated to the child

- **CPS Worker/Monitor**
  - View rights to all categories of scales
  - Create and Modify rights to the Family Scales and the Parent/Caretaker Scales
  - No rights to Create or Modify the child category of scales, unless the CPS Worker/Monitor is Associated to a specific child or children

Workers access the Family, Parent/Caretaker and Child Scales from the **Family Assessment and Service Plan** tab on the **Family Services Stage** window.
Step-by-Step: Accessing the Strengths, Needs and Risks Scales

1. From the FASP window, click on the ‘+’ next to the desired FASP on the FASP Tree. The selected FASP displays several nodes and sub-nodes.

2. Click on the ‘+’ for the Family Assessment node.

3. Click on the ‘+’ for the Strengths, Needs and Risks sub-node.

4. Select a Family, Child, or Parent/Caretaker scale to complete. Family scales are not available if you selected an Initial FASP in Step 1.

The Strengths, Needs and Risks Windows

Each Strengths, Needs and Risks window consists of a set of scales that relate to individuals in the stage, depending on the scale that was selected. The window contains the following columns:

- **Scale**: This column displays the Family, Parent/Caretaker or Child list of scales. A worker must record a response to each scale before the Case Planner can submit the FASP for approval. This column cannot be sorted.

- **Rating**: Each scale in the Comprehensive and Reassessment FASPs presents four responses. These responses display descriptions of the status of the area being assessed, ranging from a strength/attribute to an area of considerable need. Select the...
response that most closely describes individual or family functioning in that area.

Only the Initial FASP contains a fifth option: “Insufficient Information.” This additional option is available because it is possible that the Initial FASP period and/or relationship did not allow the Caseworker to gather sufficient information to make an informed decision in a particular area.

A column displays for each household within the stage. These scales are household-specific (assessing the household as a whole) and should not be confused with the Parent/Caretaker scales. In order to identify the households, at the top of each column, the first name and age displays for the following individuals:

- The Primary Caretaker
- The Secondary Caretaker (if residing at a different address)
- The eldest person living at a different address from that of the Primary Caretaker or Secondary Caretaker

If more than one household exists, an All column also displays. When applicable, the worker can select the All column to apply the same response to all of the households. Household columns are set when the FASP is launched; they do not regenerate each time the window is opened. If there is a need to regenerate these columns, based on movement within households or an additional household being added after the FASP has been launched, the worker can “Realign” the households. If the households are “Realigned,” the Family Scales are reinitialized; all previously recorded responses for the Family Scales are deleted and a column for each distinct address is generated.

A column displays for each child listed within a stage. The child’s first name, age and a tracked child indicator (if applicable) display at the top of each column. For tracked children, this indicator reads “Tracked.” The All column displays in the grid, providing the ability to apply the same response to all children listed, if applicable. Only the Case Planner or the Caseworker who is Associated to a particular child can complete the scales for that tracked child.

A column displays for each caretaker in the stage. The first name and age display at the top of each column for the following individuals:

- The Primary Caretaker
- The Secondary Caretaker
- An individual with a relationship of “Mother” or “Father” in the Family Relationship Matrix
- An individual who is older than 18 years of age and does not have an active PPG

The Primary Caretaker column displays an indicator of “PC”, “SC”
displays for a Secondary Caretaker. If more than one parent/caretaker exists, the All column displays; the worker can select the check box in this column to apply the same response for that particular scale to all parents and caretakers.

These columns are updated each time the window is opened.

The following buttons display at the bottom of the window:

- **Comments**
  
  Clicking on the Comments button opens the Comments window associated with a particular set of scales, where the worker can record comments or view existing comments. Comments should be recorded to support the Caseworker's assessment of functioning in that respective area. The Comments button is disabled until information has been recorded and saved on the corresponding Strengths, Needs and Risks window.

- **Save**
  
  Clicking on the Save button saves work that the worker recorded on the window and closes the window.

- **Cancel**
  
  Clicking on the Cancel button displays the following message:

  "Do you want to Cancel? Unsaved data and/or narrative(s) will be lost."

  - Click on the Yes button to discard all changes made since the last save and close the window.
  - Click on the No button to close the message without discarding the changes; the window remains open and all changes remain pending.

- **Close**
  
  Clicking on the Close button closes the Family Strengths, Needs and Risks window. If the worker recorded information but has not yet saved it, the following message displays:

  "Do you want to exit? Unsaved data and/or narrative(s) will be lost."

  - Click on the Yes button to close the window and discard any unsaved changes.
  - Click on the No button to keep the window open; all changes remain pending.
Strengths, Needs and Risks Scales: Family ("Family Scales")

The Family Strengths, Needs and Risks window is represented by a sub-node on the FASP Tree and contains the scales specific to the family, delineated by household. The Family Scales can be viewed when a Comprehensive or Reassessment FASP is being completed. Any worker with a role in the stage can access this node and view all of the scales. The Family Scales consist of four possible responses; one and only one of these responses can be selected for each corresponding household within each scale. If the rating is appropriate for all of the households listed, the worker can select the All check box. The Family Scales can be modified by any worker with a role in the stage (except the Case Manager) until the FASP has been approved. If the FASP has been submitted for approval (PEND) and a worker attempts to access the scales, the following message displays:

“You are authorized to access the window in browse only mode.”

If the worker is the Case Planner (or the Case Manager, if no Case Planner is assigned), the following message displays:

“Saving will invalidate the pending approval. Continue in modify mode?”
The window displays the name representing the household for which the scales are being completed:

- The name of the Primary Caretaker displays as the title for the household in which the Primary Caretaker resides.
- The Secondary Caretaker’s name displays as a second household if the Secondary Caretaker lives at a different address than the Primary Caretaker.
- If a household exists that contains neither the Primary Caretaker nor Secondary Caretaker, the name of the eldest person living at the address displays as the title of the scale.

The Family Scales must be completed for the Primary Caretaker’s household before the Case Planner can submit the FASP for approval. Scales can also be completed for the Secondary Caretaker’s household, if applicable, and households containing neither the Primary nor Secondary Caretaker. The completion of the scales for all other identified households is optional, but it is recommended if any tracked children reside in that household.

When the worker selects the Family node (which is available only for Comprehensive and Reassessment FASPs) from the FASP Tree, the Family Strengths, Needs and Risks window displays. This window contains a set of relevant scales to be used in assessing the strengths, needs and risks for each family/household. (See Appendix F.) Alternating scales are shaded in the window to help the worker differentiate between the scales.

### Step-by-Step: Rating the Family Scale

1. From the Strengths, Needs and Risks sub-node, select Family.
   *The Family Strengths, Needs and Risks window displays. Family Scales are not available if you selected the Initial FASP.*

2. Complete each scale for each household by clicking on the corresponding check boxes in each respective household’s column.
   *A corresponding response is assigned to each scale based on the selection. If a response is appropriate for all of the households, you can select the All check box.*

3. Click on the Save button.
   *The Comments button enables.*

4. Click on the Comments button.
   *The Family Strengths, Needs and Risks Comments window displays.*

5. Click on the drop-down arrow for the Please Select Family Unit These Comments Apply To field and select the Family Unit to whom the comments apply.
   *You can also select the Apply to all in list check box if the comments apply to all of the Family Units. If there is only one Family Unit, the drop-down list is disabled.*

6. Record comments, as necessary. (See “Recording Comments” on page 11-12.)

7. Click on the Save button.
   *The Modified by and Date fields are system-populated. The Comments window remains open, allowing you to record further comments (e.g., for another Family Unit).*
8. Click on the Close button.
The Family Strengths, Needs and Risks window displays.

9. Click on the Close button.
The FASP window displays.

Re-Aligning Households
The Re-Align Households function provides flexibility to help workers record a true assessment of each household. If the household composition changes, workers use the Re-Align Households function to regenerate the columns for each distinct address and reinitialize the Family Scales. This function, which is available from the Options menu, reinitializes the Family Scales based on the current addresses that are indicated as Primary for each person in the stage. The Re-Align Households function can be used at any time during a FASP cycle. Once the Re-Align Households function has been initiated, it clears any Family Scales that have been completed for that FASP. The Re-Align Households function does not affect any Parent/Caretaker Scales or Child Scales that have been completed for that FASP; however, it is important for any Caseworkers who are Associated to one or more specific children - and those Caseworkers completing Parent/Caretaker Scales for that FASP - to reassess their decisions for any completed scales, based on the changes brought about by the re-alignment of the households. Family composition and its relationship to family functioning are applicable to many areas of assessment, such as Parent/Caretaker relationships, child/family relationships, and Parent/Caretaker expectations, supervision, acceptance and/or discipline of children.

Selecting the Re-align Households command displays the following message:

“Re-aligning households will reinitialize the Family Functioning Scales, all ratings will be lost. Do you want to continue?”

- Click on the Yes button to generate a column for each current distinct address. The Family Scales display with blank check boxes; all previously selected responses for the Family Scales are deleted from the database.
- Click on the No button to cancel the re-alignment function; the Family Scales display with the previously selected responses.

Step-by-Step: Re-Aligning Households

1. On the Family Scales window, click on the Options menu and select the Re-Align Households command.
The following message displays:
   “Re-aligning households will reinitialize the Family Functioning Scales, all ratings will be lost. Do you want to continue?”

2. Click on the Yes button.
   All previously recorded scales are cleared.
Strengths, Needs and Risks Scales: Child ("Child Scales")

The Child Strengths, Needs and Risks window is represented by a sub-node on the FASP Tree. Completing the Child Scales enables the worker to record an assessment of the individual child based on strengths, needs and risks.

- The Initial FASP provides five possible responses for each scale; the fifth response always is labeled “Insufficient Information.” Only one response can be selected for each scale and corresponding child.
- The Comprehensive FASP and Reassessment FASP provide four responses for each scale. Only one response can be selected for each scale and corresponding child.

A column displays with the first name, age and tracked child indicator (if applicable) for each child, enabling the worker to record the response for each scale.

For a tracked child (a child with a Program Choice and PPG), only the Case Planner or the Caseworker Associated to that child can complete and maintain that child’s scales and related comments for that specific child. Any worker with a role in the stage can maintain scales for untracked children (children without a PPG), as well as, the Family and Parent/Caretaker scales.

If the rating applies to all of the children listed, the worker can select the All check box. To use the All check box, the worker must be either the Case Planner or be Associated to all the children.

Step-by-Step: Rating the Child Scales

1. From the Strengths, Needs and Risks sub-node, select the Child sub-node. The Child Strengths, Needs and Risks window displays.

2. Complete each scale for each child on the list by clicking on the corresponding check boxes in the Child column(s), as appropriate.
   If more than one child is listed, you can also select a scale’s corresponding check box in the All column to apply the scale rating to all children.

3. Click on the Save button. The Comments button enables.


5. Click on the drop-down arrow for the Please Select Child These Comments Apply To field and select the child to whom the comments apply.
   You can also select the Apply to all in list check box if the comments apply to all of the children.

6. Record comments, as necessary. (See “Recording Comments” on page 11-12.)
7 Click on the **Save** button.  
*The Modified by and Date fields are populated by CONNECTIONS. The Comments window remains open allowing you to record further comments (e.g., for another child).*

8 Click on the **Close** button.  
*The Child Strengths, Needs and Risks window displays.*

9 Click on the **Close** button.  
*The FASP window displays.*

**Completing the Child Scales for an FSS/CCR**

Scales can be completed for a child in an FSS/CCR stage during a Reassessment FASP cycle. All workers with a role in the case can view the scales and comments. Only the Case Planner and the Caseworker (who has been Associated to that specific child) can complete and maintain the scales and related comments. If a worker is *not* Associated to the child, the corresponding child column is disabled when the *Child Strengths, Needs and Risks* window opens. The list of Child Scales for an FSS/CCR stage differs from the list of Child Scales for an FSS/CWS stage. There is no option to select “All” in the Child Scales, because there is never more than one child in an FSS/CCR stage.
Strengths, Needs and Risks Scales: Parent/Caretaker ("Parent/Caretaker Scales")

The Parent/Caretaker Strengths, Needs and Risks window is represented by a sub-node on the FASP Tree. Completing the Parent/Caretaker Scales supports the worker’s need to assess the Parent/Caretaker(s) skills and competencies in several areas and to identify related strengths, needs and risks that may exist.

- The Initial FASP provides five possible responses; the fifth response is always labeled “Insufficient Information.”
- The Comprehensive and Reassessment FASPs provide four possible responses for each scale.

A column labeled with the first name, age and “PC” or “SC” indicator (if applicable) displays for each Parent/Caretaker. The Parent/Caretaker Scales evaluate the strengths and needs of the individuals identified as one of the following:

- The Primary Caretaker
- A Secondary Caretaker
- An individual with a relationship of “Mother” or “Father” in the Family Relationship Matrix
- An individual who is older than 18 years of age and does not have an active PPG

The Parent/Caretaker scales are only available in the FASP for an FSS/CWS stage; they are not available for FSS/CCR stages.

A worker must complete the Parent/Caretaker scales for the identified Primary Caretaker and Secondary Caretaker (if one exists) before the Case Planner can submit the FASP for approval. The completion of this set of scales is optional for all other adults in the stage.

If the rating applies to all of the parents/caregivers, the worker can select the All check box.

Step-by-Step:
Rating the Parent/Caretaker Scales

1. From the Strengths, Needs, and Risks sub-node, select the Parent/Caretaker sub-node.
   The Parent/Caretaker Strengths, Needs and Risks window displays.

2. Complete each scale for each Parent/Caretaker listed by clicking on the corresponding check boxes in the Parent/Caretaker columns. If more than one Parent/Caretaker is listed, you can also select a scale’s corresponding check box in the All column to apply the scale rating to all Parents/Caregivers.

3. Click on the Save button.
   The Comments button enables.

4. Click on the Comments button.
   The Parent/Caretaker Strengths, Needs and Risks Comments window displays.
5 Click on the drop-down arrow for the **Please Select Parent/Caretaker These Comments Apply To** field and select the parent/caretaker to whom the comments apply.

You can also select the **Apply to all in list** check box if the comments apply to all of the parents/caretakers. If there is only one parent/caretaker, the field pre-fills with his/her name and the field is disabled.

6 Record comments, as necessary. (See “Recording Comments” on page 11-11.)

7 Click on the **Save** button.

The **Modified by** and **Date** fields are populated by CONNECTIONS. The Comments window remains open, allowing you to record further comments (e.g., for another parent/caretaker).

8 Click on the **Close** button.

The **Parent/Caretaker Strengths, Needs and Risks** window displays.

9 Click on the **Close** button.

The **FASP** window displays.

**Recording Comments**

Clicking on the **Comments** button in each sub-node opens a window to record narratives supporting the decisions made in each section of the Family, Parent/Caretaker or Child Scales. Comments should contain specific examples of family or individual behavior or family functioning that supports the selected response for a particular scale. Comments are specific to the corresponding scale. For the Parent/Caretaker Scales and Child Scales, comments are person-specific.

The **Comments** window is accessible from any of the scale windows via the **Comments** button. On the **Comments** window, the worker can select the Family Unit, parent/caretaker or child (or all persons listed on the window) to whom the comments are applicable.
The Comments field is disabled until the worker selects a Family Unit, parent/caretaker or child from the list (or until the worker selects the Apply to all in list check box; see below). If only one Family Unit or parent/caretaker exists for the stage, it is auto-selected and the Comments field enables.

The Comments window contains the following fields:

- **Modified By**: Displays the name of the worker who last modified the comment.
- **Date**: Displays the date that worker saved information on the window.
- **Please Select the Family Unit [Person] these Comments Apply To**: Allows the worker to select the person in the Family Unit, a parent/caretaker, or a child for whom comments are being recorded.

The Comments window also contains the Apply to all in list check box, which enables the worker to record one comment and apply it to all households, parent/caretakers, or children (as applicable) listed on the corresponding Strengths, Needs and Risks window. The check box enables only when there are multiple people to select. The window also contains a narrative field for recording or viewing comments.

The following buttons display at the bottom of the window:

- **Spell Check**: Clicking on this button checks the recorded narrative for misspellings.
- **Save**: Clicking on this button saves the work recorded on the window.
- **Cancel**: Clicking on this button displays the following message:

  “Do you want to Cancel? Unsaved data and/or narrative(s) will be lost.”
  - Click on the Yes button to discard all unsaved changes; all other tabs enable.
  - Click on the No button to remain on the window without discarding the changes.

- **Close**: Clicking on the Close button closes the window, displaying the specific Strengths, Needs and Risks window from which the worker opened the Comments window. If the worker recorded comments but has not yet saved that information, the following message displays:

  “Do you want to exit? Unsaved data and/or narrative(s) will be lost.”
  - Click on the Yes button to close the window and discard the changes.
  - Click on the No button to remain on the window; all changes remain pending.
Step-by-Step: 
Recording Comments for the Scales

1 From the Family Scales, Child Scales or Parent/Caretaker Scales window, click on the Comments button.

   The Comments button enables after data has been saved for the scale. The Family, Child, or Parent/Caretaker Strengths, Needs and Risks Comments window displays (based on the scale from which you are accessing the Comments window).

2 To select a single Family Unit, child or parent/caretaker, click on the drop-down arrow for the Please Select Family Unit/Person These Comments Apply To field and select from the resulting list.

   If you are recording comments for the Child Scales, the drop-down list contains the names of all tracked children in the case. If you are not Associated to the selected child (or if you are not the Case Planner), you can select a child from the drop-down list, but the narrative field disables. If only one child exists, the field is pre-filled with that child’s name and the Comments field enables.

   —OR—

   Click on the Apply to all in list check box.

   The Select Family Unit/Person These Comments Apply To field disables.

3 Record comments.

4 Click on the Save button.

   The Modified by and Date fields are populated by CONNECTIONS. The Comments window remains open allowing you to record further comments (e.g., for another Family Unit).

5 Click on the Close button

   The Strengths, Needs and Risks window (from which you accessed the Comments window) displays.
Module 12:
Risk Assessment

The CONNECTIONS Case Management system provides for the continuity of assessing and planning for children’s safety, permanency and well-being. CONNECTIONS supports workers and supervisors to make informed decisions regarding the presence of the risk of future abuse or maltreatment and what needs to be implemented to decrease risk.

The term “at risk” is used to describe a variety of situations in which children or youth are likely to be harmed as a result of abuse or maltreatment. In child welfare cases, “risk” is used to refer to the likelihood that either a child will be abused or maltreated in the future, or the child’s behavior and/or home/community conditions place the child “at risk” for foster care and necessitate preventive services. Children and families under stress may be at risk of abuse or maltreatment, regardless of whether they receive child welfare services as a result of a report of abuse or maltreatment.

Risk Assessment for Child Protective Services Cases

Assessing for risk is intended to assist workers and supervisors in making decisions about whether to provide services to reduce the level of risk. Risk may be reduced with appropriate services, changes in the caretaker’s behavior, and family or community support. Risk Elements identify significant behaviors and circumstances within a family unit that create different levels of risk to the child.

Two protocols for the assessment of risk are supported in New York State’s Case Management Model and by the CONNECTIONS system. The first protocol, the Risk Assessment Profile (RAP), is a tool to predict the likelihood of the reoccurrence of maltreatment. The second protocol, Risk Assessment, is a tool to assess for the presence of risk factors in non-CPS cases.

Any worker assigned as the Case Planner (and anyone who has access to the Case Planner’s Assigned Workload) can create, modify or view both the Risk Assessment and the Risk Assessment Profile (i.e., access to the FSS/CWS stage). Contract Preventive Services and Voluntary Foster Care Agency staff will have no access to current or historical CPS Investigation stages. For all Family Services Stages that are initiated from a CPS Investigation stage, the Safety Assessment completed at the time of the Investigation Conclusion (and the Risk Assessment Profile completed prior to the determination) will be brought forward into the FSS and incorporated into the Initial Family Assessment and Service Plan (FASP), to be available to all Contract Voluntary Foster Care Agency and Preventive Services staff for review.

Structured Decision-Making and the New York State Risk Assessment Profile

The New York State Office of Children and Family Services developed a Structured Decision-Making (SDM) approach that is designed to improve the consistency and effectiveness of each decision point in the child welfare system. This is accomplished through the use of assessment tools that are objective, comprehensive and easy to use. These assessment tools help Child Welfare workers focus on critical case characteristics and issues in a straightforward, simple manner, enabling them to work with families more efficiently and effectively. The assessment instruments are intended to guide and structure decisions, not to replace the professional
judgment of Child Welfare workers. The structured assessments provide workers with a basis for explaining and justifying decisions, while providing administrators with a mechanism for ensuring accountability and quality.

The Risk Assessment Profile (RAP) is a research-based assessment tool that estimates the likelihood of recurrence of child abuse and maltreatment. It is the result of a research study that examined the relationship between family characteristics and subsequent Indicated child abuse and maltreatment reports for actual cases in New York State.

The RAP classifies cases into four risk categories (Low, Moderate, High or Very High) based on the probability of future abuse or maltreatment.

**High Risk and Very High Risk Cases**

- Services are deemed essential in order to decrease the risk of subsequent abuse or maltreatment.
- Services should be targeted to High or Very High risk cases, regardless of the CPS report determination (indicated or unfounded).

**Moderate Risk and Low Risk Cases**

- Families with Moderate or Low risk may have no service needs, or their needs may be appropriately served through informal community resources and/or through existing family strengths, resources or protecting factors within the home.
- The RAP does not replace casework judgment. There may be valid reasons why a service case is opened for a family with Low or Moderate risk.

Based on data from the New York State 2003 RAP validation study, cases which have a current Indicated report and have a “Very High” risk rating have a 71% chance of having another subsequent Indicated report within two years. The table below shows the probability for each level of risk in relation to whether the current report was Indicated or Unfounded:

<table>
<thead>
<tr>
<th>Probability of a Subsequent Indicated Report Within the Next Two Years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Rating</strong></td>
</tr>
<tr>
<td>Low Risk</td>
</tr>
<tr>
<td>Moderate Risk</td>
</tr>
<tr>
<td>High Risk</td>
</tr>
<tr>
<td>Very High Risk</td>
</tr>
</tbody>
</table>

Although no one can predict the exact cases in which subsequent child abuse or maltreatment will occur in the future, the Risk Rating can classify cases by the likelihood of subsequent child abuse or maltreatment; this enables services to be targeted to families with the highest risk. This is especially important in times when service resources are scarce. The intent of the RAP is to identify and provide services to the highest risk families who need intervention and services in order to reduce their risk of subsequent abuse or maltreatment.
RAP in the FASP

Two versions of the Risk Assessment Profile (RAP) exist within the Family Services Stage:

**Initial FASP version**
This version of the RAP is available from the Family Services Stage in the Initial FASP if a Program Choice of “Protective” exists or if the FSS is generated from an Investigation stage.

**Comprehensive or Reassessment FASP version**
In the Comprehensive and all subsequent Reassessment FASPs, the majority of RAP questions are embedded in the Strengths, Needs and Risks scales. By completing the scales, a worker answers most of the Risk Elements contained in the RAP, because the scale responses are carried forward into the RAP for the Comprehensive and Reassessment FASPs. Additional Risk Elements appear on the RAP sub-node and must be completed. These RAP sub-node Risk Elements are a combination of system-generated Risk Elements and responses, non-embedded Risk Elements, and Risk Elements that measure Parent/Caretaker progress.

The Risk Assessment Profile (RAP) is presented for stages with a Program Choice of “Protective.” While workers assess for risk on an ongoing basis through their regular family contacts, the Risk Assessment is documented in each FASP. The RAP is intended to support child welfare decision making and aid in targeting resources to High and Very High risk cases. A complete analysis of safety, risk, family strengths and needs is necessary to make an informed decision regarding how best to support a family. The RAP plays an important role in that overall assessment of family functioning and the decision-making process by identifying and targeting areas where risk needs to be reduced.

In the Initial FASP, the RAP has the same presentation as in the CPS Investigation stage; RAP case-level information is shared between the FASP and the corresponding active Investigation stage. (See “Case Level Information” on page 12-21.)

For all Family Services Stages that are initiated from a CPS Investigation stage, the Safety Assessment completed at the time of the Investigation Conclusion (and the Risk Assessment Profile completed prior to the determination) will be brought forward into the FSS and incorporated into the Initial Family Assessment and Service Plan (FASP), to be available to all Contract Voluntary Foster Care Agency and Preventive Services staff for review.

Workers can view recorded responses to the embedded risk scales by clicking on the **Mapped Risk** button. Using the combination of Mapped Risk, non-embedded Risk Elements and system-generated responses, workers can assess the risk of future abuse or maltreatment and determine if the case should remain open.
The Comprehensive or Reassessment FASPs are accessed from the **Family Assessment and Service Plan** tab by selecting the **Comprehensive** or **Reassessment** node, respectively, in the FASP tree. The **Risk Assessment Profile** sub-node displays in the FASP tree for Initial, Comprehensive and Reassessment FASPs if a Program Choice of “Protective” is selected.

The RAP (for Initial, Comprehensive and Reassessment FASPs) is completed (created, modified or viewed) by the Case Planner or the CPS Worker/Monitor.

**The Risk Assessment Profile**

The Risk Assessment Profile (RAP) is required in all FASPs (i.e., Initial, Comprehensive and Reassessment) when the Program Choice for the stage is “Protective.” If a Program Choice of “Protective” is selected, the RAP displays and must be completed within the Initial FASP. The version of the RAP in the Initial FASP differs from the RAP in the Comprehensive and Reassessment FASPs. (See the “The Comprehensive and Reassessment RAP” on page 12-15.)
The RAP that is presented in the Initial FASP is very similar to the RAP presented in an Investigation stage. The Initial FASP Risk Assessment Profile window displays the Risk Elements and associated comments, Preliminary Risk Score, Preliminary Risk Rating and Final Risk Rating. Data recorded less than 180 days since FASP generation is system-generated from the Child Protective Record Summary (CPRS), unless the caretakers have been changed.

The display of the designated Primary Caretaker and Secondary Caretaker at the top of the window is view-only. Caretakers are pre-filled from the Stage Composition tab in the FSS; this is why it is important when adding/relating people based on Person Search results, that individuals are related correctly (i.e., you are confident, based on that data, that this a true person match). If the wrong person is related to a Person ID, inaccurate case information pre-fills in the FASP. If any changes are made to the Primary or Secondary Caretaker (on the Stage Composition tab), RAP responses are deleted.
### Risk Elements
(For Risk Element definitions, refer to Appendix H1.)

1. Total prior reports for adults and children in RAP family unit†
2. Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the current report
3. Child(ren) under one year old in RAP family unit†
4. Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing
5. Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet
6. Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors
7. Caretaker is a perpetrator of, or victim of, domestic violence, or has serious conflicts with other adults
8. Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities
9. Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities
10. Caretaker(s) has a serious mental health problem
11. Caretaker(s) has very limited cognitive skills
12. Caretaker(s) has a debilitating physical illness or physical disability
13. Caretaker(s) has and applies realistic expectations of all the children
14. Caretaker(s) always or usually recognizes and attends to the needs of all the children
15. Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker

†Indicates a system-generated field; the worker can modify the value in this field.
Risk Elements
The RAP contains 15 Risk Elements, all of which must be completed: the first six Risk Elements pertain to the RAP Family Unit; the remaining Risk Elements pertain specifically to the Primary and Secondary Caretaker(s). The worker must select either the Yes or No radio button for Risk Elements 2-6. (If a Secondary Caretaker is identified, the worker must select either the Yes or No radio button for the Primary and Secondary Caretakers for Risk Elements 7-15.)

The responses to Risk Elements 1 and 3 are system-generated the first time a RAP is opened for a particular stage (these system-generated responses are modifiable):

- **Risk Element 1** reflects the number of prior reports associated with the adults and children in the RAP family unit. This Risk Element calculation does not include duplicate (DUP) stages, consolidated investigations or reports where all of the family unit members had No Role.

CONNECTIONS searches for reports that include the Person ID for any individual in the RAP Family Unit.

In order for CONNECTIONS to populate a response for **Risk Element 1**, the number of prior Indicated reports is calculated as the number of existing indicated and approved investigation stages in which:

(a) an adult in the RAP family unit was a **Confirmed Subject** (regardless of report type); or

(b) a child in the RAP family unit was a **Confirmed Maltreated child and/or** **Confirmed Abused child** in an Indicated report of suspected child abuse and/or maltreatment.

This calculation includes prior Indicated reports where an adult in the RAP family unit was a Subject, regardless of whether or not the children who were abused/maltreated in the prior report are members of the current RAP family unit. This calculation also includes prior Indicated reports where a child in the RAP family unit was abused/maltreated by an adult who is not part of the current RAP family unit. All persons in the RAP family unit are included in the calculation, not just the Primary and Secondary Caretakers of the children alleged to be abused/maltreated. It does not include prior reports in which an adult in the current RAP family unit was a child at the time of the prior report.
The response to this Risk Element displays as follows:

- No prior determined reports
- Prior unfounded reports only
- One to two prior indicated reports
- Three to four prior indicated reports
- Five or more prior indicated reports

- Risk Element 3 reflects the presence of one or more children younger than one year of age in the Stage Composition of any concurrently open Family Services Stages in the case. (Only one FSS can exist per family, per jurisdiction.) The Date of Birth (DOB) recorded in CONNECTIONS for the child(ren) is used to determine the response to this Risk Element, regardless of whether the DOB is exact or approximate. If the DOB field on the Stage Composition tab is blank for any person whose Rel/Int field signifies that the person is a child, CONNECTIONS includes that person as a child younger than one year old in this calculation.

If the RAP is cancelled before the first save, it remains in NEW status; the next time the worker accesses the RAP, the system-generated responses for Risk Elements 1 and 3 are recalculated and case-level data is incorporated accordingly.

Once the RAP is saved, its event status changes to PROC (In Process). If the worker subsequently reopen the Risk Assessment Profile window for the In-Process RAP, CONNECTIONS does not regenerate/recalculate the system-generated responses to Risk Elements 1 and 3. The responses to these Risk Elements remain modifiable by selecting a different response.

For example, a RAP is in PROC status and a worker adds an individual to the Stage Composition for this stage who is involved in a separate Indicated and approved CPS Investigation (or the CPS worker Indicates a report and the supervisor approves that determination in the system). CONNECTIONS does not regenerate/recalculate the system-generated responses to Risk Elements 1 and 3; the responses to these Risk Elements remain modifiable.

Risk Elements 2 – 6 apply to the RAP Family Unit (everyone in the Stage Composition). The worker responds to each Risk Element by clicking on either the Yes or No radio button for the respective Risk Element.

Risk Elements 7 – 15 apply to the Primary and, if applicable, Secondary Caretakers in the stage. The worker responds to each Risk Element by clicking on either the Yes or No radio button next to the respective Risk Element for each applicable
Risk Elements can be addressed in any order, but the worker must respond to all of the Risk Elements in order to populate the Preliminary Risk Score and Preliminary Risk Rating. Once the worker responds to all of the Risk Elements, the Elevated Risk button enables.

**Risk Element Comments**

Comments enable the worker to document the basis for selecting a particular Risk Element response. A written comment provides the worker’s supervisor, any subsequent worker, or anyone authorized to review the case (e.g., attorney, Family Court, state officials) with more insight regarding the rationale and context of the Risk Element response.

The worker uses this field to record comments, as required, for each Risk Element. Each Risk Element has its own corresponding comments field.

This field highlights in yellow (signifying that comments are required) for any response that increases risk; comments must be recorded before the worker can save the RAP or mark it as “Ready for FASP Submission.” The worker can record comments for any Risk Element, even if comments are not required for that Risk Element.

This field includes Spell Check functionality. The Spell Check button enables once a comment is recorded. The maximum input size for this field is 1,000 characters of text.

**Verify System Response is Accurate** (check box)

The worker selects this check box to verify that the information pre-filled by the system in Risk Element 1 is accurate for the current RAP.

The system response could be inaccurate if an individual in the RAP family unit is in the CONNECTIONS database under more than one Person ID. This can occur when an individual being added to CONNECTIONS should be (but is not) related to an existing Person ID.

If you need to add new persons to the FSS Stage Composition, or complete a Person Merge or Case Merge that could affect the stage, do so before starting a new RAP.

In order for CONNECTIONS to consider Risk Element 1 as having been addressed, the worker must either select this check box or click on the drop-down arrow for the Risk Element 1 field and select a different response from the resulting list.

If the worker selects a different response than the system-generated response, the check box disables.
If the worker selects the check box, the drop-down arrow disables.

If the worker needs to change the response to **Risk Element 1** from the system-generated response after having selected this check box, the worker must first *deselect* the check box before the information can be changed in the **Risk Element 1** field. If the worker later changes the **Risk Element 1** response back to the system-generated response, the check box must be reselected.

**Preliminary Risk Score**

This field displays the total score for all of the Risk Elements. (See Appendix H3.)

The response to each Risk Element in the RAP has an associated point value (or “weight”). CONNECTIONS determines a point value by examining the strength of the relationship between the Risk Element and the incidence of subsequent indicated abuse and maltreatment reports, based on research of actual cases in New York State. The higher an individual Risk Element’s score is, the higher its contribution is to the Preliminary Risk Rating.

The **Preliminary Risk Score** calculates once the worker has responded to *all* of the Risk Elements. If the worker changes the response to any Risk Element(s), the **Preliminary Risk Score** is automatically recalculated.

**Preliminary Risk Rating**

This field displays a rating based on the range in which the **Preliminary Risk Score** falls. This rating refers to the probability that a subsequent child abuse/maltreatment report will be received and Indicated on the RAP family unit within the next two years.

The **Preliminary Risk Rating** calculates once the worker responds to *all* of the Risk Elements. The correlation between the **Preliminary Risk Score** and the **Preliminary Risk Rating** is defined in the table below:

<table>
<thead>
<tr>
<th>Preliminary Risk Score</th>
<th>Preliminary Risk Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 or lower</td>
<td>Low</td>
</tr>
<tr>
<td>3 to 6</td>
<td>Moderate</td>
</tr>
<tr>
<td>7 to 9</td>
<td>High</td>
</tr>
<tr>
<td>10 or above</td>
<td>Very High</td>
</tr>
</tbody>
</table>

If the worker changes the response to any Risk Element(s), the **Preliminary Risk Rating** automatically recalculates.

**Final Risk Rating**

This field is based on the presence or absence of any of the Elevated Risk Elements. The presence of *any* Elevated Risk Element automatically raises the risk rating to Very High. This
rating is based on the research-based probability that the presence of one of the Elevated Risk Elements significantly increases the likelihood that a subsequent child abuse/maltreatment report will be received and indicated on the RAP family unit within the next two years.

The RAP and its Risk Ratings do not replace the professional judgment of workers and their supervisors; rather, this functionality provides objective, research-based support for the decisions made by these individuals.

The Final Risk Rating calculates once the worker responds to all of the Elevated Risk Elements. If the worker later changes the response to any Elevated Risk Element, the Final Risk Rating automatically recalculates.

The Final Risk Rating calculates as follows:

- If a worker selects “No” as the response for every Elevated Risk Element, the Final Risk Rating calculates as equal to the Preliminary Risk Rating.
- If a worker selects “Yes” as the response for at least one Elevated Risk Element, the Final Risk Rating calculates as Very High and the following text displays below the Final Risk Rating field: “Elevated Risk Exists.”

The “Elevated Risk Exists” indicator and the Final Risk Rating display on the RAP, but unlike the Preliminary Risk Score, there is only a Final Risk Rating, not a final risk score.

The RAP also contains a Ready for FASP Submission check box; a worker must select this check box before the Case Planner can submit the FASP for approval. The worker may not mark a RAP as complete until all necessary information has been recorded and the Final Risk Rating has been calculated. The Ready for FASP Submission check box does not enable until all necessary steps have been completed to calculate the Final Risk Rating. Selecting this check box locks the RAP fields (including Elevated Risk Elements). Before the FASP is approved, the worker can deselect the Ready for FASP Submission check box for a RAP that was previously marked “Ready for FASP Submission.” Once the worker does so, the RAP returns to PROC (In Process) status, the RAP fields (including the Elevated Risk Elements) unlock and new case-level information may be presented for the worker’s acceptance.
**Elevated Risk Elements**

In all versions of the RAP (i.e., Initial, Comprehensive or Reassessment), as well as the RAP in the CPRS, a worker is required to conduct further analysis regarding the possibility of Elevated Risk Elements within the RAP Family Unit. Elevated Risk Elements refer to events that are relatively rare, and thus would not affect the likelihood of future child abuse and/or maltreatment in the majority of cases. Although they occur infrequently, the presence of any of these Elevated Risk Elements indicates a heightened risk of serious child abuse and/or neglect in the future. Therefore, the presence of any of these Elevated Risk Elements automatically raises the Final Risk Rating to Very High.

A worker navigates to the Elevated Risk Elements window via the Elevated Risk button on the Risk Assessment Profile window. This button enables only when the worker has completed all Risk Elements.

The Elevated Risk Elements window displays eight Elevated Risk Elements, along with associated responses for each of the eight elements. A worker must select either the Yes or No radio button, as appropriate, for each Elevated Risk Element. This window also includes a single comment field, in which the worker records his/her reason(s) for selecting any Elevated Risk Elements.
The following Elevated Risk Elements are included in the Initial FASP:

- Death of a child as a result of abuse or maltreatment by caretaker(s)  
  (The response to this question carries forward from previous FASPs.)
- Caretaker(s) has a previous TPR
- Siblings removed from the home, prior to current report, due to abuse or neglect and remain with the substitute caregivers or foster parent
- Repeated incidents of sexual abuse or severe physical abuse by caretaker(s)
- Sexual abuse of a child and perpetrator is likely to have current access to child
- Physical injury to a child under one year old as a result of abuse or maltreatment by caretaker(s)
- Serious physical injury to a child requiring hospitalization/emergency care within the last 6 months, as a result of abuse or maltreatment by the caretaker(s)
- Newborn child has a positive toxicology for alcohol or drugs

If the worker responds “Yes” to any Elevated Risk Element, s/he must record comments. When selecting multiple Elevated Risk Elements, the worker should record comments for each Elevated Risk Element. There is one Comment field for all Elevated Risk Elements.

When all eight Elevated Risk Elements are complete, the **Final Risk Rating** is system calculated and displayed on the **Risk Assessment Profile** window. The **Final Risk Rating** is based on the presence or absence of Elevated Risk Elements. Elevated Risk exists when at least one Elevated Risk Element has a response of “Yes.” When Elevated Risk exists, the statement, “Elevated Risk Exists,” appears in bold at the bottom of the **Risk Assessment Profile** window.

**OK**  
The **OK** button (or the **OK** command from the **File** menu) closes the **Elevated Risk Elements** window and returns the worker to the **Risk Assessment Profile** window. Information the worker records on the **Elevated Risk Elements** window is not saved until s/he clicks on the **Save** button on the **Risk Assessment Profile** window.

**Cancel**  
The **Cancel** button (or the **Cancel** command in the **File** menu) displays the following message:

“Do you want to cancel?  
Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard unsaved changes.
- Click on the **No** button to close the message without discarding the unsaved changes; all changes remain pending.
Step-by-Step:
Recording an Initial FASP Risk Assessment Profile

1. On the Initial FASP Risk Assessment Profile window, confirm the system-generated response to Risk Element 1 ("Total prior reports for adults and children in RAP family unit") by clicking on the Verify System Response is Accurate check box. —OR— Click on the drop-down arrow for the Risk Element 1 field and select a different response from the resulting list.

2. Respond to Risk Elements 2-6 by clicking on the Yes or No button, as applicable.

3. Respond to Risk Elements 7-15 by clicking on the Yes or No button for the Primary Caretaker and Secondary Caretaker, as applicable. The names of the Primary Caretaker and Secondary Caretaker (if applicable) display at the top of the window.

4. Record comments, as necessary, in the Comments field. The Comments field highlights in yellow when the response to a particular Risk Element would increase risk. Each Risk Element has its own corresponding field. Once a comment has been recorded, the Spell Check button enables, allowing you to run a Spell Check on that comment. Risk Elements can be addressed in any order. (Note: Risk Elements 7–15 require responses for both caretakers, if both Primary and Secondary Caretakers have been identified.) When you have responded to all of the Risk Elements, the Preliminary Risk Score and Preliminary Risk Rating populate and the Elevated Risk button enables.

5. Click on the Elevated Risk button. The Elevated Risk Elements window displays.

6. Respond to each Elevated Risk Element by clicking on the Yes or No button, as applicable. Record comments, as necessary, in the Comments field at the bottom of the window. The Comments field highlights in yellow the first time you select the Yes radio button for an Elevated Risk Element (if the Comments field is blank). There is only one Comments field for all of the Elevated Risk Elements. Once a comment has been recorded, the Spell Check button enables, allowing you to run a Spell Check on that comment. Risk Elements can be addressed in any order.

7. Click on the OK button to close the Elevated Risk Elements window. The Initial FASP Risk Assessment Profile window displays.

8. Click on the Ready for FASP Submission check box when you have completed all RAP components. You must select this check box before the Case Planner can submit the FASP for approval.

9. Click on the Save button. The information is saved to the database.

10. Click on the Close button. The FASP window displays.
The Comprehensive and Reassessment RAP

The Risk Assessment Profile for the Comprehensive/Reassessment FASP is only available if a Program Choice of “Protective” is selected for any child in the stage. This version of Risk (also known as Risk Assessment Profile or RAP) allows a worker to view responses that originated from the FASP Family and Parent/Caretaker Strengths, Needs and Risks scales. Strengths, Needs and Risks scales should be completed prior to the RAP in the Comprehensive/Reassessment FASPs in order to have scale responses contribute to the RAP score.

It is critical to the ongoing safety and well-being of children that the assessment of the presence of risk elements be continually assessed. For this reason, the assessment of risk is built into the Strengths, Needs and Risks Assessment for the Comprehensive and Reassessment FASPs in Family Services Stages with a Program Choice of “Protective.” CONNECTIONS calculates the risk score and identifies which of the scales are carried forward into the Risk Assessment Profile (RAP) for the Comprehensive and Reassessment FASPs.

A worker must answer five Risk Elements and five Elevated Risk Elements. The combination of these components serves to assess the risk of future abuse or maltreatment and assist the worker in determining if the case should remain open. Additional elements are presented on the basis that the worker may have had more time to assess the family situation for risk and safety.

The Family and Parent/Caretaker Scales must be completed prior to accessing the Risk Assessment Profile. If a worker clicks on the Risk Assessment Profile sub-node prior to completing these scales, the following message displays:

“Family and Parent/Caretaker Scales must be completed prior to entry into the Risk Assessment Profile.”

When the Case Planner selects the Risk Assessment Profile sub-node on the FASP Tree, and the current FASP is pending approval, the following message displays:

"Saving will invalidate pending approval. Continue in Modify Mode?"

- Clicking on the Yes button opens the window in modify mode. If the FASP is pending approval, and a worker opens the window in modify mode and does not save data, the approval remains pending. If the Case Planner saves information on the Risk Assessment Profile window, the pending approval is invalidated. The worker will need to resubmit the RAP for approval.
- Clicking on the No button opens the window in view-only mode.

When any worker other than the Case Planner attempts to open the window while a FASP is pending approval, the following message displays:

"You are authorized to access this window in browse-only mode."

- Clicking on the OK button opens the window in view-only mode and changes cannot be made.
Comprehensive/Reassessment RAP Elements

The Risk Assessment Profile window displays five Risk Elements, which must be completed to allow CONNECTIONS to calculate the Preliminary Risk Score and Preliminary Risk Rating. Risk Elements 1 and 3 contain system-generated responses. Risk Elements 2, 4 and 5 require a Yes or No response for the Primary and Secondary Caretaker. The display of the Primary Caretaker and Secondary Caretaker at the top of the window is view-only. Caretakers are pre-filled from the Stage Composition tab in the FSS; this is why it is important that the correct people are related when adding/relating people from a Person Search. If the wrong person is related, his/her case information pre-fills in the FASP.

RAP Elements

1. Indicated CPS report(s) since the last assessment and service plan
2. Child(ren) in RAP family unit is currently or was previously in the care or custody of substitute caregivers or foster parents
3. Child(ren) under one year old in RAP family unit
4. Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker
5. Caretaker’s Progress with Plan:
   a) Awaiting initiation of services, compliant with referrals
   b) Participating in services and actively pursuing case plan objectives, or has successfully completed all services recommended
   c) Participating in services but not actively pursuing case plan objectives, or refused or dropped out of services
**RAP Elevated Risk Elements**

When all of the Risk Elements have been completed on the Risk Assessment Profile window, the Elevated Risk button enables. Clicking on this button opens the Elevated Risk Elements window. Select the Yes or No radio buttons, as appropriate, for each Elevated Risk Element then record comments, as applicable, to explain the selected Elevated Risk Elements.

### Elevated Risk Elements in the Comprehensive/Reassessment FASP

- Death of a child as a result of abuse or maltreatment by caretaker(s)  
  (The response to this Elevated Risk Element carries forward from the previous RAP.)
- Parental rights terminated for one or more children within the last year
- Sexual abuse of a child by caretaker(s) since the last assessment/reassessment
- Serious physical abuse of a child by caretaker(s) since the last assessment/reassessment
- A new infant was born with positive toxicology for alcohol or drugs since the last assessment/reassessment
**RAP - Mapped Risk**

The **Mapped Risk** button opens the *Mapped Risk* window, which displays the responses to embedded Risk Elements within the **Family** and **Parent/Caretaker Strengths, Needs and Risks** scales and which contribute to the Preliminary Risk Score and Preliminary Risk Rating. If no scale responses indicate the presence of risk, the window does not open and the following message displays:

"Selected answers on the Family Strengths, Needs, and Risks scales did not increase risk."

The RAP **Mapped Risk** window is view-only. Workers are not required to open this window; they can open it to see what values correlate to the risk rating/score.

---

*Where am I?*

Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Family Assessment node > Strengths, Needs, and Risks sub-node > Risk Assessment Profile sub-node > Mapped Risk button
Finalizing a RAP
The RAP window also contains the Ready for FASP Submission check box; a worker must select this check box before the Case Planner can submit the FASP for approval. Selecting the Ready for FASP Submission check box freezes the Risk Elements; deselect the check box to modify Risk Elements. Risk Elements can only be modified until the FASP has been approved.

The Risk Assessment Profile is not approved separately, but as part of the Comprehensive or Reassessment FASP review and approval process. Interim saves are allowed on the Risk Assessment Profile and the Elevated Risk Elements windows.

Step-by-Step: Recording a RAP (Comprehensive/Reassessment FASP)

1. On the Risk Assessment Profile window for a Comprehensive or Reassessment FASP, click on the Mapped Risk button. The RAP Mapped Risk window displays the contributed RAP scales and/or scores. If none of the responses selected for the Family Scales increased risk, the following message displays: “Selected answers on the Family Strengths, Needs and Risks scales did not increase risk.” Click on the OK button to close the message. In this circumstance, the RAP Mapped Risk window does not display.

2. Click on the Close button to exit the RAP Mapped Risk window. The Risk Assessment Profile window displays.

3. Confirm the system-generated response to Risk Element 1 [“Indicated CPS report(s) since the last assessment and Service Plan”] by clicking on the Verify System Response is Accurate check box. —OR— Click on the drop-down arrow for the Risk Element 1 field and select a different response from the resulting list.

4. Respond to Risk Elements 2 and 3 by clicking on the Yes or No radio button, as applicable. Risk Element 3 is system populated; you can select another response by clicking on the Yes or No radio button.

5. Respond to Risk Element 4 by clicking on the Yes or No radio button for the Primary Caretaker and Secondary Caretaker, as applicable. The names of the Primary Caretaker and Secondary Caretaker (if a Secondary Caretaker has been recorded in CONNECTIONS) display at the top of the window.

6. Respond to Risk Element 5 with the appropriate response for the Primary Caretaker and/or Secondary Caretaker by clicking on the corresponding radio button regarding the Caretaker’s progress with the plan. When you have responded to all of the Risk Elements, the Preliminary Risk Score and Preliminary Risk Rating populate and the Elevated Risk button enables.

Selecting the Verify System Response is Accurate check box disables the Risk Element 1 field’s drop-down arrow; conversely, selecting from the drop-down list disables the check box. See page 12-9 for the check box definition.
7 Click on the **Elevated Risk** button. The **Elevated Risk Elements window displays**.

8 Respond to each Elevated Risk Element by clicking on the **Yes** or **No** radio button, as applicable. 
   *Record any applicable comments; click on the **Spell Check** button to check the spelling of your comments.*

9 Click on the **OK** button. The **Risk Assessment Profile window displays**.

10 The system-generated **Final Risk Rating** displays based on the Preliminary Risk Rating and the presence or absence of Elevated Risk. 
   *Responses to the Risk Elements can be modified to reflect corrections or updated information.*

11 Click on the **Ready for FASP Submission** check box when you have completed all RAP components. 
   *You must select this check box before the Case Planner can submit the FASP for approval.*

12 Click on the **Save** button. 
   *The information is saved to the database.*

13 Click on the **Close** button. 
   *The FASP window displays.*

If you click on the **Cancel** button on the **Elevated Risk Elements window**, the following message displays: 

"Do you want to cancel? Unsaved data and/or narrative(s) will be lost."

- Click on the **Yes** button to discard the changes and close the window.
- Click on the **No** button to close the message without discarding the changes; the window remains open.
You can also use the following buttons on the Risk Assessment Profile window:

- If you click on the Cancel button when unsaved changes have been made to the window, the following message displays:
  
  "Do you want to cancel?
  Unsaved data and/or narrative(s) will be lost."

  — Click on the Yes button to close the message and discard the changes; the Risk Assessment Profile window remains open.
  — Click on the No button to close the message without discarding the changes; the Risk Assessment Profile window remains open.

- If you click on the Close button when unsaved changes have been made to the window, the following message displays:
  
  "Do you want to exit?
  Unsaved data and/or narrative(s) will be lost."

  — Click on the Yes button to close message, discard the changes and close the window.
  — Click on the No button to close the message without discarding changes.

Case-Level Information

The Case Level Information window opens when a worker accesses an existing RAP in modify mode and new case-level data exists in the Child Protective Record Summary (CPRS) or the Family Services Stage.

The Case Level Information window provides workers with the opportunity to bring data from a newly completed RAP in the same case into the current stage’s RAP; they do not need to re-enter data. This is true for all RAP types (i.e., Initial, Comprehensive and Reassessment). Information can be pulled from the CPRS RAP; however, any modifications made in the FASP RAP are not reflected in the CPRS RAP.

Case-Level Information fields:

Accept Case Level Information

This button accepts the Case-Level Information from the more recently completed RAP, overwriting the data in the current, in-process RAP with the Case-Level Information. This button is disabled until the RAP Case-Level Report has been generated and viewed.

When a worker clicks on the Accept Case Level Information button, the following message displays:

"You have chosen to accept information from a more recently saved RAP. If you choose to continue, you will overwrite any information you had entered into the RAP you are currently working on. If you do not wish to overwrite the information entered, select Cancel."

- Click on the Cancel button to close the message without overwriting the current, in-process RAP with Case-Level
Information.

- Click on the **Continue** button to close the *Case Level Information* window and populate the RAP with Case-Level Information.

**Generate RAP Report**

When a worker accesses the RAP in modify mode for an in-process RAP (after a more recent RAP has been completed), the worker can generate a report of Case-Level RAP Information. The worker can use this report to determine whether to overwrite the current, in-process RAP with the Case-Level Information.

This button generates the RAP Case-Level Report as an Adobe Acrobat (PDF) document. Once the worker clicks on this button and subsequently closes the generated RAP Case-Level Report, the *Case Level Information* window changes to display the following message:

“If you wish to overwrite your current RAP with the more recently saved information, click on Accept Case Level Information. After accepting, you may make changes to the responses and comments.

*If you do not wish to overwrite your current RAP, click Cancel to continue working on your current RAP.*”

Click on the **Cancel** button to close the *Case Level Information* window and display the current, in-process RAP without considering the Case-Level Information.

The **Stage ID** label changes based on the stage Type; it reads either “from Family Services Stage ID” or “from Investigation Stage ID.”
Once the RAP report has been generated and viewed, the Case Level Information window displays the changes:

**RAP Case Level Report**

If workers have the ability to complete a Risk Assessment Profile (RAP), they can generate a report which allows them to view more recent Case-Level Information (if it exists) to determine whether to overwrite the RAP they are currently working on with the more recently saved Case-Level Information.

When a worker accesses the Risk Assessment Profile window in modify mode for an In-Process RAP (when a more recent RAP has been completed), s/he can generate a report of RAP information to determine whether to overwrite the RAP s/he is currently working on with the data from the completed (more recent) RAP. The RAP Case Level Report lists each Risk Element and Elevated Risk Element, along with the respective responses and comments for both the RAP s/he is currently working on and the more recently completed RAP.

The following fields display on the RAP Case Level Report:

- **Case ID**: The unique, system-generated case identification number with which the Investigation stage and its corresponding Family Services Stage are associated.
- **Case Name**: The name of the case (in familial CPS cases, this is usually the name of the mother of the abused/maltreated child[ren] in the case).
- **Stage CD**: The Community District (CD) code; applicable only to Investigation stages with addresses in New York City.
- **INV Stage ID**: The unique, system-generated identification number for the stage.
| INV Stage Name | The name of the stage (in familial CPS cases, this is usually the name of the mother of the abused/maltreated child[ren] in the stage) |
| INT Report Date | The date the Intake was recorded by the State Central Register (SCR) |
| WMS# | The Welfare Management System (WMS) case identification number recorded by the CPS caseworker on the CPS Investigation Conclusion window in CONNECTIONS |
| Fatality Report | An indicator denoting that the Investigation stage involves the reported fatality of one or more children in the household (displays only if applicable) |
| High Priority | An indicator denoting that High Priority safety factors have been recorded for the stage (displays only in NYC, if applicable) |
| Risk Elements 2 and 4 – 15 | Risk Elements displayed on the RAP (not including Risk Elements 1 and 3, since system-generated responses are created for them) |

The fields described below display on the report for both the current, in-process RAP and the more recently completed RAP (referred to as Case-Level Information). The date the Case-Level Information was saved to the database is listed in the heading of the Case Level column.

| Primary Caretaker | The name of the Primary Caretaker selected on the Risk Assess Profile tab in the CPRS or from the Stage Composition tab in the FSS/CWS |
| Secondary Caretaker | The name of the Secondary Caretaker (if any) selected on the Risk Assess Profile tab in the CPRS or from the Stage Composition tab in the FSS/CWS |
| Response | “Yes” or “No,” as selected, in response to each Risk Element (Risk Elements 7 – 15 require a response for both the Primary Caretaker and the Secondary Caretaker, if selected; “Secondary” displays for all Risk Elements requiring a secondary response, even if a Secondary Caretaker has not been recorded.) |
| Comments [for Risk Elements] | The comments recorded for each Risk Element. |
| Elevated Risk Elements | The Elevated Risk Elements as displayed on the Elevated Risk Elements window |
| Elevated Risk Response | “Yes” or “No,” as selected, in response to each Elevated Risk Element |
| Comments [for Elevated Risk Elements] | The comments recorded for any Elevated Risk Element. |
Step-by-Step: Generating the Case-Level Information RAP Report

1. From the **Case Level Information** window, click on the **Generate RAP Report** button. The report displays in print preview mode.

2. Click on the **Print** button. The report is sent to your default printer. Review the report to determine if you want to accept the Case Level Information.

3. Click on the **Close** button to close the report. The **Case Level Information** window displays.

Risk Assessment for Non-Protective Cases

A family receiving services related to issues other than abuse or maltreatment does not always mean that the children in these families are always free from risk of harm. In services cases where there is no Program Choice of "Protective," a Risk Assessment (other than the RAP) is utilized.

The RAP is an assessment protocol that calculates and predicts the likelihood of future child abuse and/or maltreatment and informs casework decision making regarding the delivery of services to a family. The Risk Assessment in non-Protective cases is a guide to assist workers in identifying and incorporating into their service plan the family characteristics and dynamics that could create a risk of harm to the child(ren). Since this Risk Assessment is less predictive, it does not provide a risk score or Final Risk Rating.

This Risk Assessment is only completed in the Initial FASP; it does not display for the Comprehensive or Reassessment FASPs. Workers can complete an optional Risk Assessment Profile in subsequent FASPs by selecting **Add a Component** from the FASP tree.

The version of Risk Assessment that is available in the Initial FASP when no Program Choice of "Protective" is selected (also known as Risk Assessment), consists of a series of 11 non-CPS-based elements, which are used to predict risk. Workers are required to select "Yes," "No" or "Ins. Info." (Insufficient Information), as appropriate, in response to each of these elements.

When the Case Planner selects the **Risk Assessment** sub-node on the FASP tree, and the current FASP is pending approval, the following message displays:

"Saving will invalidate pending approval. Continue in Modify Mode?"

- Clicking on the **Yes** button opens the window in modify mode. If the FASP is pending approval and the Case Planner does not save data, the approval remains pending. If the Case Planner saves modifications on the Risk Assessment window, the pending approval is invalidated.
- Clicking on the **No** button opens the window in view-only mode.
When any worker other than the Case Planner selects the Risk Assessment sub-node on the FASP Tree, the following message displays:

“You are authorized to access this window in browse only mode”

Only the Case Planner can modify the information on this window for non-Protective cases.

The Risk Assessment displays the names of the Primary Caretaker and Secondary Caretaker (if one has been recorded). These names are view-only and can never be modified from this window.

No Case-Level Information is created and no Preliminary Risk Rating or Final Risk Rating is generated.

The Risk Assessment is not approved separately, but as part of the Initial FASP approval process. The Risk Assessment is only available in the Initial FASP. A worker must complete all 11 non-CPS Risk Elements as part of the FASP submission requirements. Interim saves are allowed if the worker cannot address all 11 Risk Elements in one time period.

### Step-by-Step: Recording the Risk Assessment

1. On the Risk Assessment window, respond to Risk Elements 1-3 by clicking on the Yes, No or Ins Info button, as applicable.

2. Respond to Risk Elements 4-11 by clicking on the Yes, No or Ins Info button for the Primary Caretaker and Secondary Caretaker, as applicable.
   *The names of the Primary Caretaker and Secondary Caretaker (if applicable) display at the top of the window.*

3. Click on the Save button.
   *The recorded information is saved to the database and the FASP window displays*
Module 13: Family Assessment Analysis

Four tabs display in the Assessment Analysis node:

- Family View/Child View
- Behaviors/Contributing Factors
- Strengths
- Needed Improvements/Changes

Each tab contains directed narrative questions that guide the Case Planner (and other workers who contribute to this analysis) through a logical process. As a result of this process, the Case Planner/Caseworker arrives at conclusions regarding the dimensions of individual and family functioning (behaviors, abilities, conditions, coping strategies, etc.) that need to improve or change. The Case Planner/Caseworker uses these tabs to document the results of the assessment that was developed with the family and/or child. This assessment includes safety factors, risk elements and family strengths and needs.

In practice, the FASP assists the Case Planner and Caseworkers in preparing for family conferences, which should be part of the FASP development process. The Analysis node of the FASP provides easy accessibility to the Assessment Summary, which is a compilation of factors from the Safety Assessment, the RAP scales and all assessment areas. This is useful for reminding the Case Planner/Caseworker and the family about the key areas of concern, strength and need. As they work together, this will help them reach conclusions about what needs to change and identify the strengths that will help them achieve those changes.

A worker with a role in the stage can record information on any of the tabs within the Analysis node.
Tabs on the Assessment Analysis Window

As with the Family Update and Child Update node, the sections of the Analysis node and the components that display are dependent on the type of FSS being accessed. The Assessment Analysis window is arranged in a tabular format with four tabs:

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family View/Child View</td>
<td>For an FSS/CWS, document the family’s view of the situation at the present time. What do they see as their most pressing needs and concerns? What does the family believe needs to happen in order for them to meet the needs of their children for safety, permanency and well-being? What do they want from child welfare or other services at this time? For an FSS/CCR, document what the child has identified as his/her most pressing needs and concerns. (For more information, see page 13-3.)</td>
</tr>
<tr>
<td>Behaviors/Contributing Factors</td>
<td>This tab only displays for an FSS/CWS. Use this tab to record what factors and underlying conditions interact to sustain the behaviors that warrant child welfare intervention. (For more information, see page 13-6.)</td>
</tr>
<tr>
<td>Strengths</td>
<td>For an FSS/CWS, this tab allows identification of the individual, family, and community strengths and/or resources that can be used to meet the family’s pressing needs and support their ability to meet the child’s needs for safety, permanency and well-being. For an FSS/CCR, identify the child’s strengths that can be used to promote the child’s well-being and ability to function well as the goal is achieved. (For more information, see page 13-8.)</td>
</tr>
<tr>
<td>Needed Improvements/Changes</td>
<td>For an FSS/CWS, document the improvements/changes that need to be made in family functioning, behavior, and/or living conditions to achieve the identified Permanency Planning Goal and provide for child(ren)’s safety, permanency and well-being. For an FSS/CCR, this tab allows you to record the needs and/or behaviors that must be addressed to promote the child’s well-being and Permanency Planning Goal (PPG). (For more information, see page 13-11.)</td>
</tr>
</tbody>
</table>

The Analysis node must be completed within each FASP.

---

**Step-by-Step:**

**Opening the Family/Child Assessment Analysis Window**

1. From the Family Assessment node, click on the Analysis sub-node. The Family Assessment Analysis (or Child Assessment Analysis) window displays and the Family View (or Child View) tab is active.
**Family/Child View**

When the Assessment Analysis window is first opened, the focus will be on the **Family View** tab for an FSS/CWS or on the **Child View** tab for an FSS/CCR. Use this tab to document the family’s (or child’s) view and what they perceive to be their most pressing needs and concerns.

---

**FSS/CWS**

![FSS/CWS Family View](image1)

**FSS/CCR**

![FSS/CCR Child View](image2)

The **Family/Child View** tab is divided into two sections: a grid containing all of the entries for the tab and a **Narrative** field. There are also several buttons located along the bottom of the tab.
The grid contains three fields that are system-populated:

- **Date of Entry**
  The Date the narrative was recorded

- **Author**
  The system-populated name (based on Person ID) of the worker recording the entry in CONNECTIONS

- **Status**
  The status of the narrative entry (“Final” or “Draft”)

The **Narrative** field can hold an unlimited amount of text. This field features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word (such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check).

The following buttons display at the bottom of the tab:

**Case Planner Summary** (with Launched check box)
This button launches the Case Planner Summary functionality. The Case Planner integrates the entries made by assigned workers into a single, coherent narrative that summarizes the various activities and events that have occurred with all the family members. The **Launched** check box is system-filled once the Case Planner has launched and saved the Case Planner Summary. Once this check box is selected, no other entries can be recorded on this window and those previously recorded cannot be modified.

**Clear**
Clicking on this button clears any narrative that was previously displayed in the **Narrative** field.

**Save as Draft**
This button enables after a modification has been made to the tab. It saves the work recorded on the **Family/Child View** tab in “Draft” format. This allows only the author to modify it. The entry can be modified until the Case Planner initiates the Case Planner Summary.

**Save as Final**
This button enables after a modification has been made to the tab. It saves the work recorded on the **Family/Child View** tab in “Final” format. An entry saved as “Final” cannot be modified. Saving an entry as “Final” indicates to the Case Planner that you have finished this entry.

**Cancel**
Clicking on the **Cancel** button discards any unsaved data. The following message displays:

“Do you want to cancel? Unsaved data and/or narratives will be lost.”

- Click on the **Yes** button to discard the unsaved changes. The **Family/Child View** tab remains open.
- Click on the **No** button for the tab to remain displayed without discarding the unsaved changes.
For an FSS/CWS, use the **Narrative** field to document responses to the following questions:

- What's the family's view of the situation at this time?
- What do they see as the most pressing needs and concerns?
- What does the family believe needs to happen in order for them to meet the needs of their children for safety, permanency and well-being?
- What do they want from child welfare or other services at this time?

If the stage type is FSS/CCR, use the **Narrative** field to document what the child has identified as his/her most pressing needs and concerns. This includes what the child wants from child welfare services.

Once the narrative has been recorded, save the work in either “Draft” or “Final” status. Clicking on the **Save as Final** button freezes the narrative that has been recorded; it is no longer modifiable. Clicking on the **Save as Draft** button allows the narrative to be modified (by the worker who recorded and saved it) until the Case Planner initiates the Case Planner Summary functionality.

---

### Step-by-Step: Recording the Family/Child View Narrative

1. Click on the **Analysis** sub-node. 
   *The Family Assessment Analysis (or Child Assessment Analysis) window displays, depending on the FSS type (e.g., a CCR stage displays the Child Assessment Analysis window and a CWS stage displays the Family Assessment Analysis window). The first tab is active; its title reads Family View or Child View, depending on the FSS type selected.*

2. Record the family’s (or child’s) view of the situation and their most pressing needs and concerns in the **Narrative** field. 
   *The Save as Draft, Save as Final and Cancel buttons enable.*

3. Click on the **Save as Draft** or **Save as Final** button.

### Step-by-Step: Modifying the Family/Child View Narrative

1. Click on the **Analysis** sub-node. 
   *The Family Assessment Analysis (or Child Assessment Analysis) window displays, depending on the FSS type (e.g., a CCR stage displays the Child Assessment Analysis window and a CWS stage displays the Family Assessment Analysis window). The first tab is active; its title reads Family View or Child View, depending on the FSS type selected.*

2. From the **Narrative** grid, select the narrative you want to change. 
   *The narrative displays in the **Narrative** field.*
3 Record the family’s (or child’s) view of the situation and their most pressing needs and concerns in the **Narrative** field.

*The Save as Draft, Save as Final and Cancel buttons enable.*

4 Click on the **Save as Draft** or **Save as Final** button.

**Behaviors/Contributing Factors**

The **Behaviors/Contributing Factors** tab displays for FSS/CWS stages. Use this tab to document (based on the assessment of safety, risk and family functioning) the factors and underlying conditions that interact to sustain the behaviors or conditions that warrant child welfare intervention. To the extent possible, the Case Planner and/or Caseworkers need to assess with the family the factors that contribute to the abuse/maltreatment or PINS behavior, and what conditions underlie the overt abusive, neglectful or delinquent behavior. Examples of such underlying conditions are the family’s knowledge of parenting skills, their perception of what is acceptable parental behavior in their culture, their self-concept, their experiences growing up, and the needs they try to meet with their current behavior. This information can be gathered through careful interviewing, as well as through the use of the Safety Assessments, Risk Assessment Profile(s) and Family Assessment Protocols.
The **Behaviors/Contributing Factors** tab is divided into two sections: a grid containing all of the entries for this window and a **Narrative** field.

The grid contains three fields that are system-populated:

- **Date of Entry**: The date the narrative was recorded
- **Author**: The system-populated name (based on Person ID) of the worker recording the entry in **CONNECTIONS**
- **Status**: The status of the narrative entry ("Final" or "Draft")

Along the bottom of the tab, the following buttons display:

- **Case Planner Summary** (with **Launched** check box)
- **Clear**
- **Save as Draft**
- **Save as Final**
- **Cancel**

The **Narrative** field can hold an unlimited amount of text. It features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check.

Once the narrative has been recorded, save the work in either “Draft” or “Final” status. Keep in mind that clicking on the **Save as Final** button freezes the narrative as recorded; it is no longer modifiable. Clicking on the **Save as Draft** button allows the narrative to be modified by the author until the Case Planner initiates the Case Planner Summary functionality.

---

### Step-by-Step: Recording Behaviors/Contributing Factors

1. On the **Assessment Analysis** window, click on the **Behaviors/Contributing Factors** tab.

2. In the **Narrative** field, record the narrative of the behaviors and contributing factors. *The **Save as Draft**, **Save as Final** and **Cancel** buttons enable.*

3. Click on the **Save as Draft** or **Save as Final** button.

---

### Step-by-Step: Modifying Behaviors/Contributing Factors

1. On the **Assessment Analysis** window, click on the **Behaviors/Contributing Factors** tab.

2. From the **Narrative** grid, select the narrative you want to modify. *The narrative displays in the **Narrative** field.*
3 In the Narrative field, record the narrative of the behaviors and contributing factors. 
The Save as Draft, Save as Final and Cancel buttons enable.

4 Click on the Save as Draft or Save as Final button.

**Strengths**

As with some of the other tabs on the Analysis node, the Strengths tab displays slightly differently depending on the FSS type. For an FSS/CWS, use the Strengths tab to identify and focus on the strengths that exist within the family unit and the community that support the family’s ability to meet the child’s needs for safety, permanency and well-being.

Strengths are the personal, family and community characteristics and abilities that can be the building blocks of coping, problem solving and positive change. These strengths are identified through your interviews and ongoing relationship with the family and through the application of the assessment scales. In this section, your documentation should highlight what the family does well (or has done well in the past), what they know about positive child caring, their ability to use assistance that may be available in their extended family or community, their positive intentions toward caring for their child(ren), etc.

There are many areas of strength; focus on those that you and the family agree are most relevant to the family’s unique situation, as well as each family member’s ability to change the behaviors, factors and conditions that necessitate child welfare involvement. The strengths that are identified here will be used to shape the Service Plan. By using a strengths-based approach (even if the area of strength seems tenuous) and applying these strengths to positive parenting and youth development, you will build a Service Plan that is more likely to succeed than one that was developed without a strengths-based focus.
The Strengths tab is divided into two sections: a grid containing all of the entries for this window and a Narrative field. The Narrative field holds a virtually unlimited amount of text and features the Text Control tool.
The grid contains three fields that are system-populated:

- **Date of Entry**: The date the narrative was recorded
- **Author**: The system-populated name (based on Person ID) of the worker recording the entry in CONNECTIONS
- **Status**: The status of the narrative entry ("Final" or "Draft")

The following buttons display along the bottom of the tab:

- **Case Planner Summary** (with **Launched** check box)
- **Clear** (displays only for FSS/CWS stages)
- **Save as Draft**
- **Save as Final**
- **Cancel**

The **Strengths** tab also has a **Narrative** field that functions identically to the **Narrative** field on the **Behaviors/Contributing Factors** tab. (See the **Narrative** field description on page 13-7.)

### Step-by-Step: Recording Strengths

1. On the **Family Assessment Analysis** window, click on the **Strengths** tab.
2. In the **Narrative** field, explain the individual, family or community strengths that can be used to meet the child(ren)'s needs for safety, permanency and well-being. *The **Save as Draft**, **Save as Final** and **Cancel** buttons enable.*
3. Click on the **Save as Draft** or **Save as Final** button.

### Step-by-Step: Modifying Strengths

1. On the **Family Assessment Analysis** window, click on the **Strengths** tab.
2. From the **Narrative** grid, select the narrative you want to modify. *The narrative displays in the **Narrative** field.*
3. In the **Narrative** field, explain the individual, family or community strengths that can be used to meet the child(ren)'s needs for safety, permanency and well-being. *The **Save as Draft**, **Save as Final** and **Cancel** buttons enable.*
4. Click on the **Save as Draft** or **Save as Final** button.

To view a Narrative, click on the box to the left of the entry in the list section at the top of the **Strengths** tab; the Narrative displays in the lower half of the tab.

See page 13-4 for a description of the **Case Planner Summary**, **Save as Draft, Save as Final, Cancel, and Clear** buttons.
**Needed Improvements/Changes**

As with many of the tabs in the Analysis node, the **Needed Improvements/Changes** tab’s appearance varies if the FSS type is CWS or CCR. For an FSS/CWS, record the improvements/changes that need to be made in family functioning, behavior and/or living conditions to achieve the identified Permanency Planning Goal and provide for the child(ren)’s safety, permanency and well-being. This section is the “bridge” to the Service Plan.

The Caseworker should record his/her conclusions (as well as the family’s) about what needs to change in key aspects of family functioning. The result should be that all family members are safe, the children’s basic needs are met, and the conditions, factors and actions that led to the need for child welfare intervention are addressed and not likely to recur.

For example, if a family is living in an unsanitary home and the children have recurring health issues due to their environment, you would document specific changes that address the underlying conditions for the parental neglect.

The following are some examples:

- The mother’s depression needs to be assessed and addressed so she will be able to clean, shop for nutritious food and provide her children with a healthful environment.
- The mother needs to develop an understanding of how pet debris and garbage can affect a toddler’s health. This should be addressed in a way that she can understand, taking into account any developmental disability.
- The father needs to recognize his importance to this family’s well-being and become more involved in raising the children, providing them with supervision, meals and physical cleanliness when the mother is not able to do so.

By documenting what needs to change, rather than documenting only the overt and obvious symptoms of family problems and needs, the Case Planner/Caseworkers establish a basis for targeting services that are more likely to effect lasting change. Not all of what needs to improve or change will require formal services, but it is important to capture these needs. This assessment will assist the Case Planner in determining whether a service is likely to meet the family’s real needs.

For an FSS/CCR stage, document the needs and/or behaviors that must be addressed to promote the child’s well-being. For a child who has been legally freed for adoption, focus on his/her specific needs and/or behaviors (e.g., counseling, substance abuse treatment or medical care).
The **Needed Improvements/Changes** tab is organized with a grid at the top and a **Statement** field in the lower portion of the tab.
The grid contains three fields that are system-populated:

- **Date of Entry**: The date the narrative was recorded.
- **Author**: The system-populated name (based on Person ID) of the worker recording the entry in CONNECTIONS.
- **Entry**: Contains any narrative that has been recorded in this tab.

To view a Narrative, click on the box to the left of the entry in the list section at the top of the **Strengths** tab; the Narrative displays in the lower half of the tab.

The bottom of the tab contains the following buttons:

- **Case Planner Summary** (with Launched check box): This button launches the Case Planner Summary functionality. The Case Planner integrates the entries recorded by assigned workers into a single, coherent list of specific needed improvements and changes that workers have identified. The **Launched** check box is system-filled once the Case Planner has launched and saved the Case Planner Summary. Once this check box is selected, no other entries can be recorded on this window and those previously recorded cannot be modified.

  For a list of all the windows the Case Planner Summary can be accessed from, see Appendix J.

- **Clear** (only in FSS/CWS): Clicking on this button clears the current entry displayed in the **Statement** field.

- **Save**: Clicking on this button saves work recorded or changed in the **Statement** field.

- **Cancel**: Clicking the **Cancel** button discards any unsaved data. The following message displays:

  “Do you want to cancel? Unsaved data and/or narratives will be lost.”

  - Click on the **Yes** button to discard the unsaved changes. *The Needed Improvements/Changes tab remains open.*
  
  - Click on the **No** button to leave the focus on the tab without discarding the unsaved changes.

The layout changes with the **Statement** field. This field is limited to 200 characters. However, there are no Text Control tools. Three additional buttons display next to the **Statement** field:

- **Add**
- **Modify**
- **Delete**

Record specific points for each person for each needed improvement or change in the **Statement** field, then add those entries to the list by clicking on the **Add** button. A directed narrative on the window that reminds workers to record changes individually, rather than as a long narrative. Because these improvements and/or changes generate a list rather than a narrative when the Case Planner Summary is accessed via this tab, they should be kept brief.
The Case Planner Summary list is carried forward to the Service Plan. To modify an existing entry, highlight the row and make the needed changes in the Narrative field. Once changes are made, click on the Modify button. Any record can be deleted by its author by highlighting that row and clicking on the Delete button. Only the author of the item can modify or delete it. Workers need to save the item(s) they recorded, modified or deleted.

Individual entries are retained as long as the FASP is In Process. Once the FASP is approved, “Draft” entries are no longer available.

---

**Step-by-Step: Recording Needed Improvements/Changes**

1. On the Needed Improvements/Changes tab, record in the Statement field the improvements and/or changes (family or child) that need to be addressed to promote the child(ren)’s safety and well-being.

2. Click on the Add button.
   *The narrative is added to the Entry field in the grid.*

3. Click on the Save button.

---

**Step-by-Step: Modifying Needed Improvements/Changes**

1. On the Needed Improvements/Changes tab, click on the box to the left of the entry to highlight an existing row from the grid.
   *The record displays in the Statement field.*

2. Make any necessary changes to the selected Needed Improvement/Change.

3. Click on the Modify button.
   *The changed statement displays in the grid.*

4. Click on the Save button.

---

**Step-by-Step: Deleting Needed Improvements/Changes**

1. On the Needed Improvements/Changes tab, click on the box to the left of the entry to highlight an existing row from the grid.
   *The record displays in the Statement field.*

2. Click on the Delete button.

3. Click on the Save button.
The Case Planner Summary Window on the Needed Improvements/Changes Tab

When accessed from the Needed Improvements/Changes tab on the Assessment Analysis window, the Case Planner Summary window displays differently than it does elsewhere in the FASP. When the Case Planner is preparing the FASP for submission, s/he accesses the Case Planner Summary functionality. This is initiated through the Case Planner Summary button on the Needed Improvements/Changes tab. Rather than recording a narrative entry, the Case Planner selects from a list of needed improvements/changes (or can record his/her own list items) to create a final list that is submitted with the FASP for approval. Because these statements are generating a list rather than a narrative, they should be kept very brief; they are carried over to the Needed Improvements/Changes list on the Service Plan window.

When accessed from the Needed Improvements/Changes tab, the window appears as below:

On the left side, the Preliminary List grid displays all of the individual entries recorded by workers assigned a role in the stage. The Case Planner List grid displays on the right side. Between the grids are two buttons: Add and Delete. Select the improvements and/or changes that will be submitted with the FASP for approval by highlighting the desired item in the Preliminary List grid and clicking on the Add button. This adds the selected item to the Case Planner List grid. The Case Planner can delete any Needed Improvements/Changes items s/he feels are unnecessary or incorrect once they have been submitted.
added to the Case Planner List grid by selecting the desired row and clicking on the **Delete** button located between the grids. Multiple entries can be added or deleted by selecting the desired rows and clicking on the appropriate button.

The Case Planner can add additional Needed Improvements/Changes by typing them into the **Statement** field below the grids. This field is limited to 200 characters. Once a new entry is made, add it to the Case Planner List by clicking on the **Add New** button next to the **Statement** field. To the right of the **Add New** button are the **Modify** and **Clear** buttons. To modify the text of an existing entry, highlight the desired row in the Case Planner List, make any necessary changes in the **Narrative** field and then click on the **Modify** button. To clear the **Statement** field of any text, click on the **Clear** button.

For a list of all the windows the Case Planner Summary can be accessed from, see Appendix J.

The following buttons display at the bottom of the **Case Planner Summary** window:

**Save**
Clicking on this button saves work that has been recorded or changes that have been made in the Case Planner Summary; the window remains open. The following message displays:

“Changes have been saved.”

- Click on the **OK** button to close the message.

**Cancel**
Clicking on the **Cancel** button discards any unsaved data. The following message displays:

“Do you want to cancel? Unsaved data and/or narratives will be lost.”

- Click on the **Yes** button to discard the unsaved changes and leave the window open.
- Click on the **No** button to leave the window open without discarding the unsaved changes.

**Close**
Clicking on the **Close** button closes the **Case Planner Summary** window and displays the **Needed Improvements/Changes** tab. If you have not saved all of your changes prior to clicking on the **Close** button, the following message displays:

“Do you want to exit? Unsaved data and/or narratives will be lost.”

- Click on the **Yes** button to discard the unsaved changes and close the **Case Planner Summary** window. 
  The **Needed Improvements/Changes** tab displays.
- Click on the **No** button to keep the **Case Planner Summary** window open with your unsaved changes displayed.
The Case Planner Summary window can be accessed at any time prior to submission of the FASP for approval. The information recorded here is carried forward to subsequent FASPs from the last approved in-sequence FASP and should be re-evaluated during every FASP cycle. When a subsequent FASP is first launched, the Case Planner’s List from the last approved in-sequence FASP will be brought forward into the Preliminary List on the Case Planner Summary window. These entries will not be stamped with the Case Planner’s ID. Once the Case Planner modifies an entry, s/he is considered the author.

Individual entries made by all of the workers assigned a role in the stage will be retained as long as the FASP is In Process. Once the FASP is approved, “Draft” entries are no longer available. The Approved FASP includes only the Case Planner List.

### Step-by-Step: Adding Information to the Case Planner List

1. On the **Needed Improvements/Changes** tab, click on the **Case Planner Summary** button.
   
   The Case Planner Summary window displays. The Preliminary List, on the left, displays all individual needed improvements/changes entries recorded by any worker assigned a role in the stage.

2. To add an entry from the Preliminary List to the Case Planner List, highlight the desired row, and then click on the **Add** button.
   
   The needed improvement/change from the Preliminary List is added to the Case Planner List on the right and the **Statement** field clears.

3. Click on the **Save** button.

### Step-by-Step: Recording Information on the Case Planner List

1. On the **Needed Improvements/Changes** tab, click on the **Case Planner Summary** button.
   
   The Case Planner Summary window displays. The Preliminary List, on the left, displays all individual needed improvements/changes entries recorded by any worker assigned a role in the stage.

2. To add an item directly to the Case Planner List, enter needed improvements/changes into the **Statement** field.

3. Click on the **Add New** button.
   
   The recorded narrative is added to the Case Planner List.

4. Click on the **Save** button.
Step-by-Step: Deleting Information on the Case Planner List

1. On the Needed Improvements/Changes tab, click on the Case Planner Summary button.
   The Case Planner Summary window displays. The Preliminary List, on the left, displays all individual needed improvements/changes entries recorded by any worker assigned a role in the stage.

2. To delete an item from the Case Planner List, highlight the desired row.
   The entry displays in the Statement field.

3. Click on the Delete button.

4. Click on the Save button.

Step-by-Step: Modifying Information on the Case Planner List

1. On the Needed Improvements/Changes tab, click on the Case Planner Summary button.
   The Case Planner Summary window displays. The Preliminary List, on the left, displays all individual needed improvements/changes entries recorded by any worker assigned a role in the stage.

2. To modify an item from the Case Planner List, highlight the desired row.
   The entry displays in the Statement field.

3. Make any necessary changes to the text in the Statement field.

4. Click on the Modify button.
   The changed statement displays in the list.

5. Click on the Save button.
Module 14: 
Foster Care Issues

Safety, permanency and well-being are three key issues for children and families receiving Foster Care services. Casework with children and families often involves managing extensive data from multiple sources and recording precise documentation so that written records are available for current and future reference. CONNECTIONS provides workers with a tool to help guide their practice and to manage and record pertinent information for each case. The Foster Care Issues functionality provides a uniform structure to assist workers in planning for and documenting key casework assessments, activities and outcomes about specific aspects of effective foster care practice. Information to be recorded includes both the efforts made in providing a safe, temporary living situation and concurrent efforts made toward providing a permanent living situation for children in care.

The Permanency Bill, Chapter 3 of the Laws of 2005, took effect on December 21, 2005. Part A of the Bill affects children placed in foster care under Article 10 of the Family Court Act (FCA), children placed directly with a relative or other suitable person under Article 10 of the Family Court Act (Non-LDSS Custody/direct care), children voluntarily placed in foster care, children surrendered for adoption, children completely freed for adoption (including completely freed children subject to Article 3 JD and/or Article 7 PINS proceedings) and children subject to Article 651.b Unaccompanied Refugee Minors. The main provisions of Part A include the following:

- Courts are to set a “Date Certain” for each permanency hearing for all children referenced above. This date for the first permanency hearing is to be set at the removal hearing (or the hearing approving the Voluntary Placement Agreement or surrender).

- The first permanency hearing after a non-freed child is removed must be commenced on the Date Certain set by the court, which must be within eight (8) months of the removal. The first permanency hearing for a child completely freed for adoption must occur no later than 30 days after the hearing that completely freed the child, but preferably immediately following an approval of a Voluntary Surrender or a Termination of Parental Rights disposition that completely frees a child for adoption. Subsequent permanency hearings for completely freed and non-freed children must be held at least every six months thereafter for as long as the child remains in foster care or direct care with a relative or other suitable person. A Date Certain for the next hearing will be set at each hearing, so that all parties know when they are expected back in court. The Judge may set the next permanency hearing at a date earlier than six (6) months from the date of the current hearing, but no later. In addition, all permanency hearings must be completed within 30 days of commencement.

- Permanency Hearing Reports must be prepared for each permanency hearing. These reports will serve as the means used to notify the court of a family’s progress. The Permanency Hearing Report must be mailed with the Permanency Hearing Notice to required parties 14 days prior to the Date Certain; it must also be filed with the court. Three templates have been developed collaboratively by the Office of Court Administration (OCA) and OCFS for use in completing these reports. These templates offer a temporary solution; however, it is anticipated that after the implementation of Build 19, CONNECTIONS will generate Permanency Hearing Reports and notices. The templates can be accessed at: http://www.ocfs.state.ny.us/main/legal/legislation/permanency/caseworkerguide.asp
Foster Care Issues functionality is available within all FASP types (Initial, Comprehensive and Reassessment and Plan Amendment) and is a required component for any child with a Program Choice of “Placement.” Also, two sub-nodes of Foster Care Issues—**Family/Child Visiting Plan** and **Appropriateness of Placement**—must be completed for Removal Update Reports. The Removal Update process in CONNECTIONS pulls these two sub-sets of information from Foster Care Issues, combines them with the Service Plan and Visiting Plan components of an in-process FASP, and produces a Removal Update Report, which can be submitted for review and approval. It allows workers to obtain approval of a status change within 30 days, in order to be in compliance with Permanency Bill regulations, and is available for the first 90 days after a child’s removal. The Removal Update functionality also provides workers with the ability to obtain current, approved information for inclusion in the Permanency Hearing Report when a periodic FASP is in-process and cannot be completed or approved before a Permanency Hearing Report is due. The Removal Update functionality is available in FSS/CWS stages for children with a Program Type of “Placement” or “Non-LDSS Custody.”

The **Foster Care Issues** maintained in CONNECTIONS are grouped into seven sub-nodes on the FASP Tree. Each sub-node opens a window, which consists of specific questions and supporting narratives. Some of the questions are customized based on the child’s Permanency Planning Goal or other factors, such as the child’s age. Only the questions that are applicable will display. Each sub-node contains a series of tabs; each tab displays one or more Yes/No questions and supporting narrative fields.

<table>
<thead>
<tr>
<th><strong>Appropriateness of Placement</strong></th>
<th>Workers use this sub-node to view and record details regarding the child(ren)’s location, justification for placement, continuity of environment and culture, and alternatives to placement that were considered.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Adjustment and Functioning</strong></td>
<td>Workers use this sub-node to record child safety in the specific foster care setting and the child’s adjustment to foster care. This information is also used to assess the child’s current level of functioning in the placement setting.</td>
</tr>
<tr>
<td><strong>Permanency Progress/ Concurrent Planning</strong></td>
<td>Workers use this sub-node to record efforts made toward achieving a child’s Permanency Planning Goal, including efforts made to establish a concurrent plan if reunification is not likely.</td>
</tr>
<tr>
<td><strong>Life Skills Assessment</strong></td>
<td>Workers use this sub-node to record information detailing a youth’s (age 14 and over) ability to perform specific life skills. The assessment record helps determine what services are necessary to maintain or enhance a desired life-skill competency level.</td>
</tr>
<tr>
<td><strong>Family/Child Visiting Plan</strong></td>
<td>Workers use this sub-node to record specific information about visitation between children in care and parents, siblings, and other visits with significant persons and, in subsequent FASPs, the Visiting Plan evaluation.</td>
</tr>
</tbody>
</table>
Family/Child
Visiting Grid

Workers use this sub-node to display family/child visitation information recorded in Progress Notes in CONNECTIONS, based on the following types:

- Attempted Family/Permanency Discharge Resource Visitation
- Attempted Sibling Visitation
- Family/Permanency Discharge Resource Visitation
- Sibling Visitation

Discharges

Workers use this sub-node to record the type of discharge that is occurring and specifics regarding Discharge Planning.

The Foster Care Issues node and its corresponding sub-nodes are accessed via the FASP Tree.

---

**Step-by-Step: Accessing the Foster Care Issues Node**

1. From the Assigned Workload, select the FSS. The **Tasks...** button enables.
2. Click on the **Tasks...** button. The FSS displays.
3. Click on the **Family Assessment and Service Plan** tab. The **Family Assessment and Service Plan** window displays, with the FASP Tree (containing FASP types and corresponding nodes) on the left side of the window.
4. Click on the ‘+’ next to the desired FASP. The corresponding nodes and sub-nodes display.
5. Click on the ‘+’ next to the Foster Care Issues node. The Foster Care Issues node expands.
Select Child Grid

The Select Child grid displays in the upper left corner of each window in the Foster Care Issues node, displaying the child’s ID, name and age. The child’s age and date of birth are calculated based on the FASP due date; if no FASP is due, the date is calculated based on the FASP initiation date. For all stages in which the recording of Foster Care Issues is required, all children in the stage with a Program Choice of “Placement” are listed in the Select Child grid. If the Foster Care Issues node was an added component, every child in the stage, regardless of Program Choice, is listed in the grid. (See “Add a FASP Component” in Module 8: Family Assessment and Service Plan.) CONNECTIONS gives workers the flexibility to add one or more Foster Care Issues as a component. For example, the Life Skills Assessment sub-node can be added for a child who is receiving Preventive services but not Foster Care services. The scroll bar displays to the right of the grid (when necessary), enabling the worker to scroll down and view the entire list. Selecting a child from this list applies information to that specific child. Only one child may be selected at a time.

Each window within the Foster Care Issues node also contains three buttons:

- **Spell Check**  
  Click on this button to identify possible misspellings in the narrative field.

- **Save**  
  Clicking on this button saves work that has been recorded or modifications that have been made. Once changes are saved, all other tabs on the window enable.

- **Cancel**  
  Clicking on this button cancels any changes made to the information on the tab since the last save. The Cancel button is disabled until the worker makes a change. When the worker clicks on the Cancel button, the following message displays:

  “Do you want to cancel?  
  Unsaved data and/or narrative(s) will be lost.”

  - Clicking on the Yes button cancels the changes and all information reverts to its state after the last save.
  - Clicking on the No button ends the cancellation request and returns to the window with the current changes that were made.

- **Close**  
  Clicking on this button closes the window and displays the FASP window. If any unsaved changes exist on the window when you click on this button, the following message displays:

  “Do you want to Exit?  
  Unsaved data and/or narrative(s) will be lost.”

  - Clicking on the Yes button discards the unsaved changes and closes the window.
  - Clicking on the No button closes the message without closing the window; all changes remain unsaved.

- **Copy**  
  (only available on certain tabs)  
  After recording and saving information for a child, you can duplicate that information to one or more children in the stage using the Copy to Child functionality. When you click on the Copy button, the Copy to Other Children window displays, containing the name of the child for whom you
recorded information and a list of all other children in the stage. Select one or more children to whom you want to copy information. Click on the **Save** button on the *Copy to Other Children* window to complete the copying process and save the information to the database. The **Copy** button is only available on certain tabs. Only the Case Planner or the Caseworker Associated to a child can copy information to that child. The **Copy** button is disabled if information has already been recorded and saved for that child.

Only a Caseworker who is Associated to a specific child on the *Tracked Children Detail* window or a Case Planner can record information in the **Foster Care Issues** node for that child. For Caseworkers who are *not* Associated to a child on the *Tracked Children Detail* window, the fields are view-only. If no information has been recorded, the following message displays when the child is selected from the Select Child grid:

“No information exists for selected child.”
Appropriateness of Placement Window

A child must be placed in the least restrictive, most family-like setting appropriate for the child’s needs. The appropriateness of a particular placement is a critical issue for children and families receiving Foster Care services. The Appropriateness of Placement window allows workers to record and maintain all required information regarding the selection of a foster care placement for a child, including why a child was placed in foster care, the alternatives considered before placement occurred and the efforts made by workers to maintain continuity with the child’s pre-placement environment. This information is required for Removal Update Reports and Permanency Hearing Reports. Recording the provision of a safe, temporary and appropriate living situation for a child in care is the first step toward reaching the ultimate goal of permanency.

Often when creating and modifying a FASP, Appropriateness of Placement information must be recorded. For example:

- a child with a Program Choice of “Placement” in the Initial FASP;
- a child who has entered or reentered foster care since the last FASP (Comprehensive or Reassessment); or
- a child who has moved from one placement to another and the information has not yet been recorded in a Plan Amendment.

The Appropriateness of Placement window provides for the recording and maintenance of all required information regarding the selection of a foster care placement for each child to whom the Caseworker is Associated on the Tracked Children Detail window. The Appropriateness of Placement window includes a narrative regarding why a child was placed in foster care and the alternatives that were considered before placement occurred.

For all FASP types except Initial, clicking on the Appropriateness of Placement sub-node on the FASP Tree displays the Appropriateness of Placement message window. This window contains three checkboxes in an FSS/CWS stage and two checkboxes in an FSS/CCR stage. Workers select the corresponding checkbox if any child in the Stage Composition has entered or reentered foster care and/or has been moved from one foster care setting to another. The worker can select one checkbox, both checkboxes or neither checkbox, as applicable. If neither option applies, s/he selects the Does not apply to any child checkbox.

Once workers have selected the appropriate checkbox(es), they click on the OK button to open the Appropriateness of Placement window. (If the Does not apply to any child checkbox was selected, clicking on the OK button displays the FASP window.)
Clicking on the **Cancel** button closes the **Appropriateness of Placement** message window and the **FASP** window displays.

### Step-by-Step: Opening the **Appropriateness of Placement** Window

1. From the **Foster Care Issues** node, click on the **Appropriateness of Placement** sub-node.
   
   The **Appropriateness of Placement** message window displays for all FASP types except Initial. If Appropriateness of Placement information was previously recorded and saved in CONNECTIONS or this in an Initial FASP, this message window does not display.

2. Select the applicable checkbox.

3. Click on the **OK** button.
   
   The **Appropriateness of Placement** window displays.

Once workers have made a selection on the **Appropriateness of Placement** message window, the **Appropriateness of Placement** window displays. If the **Does not apply to any child** checkbox was selected, the **Appropriateness of Placement** window does not display; the message window closes and the **FASP** window displays. The **Appropriateness of Placement** window consists of the Select Child grid, tabs and buttons. (For detailed information about these features, see page 14-4.)

The stage type determines the tabs that display:

- **Activities Prior to Placement**
- **Location of Child**
- **Continuity of Environment** (*FSS/CWS stages only*)
- **Continuity of Culture for American Indian Children**
The Activities Prior to Placement Tab
When a child is being considered for placement, workers need to explore and consider other, less disruptive measures to protect the child, family or community. Other safety interventions besides foster care may allow a child to remain at home while preventive services are put in place that could reduce the risk of future abuse or maltreatment. In addition, specific steps must be taken to locate relatives or family friends who can provide alternative living arrangements for the child(ren). The Activities Prior to Placement tab allows workers to record the activities that were pursued in order to avert placement and to demonstrate to the court that reasonable efforts were made to prevent placement. This information is critical; the court must be able to determine that these efforts were made in order for the agency to receive funding for services to the child.

The Activities Prior to Placement tab provides directed narrative fields for recording information regarding the alternatives that were considered prior to foster care placement or changes in foster care settings for a child already in care. The fields that display are dependent on the selections you made on the Appropriateness of Placement message window. A Caseworker who is Associated to a child, or the Case Planner, can record and maintain information on this tab.

For FSS/CWS stages, when workers select the Child has entered or reentered foster care checkbox on the Appropriateness of Placement message window, or the FASP is the Initial FASP, workers complete the top narrative field. The directive for the narrative instructs workers to discuss the reasons for placement, record the alternatives to placement that were
considered, the services offered to the family, and/or the reasonable efforts made to avert placement, including efforts made to identify and evaluate the suitability of the non-respondent parent, other relatives, or other suitable persons as resources. The narrative should contain a description of why these alternatives are unavailable, refused by the parent, tried but unsuccessful, inappropriate or not sufficient to provide safety at this time. This narrative should also contain a description of what harm is likely to occur unless a child is placed in foster care.

For FSS/CWS or FSS/CCR stages, workers select the **Child has been moved from one foster care setting to another** checkbox on the *Appropriateness of Placement* message window, they are required to complete the bottom narrative field. In this field, the major events that precipitated the move and the efforts that were made to prevent the move in the absence of safety issues are recorded. If a safety issue in the foster care setting prompted the move, a comprehensive description of the safety issue and the specific actions that were taken to protect the child must be recorded.

<table>
<thead>
<tr>
<th>Step-by-Step: Recording Activities Prior to Placement Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> From the <strong>Foster Care Issues</strong> node, click on the <strong>Appropriateness of Placement</strong> sub-node.</td>
</tr>
<tr>
<td>The <em>Appropriateness of Placement</em> message window displays (unless this is an Initial FASP or information has already been recorded on this window).</td>
</tr>
<tr>
<td><strong>2</strong> Select the appropriate checkbox:</td>
</tr>
<tr>
<td>• <strong>Child has entered or reentered foster care</strong></td>
</tr>
<tr>
<td>• <strong>Child has been moved from one foster care setting to another</strong></td>
</tr>
<tr>
<td>• <strong>Does not apply to any child</strong></td>
</tr>
<tr>
<td><strong>3</strong> Click on the <strong>OK</strong> button.</td>
</tr>
<tr>
<td><em>If you selected the <strong>Child has entered or reentered foster care</strong> checkbox and/or the <strong>Child has been moved from one foster care setting to another</strong> checkbox, the <em>Appropriateness of Placement</em> window displays with the <strong>Activities Prior to Placement</strong> tab active. If you selected the <strong>Does not apply to any child</strong> checkbox, the FASP window displays.</em></td>
</tr>
<tr>
<td><strong>4</strong> Click on the box to the left of the child’s name in the <strong>Select Child</strong> grid at the top of the window.</td>
</tr>
<tr>
<td><em>The child’s line highlights in blue.</em></td>
</tr>
<tr>
<td><strong>5</strong> If you selected the <strong>Child has entered or reentered foster care</strong> checkbox for an FSS/CWS stage, use the <strong>Discuss the reasons for placement</strong> … narrative field to record the alternatives to placement that were considered and/or any services that were offered to avert placement.</td>
</tr>
</tbody>
</table>

For FSS/CWS Stages ONLY:

If you selected the **Child has entered or reentered foster care** checkbox on the *Appropriateness of Placement* message window, or this is an Initial FASP, a narrative field displays in the upper half of the **Activities Prior to Placement** tab.

If you click on the **Cancel** button when unsaved changes have been made to the window, the following message displays:

*“Do you want to cancel? Unsaved data and/or narratives will be lost.”*

♦ **Click on the **Yes** button** to discard all unsaved changes and close the window.

♦ **Click on the **No** button** to close the message; the window remains open and all changes remain pending.
6 If you selected the **Child has been moved from one foster care setting to another** checkbox for an FSS/CWS or FSS/CCR stage, use the **Discuss the major events that led to the move**... narrative field to record the major events that led to the move. If a safety issue in the foster care setting prompted the move, include a description of the issue and specific actions that were taken to protect the child, as well as efforts to prevent the move in the absence of safety issues.

7 Click on the **Save** button.

_The information is saved to the database. All other tabs enable on the window._
**Location of Child Tab**

The **Location of Child** tab allows workers to view information in CONNECTIONS that has been carried over from CCRS. This information includes the location where a child who is in care has been placed. CCRS remains the system of record for placement information. Workers may find information that is incorrect in CONNECTIONS; workers can update and save information in CONNECTIONS, but their changes will not modify the CCRS record. The CCRS record will need to be updated to reflect the changes made in CONNECTIONS.

Two important standards of child welfare practice stipulate that:

- children in foster care should be placed in the lowest level of care that meets their needs; and
- children should be placed as close as possible to their family/permanency resource, as long as it is not contrary to the child(ren)’s well-being.

The **Best Interest** narrative section on the **Location of Child** tab allows workers to record the reason a placement was selected, including a supporting narrative to document (if applicable) why a child was placed a distance from his/her home.

Selecting a level of placement other than **Adoptive Home, Certified Foster Home** or **Approved Relative Foster Home**, a narrative field displays requiring workers to explain the child’s specific needs and how the placement responds to the level of care for that demonstrated need.
This tab is comprised of the following elements:

**CCRS Placement Data as of Date label**
This label displays the date and time that the information was brought over from CCRS. This date is pre-filled by the CONNECTIONS Interface with CCRS and cannot be modified. If information is modified on the Location of Child tab in CONNECTIONS, this label will not display the next time the tab is opened.

**Location grid**
The Location grid is a single-row, view-only grid at the top of the tab that displays the following information:

- Facility Name
- Facility Address
- Placement Date
- Facility Type
- Reason for Transfer
- Out of County
- Reason for Out of County Placement

If CONNECTIONS data has not been recorded for the selected child for all of the fields listed above, the grid populates with information from CCRS.

To modify the information on this tab, click on the Edit button.

**Edit button**
Clicking on this button displays the Location Detail window, in which you can modify location information. For more information about this window, see “The Location Detail Window” on page 14-14.

For CWS stage types, the Location of Child tab displays the following question:

*Is the child placed a substantial distance from his/her parent(s)? (Include situations where parent(s) move a substantial distance or out-of-state after the child is placed.)*

*For NYC only: Include children placed outside their Community District.*

Workers are required to answer Yes or No to this question by selecting the corresponding radio button. If the Yes radio button is selected, workers must explain in the Best Interest narrative field why such placement is in the best interest of the child. If the Out of County indicator is selected on the Location grid, the Yes radio button populates automatically; the No radio button may be selected, if appropriate. If the No radio button is selected, this narrative field does not display.

For FSS/CCR stages, the tab displays the following question:

*Is the child placed a substantial distance from his/her siblings or out of state?*

If the Out of County indicator is selected on the Child Location grid, the Yes radio button populates automatically; the No radio button may be selected, if appropriate. If the Yes radio button is selected, workers must record in the corresponding narrative field the reasons why this placement is in the best interests of the child. If the No radio button is selected, this narrative field does not display.
Step-by-Step: Recording Location of Child Information

1. On the **Location of Child** tab, click on the box to the left of the child’s name in the Select Child grid to view placement information for that child. *The placement information displays for the selected child. This information is retrieved from CONNECTIONS information. If the data has not yet been recorded in CONNECTIONS, the fields populate from information retrieved from CCRS. If the populated fields do **not** reflect current information, click on the **Edit** button to open the Location Detail window. Record new placement information.*

2. For FSS/CWS stages, click on the **Yes** or **No** radio button, as applicable, in response to the following question: “**Is the child placed a significant distance from his/her parents? (Include situations where the parent moved a substantial distance or out of state after the child is placed.)**” For NYC only: Include children placed outside their Community District.

   —OR—

   For FSS/CCR stages, click on the **Yes** or **No** radio button, as applicable, in response to the following question: “**Is the child placed a significant distance from his/her siblings or out of state?**”

3. If you select the **Yes** radio button, a corresponding narrative field displays, highlighted in yellow (indicating that it is a required field), with the following instructions: “**Explain why such placement is in the best interests of the child.**” *If you select the **No** radio button, the narrative field does not display.*

4. Record the narrative, as applicable.

5. If applicable, record a narrative in the **Service Needs** narrative section, describing which service needs cannot be met at a lower level of care.

6. Click on the **Save** button to save the information to the database.
**The Location Detail Window**

This window is used to record the physical location for each foster child in the stage. This information can be recorded and maintained by the Caseworker who is Associated to the child on the *Tracked Children Detail* window or by the Case Planner.

The fields on the *Location Detail* window contain the information displayed on the Location grid on the *Location of Child* tab. This information is brought over from CCRS and/or displayed from information recorded in CONNECTIONS; it is modifiable.

The following fields display on the *Location Detail* window:

- **Facility Name**
  - This field displays the name of the facility where the child is in placement.

- **Address 1**
  - These fields display the facility’s complete address. (If the facility also has an alternate address, record that information in the *Address 2* field.)

- **City**

- **State**

- **ZIP**

- **Placement Date**
  - This field contains the date on which the child was placed at the facility. To change the date, click on the drop-down arrow and select from the resulting calendar. (The date can also be changed by typing the month, date and year directly in the field [in m/d/yy format]; each section (month, date, year) must be recorded separately when using this method and the field’s checkbox must be selected before the date can be manually changed.)

- **Facility Type**
  - This field contains a drop-down list of 11 possible Facility Types supported in CONNECTIONS:

The information displayed on this window is carried forward from CCRS to CONNECTIONS in the system interface.

**Remember that information modified in CONNECTIONS does not carry over to CCRS.**

To avoid needing to record the information in both systems, record the Location Detail information in CCRS, then re-open the *Location Detail* window in CONNECTIONS. The system interface will update CONNECTIONS with the CCRS information.
Reason for Transfer

Use this field to record the reason for transferring the child to the new location. This field contains a drop-down list of 18 possible choices:

- Adoptive Home
- Runaway Shelter Group
- Group Institution
- Group Residence
- Group Home
- Agency Boarding Home
- Certified Foster Home
- Approved Relative Foster Home
- Psychiatric Hospital
- Other
- Foster/Adoptive Home
- Long Term Care
- Child Request
- Natural Family Request
- Foster Family Request
- Placed in Adoptive Home
- Court Adjudication Change
- Child’s Condition Improved
- Child’s Condition Deteriorated
- Questionable Care
- Re-unite Siblings
- Facility No Longer Available
- Cannot Provide New Service Needed
- Original Plan Deemed Inappropriate
- Facility Closed
- Child too Old
- Temporary Placement
- Child and Foster Family Request
- Other
- Unknown
- Non-Emergency
- Agency Approved EARH

Out of County

This checkbox is selected automatically if the child is placed outside of his/her home county. This checkbox can be deselected, if necessary.

Reason for Out of County Placement

Use this field to select the reason why out-of-county placement was selected. This field contains a drop-down list of 11 possible reasons:

- Clinical Reason
- Child in Vicinity of Family
- Judge’s Order
- Placement by Another District
- No Program Available in Home County
- No Vacancy Available in Home County
- Rejected by Local Program
- Parents Do Not Reside in Area
- Adoption Placement/Child Freed
- Foster Family Moved
- Other
- Unknown

Out of State

This checkbox provides workers with the ability to indicate if the child has been placed out of New York State.

Reason for Out of State

This field is required when the Out of State checkbox is selected. This field is used to record the reason that the child was placed out-of-state. The following options display in a drop-down list:
Placement

• Child residing with relative or other suitable person
• Child in pre-adoptive placement with relative
• Child in pre-adoptive placement with non-relative
• Clinical Program exists in NYS – no vacancy
• Child was rejected from all NYS programs due to clinical need
• No program available in NYS

Program Types

This field displays and is required when a worker selects “No program available in NYS” from the **Reason for Out of State Placement** drop-down menu. This field is used to record the type(s) of programs the child requires. The following options display in a drop-down list; more than one option can be selected:

• Medical need
• Psychiatric need
• Developmental disability need
• Violent behavior
• Sex offending behavior
• Fire setting behavior
• Criminal behavior
• Substance Abuse

The **Location Detail** window also contains three buttons:

**Save**

This button enables once information has been recorded or modified on the **Location Detail** window. Clicking on this button saves work that has been recorded or modifications that have been made on the window, closes the window and displays the **Location of Child** tab.

**Cancel**

Clicking on this button before the changes are saved displays the following message:

> “Do you want to Cancel? Unsaved data and/or narrative(s) will be lost.”

• Click on the **Yes** button to discard all changes. The **Location Detail** window remains open.
• Click on the **No** button to close the message without closing the **Location Detail** window; all changes remain unsaved.
Clicking on this button closes the Location Detail window and displays the Location of Child tab.

If all the changes have not been saved prior to clicking on the Close button, the following message displays:

“Do you want to exit?

Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes. The Location Detail window closes and the Location of Child tab displays.

- Click on the No button to return and to keep the Location Detail window open with the unsaved changes displayed.

---

**Step-by-Step: Recording Information on the Location Detail Window**

1. On the Location of Child tab, click on the box to the left of the child’s name in the Select Child grid.
2. Click on the Edit button. The Location Detail window displays.
3. In the Facility Name field, record the name of the foster home or facility where the child has been placed.
4. Click on the drop-down arrow for the Facility Type field and select from the resulting list.
5. Record the street address of the foster home or facility in the Street 1 (and, if necessary, Street 2) field(s).
6. Record the city, state and ZIP Code information by typing directly in the City, State and Zip fields.
7. To accept the current Placement Date, click on the checkbox to the left of the existing date. **—OR—**
   Change the date by clicking on the drop-down arrow for the Placement Date field and selecting a new date from the resulting calendar selector.
   You can also type the date directly into the field, one segment (month, date, year) at a time; to use this method of entry, you must first click on the checkbox to make the field “active.”
8. If appropriate, click on the drop-down arrow for the Reason for Transfer field and select from the resulting list.
9. If the child is placed out of county, select the Out of County checkbox. Proceed to **Step 10**. **—OR—**
   If the child is not placed out of county, skip to **Step 11**.
10 Click on the drop-down arrow for the **Reason for Out of County Placement** field and select from the resulting list.

11 If the child is placed outside of New York State, click on the **Out of State** checkbox to select it.

   *Proceed to Step 12.*

   —OR—

   If the child is not placed outside of New York State, skip to Step 14.

12 Click on the drop-down arrow for the **Reason for Out of State Placement** field and select from the resulting list.

   *If you selected “No program available in NYS” for the Reason for Out of State Placement field, the Program Types field displays. Proceed to Step 13.*

   —OR—

   *If the reason for out of state placement you selected was other than “No program available in NYS,” skip to Step 14.*

13 Click on the drop-down arrow for the **Program Types** field and select one or more options from the resulting list.

14 Click on the **Save** button.

*Recording and saving other changes to this window may change the fields that display on the Location of Child tab. You may be required to record specific information on the tab due to those changes.*
The Continuity of Environment Tab

Another standard of foster care practice is the maintenance of continuity of environment for children in care, since a similar foster care environment can add to the child’s sense of familiarity and security and lessen the barriers between the parents and the foster parents. The Continuity of Environment tab is designed to capture information about the worker’s efforts to maintain an environment as similar as possible to that of the child placed in care where it is safe and appropriate to do so. This includes an environment that reflects the parent’s religious preferences. It is also pertinent to document situations in which contact with certain family members is not occurring and why. Sibling groups who require placement must be placed together, unless placing them together would be contrary to the health, safety or well-being of one or more of the children. Separation of siblings is permitted only after a consultation with and/or evaluation by professional staff other than the worker and supervisor. The results of the consultation must be documented in the case record. The Continuity of Environment tab on the Appropriateness of Placement window provides for the management and recording of pertinent continuity information.

The tab contains five questions that address whether the placement supports continuity of environment:

- Are all siblings placed in the same home?

Does the Placement Permit:

- Family Contact?
- Sibling Contact?
- Continuity with the Child’s Community?
- Continuity with the Parent’s Religious Preference?

Workers answer each question by selecting the corresponding Yes or No radio button. (The third question, which addresses sibling contact, also contains an N/A button for use in situations where there are no siblings.) A response must be selected for
each question. Selecting the No radio button for the first question (“Are all siblings placed in the same home?”) displays a narrative field with the following instructions: “Where siblings are not placed together in foster care, explain why they are separated and what efforts are being made for them to maintain contact.”

Selecting the No radio button for any of the remaining questions displays a narrative field where workers must explain why the specific placement was selected, despite a lack of continuity.

<table>
<thead>
<tr>
<th>Step-by-Step: Recording Continuity of Environment Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 On the Appropriateness of Placement window, click on the Continuity of Environment tab.</td>
</tr>
<tr>
<td>2 Click on the box to the left of the child’s name on the Select Child grid.</td>
</tr>
</tbody>
</table>
| 3 Click on the Yes or No radio button, as appropriate, for the Sibling Placement question.  
  If you click on the No radio button, a narrative field displays on the tab with the following instructions: “Where siblings are not placed together in foster care, explain why they are separated and what efforts are being made for them to maintain contact.” If you click on the Yes radio button, the narrative field does not display. |
| 4 Record comments, as appropriate. |
| 5 For the Family Contact question, click on the Yes or No radio button, as appropriate.  
  If you click on the No radio button, a narrative field displays on the tab with the following instructions: “For each situation where continuity is not achieved, explain why the specific placement was nevertheless selected.” The field highlights in yellow, indicating that comments are required. |
| 6 Record comments, as appropriate. |
| 7 For the Sibling Contact question, click on the Yes, No or N/A radio button, as appropriate:  
  • If you select the Yes radio button, skip to Step 9.  
  • If the child has no siblings, click on the N/A radio button. (Skip to Step 9.)  
  • If you select the No radio button, the narrative field described in Step 5 displays (if it was not generated by a No response in Step 5). |
| 8 Record comments, as appropriate. |
| 9 For the Continuity with the Child’s Community question, select the Yes or No radio button, as appropriate.  
  If you click on the Yes radio button, skip to Step 11. If you click on the No radio button, the narrative field described in Step 5 displays (if it was not generated by a No response in Step 5 or Step 7). |
| 10 Record comments, as appropriate. |
| 11 For the Continuity with the Parent’s Religious Preference question, select the Yes or No radio button, as appropriate.  
  If you click on the Yes radio button, skip to Step 13. If you click on the No radio button, the narrative field described in Step 5 displays (if it was not generated by a No response in Step 5, Step 7 or Step 9). |
12 Record comments, as appropriate.
13 Click on the Save button.

The Continuity of Culture for American Indian Children Tab
When involved in casework with children and families of American Indian heritage, it is imperative to place these children in an environment that supports their culture and affords them all rights under the American Indian Child Welfare Act.

This tab contains the following question:

“Is the child in placement an American Indian child?”

By default, CONNECTIONS populates the Yes or No radio button, based on the information recorded on the Person Demographics tab. Specifically, if the Race column on that tab indicates “American Indian” for that child, the Yes radio button is selected automatically on this tab; if “American Indian” is not indicated in the Race column, the No radio button is selected automatically on this tab. This selection can be changed.

When a worker changes this selection, CONNECTIONS verifies whether the selected response is consistent with the Race information recorded for that child on the Person Demographics tab. If it does not match, the following message displays:

“Your selection is not consistent with the child’s ethnicity found in Person Demographics.”

This message does not prevent workers from proceeding; they should, however, update the child’s race on the Person Demographics tab to keep the information consistent. Clicking on the OK button closes the message.
When the No radio button is selected in response to the original question (“Is the child in placement an American Indian child?”), this is the only question that displays on the tab. When the Yes button is selected, two follow-up questions display:

“Does this Placement meet the requirement for the child to be placed in a home compatible with the child’s culture?

“Was the required order of preference for placement of American Indian children followed?”

Workers select the respective Yes or No radio buttons, as appropriate, in response to these questions. Selecting No to either or both questions displays a narrative field where workers are required to record an explanation.

After recording and saving information for a child, workers can copy that information for one or more children in the stage by clicking on the Copy button on the Continuity of Culture for American Indian Children tab. The Copy function copies information that has been recorded and saved on any tab on this window.

### Step-by-Step: Recording Information About Continuity of Culture for American Indian Children

1. On the Appropriateness of Placement sub-node, click on the Continuity of Culture for American Indian Children tab.

2. On the Select Child grid, click on the box to the left of the appropriate child’s name.

3. Respond to the question (“Is the child in placement an American Indian child?”) by selecting either the Yes or No radio button. This field is system populated based on the information you recorded on the Person Demographics tab.

   - When you select one of these radio buttons, CONNECTIONS verifies whether the Race column on the Person Demographics tab indicates “American Indian” for the selected child. If the response you selected does not match the Race selection on the Person Demographics tab, the following message displays:

     “Your selection is not consistent with the child’s ethnicity found in Person Demographics.”

   - Click on the OK button to close the message.

   - If you select the Yes button, the following questions display:

     “Does this placement meet the requirement for the child to be placed in a home compatible with the child’s culture?”

     “Was the required order of preference for placement of American Indian children followed?”

   - If you select the No radio button for either the second or the third question, record an explanation in the narrative field regarding why the placement was selected, despite a lack of continuity of culture.

4. If applicable, respond to the follow up questions that display.

5. Click on the Save button.
The Adjustment and Functioning Window

The Adjustment and Functioning window provides a uniform structure for documenting several factors that affect the child’s overall well-being: the child’s response to separation and loss, overall functioning and well-being in the current placement, and the degree to which the child’s needs for safety are being met. Ongoing assessment of the child’s response to a setting is necessary to determine if the placement is meeting the child’s current service and health needs in the least restrictive and most home-like setting. This documentation is completed in the FASP for both FSS/CWS and FSS/CCR stages.

The Adjustment and Functioning window contains the Select Child grid and two tabs to provide for the recording of the worker’s assessment of a child’s safety in and adjustment to foster care.

The Adjustment in Foster Care Tab

The Adjustment in Foster Care tab provides for the recording of information describing how a child is functioning in his/her foster care location. As part of recording Adjustment and Functioning information, the Caseworker must record an Adjustment in Foster Care narrative for each foster child in the stage to whom that Caseworker has been Associated on the Tracked Children Detail window.

A narrative format is used to record information describing how each child is functioning in his/her foster care location.

Workers need to observe the child in the foster care setting, confer with the foster parents and child, and document the physical indicators (eating, sleeping, etc.), emotional indicators (withdrawal, behavioral outbursts, etc.) and interpersonal indicators (relationships with foster family household members; siblings, if applicable) that best demonstrate the child’s adjustment to the foster care setting. This narrative should also explain how this placement is the most appropriate setting to meet the child’s current service and health needs and whether it is the
least restrictive and most home-like setting. If a child has moved from one foster care setting to another, include specific information that describes the child’s response to the move.

### Step-by-Step:
**Recording Adjustment in Foster Care Information**

1. From the **Foster Care Issues** node, click on the **Adjustment and Functioning** sub-node.  
   *The Adjustment and Functioning window displays, with the Adjustment in Foster Care tab active.*

2. Click on the box to the left of the child’s name in the Select Child grid.  
   *The child’s line highlights in blue.*

3. Record the narrative describing the child’s functioning in the foster care setting.

4. Click on the **Save** button.

### The Safety in Foster Care Tab

A worker’s focus on the safety of the child continues when the child is in foster care. Workers continue to assess for and support the safety of the child in the foster home; this occurs by having direct contact with the child in the foster care setting, as well as identifying, supporting and documenting protecting factors that are keeping the child safe in his/her foster care placement. Protecting Factors are inherent in the foster care environment and help keep the child safe in the foster care placement. An example of a protecting factor for a placement involving a teenager who is emotionally disturbed would be that the foster parents have extensive experience working with emotionally disturbed children and are a licensed therapeutic foster home. If safety-related issues have been identified in the foster care setting, the worker needs to document the issue and the actions s/he took to intervene and to preserve the child’s safety in placement. An identified safety-related issue might be that a foster parent takes several different types of medication (for seizure activity and hypertension) and the medicine was found to be within reach of a young foster child. The action taken by the worker to remedy the situation would be to verify that the foster parent obtained a locked medical box in which to put the medication to prevent access by the foster child. The **Safety in Foster Care** tab provides a uniform structure for documenting this casework effort.
The narrative field at the top of the tab is used to identify and describe protecting factors that keep the selected child safe in the current placement.

The question on this tab displays differently depending on the type of FASP being recorded:

<table>
<thead>
<tr>
<th>Initial FASP</th>
<th>Comprehensive or Reassessment FASP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there any safety-related issues in the current placement?</td>
<td>Since the last FASP, are there any safety-related issues in the current placement?</td>
</tr>
</tbody>
</table>

Workers select the Yes or No radio button to indicate whether there are any safety-related issues in the child's current placement. Selecting the Yes radio button displays a narrative field where workers must document those issues, along with a description of the activities they put into place to provide for the child's safety. If No radio button is selected, the narrative field does not display.

After recording and saving information for a child, workers can copy that information for one or more children in the stage by clicking on the Copy button on the Safety in Foster Care tab. This copies information that has been recorded and saved on either tab on this window. (For more information about the Copy to Other Children function, see page 14-83.)

**Step-by-Step: Recording Safety in Foster Care Information**

1. On the Adjustment and Functioning window, click on the box to the left of the child’s name in the Select Child grid. *The child’s line highlights in blue*
2. Click on the Safety in Foster Care tab.
3. In the Protecting Factors narrative field, record any identified protecting factors that keep the child safe in his/her current placement.
4. Select the Yes or No radio button, as applicable, to reflect the presence or absence of safety-related issues in the child’s current placement.
5 If you selected the **Yes** radio button in **Step 4**, use the corresponding narrative field to describe the safety-related issues and the actions you have taken to provide for the safety of the child.

6 Click on the **Save** button.
The Permanency Progress/Concurrent Planning Window

Workers are responsible for supporting parents and children in achieving their goals within timeframes that respect the child’s developmental and permanency needs and that meet federal and state standards. Concurrent planning is an effective method of achieving permanency within those timeframes; the Permanency Progress/Concurrent Planning window supports the worker in thinking through the concurrent planning process and documenting progress made in that process. Workers are continuously assessing the progress being made by a child in foster care (and/or the child’s family) toward his/her permanency goal. This window provides guidance to the worker regarding the actions that should be taken and documented regarding the worker’s efforts to achieve the primary and concurrent goals, and the parent’s, or discharge resource’s progress.

Depending on the stage type (CWS or CCR), the Permanency Planning Goal (PPG) of the selected child and the FASP type, the appropriate tabs will display on this window. See Appendix I-1 for a description of which tabs display under which circumstances. The following tabs may display on the Permanency Progress/Concurrent Planning window:

- **Progress Toward Permanency**
  - This tab allows the worker to record in narrative format the positive progress made to achieve the child’s PPG.

- **TPR Petition**
  - This tab identifies the child’s longevity in foster care and guides the worker through a decision-making process to determine if parental rights should be terminated. If time frames indicate that a petition to terminate parental rights should have been filed and this has not been done, the worker must specify the reasons, compelling or otherwise, why this has not happened.

- **Parent Location**
  - This tab allows the worker to document that a child’s parents have been identified and located. If this information is not available, the worker describes the efforts made to identify and locate the child’s parents.

- **Alternative Permanency Resources**
  - For children who may not be able to return home, this tab directs the worker to describe the alternative resources explored as a permanent living situation.

- **Conc. Plan Discussion w/Parents**
  - This tab allows the worker to summarize the parents’ response to ongoing dialogue regarding identifying alternative resources in the event a child is unable to return home. The worker must record an explanation if no discussion has occurred.

- **Conc. Plan Discussion w/Foster Parents**
  - This tab allows the worker to summarize the foster parents’ response to ongoing dialogue regarding the desire to adopt the child.

- **Adoption Discussion**
  - This tab allows the worker to summarize the parent’s response to ongoing dialogue regarding the option to surrender the child for adoption.
Adoption Readiness
For children who are likely to be freed for adoption or for those children with a goal of adoption, this tab allows the worker to document in narrative form how prepared a child is to be adopted.

Legal Status
This tab allows the worker to describe the efforts being made to free a child for adoption who has had a PPG of “Adoption” for more than six months, but has not been legally freed for adoption.

Placement Status
This tab allows the worker to describe why a child with a PPG of “Adoption” who is legally freed has not been placed in an adoptive home. The worker is also required to document the actions being taken to facilitate an adoptive placement.

Barriers to Finalization of Adoption
For a child who has been in an adoptive placement for more than six months, this tab allows the worker to record the factors that prevent a final adoption and the measures taken to meet the goal of permanency.

Consent to Adoption
This tab allows the worker to document when a youth (age 14 or older) is not consenting to be adopted. The worker needs to record the alternative permanency options that have been discussed.

Resource Connection
This tab allows the worker to detail information regarding a child who has ties to an adult resource in the community, often referred to as a mentor. A mentor is an adult in a position to provide advice and support. If a mentor has not been identified, Workers record the efforts made to identify a suitable role model.

Readiness For Adult Residential Care
This tab allows workers to document a child's need for services that will permit discharge to Adult Residential Care within the next 24 months and will support the child after discharge.

Step-by-Step:
Accessing the Permanency Progress/Concurrent Planning Window

1. From the Foster Care Issues node, click on the Permanency Progress/Concurrent Planning sub-node.

   The Permanency Progress/Concurrent Planning window displays. The tabs do not display until a child is selected from the grid.
The **Progress Toward Permanency Tab**

The Progress Toward Permanency tab provides a narrative field to record the positive progress made to achieve the Permanency Planning Goal. The narrative should contain a description of the parent’s, relative’s or primary resource person’s involvement in planning for the child’s discharge and should specify any barriers to timely permanency.

### Step-by-Step: Recording Progress Toward Permanency Information

1. On the *Permanency Progress/Concurrent Planning* window, click on the box to the left of the child’s name in the Select Child grid. *The child’s line highlights in blue and the corresponding tabs display.*

2. On the **Progress Toward Permanency** tab, record a narrative describing positive progress made to achieve the PPG, including the parent’s, relative’s or primary resource person’s involvement in planning for the child’s discharge. *Specify any barriers to timely permanency, if applicable.*

3. Click on the **Save** button.
**TPR Petition Tab**
The TPR Petition tab supports the worker’s need to document whether or not a TPR petition has been filed, including specific explanations for any reason why the petition has not been filed, if applicable.

This tab displays three questions:

- Has the child been in foster care for 15 of the past 22 months?
- Has the child in foster care been determined by a court to be an abandoned child?
- Has a court determined that the parent(s) of this child committed a serious crime against this child or another of their children?

Workers must respond to each question by selecting either the Yes or No radio button, as applicable. Selecting the Yes radio button for any of these questions displays the following question:

“Has a petition to terminate parental rights been filed?”

- If workers select the No radio button in response to this question, a narrative field displays in which they must specify the reasons, compelling or otherwise, that a petition to terminate parental rights has not been filed.
- If workers select the Yes radio button, the narrative field does not display.

The decision of whether to file a Termination of Parental Rights (TPR) petition must be evaluated on a child specific basis and made in accordance with a child’s best interests. It is not appropriate to declare a compelling reason simply because of a child’s association with a certain class of children (e.g. JD/PINS, Indian children). For example, a compelling reason cannot apply to all JD/PINS children simply because they fit into that category. Pre-existing policy on this matter is outlined in Chapter 145 of the Laws of 2000. It specifically added reference to the requirement of case-by-case determination and eliminated any perceived class
of persons to whom the compelling reason standard would apply. For a more thorough
discussion of this topic, refer to 98 OCFS INF-3 and 00 OCFS INF-5.

The following table contains case circumstances that may constitute a compelling reason not to
file a TPR for a particular child. These reasons should not be considered an automatic
justification not to file, nor is this list necessarily all-inclusive. In all cases, a case-by-case
determination should be made as to whether filing a petition to terminate parental rights would
not be in the best interests of the child.

<table>
<thead>
<tr>
<th>Case Circumstances</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child is 14 years old or older and does not want to be adopted.</strong></td>
</tr>
<tr>
<td>This is despite meaningful adoption counseling about benefits of adoption and the child’s awareness of possibility (if appropriate) for continued contact with members of the child’s birth family.</td>
</tr>
<tr>
<td><strong>Family setting will not currently meet the child’s needs because of the child’s severe emotional, behavioral or psychiatric problems.</strong></td>
</tr>
<tr>
<td>The agency has demonstrated that it has put in place services to address the problems that prevent the child from functioning in a family setting.</td>
</tr>
<tr>
<td><strong>At least one parent is actively being considered as a discharge resource for the child and it is anticipated that such discharge is likely to occur within six months.</strong></td>
</tr>
<tr>
<td>The parent is making substantial progress in correcting the conditions that led to placement, or in overcoming any barriers that currently impede a safe discharge; or an incarcerated parent is scheduled to be released within the next few months and it is likely that the parent will be able to safely care for the child within a reasonable time following the release.</td>
</tr>
<tr>
<td><strong>The child is in placement with a sibling(s) and the sibling(s) is not being freed for adoption.</strong></td>
</tr>
<tr>
<td>There is a justifiable reason for not freeing the sibling for adoption, including the circumstances in this list, or the sibling has not been in foster care 15 of the past 22 months.</td>
</tr>
<tr>
<td><strong>The parent makes regular contact with the child and maintaining their relationship benefits the child.</strong></td>
</tr>
<tr>
<td>The child is younger than 14 years of age and ongoing regular and meaningful visitation takes place from which the child substantially benefits. However, the parent is unable or not ready to safely care for the child.</td>
</tr>
<tr>
<td><strong>The child is in foster care for a child-related problem, at least in part, and there would be little or no benefits to the child in ending the child’s relationship with the child’s parent(s).</strong></td>
</tr>
<tr>
<td>The child has a disability that can only be managed with intensive assistance in a specialized setting and the child’s birth parents or other family member(s) continue to be meaningfully involved in the child’s life.</td>
</tr>
<tr>
<td><strong>The parent’s death is imminent.</strong></td>
</tr>
<tr>
<td>It is anticipated that the parent will expire in the very near future, and the parent’s death would free the child for adoption.</td>
</tr>
<tr>
<td><strong>There are insufficient legal grounds for TPR.</strong></td>
</tr>
<tr>
<td>The determination must be based on a consultation with the agency’s attorney.</td>
</tr>
</tbody>
</table>
**Case Circumstances**

<table>
<thead>
<tr>
<th>The child’s best/most likely permanency option is something other than adoption.</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is willingness and capability for a relative or other resource person to become the child’s legal guardian or legal custodian, or for such person to provide a permanent home for the child, but unwillingness or inability to adopt the child.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The child was placed into foster care pursuant to Article 3 or 7 of the family court act.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A review of the specific facts and circumstances of the child’s placement demonstrates that the appropriate permanency goal for the child is either a return to his or her parent or guardians, or discharge to independent living.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The child is the subject of a pending disposition under Article 10 of the family court act, (except where such child is already in the custody of the commissioner of social services as a result of a proceeding other than the pending Article 10 proceeding) and a review of the specific facts and circumstances of the child’s placement demonstrates that the appropriate permanency goal for the child is discharge to his or her parent or guardian.</th>
</tr>
</thead>
<tbody>
<tr>
<td>This does not apply if the child has been in continuous foster care based on another type of legal authority such as a Voluntary Placement, PINS, or JD.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The child is being cared for by a relative.</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are extenuating circumstances ruling out adoption. Regarding a relative placement, the agency has the discretion to file a petition to terminate parental rights when a child is being cared for by a relative and it is in the best interests of the child.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The family has not been provided with services necessary for the safe return of the child unless such services are not legally required.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not legally required may include a court finding of “aggravated circumstances,” thereby not requiring “reasonable efforts.” The necessary services must be documented in the services plan and must still be necessary to safely discharge the child.</td>
</tr>
</tbody>
</table>

---

**Step-by-Step:**

**Recording TPR Petition Information**

1. On the **Permanency Progress/Concurrent Planning** window with a child selected from the grid, click on the **TPR Petition** tab.

2. Record a response to each of the three questions by clicking on the **Yes** or **No** radio button, as applicable.
   - *If you select the Yes radio button for any of these questions, a fourth question displays: “Has a petition to terminate parental rights been filed?”*
   - *If you select the No radio button for all of these questions, skip to Step 5.*

3. Record a response to the question, “Has a petition to terminate parental rights been filed?”
   - *If you select the No radio button, a narrative field displays.*
   - *If you select the Yes radio button, skip to Step 5.*

4. Record a narrative specifying the reasons, compelling or otherwise, why a petition to terminate parental rights has not been filed.

5. Click on the **Save** button.
The Parent Location Tab

Workers are responsible for identifying and locating all of the child's parents - biological parents as well as stepparents. If one or more of the child's parents cannot be identified, workers need to document the efforts undertaken to identify them. If workers are unable to locate any of the child's parents, this needs to be recorded in the case record as well, including any results from inquiries workers made to the Parent Locator Service.

The Parent Location tab provides for the documenting of the worker's efforts to identify and locate all of the child's parents.

On the left side of the tab, workers use the Yes or No radio button to indicate whether all of the child’s parents have been identified. Selecting the No radio button displays a corresponding narrative field; all efforts to identify the parents must be described in this field.

On the right side of the tab, workers use the Yes or No radio button to indicate whether all of the child's parents have been located. Selecting the No radio button displays a narrative field; any efforts to locate the parents, including any inquiries made to the Parent Locator Service, must be recorded in this field.
Step-by-Step: Recording Parent Location Information

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Parent Location tab.

2. Respond to each of the questions for the child who was previously selected in the Select Child grid by selecting the Yes or No radio button, as appropriate. If you select the No radio button for either question, corresponding narrative fields display.

3. If you clicked on the No radio button to either question, record information describing your efforts to identify and/or locate the parents, as applicable, in the corresponding narrative field.

4. Click on the Save button.

The Alternative Permanency Resources Tab
The Alternative Permanency Resources tab directs workers to record information regarding the exploration of alternative permanency resources. Workers need to record the efforts undertaken to locate and secure a permanent living situation for a child who is not returning home.
If the worker has explored alternative permanency resources that may be available to the child, s/he clicks on the **Yes** radio button; otherwise, s/he clicks on the **No** radio button.

- If the worker selects the **Yes** radio button, a narrative field displays in yellow, directing her/him to identify any potential resources that have been identified.
- If the worker selects the **No** radio button, a separate narrative field displays in yellow, directing her/him to explain why permanency resources have not been explored.

**Step-by-Step: Recording Alternative Permanency Resources Information**

1. On the *Permanency Progress/Concurrent Planning* window with a child selected from the grid, click on the **Alternative Permanency Resources** tab.

2. For the first question, click on the **Yes** or **No** radio button, as applicable, to indicate whether you have explored alternative permanency resources that may be available for the child you previously selected from the Select Child grid. A corresponding narrative field displays, depending on the radio button you selected.

3. Record the appropriate narrative. *If you clicked on the Yes radio button, identify any alternative permanency resources that may be available.* *If you clicked on the No radio button, explain why permanency resources have not been explored.*

4. Click on the **Save** button.

**The Concurrent Planning Discussion with Parents Tab**

This tab supports the worker in thinking through the concurrent planning process and documenting progress made in implementing the concurrent planning process. Concurrent planning involves creating and working toward both a targeted primary permanency goal of reunification and an alternative goal, such as adoption or relative guardianship, in the event the primary goal is unachievable. Efforts to realize the alternative goal are pursued at the same time as the primary goal.

There are several components of an effective concurrent planning process that workers need to adhere to and document thoroughly. Workers need to maintain a record of diligent efforts to reunify the family, while at the same time openly discussing with the parents the pursuit of an alternative permanency plan, should reunification not be able to occur within regulatory timeframes and the timeframes dictated by the child’s developmental and permanency needs. Workers should engage all members of the child’s significant network, including foster parents, in planning for the child’s well-being. Workers also should have an open and ongoing dialogue with the members of that network regarding the concurrent plans and the progress made toward achieving them.
Concurrent planning involves a thorough discussion between a worker and parents regarding the following issues:

- The importance of their participation in service planning
- An understanding of the negative effects of out-of-home care on their child
- The necessity of a regular and dependable visitation schedule with their child
- The realization that failure to participate in their child’s permanency planning could result in the termination of parental rights

Throughout the course of concurrent planning, alternative Permanency Planning Goals and placement resources should be discussed. These alternative resources could include foster parents, relatives, godparents, neighbors and friends who have a relationship with the child. The Conc. Plan Discussion w/Parents tab provides for the recording of the ongoing dialogue with parents regarding their participation in developing the concurrent plan, their support of that plan or their concerns about that plan.

On this tab, the worker must select the Yes or No radio button to indicate whether s/he has discussed concurrent planning and alternative placement resources (including foster parents) with the parents.

- If the worker selects the Yes radio button, a narrative displays in yellow, in which s/he must describe the parents’ response to the discussion.
- If the worker selects the No radio button, a separate narrative displays in yellow, in which s/he must explain why this discussion has not occurred.

Only one of these respective narrative fields will display, based on the worker’s selection.
Step-by-Step: Recording Concurrent Planning Discussion with Parents Information

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Conc. Plan Discussion w/Parents tab.

2. Click on the Yes or No radio button, as applicable, to indicate whether concurrent planning and alternative placement resources (including foster parents) have been discussed with the child’s parents. A corresponding narrative field displays, depending on the radio button you selected.

3. Record the appropriate narrative. If you clicked on the Yes radio button, describe the parents’ response to the discussion. If you clicked on the No radio button, explain why this discussion has not occurred.

4. Click on the Save button.

The Concurrent Planning Discussion with Foster Parent Tab

Foster parents are a likely alternative permanency resource for children in foster care. As the worker and the child’s parents are developing the Comprehensive FASP, the worker and the family should be assessing the need for a concurrent plan and developing it at the same time that they develop the primary plan. After three months of caring for a child, the foster parents may be able to determine if they are prepared to make a commitment to the child and to become the child’s alternative permanency resource. In order for the worker and the parents to build the concurrent plan, they need to know whether the foster parents are likely to serve as the back-up plan for the child’s permanency if the worker and the parents need to identify another alternative permanency resource. For this reason, it is important that the worker discuss with the foster parents their willingness to be the alternative permanency resource in the concurrent plan.

The Conc. Plan Discussion w/Foster Parent tab directs the worker to record a response to the question, “If the child has been in placement 90 days or more, have the foster parents been asked whether they would consider adopting the child, should the child become free for adoption, or otherwise provide a permanent living arrangement for the child?”

If the worker selects the Yes radio button in response to this question, a narrative field displays (highlighted in yellow) in which the worker must describe the foster parents’ response. If the worker selects the No or N/A radio button, the narrative field does not display.
Step-by-Step: Recording Concurrent Planning Discussion with Foster Parent Information

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Conc. Plan Discussion w/Foster Parent tab.

2. Click on the Yes, No or N/A radio button, as appropriate.
   *If the child has been in placement for three months or more, have the foster parents been asked whether they would consider adopting the child (if s/he should become free for adoption) or otherwise provide a permanent living arrangement for the child.*

3. If you select the Yes radio button, a narrative field displays, in which you must describe the foster parent’s response to the discussion.

4. Click on the Save button.
**The Adoption Discussion Tab**

Not all parents will be able to make all of the changes necessary for them to parent their children safely and to meet their children’s needs; for this reason, it is important for workers to explore with parents the available alternatives for providing safety, permanency and well-being to their children. By surrendering their rights to a child, parents who are struggling (or are unwilling) to meet basic parental expectations can give their child a more secure life with adoptive parents; they can also avoid an adversarial legal process to terminate their parental rights forcibly in the event that they fail to plan for their child.

When a child has been in placement for six months or more, the worker needs to discuss the prospect of a voluntary (including conditional, where appropriate) surrender of the parents’ rights to the child. The term “conditional surrender” refers to a situation in which a parent is willing to surrender parental rights under certain specified conditions. One example of a conditional surrender involves a parent who is willing to surrender only if the foster parents are willing to adopt.

The Adoption Discussion tab supports the worker’s documentation of this discussion with the child’s parents. Select the Yes or No radio button, as applicable, to indicate whether workers have discussed with the child’s parents the signing of a voluntary surrender, including, where appropriate, a conditional surrender. Selecting the Yes radio button displays a narrative field highlighted in yellow; the parent’s response must be recorded in this field.
Step-by-Step: Recording Adoption Discussion Information

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Adoption Discussion tab.

2. Click on the Yes or No radio button, as appropriate. If you select the Yes radio button, a narrative field displays on the tab.

3. If applicable, record a narrative describing the parent’s response.

4. Click on the Save button.

The Adoption Readiness Tab

Regardless of whether a child is being surrendered for adoption or will be freed through a termination of parental rights proceeding, it is essential that the child’s readiness for adoption is assessed. Children of all ages in foster care may have significant issues of loyalty to their birth family, of identity and self-concept, of anger or depression, as well as disorders of attachment. Many children in foster care also have significant physical and behavioral health challenges that may make it difficult for them to transition successfully into an adoptive home. The casework team, which may include the child’s therapist(s), needs to conduct this assessment of readiness to be adopted so that the child can take the first step and be willing to be adopted (especially if the child is age 14 or over) Once the child has taken this first step, s/he can transition to and succeed in an adoptive home. If this assessment does not occur, the worker needs to explain why.

Once the worker has conducted this assessment, s/he needs to determine whether the child is, in fact, ready to be adopted. If the child is not yet ready, the worker needs to consider what activities (such as therapy, having the birth parent write a letter to the child giving his/her blessing to the child’s adoption, etc.) are necessary to prepare the child for adoption.

The Adoption Readiness tab supports the documentation of this assessment and determination. This tab contains two fields, each of which contains a Yes and No radio button. In the first field, workers must select the appropriate radio button to indicate whether they have assessed the child for readiness to be adopted. Selecting the No radio button displays a narrative field highlighted in yellow; workers must document why the child has not been assessed in this field.

In the second field, workers must select the appropriate radio button to indicate whether the child is ready to be adopted. Selecting the No radio button displays a narrative field highlighted in yellow; workers must document what needs to occur to prepare the child for adoption in this field.
Step-by-Step:
Recording Adoption Readiness Information

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Adoption Readiness tab.
2. In the left field, select the Yes or No radio button, as appropriate, to indicate whether you have assessed the child for readiness to be adopted.
   If you select the No radio button, a corresponding narrative field displays. Record a narrative specifying why the child has not been assessed for readiness to be adopted.
3. In the right field, select the Yes or No radio button, as appropriate, to indicate whether the child is ready to be adopted.
   If you select the No radio button, a corresponding narrative field displays. Record a narrative specifying what needs to occur to prepare the child for adoption.
4. Click on the Save button.

The Legal Status Tab
If a child has not yet been legally freed for adoption but has had a Permanency Planning Goal of “Adoption” for at least six months, the worker needs to pursue all due diligence and legal avenues to free the child for adoption. The case record needs to reflect the status of the worker’s efforts in this regard.

The Legal Status tab provides for the documentation of these efforts. The worker selects the Yes, No or N/A radio button, as appropriate, to indicate whether a child who is not legally freed has had a Permanency Planning Goal of “Adoption” for six months or more. Selecting the Yes radio button displays a narrative field, highlighted in yellow; the worker must describe in this field
the status of his/her efforts to free the child for adoption. If the No or N/A radio button is selected, the narrative does not display.

**Step-by-Step: Recording Legal Status Information**

1. On the Permanency Progress/Concurrent Planning window with a child selected from the grid, click on the Legal Status tab.

2. Click on the Yes, No or N/A radio button, as appropriate, to indicate whether a child who is not legally freed has had a Permanency Planning Goal of “Adoption” for six months or more. 
   
   *If you select the Yes radio button, a narrative field displays. Describe the status of your efforts to free the child for adoption.*

3. Click on the Save button.

**The Placement Status Tab**

When a child has been legally freed for adoption and has a Permanency Planning Goal of “Adoption,” it is important that the child not remain in a temporary status for longer than is necessary. If the child has not been placed in an adoptive (or other permanent) placement, the worker needs to take action to address any barriers that need to be overcome in order for the child to be placed in a permanent living arrangement.
The **Placement Status** tab supports the need to document any actions taken and/or obstacles encountered regarding the worker’s efforts to place the child in an adoptive or other permanent placement.

Workers must select the **Yes** or **No** radio button, as applicable, to indicate whether the legally freed child who has a PPG of “Adoption” is in an adoptive or other permanent placement. Selecting the **No** radio button displays a narrative field highlighted in yellow; workers must specify the actions they have taken to facilitate the placement of the child in an adoptive home or other permanent living arrangement in this field. This narrative should include any barriers that must be overcome. Workers should describe the characteristics of the family that are most likely to meet this child’s needs and the workers’ efforts to recruit potential adoptive parents.

### Where am I?

**Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Foster Care Issues node > Permanency Progress/Concurrent Planning sub-node**

### Step-by-Step: Recording Placement Status Information

1. On the **Permanency Progress/Concurrent Planning** window with the child selected from the grid, click on the **Placement Status** tab.

2. Click on the **Yes** or **No** radio button to indicate whether the legally freed child who has a PPG of “Adoption” is in an adoptive or other permanent placement. 

   *If you selected the **No** radio button, a narrative field displays. Specify the actions you have taken to place the child into an adoptive home or other permanent living arrangement. Describe the barriers which must be overcome. Describe the characteristics of the family most likely to meet the needs of this child and the efforts made to recruit potential adoptive parents.*

3. Click on the **Save** button.
The national standard for finalization of adoptions is two years from the date of placement into foster care. There may be many barriers to achieving that standard, many of which may be encountered after the child has been legally freed. By documenting the specific barriers to finalization, the worker is providing information to the supervisor, the agency and the Family Court that conducts the permanency hearings; these sources may assist the worker in overcoming those barriers on a case-specific and a systemic basis.

Permanency is not achieved until the adoption is finalized. The Barriers to Finalization of Adoption tab supports the need to document whether a child has been in an adoptive placement for at least six months and if so, any barriers preventing finalization and the efforts to address them.

Workers click on the Yes or No radio button, as appropriate, to indicate whether the child has been in an adoptive placement for six months or more. Selecting the Yes radio button displays a narrative field highlighted in yellow; in this field, workers must specify the barriers preventing legal adoption in this home, the actions being taken to overcome these barriers and finalize the adoption, and the efforts s/he is making to achieve the Permanency Planning Goal of “Adoption” for the child.

Step-by-Step: Recording Barriers to Finalization of Adoption

1. On the Permanency Progress/Concurrent Planning window with the child selected from the grid, click on the Barriers to Finalization of Adoption tab.
2. Click on the Yes or No radio button, as appropriate, to indicate whether the child has been in an adoptive placement for six months or more.  
   If you select the Yes radio button, a narrative field displays, in which you must specify the barriers preventing legal adoption in this home and the actions taken to overcome these barriers and finalize the adoption.
3. Click on the Save button.
The Consent to Adoption Tab
While it is important that all children who are old enough to understand what adoption means be given the opportunity to express their feelings about being adopted, those children who are fourteen or older have the right to refuse to be adopted. Any youth who has been legally freed for adoption has the right to be consulted regarding his/her agreement with this goal. A youth who does not consent to being adopted needs to be advised of alternative permanency options. Regardless of the youth’s current refusal to be adopted, it is important that this option be continually explored with the youth. The youth may change his/her mind, should a family inquire about him/her; the youth may become able to identify someone from his/her past or present by whom the youth would consider being adopted; the youth may develop a more positive attitude toward being part of a family.

The Consent to Adoption tab presents the worker with an area to record the actions taken to address the permanency needs specific to the youth, and the permanency alternatives to adoption that have been discussed. Alternative permanency options other than adoption include (but are not limited to) Independent Living, with a strong and stable attachment to an adult who is committed to supporting and mentoring the youth, or guardianship by a relative.

This tab directs you to record the alternative permanency options discussed with a youth (age 14 or older) who is not consenting to be adopted.
Step-by-Step: Recording Consent to Adoption Information

1. On the Permanency Progress/Concurrent Planning window with the child selected from the grid, click on the Consent to Adoption tab.

2. Click on the Yes or No radio button, as appropriate, to indicate whether the legally freed youth is refusing consent to his/her adoption. If you select the Yes radio button, a narrative field displays, in which you must describe the permanency alternatives, discussed with the youth, including his/her ability to reconsider adoption.

3. Click on the Save button.

The Resource Connection Tab

For children in care, relationships with positive adults are vital to successful adjustment and functioning, as well as to the achievement of Permanency Planning Goals. Identifying, addressing and recording significant relationships creates a consortium of community supporters, positive adults and potential permanency resources. If a resource connection exists, it is important to pursue contact between the invested adults who have developed and established a supporting relationship with children in care. If a resource contact has not been identified, it is important to pursue potential resources who could provide support and aid in the achievement of the child’s safety, permanency and well-being.

The Resource Connection tab provides for the documentation of any identified resources (such as a relative, mentor or adult with whom the child has a close relationship) who are available to the child. If no such resource currently exists, the worker needs to document on this tab the efforts that have been pursued to help the child connect to such a resource.

This information must be recorded for children 14 years and older.

The worker clicks on the Yes or No radio button, as appropriate, to indicate whether the child is currently connected to an adult, family and/or mentor in the community to whom the child can go for emotional support, advice and guidance.

- If the worker selects the Yes radio button, a corresponding narrative field displays highlighted in yellow; the worker must identify the resource and that person’s relationship to the child.

- If the worker selects the No radio button, a separate corresponding narrative field displays highlighted in yellow; the worker must explain her/his efforts to help the child connect to such a resource.

Only one of the narrative fields will display.
Step-by-Step: Recording Resource Connection Information

1. On the Permanency Progress/Concurrent Planning window with the child selected from the grid, click on the Resource Connection tab.

2. Click on the Yes or No radio button, as appropriate, to indicate whether the child is currently connected to an adult, family and/or mentor in the community to whom the child can go for emotional support, advice and guidance. *Individual narrative fields display depending on the radio button selected.*

3. If you selected the Yes radio button, use the resulting narrative field to identify the resource and that person’s relationship to the child.  
   —OR—  
   If you selected the No radio button, use the resulting narrative field to explain your efforts to connect the child with such a resource.

4. Click on the Save button.

The Readiness for Adult Residential Care Tab

When the worker determines that a child is to be discharged to Adult Residential Care, it is important to assess the child’s readiness for such a significant change. Children discharged to Adult Residential Care often present with a profound need, such as a severe developmental disability, and will require continuous adult care. The worker is required to assess, identify and record services necessary to provide successful discharge to a level of care that best meets the individual’s needs. The assessment process begins as soon as a child is identified to be discharged to Adult Residential Care within the next 24 months. The assessment process also requires the worker to identify any barriers that would prevent implementing these services and supporting a child after discharge.

The worker selects the Yes or No radio button, as appropriate, to identify whether the child is expected to be discharged to Adult Residential Care within 24 months. Selecting the Yes radio button displays a narrative field; the services that are needed to permit discharge and to support
the child after discharge must be recorded in this field. If any barriers exist that prevent the provision of these services, they should be specified in this narrative.

**Step-by-Step: Recording Readiness for Adult Residential Care**

1. On the *Permanency Progress/Concurrent Planning* window with the child selected from the grid, click on the *Readiness for Adult Residential Care* tab.

2. Click on the **Yes** or **No** radio button, as appropriate, to indicate whether the child is expected to be discharged to Adult Residential Care within 24 months.

3. If you select the **Yes** radio button, use the resulting narrative field to describe the services that are needed to permit discharge and support the child after discharge. Include any specific barriers to the provision of services.

4. Click on the **Save** button.
Life Skills Assessment

As children in foster care grow older, it is important that they possess the basic skills that are necessary to make the transition into adulthood. It is possible that an adolescent has not learned how to build healthy relationships, balance a checkbook or access community resources. Part of each worker’s responsibility is to prepare adolescent foster children (age 14 or older) to secure and receive the assistance needed for them to succeed once they are discharged. The Life Skills Assessment sub-node is designed to support a worker’s assessment of the knowledge and capability a child has regarding specific life skills and to enable the worker to determine whether further instruction in individual areas is necessary to help the child acquire, enhance or maintain those skills. The Life Skills Assessment aids workers in developing the appropriate service plan for the child.

As part of recording and maintaining Foster Care Issues information in a Family Assessment and Service Plan (FASP), workers are responsible for completing a Life Skills Assessment for each foster child (age 14 and older).

The Life Skills Assessment window can also be accessed via the Non-LDSS Custody node and the Add a Component functionality. If the Life Skills Assessment sub-node is added, all children in the stage display on the Life Skills Assessment window.

Step-by-Step: Accessing the Life Skills Assessment from Foster Care Issues Node

1. From the Foster Care Issues node, click on the Life Skills Assessment sub-node. The Life Skills Assessment window displays.
The Life Skills Assessment Window

<table>
<thead>
<tr>
<th>Category</th>
<th>Level of Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forming and Sustaining Positive Relationships</td>
<td>Exceptional skills in this area</td>
</tr>
<tr>
<td></td>
<td>Adequate skills in this area</td>
</tr>
<tr>
<td></td>
<td>Limited skills in this area; needs some support and skill development/training</td>
</tr>
<tr>
<td></td>
<td>Has no or very limited skills in this area; needs significant support and skill development/training</td>
</tr>
<tr>
<td></td>
<td>Insufficient Information</td>
</tr>
<tr>
<td>Problem Solving/Decision Making/Goal Planning</td>
<td>Exceptional skills in this area</td>
</tr>
<tr>
<td></td>
<td>Adequate skills in this area</td>
</tr>
<tr>
<td></td>
<td>Limited skills in this area; needs some support and skill development/training</td>
</tr>
<tr>
<td></td>
<td>Has no or very limited skills in this area; needs significant support and skill development/training</td>
</tr>
<tr>
<td></td>
<td>Insufficient Information</td>
</tr>
<tr>
<td>Preventive Health and Wellness</td>
<td>Exceptional skills in this area</td>
</tr>
<tr>
<td></td>
<td>Adequate skills in this area</td>
</tr>
<tr>
<td></td>
<td>Limited skills in this area; needs some support and skill development/training</td>
</tr>
<tr>
<td></td>
<td>Has no or very limited skills in this area; needs significant support and skill development/training</td>
</tr>
</tbody>
</table>

Each child is assessed in each of the following life skills categories:

- Forming and Sustaining Positive Relationships
- Problem Solving/Decision Making/Goal Planning
- Preventive Health and Wellness
- Education and Support
- Vocational/Career Planning
- Employment Skills
- Budgeting and Financial Management
- Housing
- Home Management
- Accessing Community Resources

For each category, the following Levels of Achievement are listed in the following order:

- Exceptional skills in this area
- Adequate skills in this area
- Limited skills in this area; needs some support and skill development/training
- Has no or very limited skills in this area; needs significant support and skill development/training
- Insufficient Information

(only appears on the grid for an Initial FASP)

You cannot select more than one Level of Achievement in the same category for the same child.
The grid contains a column for each child in the stage who is 14 years of age or older.

- The label on each column is the child’s name (last name, first name).
- If the child has a Program Choice of “Placement,” the label “F/C” displays under the child’s name.
- The child must be at least 14 years old as of the FASP due date, if that date exists. If there is no FASP due date, the child must be at least 14 years old as of the FASP launch date.
- If the sub-node has been added via the Add A Component function, all children in the stage (regardless of age) display.

Each child column contains a checkbox corresponding to each Level of Achievement in each Category. Indicate the capability a child has regarding specific life skills listed in the grid by selecting the appropriate skill level in each area. You can select only one Level of Achievement for each life skill.

If the Program Choice is “Non-LDSS Custody,” completion of this section is optional.

**Step-by-Step: Completing the Life Skills Assessment Window**

1. On the Life Skills Assessment window, for each category click to select each appropriate checkbox, rating each tracked child’s level of achievement. *A check mark displays in the checkbox for each selected item.*

2. Click on the Save button.

If Life Skills Assessment was added to the FASP tree via “Add a Component,” *every* child in the stage (regardless of age) will display in the grid. Workers may then complete a Life Skills Assessment for a child of any age, if appropriate.
Family/Child Visiting Plan

One of the primary goals of child welfare is preserving the family, consistent with the safety of the children. The goal of family reunification is considered first and foremost for children in foster care, unless it has been determined by the court that reasonable efforts to reunite the family are not necessary. Even when reunification is not the permanency goal, visitation with family members is critical to maintaining and fostering sibling and other family relationships. To achieve this, it’s important for all children to have consistent visitations scheduled with parents, siblings, legal guardians and other appropriate individuals. Not only does visitation keep the families in regular contact with each other, it also provides workers with valuable information regarding family interaction. Workers record the logistics of the visits (e.g., location, participants, frequency, duration, need for supervision, specific concerns) and periodically review the visiting plan based on observations made regarding the dynamics during visitation (e.g., appropriateness of parents’ interaction, punctuality, whether expectations are met). Workers use the Visiting Plan window to record all information regarding Visiting Plans in a FASP, as well as the details of new plans. This must be recorded for all children in foster care and can be recorded for children in Non-LDSS Custody.
Step-by-Step: Accessing the Family/Child Visiting Plan Tab from the Foster Care Issues Node

1. From the Foster Care Issues node, click on the Family/Child Visiting Plan sub-node.

   The Visiting Plan window displays, with the Visiting Plan tab active. The Visiting Plan Review tab is active when a prior approved FASP had a Visiting Plan recorded.

**Visiting Plan Tab**

In an Initial FASP, the Visiting Plan tab is active when the Visiting Plan window opens. This tab supports the capture and display of logistical information pertaining to the Visiting Plan. Since a child in foster care might have separate visitations with each parent, siblings and other appropriate individuals, several plans may exist simultaneously. The Visiting Plan tab lists all active and inactive plans. This tab allows the worker to indicate whether the plan is active or inactive; record the frequency, duration and location of visits, along with an explanation of any special conditions that must be met; and describe what must occur during visits to support the parent/child relationship.

The screen graphics on the next page show a comparison between the Visiting Plan tab for an FSS/CWS and an FSS/CCR.
CONNECTIONS provides system edits for completing the Visiting Plan, based on certain case information. The table below illustrates the requirements for completing a Visiting Plan:

<table>
<thead>
<tr>
<th>Stage Type</th>
<th>One or more children have a Program Choice of…</th>
<th>No child has a Program Choice of…</th>
<th>Visiting Plan Recording Requirements</th>
</tr>
</thead>
</table>
| CWS        | Placement                                     | Non-LDSS Custody                  | You must create *at least one* Visiting Plan with one of the following Plan Descriptions:  
• Parents/Child(ren)  
• Mother/Child(ren)  
• Father/Child(ren)  
• Legal Guardian/Legal Custodian/Child(ren)  
• Primary Discharge Resource/Children  
*OR*  
You must justify the reason(s) for not creating a Visiting Plan |
|            |                                               |                                   | You may complete a Visiting Plan  
*OR*  
You may justify not creating a Visiting Plan  
*These are NOT required.* |
| CCR        | N/A                                           | N/A                               | You may complete a Visiting Plan  
*OR*  
You may justify not creating a Visiting Plan  
*These are NOT required.* |

On the *Visiting Plan* tab, workers record as many plans as necessary to document each family/child visitation arrangement. Workers also record any visitations that include individuals outside the immediate family and separate sibling visits. If the FASP is Comprehensive or Reassessment and a Visiting Plan was previously recorded, workers must review the previous Visiting Plan and progress toward permanency. They should consider changes to the Visiting Plan, if needed.

At the top of the tab, a grid displays with the following fields:

- Review Status
- Plan Description
- Primary Location
- Frequency
- Duration
- Visiting Plan Status
**Review Status**

The Review Status of “N/A” indicates that a Visiting Plan Review is not applicable in a particular circumstance. This would always be the case in an Initial FASP. The Visiting Plan Review is used to assess the quality of visitation between the child and parent/primary discharge resource; the Visiting Plan Review is not applicable for sibling visits or any type of visit that does not include a parent/primary discharge resource. The details of all visits are documented in Progress Notes. “N/A” displays in the **Review Status** column under the following conditions:

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial -OR- Adding a new plan using the <strong>Add Visiting Plan</strong> button</td>
<td>CWS -OR- CCR</td>
<td>Any</td>
<td>Any</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive -OR- Reassessment</td>
<td>CWS</td>
<td>Placement</td>
<td>Relatives/ Child(ren) -OR- Sibling/Half Sibling -OR- Other/Child(ren)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive -OR- Reassessment</td>
<td>CWS</td>
<td>Non-LDSS Custody</td>
<td>Any</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive -OR- Reassessment (with a previously recorded Visiting Plan)</td>
<td>CWS</td>
<td>Placement</td>
<td>Parents/Child(ren) -OR- Mother/Child(ren) -OR- Father/Child(ren) -OR- Legal Guardian/Legal Custodian/ Child(ren) -OR- Primary Discharge Resource/Child(ren)</td>
</tr>
</tbody>
</table>

The **Review Status** of “Complete” displays under the following conditions when all required Visiting Plan Review information was saved on the **Visiting Plan Review** tab:

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive -OR- Reassessment</td>
<td>CWS</td>
<td>Placement</td>
<td>Parents/Child(ren) -OR- Mother/Child(ren) -OR- Father/Child(ren) -OR- Legal Guardian/Legal Custodian/ Child(ren) -OR- Primary Discharge Resource/Child(ren)</td>
</tr>
</tbody>
</table>
The Review Status of “Incomplete” displays under the following conditions when all required Visiting Plan Review information was not recorded on the Visiting Plan Review tab:

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Stage Type</th>
<th>Program Choice</th>
<th>Plan Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive -OR- Reassessment (with a previously recorded Visiting Plan)</td>
<td>CWS</td>
<td>Placement</td>
<td>Parents/Child(ren) -OR- Mother/Child(ren) -OR- Father/Child(ren) -OR- Legal Guardian/Legal Custodian/Child(ren) -OR- Primary Discharge Resource/Child(ren)</td>
</tr>
</tbody>
</table>

The remaining fields in this grid are populated with the information (if any) recorded in the corresponding fields displayed on the right side of the tab. These fields all contain drop-down arrows; click on an arrow and select from the resulting list.

The grid is sorted by Visiting Plan Status in the following order: Active, Suspended and Closed.

The first field allows workers to select the children for the Visiting Plan. It populates with all of the children listed in the Stage Composition. Workers must select one or more of the children who will take part in this Visiting Plan. At least one child must be selected. For FSS/CCR stages, only one child populates the list and cannot be deselected.

The second field allows workers to select the adults for the Visiting Plan and only displays for FSS/CWS stages. This list is populated with the adults listed in the Stage Composition. Workers must select one or more of the adults who will take part in this Visiting Plan. At least one adult (or outside participant) must be selected.

The third field allows workers to select any outside participants for the Visiting Plan. This is required for FSS/CCR stages if a Visiting Plan is being recorded. This field populates with any individuals who were added in the Add Other Participants process. Below this field is the Add Outside Participants button. Clicking on this opens the Outside Participants window. Once there, workers record the names of any outside participants who were not recorded through the Add Other Participants process. (See “Add Outside Participants” on page 14-62 for more information.)

Plan Description

The content of the drop-down list varies based on whether the FSS type is CWS or CCR. Select one and only one description from the following list:

**FSS/CWS**

- Parents/Child(ren)
- Mother/Child(ren)
- Father/Child(ren)
- Legal Guardian/Legal Custodian/Child(ren)
- Primary Discharge Resource/Child(ren)
- Relatives/Child(ren)
- Sibling/Half Sibling
- Other/Child(ren)

**FSS/CCR**
- Adoptive Resource/Child
- Bio Sibling/Half Sibling
- Bio Parent(s)/Child
- Bio Mother/Child
- Bio Father/Child
- Bio Relative(s)/Child
- Primary Discharge Resource/Child
- Other/Child

### Primary Location
This field displays a drop-down list. The choices are the same for FSS/CWS and FSS/CCR stages:
- Adoptive Home
- Case Address
- Child Advocacy Center
- Community Resource
- Congregate Care Facility
- Court
- Day Care
- Foster Home
- Hospital/Health Facility
- LDSS Office/Field Office
- OMH Facility
- OMRDD Facility
- Service Provider/Contract Agency
- Precinct/Law Enforcement Office
- Parent’s Home
- Prison
- Public Location
- Relative’s Home
- School
- Shelter-Domestic Violence
- Shelter-Homeless
- Other

### Frequency
This field displays a drop-down list. The choices are the same for FSS/CWS and FSS/CCR stages.
- Daily
- Multiple times per week
- Weekly
- Multiple times per month
- Monthly
- Other

### Duration
This field displays a drop-down list. The choices are the same for FSS/CWS and FSS/CCR stages:
- 1 to 2 hours
- 2 to 4 hours
- Overnight
- Weekends
- Multiple days (more than 3)
Visiting Plan Status  This field displays a drop-down list. The choices are the same for FSS/CWS and FSS/CCR stages:

- Active (Default)
- Suspended
- Closed

In the lower left corner of the Visiting Plan tab, workers document whether there are any special conditions regarding the visitation. This includes court orders, supervised contact, phone contact and restrictions on subject matter that is discussed. If any conditions exist, workers click on the Yes radio button. If not, they click on the No radio button. If the worker selects the Yes radio button, a narrative field displays highlighted in yellow; s/he records the specifics of the conditions that are in place.

Next to the Special Conditions radio button, document whether any assistance is necessary to facilitate visitation. Examples of such assistance are transportation, access to a secure facility or directions to the facility written in the parent’s language. If any assistance is needed, click on the Yes radio button. A corresponding narrative field displays, highlighted in yellow; the worker must record the type of assistance needed and how it will be provided. If no assistance is needed, the worker clicks on the No radio button.

In the lower right corner of the Visiting Plan tab, the worker must record a narrative based on the specifics of what will occur during visits to enhance parental capability, support the parent/child relationship and support the child’s well-being. This includes activities that parents participate in with the child and any type of parenting skills that are practiced during visitation. This narrative is required for all plans with a Plan Description of Parents/Child(ren), Mother/Child(ren), Father/Child(ren), Legal Guardian/Legal Custodian/Child(ren), or Primary Discharge Resource/Child(ren).

Two buttons, Add Visiting Plan and Visiting Plan Detail, display in the footer along with the standard buttons: Spell Check, Save and Cancel.

The Add Visiting Plan button clears the fields on the tab and a new Visiting Plan can be recorded. The new Visiting Plan displays in the grid once the worker clicks on the Save button.

Clicking on the Visiting Plan Detail button opens the Visiting Plan Detail window, which consists of a Narrative field, as well as Spell Check, Save and Close buttons. Workers record any additional details regarding the location, frequency or duration of the Visiting Plan. The window display is the same for FSS/CWS and FSS/CCR stages.
Step-by-Step: Creating a Visiting Plan

1. If this is a Comprehensive or Reassessment FASP, click on the Visiting Plan tab. If this is an Initial FASP, the Visiting Plan tab is the first tab that displays.

2. In the Select Child(ren) for Visiting Plan field, click on the corresponding checkbox(es) to select the child(ren) who will participate in this Visiting Plan. If the stage is an FSS/CCR, only one child’s name displays in this field.

3. In the Select Adult(s) for Visiting Plan field, click on the corresponding checkbox(es) to select the adult(s) who will participate in thisVisiting Plan, if applicable. In an FSS/CWS, you must select at least one adult or outside participant. If the stage is an FSS/CCR, this field does not display.

4. If applicable, click on the corresponding checkbox(es) in the Select Outside Participants field to select any other individuals who will participate in this Visiting Plan. If the stage is an FSS/CCR, you must select at least one outside participant. (To add an outside participant to this list, see “Add Outside Participants” on page 14-62.)

5. Click on the drop-down arrow for the Plan Description field and select the appropriate description for this Visiting Plan.

6. Click on the drop-down arrow for the Primary Location field and select the location of the visits.

7. Click on the drop-down arrow for the Frequency field and select how often the visits will take place.

8. Click on the drop-down arrow for the Duration field and select how long each visit will last.

9. If the Visiting Plan’s status is anything other than “Active,” click on the drop-down arrow for the Visiting Plan Status field and select the status. The field automatically pre-fills with the status of “Active.”

10. Click on the Yes or No radio button, as appropriate, in the Special Conditions field to indicate whether any special conditions exist regarding visitation (including supervised visitation). If you click on the Yes button, a Narrative field displays below, highlighted in yellow (indicating that it is a required field). Record a narrative explaining the conditions and any accommodations that need to be made.

11. Click on the Yes or No radio button, as appropriate, in the Visitation Assistance field to indicate whether any assistance is necessary to facilitate visitation. If you click on the Yes radio button, a Narrative field displays below, highlighted in yellow (indicating that it is a required field). Record a narrative explaining what assistance is necessary and how it will be provided.

12. In the final Narrative field, record the specifics of what will occur during the visits to enhance parental capability, support the parent/child relationship and support the child’s well-being.
13 If additional details need to be recorded, click on the **Visiting Plan Detail** button.
   *The Visiting Plan Detail window displays.*

14 Record a narrative in the **Narrative** field.

15 Click on the **Save** button.
   *The **Visiting Plan** tab displays.*

16 Click on the **Save** button.

There may be times when it is necessary to modify the details of an existing Visiting Plan. In order to modify a plan, it must *not* yet have been approved.

#### Step-by-Step: Modifying a Visiting Plan

1. On the **Visiting Plan** tab, click to select a visiting plan from the list in the upper half of the window.
   *Detailed information from the selected Visiting Plan displays in the detail fields in the lower half of the window.*

2. Modify the information in the detail fields, as necessary.

3. Click on the **Save** button.
   *The selected Visiting Plan is updated in the list section.*
Add Outside Participants

When preparing a Visiting Plan, workers are required to identify the individuals who visit the child. At times, these individuals are not involved in the stage and therefore are not part of the Stage Composition. This includes extended family and adults with whom the child has a strong attachment (e.g., mentor, pastor, family friend). The Add Outside Participants functionality allows the worker to include these individuals in the Visiting Plan and to record Visiting Plan information involving all participants.

The Outside Participants functionality is also available for the Service Plan Review.

An Outside Participants grid displays at the top of this window. This grid contains a list of any outside participants who have already been added to the stage. The columns displayed are Participant Name, SPR Role and Relationship. These columns are view-only, but the information they contain can be modified by selecting a row, editing the information that populates the fields (except the SPR Role field) below the grid and clicking on the Modify button.

Below the Outside Participants grid, the following fields display:

- **Last Name**: Record the last name of the outside participant in this required field.
- **First Name**: Record the first name of the outside participant in this required field.
- **MI**: Record the middle initial of the outside participant in this field.
**SPR Role**  
This field is used to record an individual's role in the Service Plan Review; it is disabled here.

**Relationship**  
Record the relationship of the outside participant to the child. This is a required field.

- Sibling
- Half-Sibling
- Step-Sibling
- Step-Parent
- Great Grandparent
- Grandparent
- Aunt/Uncle
- Niece/Nephew
- Cousin
- Other Family Member
- Legal Guardian
- Legal Custodian
- None

**Agency**  
This field is disabled; it enables only when you access the Outside Participants window via the Service Plan Review node.

The next section contains the following Participant Address fields along with a Validate button:

- Street
- PO Box/Apt. #
- City
- State
- Zip
- County
- Type
- CD

The following additional contact information fields display:

- Phone
- Fax
- Email

The following buttons display in the footer:

- **Add** Adds new participant information to the Outside Participants grid
- **Modify** Modifies previously recorded information for outside participants
- **Delete** Deletes previously recorded outside participants
- **Clear** Clears all fields and previous row selections on the grid
- **Save** Saves the records to the database
- **Cancel** Click on this button to discard all unsaved changes. The following message displays:

  "Do you want to Cancel?  
  Unsaved data and/or narrative(s) will be lost."

  - Click on the Yes button to discard all changes.
  - Click on the No button to close the message; all changes remain pending.
Close

Click on this button to close the window and display the FASP window. If any unsaved changes exist on the window when you click on this button, the following message displays:

“Do you want to Exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes and close the window.
- Click on the No button to close the message without closing the window; all changes remain pending.

---

Step-by-Step: Adding an Outside Participant to the Visiting Plan

1. On the Visiting Plan tab, click on the Add Outside Participants button. The Outside Participants window displays. Any outside participants who were already added to the stage display in the grid. Required fields highlight in yellow.

2. Record the person’s last and first name in the name fields.

3. In the Relationship field, click on the drop-down arrow and select the relationship type from the resulting list.

4. In the Participant Address section, record the individual's address in the appropriate fields.

5. When you have recorded the address, click on the Validate button. CONNECTIONS runs address validation.

6. Click on the Accept button to accept the validated address.

7. Record phone, fax and e-mail information in the respective fields.

8. When you have finished recording information for this individual, click on the Add button. The information is added to the Outside Participants grid.

9. Click on the Save button.

---

To add an outside participant who is listed as a Visiting Resource in the Service Plan Review:

1. Click on the Add Outside Participants button.

2. Select the individual from the grid on the Outside Participants window.

3. Click on the drop-down arrow for the Relationship field and select from the resulting list.

4. Click on the Modify button. The Visiting Plan tab displays with the individual now included on the list Outside Participants list and can be selected.
Step-by-Step: Modifying Information About an Outside Participant

1. On the Visiting Plan tab, click on the Add Outside Participants button. The Outside Participants window displays. Any outside participants who were already added to the stage display in the grid. Required fields highlight in yellow.

2. Click on an existing outside participant’s name in the grid. Detailed information recorded about that individual displays in the fields in the lower half of the window.

3. Modify fields, as necessary, by typing directly in the field or selecting from drop-down lists, as appropriate. If you modify a person’s address information, click on the Validate button to run the address through address validation.

4. Click on the Modify button. The person’s information updates in the grid at the top of the window.

5. Click on the Save button.

To delete a person from the Outside Participants field:

1. Click on the Add Outside Participants button.

2. Select the individual from the grid on the Outside Participants window.

3. Click on the Delete button.

Where am I?

Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Foster Care Issues node > Family/Child Visiting Plan sub-node
**Visiting Plan Review**

While a child is in foster care or Non-LDSS Custody –Relative/Resource Placement, circumstances may change independently or as a result of the child’s needs. Visiting plans should be reviewed periodically to gauge their current effectiveness and record any necessary changes to the plan. For example, if a parent is consistently visiting and appropriately interacting with the child, the frequency or duration of the visits might need to be increased. The Visiting Plan Review tab provides a place in the FASP to review any Visiting Plans that were developed, gauge their effectiveness in building parenting capacity and supporting child well-being, and record changes to the plan to meet the child’s needs more effectively. If the last approved in-sequence FASP had an associated Visiting Plan with a designated Plan Description, a Visiting Plan Review is required. (See the table on the next page for more information about when a Visiting Plan Review is required.)

This tab is available only if both of the following conditions are met (if either condition is not met, the Visiting Plan Review tab does not display):

- The FASP type is Comprehensive or Reassessment.
- The last approved in-sequence FASP had Visiting Plan information recorded and saved.

<table>
<thead>
<tr>
<th>Visiting Plan Review is Required when:</th>
<th>Visiting Plan Review is Optional when:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage is CWS</td>
<td>Stage is CWS</td>
</tr>
<tr>
<td>-AND-</td>
<td>-AND-</td>
</tr>
<tr>
<td>Each Visiting Plan has a Plan Description of Parents/Child(ren), Mother/Child(ren), Father/Child(ren), Legal Guardian/Legal Custodian/Child(ren), or Primary Discharge Resource/Children -AND-</td>
<td>No active Visiting Plan has a Plan Description of Parents/Child(ren), Mother/Child(ren), Father/Child(ren), Legal Guardian/Legal Custodian/Child(ren), or Primary Discharge Resource/Children -AND-</td>
</tr>
<tr>
<td>One or more children have a Program Choice of Placement</td>
<td>One or more children have a Program Choice of Placement</td>
</tr>
<tr>
<td>Stage is CWS</td>
<td>Stage is CWS</td>
</tr>
<tr>
<td>-AND-</td>
<td>-AND-</td>
</tr>
<tr>
<td>No child has a Program Choice of Placement</td>
<td>No child has a Program Choice of Placement</td>
</tr>
<tr>
<td>One or more children have a Program Choice of Non-LDSS Custody</td>
<td>One or more children have a Program Choice of Non-LDSS Custody</td>
</tr>
<tr>
<td>Stage is CCR</td>
<td>Stage is CCR</td>
</tr>
</tbody>
</table>
The Visiting Plan Review tab contains a visiting plan grid with the following fields:

- Review Status
- Primary Location
- Duration
- Plan Description
- Frequency
- Visiting Plan Status
In both the FSS/CWS and FSS/CCR stages, this grid is view-only and contains Visiting Plan data fields that are brought over from the last approved in-sequence FASP. Only the Visiting Plans that are indicated as Active are brought forward. See “Visiting Plan” on page 14-53 for detailed descriptions of these fields.

In the middle of the tab, three view-only lists display:

- **Child Participants**
  The children selected to participate in the Visiting Plan

- **Adult Participants**
  The adults selected to participate in the Visiting Plan
  *(CWS only)*

- **Outside Participants**
  Others selected to participate in the Visiting Plan who are *not* in the Stage Composition

The Visiting Plan Review is used not only to record the *quantity* of visits, but the *quality*; both of these criteria should be evaluated. A grid with two columns, **Degree** and **Description**, displays on this tab. Workers use these fields to rate the degree to which the parent(s) or other visitors met the frequency on the previous visiting plan. One and only one row can be selected at a time.

<table>
<thead>
<tr>
<th>Degree</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totally</td>
<td>Regularly attends visits (90-100% compliance)</td>
</tr>
<tr>
<td>Routinely</td>
<td>May miss visits occasionally (65-89% compliance)</td>
</tr>
<tr>
<td>Sporadically</td>
<td>Misses many scheduled visits (26-64% compliance)</td>
</tr>
<tr>
<td>Rarely</td>
<td>Misses most scheduled visits (1-25% compliance)</td>
</tr>
<tr>
<td>Never</td>
<td>Does not visit</td>
</tr>
</tbody>
</table>

To the right of this grid is a field containing a drop-down arrow. Workers use this field to rate the degree to which the parents’ (or other primary discharge resource’s) behavior during visits supports a healthy and nurturing relationship. Workers click on the drop-down arrow and select from the resulting list. Only one of the following values can be selected; the system does *not* default to a value.

- Consistently
- Occasionally
- Rarely
- Never

As workers determine which value to select from the list, they should consider the degree to which the parent has demonstrated the following important parenting competencies:

- Demonstrates parental role
- Demonstrates knowledge of child’s development
- Responds appropriately to child’s verbal/non-verbal signals
- Puts child’s needs in front of her/his own
- Shows empathy toward child

In the lower left corner of the **Visiting Plan Review** tab, workers must document whether the expectations of the previous Visiting Plan were met. To guide their decision, workers should consider each parent’s/discharge resource’s adherence to the frequency, logistics, and any
special conditions of the plan. Workers should also consider the parent’s/discharge resource’s demonstrated ability on core parental competencies that support a healthy and nurturing relationship. If the expectations of the plan were met, workers click on the Yes radio button. If not, they click on the No radio button. If workers select the No radio button, the narrative field displays highlighted in yellow; the worker must record any expectations that were not met and the reason they were not met. In this field, workers should also explain the reason for their rating and the degree to which the parent’s or other visitor’s behavior during visits does or does not support a healthy and nurturing relationship. Once the required information has been recorded and saved, the value of the Review Status field changes from “Incomplete” to “Complete.” If workers choose to complete a Visiting Plan Review when one is optional, the required fields must still be completed: a selection from the Degree/Description grid, a selection from the “Rate the degree” drop-down list, and an answer to the Yes/No “Expectations” question.

The buttons that display in the footer are Spell Check, Save and Cancel. These are common to Foster Care Issues.

<table>
<thead>
<tr>
<th>Step-by-Step: Completing the Visiting Plan Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 On the Visiting Plan Review tab, click on the column to the left of the plan you want to review. If you are accessing the Visiting Plan window in a Comprehensive or Reassessment FASP, this tab should display automatically. Information from any Active Visiting Plans populates the Visiting Plan grid. If the stage is an FSS/CCR, the Adult Participants field does not display. When you select a plan on the tab, a list of the participants in that plan displays in the appropriate participant fields.</td>
</tr>
<tr>
<td>2 In the Degree/Description grid, click on the radio button that accurately reflects the degree to which the parent(s) or other visitors met the frequency of the Visiting Plan. Only one degree can be selected for each Visiting Plan.</td>
</tr>
<tr>
<td>3 Click on the drop-down arrow for the Behavior Rating field and select the degree to which the parent’s behavior during visits supports a healthy and nurturing relationship. Consider the degree to which the parent has demonstrated the following parenting competencies:</td>
</tr>
<tr>
<td>• Demonstrates parental role</td>
</tr>
<tr>
<td>• Demonstrates knowledge of child’s development</td>
</tr>
<tr>
<td>• Responds appropriately to child’s verbal/non-verbal signals</td>
</tr>
<tr>
<td>• Puts child’s needs in front of her/his own</td>
</tr>
<tr>
<td>• Shows empathy toward child</td>
</tr>
<tr>
<td>4 Click on the appropriate Yes or No radio button to record whether the expectations of the Visiting Plan were met. If you click on the No radio button, a corresponding Narrative field displays to the right. (This field highlights in yellow, indicating that it is a required field.) Record a narrative explaining what expectations were not met, the reason for your rating and the degree to which the parent’s or other visitor’s behavior during visits does or does not support a healthy and nurturing relationship.</td>
</tr>
<tr>
<td>5 Click on the Save button.</td>
</tr>
</tbody>
</table>
No Visiting Plan

For FSS/CWS and FSS/CCR stages, there are times when a Visiting Plan will not be recorded. Perhaps it has been determined that the safety of the child would be compromised by visiting with available family members. If this is determined to be the case, the worker should record a narrative to support the reason why a Visiting Plan has not been developed. In an FSS/CWS, this narrative is required; for an FSS/CCR the narrative is optional. However, it is always recommended that workers record information pertinent to the stage. This tab can also be used to record a narrative describing any non-visiting contact a foster child may have with his/her family (e.g., phone calls, letters, e-mails).

The No Visiting Plan tab is comprised of a narrative field that holds up to 4,000 characters of text.

Step-by-Step: Completing the No Visiting Plan Tab

1. On the Visiting Plan window, click on the No Visiting Plan tab.
2. For any child who does not have a Visiting Plan with a parent, legal guardian or primary discharge resource, record a narrative explaining why. Also, describe any contact other than visiting that any child has with these individuals.
3. Click on the Save button.
The Family/Child Visiting Grid

The Family/Child Visiting Grid window helps consolidate information regarding visitation from other areas of the Case Management functionality. It displays the information populated from Progress Notes for the following note types:

- Attempted Family/PDR Visitation
- Attempted Sibling Visitation
- Family/PDR Visitation
- Sibling Visitation
- Other Visitation

This is a view-only window that allows workers to view a list of Family/Child Visiting occurrences recorded in CONNECTIONS Progress Notes. This helps confirm that all visitation information recorded by workers is reviewed and recorded correctly in the FASP.

At the top of the window, information displays regarding the specific range of dates. In an Initial FASP, the “From” date is the creation date of the Family Services Stage. In a Comprehensive or Reassessment FASP, the “From” date is the due date of the last FASP. In all FASP types, the “To” date is today’s date.

The Family/Child Visiting Grid window contains the following columns:

- Date of Visit
- Type of Visit
- Participant
- Location

Each row listed represents a visit or attempted visit that was documented in Progress Notes. The information in each column is populated by exactly what was recorded in the corresponding Progress Notes fields.
Step-by-Step: Accessing the Family/Child Visiting Grid Window

1. From the Foster Care Issues, click on Family/Child Visiting Grid sub-node.
   *The Family/Child Visiting Grid window displays in view-only mode.*

2. Review the information displayed.

3. Click on the Close button.
**Discharges**

Discharge planning begins as soon as a child is placed in foster care. Foster care is intended as a temporary solution; the ultimate goal is the achievement of the child’s safety and well-being in a permanent home with permanent attachments and relationships. All casework, family and child/youth activity and progress is aimed toward achieving this goal. Workers continually assesses safety, risk, family functioning, needs and progress toward plan outcomes; concurrently, there is a specific set of factors that need to be considered when progress indicates that discharge may be appropriate. CONNECTIONS guides workers through the process of determining a child/youth’s readiness for discharge and supporting the child and family after discharge. When a child is being discharged from foster care and placed in a new living situation, information is recorded to describe the type of discharge that is occurring and specifics regarding the suitability of the new living situation. Record and maintain all information pertaining to child(ren) being discharged from foster care on the appropriate Discharges window. This includes date of discharge, type of discharge (trial or final), discharge setting, as well as detailed information about safety factors, needs and resources available to the child or family.

There are four discharge protocols organized as separate windows:

- Discharge to Home/Relative/Other Caretaker
- Discharge to Independent Living
- Discharge to Adult Residential Care
- Discharge to Adoption (only available in FSS/CCR)

The Discharges windows are available in the Initial, Comprehensive and Reassessment FASPs. The Discharges windows are also available in the Plan Amendment and separately via the Add a Component function. The wording on the windows is identical for each FASP type. Discharge information must be recorded for each child who is discharged from foster care. When selecting the Discharges sub-node from the FASP tree, it is necessary to identify which of the discharge protocols is applicable. Each button on the Discharges window is initially labeled New; once information is recorded on one of the resulting windows, the button displays as In-Process. Each child in a stage can have a different discharge type. “Discharge to Adoption” only displays on the Select Discharge window if the FSS type is CCR.
Step-by-Step: Accessing the Discharges Window

1. From the Foster Care Issues node, click on the Discharges sub-node. The Discharges window displays the following Discharge Types:
   - Home/Relative/Other Caretaker
   - Independent Living
   - Adult Residential
   - Adoption (for FSS/CCR only)

   All of the buttons are initially labeled New; once information has been recorded on one of the resulting windows, the button is labeled In-Process.

2. Click on the New button for the desired Discharge Type. The selected window opens.

Discharge to Home/Relative/Other Caretaker

Frequently, when a child is discharged from foster care, s/he returns home or to the custody of a relative (or other caretaker). The Discharge to Home/Relative/Other Caretaker window supports the decision-making process as well as the recording and maintenance of information regarding this type of discharge. In addition to the basic facts of the discharge, it is important to record information regarding why the decision has been made to discharge the child from foster care, what has changed in the home to allow the child to return safely, any court-ordered requirements that the parent or caretaker has failed to meet, a review of the family composition and living conditions to which the child will be discharged and the ability of the parent or caretaker to meet the child’s needs.

At the top of the Discharge to Home/Relative/Other Caretaker window is the Select Child grid. From this grid, workers must select the child to whom the information applies. This grid applies to each tab within this window.

This window contains the following tabs:
   - Situations/Behaviors/Concerns
   - Decision Support
   - Needs/Resources

When the Discharge to Home/Relative/Other Caretaker window is opened, the Situations/Behaviors/Concerns tab displays.

Situations/Behaviors/Concerns

When a child is being discharged home or to a relative/caretaker, it’s important to record not only the basic details of the discharge, but also the circumstances that initially created the need for the child to be placed in foster care. A narrative description is required to explain these
circumstances and describe what has changed to create a safe environment for the child to return home. If the worker indicates that safety issues exist in the discharge household that may affect the child’s safety, s/he must describe them in narrative form, as well as the protecting factors that are in place. All required information must be recorded before the FASP is submitted for approval.

The Select Child grid displays at the top of the window. To select a child from the grid, workers click on the box to the left of the child’s name.

Workers record the Discharge Effective Date by clicking on the drop-down arrow and selecting from the resulting calendar. (They can also enter the date manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”) Below this field, select the appropriate Discharge Setting by clicking on the Home, Relative or Other radio button. Next, select the Discharge Type by clicking on the Trial or Final radio button.

Below the radio buttons are two Narrative fields. In the first, workers briefly describe the situations and behaviors that created and maintained the need for placement. In the next field, they explain what has changed to make this a safe environment for the child(ren).

At the bottom of the tab, workers identify any issues or concerns related to other children or adults in the household that may impact the child’s safety, permanency or well-being upon discharge. This could include dangerous individuals who frequent the home or unsafe living conditions that exist. If any issues or concerns exist, workers click on the Yes radio button. If not, workers click on the No radio button. Selecting the Yes radio button displays a narrative field highlighted in yellow; the details of the issues and concerns are recorded in this field, as well as the actions taken or the protecting factors that are in place.
**Step-by-Step:**
Completing the Situations/Behaviors/Concerns Tab on the Discharge to Home/Relative/Other Caretaker Window

1. In the Select Child grid, click on the box to the left of the child’s name for whom you wish to record discharge information.
   *If this is an FSS/CCR, the grid displays the name of the only child in the stage.*

2. To record the Discharge Effective Date, click on the drop-down arrow and select from the resulting calendar.
   *You can also enter the date manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”*

3. In the Discharge Setting field, click on the Home, Relative or Other radio button, as appropriate.

4. In the Discharge Type field, click on the Trial or Final radio button, as appropriate.

5. In the Situations and Behaviors Narrative field, record the situations and behaviors that created and maintained the need for placement.

6. In the What has Changed Narrative field, record what has changed to create a safe environment for the child(ren).

7. In the Discharge Concerns field, click on the Yes, No or N/A radio button, as appropriate, to indicate whether there are any issues or concerns related to other children or adults in the home that may impact this child upon discharge.
   *If you selected “Yes,” a Narrative field displays below. If you selected “No” or “N/A,” skip to Step 9.*

8. In the Narrative field, record the details of these issues and/or concerns.

9. Once you have recorded all of the discharge information, click on the Save button.
   *The following message displays:*
   “You are Discharging <Last Name, First Name> to Home/Relative/Other Caretaker. Continue?”

10. Click on the Yes button to finish recording the discharge information.
    *OR*
    Click on the No button to discard all of the changes.

Where am I?
Assigned Workload > FSS > Tasks > Foster Care Issues node > Discharges sub-node > Home/Relative/Other Caretaker
**Decision Support**

The **Decision Support** tab on the *Discharge to Home/Relative/Other Caretaker* window guides workers regarding key factors that must be considered when determining whether the discharge from foster care is safe and appropriate. On this tab, workers also record information pertaining to the parent’s or caretaker’s completion of any court-ordered conditions and the level of support by the parent/guardian and the child regarding the discharge plan. If any court-ordered conditions have not been met, a narrative explanation must be recorded specifically detailing each condition that has not been met and the actions/activities required. For example, if a parent was court-ordered to attend weekly counseling meetings and has not complied, the reason for this must be documented. Additionally, if the parent/guardian or the child is not fully supportive of the decision to discharge, a narrative must be recorded explaining this. If a child consistently expresses unhappiness or anger with the plan for him/her to return home, the reason for this must be explained in the appropriate narrative field. If the **No** radio button is selected for any of the questions on this window, workers should reconsider the discharge plan and implement additional supports to prepare the child (and the discharge resource) for a safe and successful discharge.

For the child selected on the Select Child grid, workers record whether the parent or caretaker has met the conditions of the court order. Clicking on the **Yes** radio button indicates that s/he has; clicking on the **No** radio button indicates that s/he has not. Clicking on the **N/A** radio button indicates that no court order exists and this question does not apply. Selecting the **No** radio button displays a narrative field highlighted in yellow; the conditions that were not met must be recorded in this field.

Below this field, workers record whether the parent or caretaker is fully supportive of the discharge decision. Clicking on the **Yes** radio button indicates that s/he is; clicking on the **No** radio button indicates that s/he is not. Clicking on the **N/A** radio button indicates that this does not apply. (For example, if the child is
being discharged to an aunt because the parents died while the child was in foster care.) Selecting the No radio button displays a narrative field highlighted in yellow; the parent’s position must be recorded in this field.

In the lower right corner, workers record whether the child is fully supportive of the discharge decision. Clicking on the Yes radio button indicates that s/he is. Clicking on the No radio button indicates that s/he is not. Clicking on the N/A radio button indicates that this question does not apply. An example of this is if the child does not have the capacity (due to age or developmental disability) to state a position. Selecting the No radio button displays a narrative field highlighted in yellow; the child’s position for not supporting the decision must be recorded in this field.

### Step-by-Step: Recording Discharge Decision Support Information

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>On the Discharge to Home/Relative/Other Caretaker window, click on the Decision Support tab.</td>
</tr>
<tr>
<td>2</td>
<td>Click on the box to the left of the appropriate child’s name in the Select Child grid.</td>
</tr>
</tbody>
</table>
| 3    | For the child you selected on the Select Child grid, click on the Yes, No or N/A radio button, as applicable, to indicate whether the parent/caretaker met the conditions of the court order.  
If you selected No, a Narrative field displays below. If you selected Yes or N/A, skip to Step 5. |
| 4    | In the corresponding Narrative field, record the conditions that the parent/caretaker did not meet. |
| 5    | In the Parent/Caretaker Support field, click on the Yes, No or N/A radio button, as applicable, to indicate if the parent/caretaker is supportive of the discharge decision.  
If you selected No, a Narrative field displays below. If you selected Yes or N/A, skip to Step 7. |
| 6    | In the corresponding Narrative field, record the parent’s/caretaker’s reason(s) for not supporting the discharge decision. |
| 7    | In the Child Support field, click on the Yes, No or N/A radio button, as applicable, to indicate whether the child is supportive of the discharge decision.  
If you selected No, a Narrative field displays below. If you selected Yes or N/A, skip to Step 9. |
| 8    | In the corresponding Narrative field, explain the child’s reason(s) for not supporting the discharge decision. |
| 9    | Click on the Save button. |
**Needs/Resources**

The **Needs/Resources** tab on the *Discharge to Home/Relative/Other Caretaker* window provides for the documentation of information regarding the review of the living conditions in the home to which the child is discharged, as well as the parent’s/caretaker’s ability to support the child financially, physically and emotionally. If the living conditions were not reviewed, a narrative explaining why this was not done must be recorded. To determine the parent’s/caretaker’s ability to meet the child’s basic needs upon discharge, information is gathered about income, medical coverage and extended family or community resources that are available.

For the child selected on the Select Child grid, workers record in the upper left corner of the tab whether a recent review was conducted which determined that the living conditions and available sleeping arrangements are adequate. Clicking on the *Yes* radio button indicates that such a review and positive determination was made. If not, workers must click on the *No* radio button. Selecting the *No* radio button displays a narrative field highlighted in yellow; the reason the conditions/arrangements are not adequate or why such a review was not done must be recorded in this field.

In the upper right corner of the tab, workers record whether the parent or caretaker has an adequate source of income to provide for the child’s needs. This includes earned income and/or public assistance. Clicking on the *Yes* radio button indicates that the parent/caretaker does. Clicking on the *No* radio button indicates that s/he does not. Selecting the *No* radio button displays a narrative field highlighted in yellow; record how the parent or caretaker will provide for the child’s needs.

If there are any needs related to the child that should be addressed after the child’s discharge, workers record this in the designated field in the lower left corner of the tab. This might include medical, behavioral or educational needs. Clicking on the *Yes* radio button indicates that the child has such needs. If not, workers must click on the *No* radio button. Selecting the *Yes* radio button displays a
narrative field highlighted in yellow; the details of the child’s needs and how they will be addressed must be recorded in this field.

On the right side of the tab, workers record whether the child will have medical coverage upon discharge for preventive health care and identified physical, mental, dental health and/or prescription needs. Clicking on the Yes radio button indicates the child will have coverage. If not, the worker must click on the No radio button. Selecting the No radio button displays an additional set of radio buttons to record whether a referral was made to medical assistance for an eligibility determination. Clicking on the Yes radio button indicates it was made. If not, the worker must click on the No radio button.

In the narrative field in lower right corner, workers identify the resources within the extended family and/or community that will support the child and/or family upon the child’s discharge.

The Copy, Spell Check, Save and Cancel buttons display in the footer. (See page 14-3 for definitions of these buttons.)

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>On the Discharge to Home/Relative/Other Caretaker window, click on the Needs/Resources tab.</td>
</tr>
<tr>
<td>2</td>
<td>On the Select Child grid, click on the box to the left of the appropriate child’s name.</td>
</tr>
<tr>
<td>3</td>
<td>For the child you selected on the Select Child grid, click on the Yes or No radio button in the Living Conditions Review field, as appropriate, to indicate if a recent review has determined that the living conditions and available sleeping arrangements are adequate. If you selected No, a Narrative field displays below. If you selected Yes, skip to Step 5.</td>
</tr>
<tr>
<td>4</td>
<td>In the corresponding Narrative field, explain why a review was not done or how the living conditions and/or sleeping arrangements are inadequate.</td>
</tr>
<tr>
<td>5</td>
<td>In the Parent/Caretaker Income field, click on the Yes or No radio button, as appropriate, to record whether the parent or caretaker has an adequate source of income to provide for the child’s needs. If you selected No, a Narrative field displays below. If you selected Yes, skip to Step 7.</td>
</tr>
<tr>
<td>6</td>
<td>In the corresponding Narrative field, explain how the parent/caretaker plans to provide for the child’s needs.</td>
</tr>
<tr>
<td>7</td>
<td>In the Additional Needs field, click on the Yes or No radio button, as appropriate, to indicate whether there are any needs that should be addressed after the child’s discharge. If you selected Yes, a Narrative field displays below. If you selected No, skip to Step 9.</td>
</tr>
<tr>
<td>8</td>
<td>In the corresponding Narrative field, record the details of these needs and how they will be addressed.</td>
</tr>
<tr>
<td>9</td>
<td>In the Medical Coverage field, click on the Yes or No radio button, as appropriate, to indicate whether the child will have medical coverage upon discharge.</td>
</tr>
</tbody>
</table>
If you selected **No**, the **Medical Referral** radio buttons display below. If you selected **Yes**, skip to **Step 11**.

10 In the **Medical Referral** field, click on the **Yes** or **No** radio button, as appropriate, to indicate whether a referral has been made to medical assistance for an eligibility determination.

11 In the **Resources** field, record a narrative identifying the resources that exist within the extended family and/or community that will support the child and/or family upon discharge.

12 Click on the **Save** button.

**Discharge to Independent Living**

Some children in foster care will not return home. The Permanency Planning Goal may be changed to Independent Living when:

- there is no parental or kinship discharge resource willing or able to assume custody or guardianship of the child;
  
  - **AND-**

- the child is 14 years of age or older;

  - **AND-**

- the child does not wish to pursue adoption.

Workers should continue to pursue building the youth’s relationships with supportive adults; these adults can mentor the youth before, during and after his/her discharge. Such relationships are essential to the youth’s safety and well-being after discharge. While in care, the youth has the opportunity to learn and improve the living skills s/he needs to be successful on his/her own. A discharge to an Independent Living situation requires workers to evaluate and record information specific to the details of the discharge, as well as the specific needs and safety concerns that pertain to each adolescent.

**Discharge Type/Dates**

The **Discharge Type/Dates** tab provides for the recording of each child’s discharge type and the effective date of his/her discharge to Independent Living. Workers also indicate that a youth received a 90-day written notice of intent to discharge and document the date this notice was given. If no notice was given, a narrative must be recorded explaining why this did not take place.
From the Select Child grid at the top of the window, workers click on the box to the left of the name of the youth for whom they are recording information.

Clicking on the Trial, Final or 90 Days Prior to Discharge radio button, as appropriate, records the Discharge Type. Next, workers record the Discharge Effective Date by clicking on the drop-down arrow and selecting from the resulting calendar. (The date can also be recorded manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”) Workers must document whether the youth received a 90-day written notice of intent to discharge. Clicking on the Yes radio button indicates the youth received notice. Clicking on the No radio button indicates s/he did not. Selecting the Yes radio button displays the Date of Notice field; the date the notice was given must be recorded here. Selecting the No radio button displays a narrative field highlighted in yellow; the reason the notice was not provided must be recorded in this field.

The Spell Check, Save and Cancel buttons display in the footer. (See page 14-3 for definitions of these buttons.)

**Step-by-Step: Recording Discharge Type and Dates for Independent Living**

1. On the Discharges window, click on the Independent Living button. The Discharge to Independent Living window displays. The Select Child grid displays at the top of the window and the Discharge Type/Dates tab is active.

2. In the Select Child grid, click on the box to the left of the child’s name for whom you wish to record discharge information. If this is an FSS/CCR, the grid displays the name of the only child in the stage.

3. In the Discharge Type field, click on the Trial, Final or 90 Days Prior to Discharge radio button, as appropriate.
4 To record the effective date of the discharge, click on the drop-down arrow for the **Discharge Effective Date** field and select from the resulting calendar. You can also record the date manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”

5 Click on the **Yes** or **No** radio button, as appropriate, to indicate whether the youth received a 90-day written notice to discharge. *If you selected Yes, a Date of Notice field displays below. If you selected No, a Narrative field displays.*

6 If you answered **Yes**, record the date of the notice. **-OR-**

   If you answered **No**, record a narrative explaining why the notice was not provided.

7 Click on the **Save** button.

   The following message displays: “You are Discharging <Last Name, First Name> to Independent Living. Continue?”

8 Click on the **Yes** button to finish recording the discharge information. **-OR-**

   Click on the **No** button to discard all of the changes.

**Needs/Resources**

The **Needs/Resources** tab on the **Discharge to Independent Living** window supports the capture and display of information regarding the youth’s success securing a residence, source of income, medical coverage, essential documents and the presence of an adult resource to provide emotional support upon discharge.

From the Select Child grid, workers select the youth for whom they are recording information.

In the upper left corner of the tab, workers record whether the youth has secured an appropriate residence. Clicking on the **Yes** radio button indicates s/he has. If not, workers must click on the **No** radio button. Selecting the **No** radio button displays a narrative field highlighted in yellow;
the actions taken and/or still needed to secure an appropriate residence must be recorded in this field.

In the upper right corner, workers record whether the youth has sufficient income upon discharge. Clicking on the Yes radio button indicates s/he does. If not, workers must click on the No radio button. Selecting the No radio button displays a narrative field highlighted in yellow; the actions taken and/or needed for the youth to secure a sufficient source of income must be recorded in this field.

In the lower left corner, workers record whether the youth will have medical coverage upon discharge for preventive health care and identified physical, mental, dental health and prescription needs. Clicking on the Yes radio button indicates the youth will have coverage. Clicking on the No radio button indicates s/he will not. Selecting the No radio button displays a narrative field, highlighted in yellow; the actions taken and/or still needed for the youth to secure medical coverage must be recorded in this field. This includes referrals to medical assistance for an eligibility determination.

Next, workers record whether arrangements are being made for the youth to receive essential documents (e.g., birth certificate, Social Security card, medical records, education records) at the time of discharge. Clicking on the Yes radio button indicates these arrangements are in process. Clicking on the No radio button indicates they are not.

In the narrative field in the lower right corner, workers must identify the adult resource available upon the youth’s discharge to provide emotional support/advice/guidance. If no one has been identified, all efforts that will be made to secure such a resource must be recorded.

The Spell Check, Save and Cancel buttons display in the footer. (See page 14-3 for definitions of these buttons.)

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**Step-by-Step: Recording Needs and Resources**

1. On the Discharge to Independent Living window, click on the Needs/Resources tab.

2. In the Select Child grid, click on the box to the left of the child’s name for whom you wish to record information.

3. In the Residence field, click on the Yes or No radio button, as appropriate, to indicate whether the youth has secured an appropriate residence.
   - *If you answered No, a Narrative field displays below. If you answered Yes, skip to Step 5.*

4. In the corresponding Narrative field, describe any actions taken and/or still needed to secure appropriate housing.

5. In the Income field, click on the Yes or No radio button, as appropriate, to indicate whether the youth has secured a sufficient source of income.
   - *If you answered No, a Narrative field displays below. If you answered Yes, skip to Step 7.*

6. In the corresponding Narrative field, describe any actions taken and/or still needed for the youth to secure a sufficient source of income.
7 In the **Medical Coverage** field, click on the **Yes** or **No** radio button, as appropriate, to indicate whether the youth will have medical care upon discharge.  
*If you answered No, a Narrative field displays below. If you answered Yes, skip to Step 9.*

8 In the corresponding **Narrative** field, describe any actions taken and/or still needed for the youth to secure medical coverage.

9 In the **Essential Documents** field, click on the **Yes** or **No** radio button, as appropriate, to indicate whether arrangements are being made for the youth to receive essential documents at the time of discharge.

10 In the **Resources Narrative** field, record the adult resource(s) available upon discharge to provide emotional support/advice/guidance to the youth. If no one has been identified, record the efforts to be taken to secure one.

11 Click on the **Save** button.

**Safety/Services**

On this tab, workers must indicate whether any safety concerns related to the youth’s discharge have been identified. These can include safety issues in the youth’s decision-making skills or his/her known associates. If safety concerns were identified, workers are required to describe these concerns on the **Safety/Services** tab on the **Discharge to Independent Living** window. Workers must identify and document any arrangements made with service providers needed by the youth upon discharge. If the youth has not been made aware of the services available to him/her, an explanation must be recorded.

From the Select Child grid, workers select the youth for whom they are recording information.
Any existing safety concerns related to the youth’s discharge from foster care must be recorded. Clicking on the Yes radio button indicates there are concerns. If not, workers click on the No radio button. Selecting the Yes radio button displays a narrative field highlighted in yellow; the safety concerns and any actions taken (or still needed) to address them must be recorded in this field.

In the narrative field in the upper right corner of the tab, workers must identify the arrangements made with service providers for services that the youth will need upon discharge. Below this field, workers must record whether the youth has been advised of the services that will be available to him/her upon discharge from foster care until the age of 21. Clicking on the Yes radio button indicates s/he has been advised. If not, workers must click on the No radio button. Selecting the No radio button displays a narrative field highlighted in yellow; workers are required to record why the youth has not been advised of these services in this field.

The Spell Check, Copy, Save and Cancel buttons display in the footer. (See page 14-3 for definitions of these buttons.)

### Step-by-Step: Recording Safety Issues and Services

1. On the Discharge to Independent Living window, click on the Safety/Services tab.
2. In the Select Child grid, click on the box to the left of the appropriate child’s name.
3. Click on the Yes or No radio button, as appropriate, to indicate whether there are any safety concerns related to the youth’s discharge. *If you selected Yes, a Narrative field displays below. If you selected No, skip to Step 5.*
4. In the corresponding Narrative field, record the identified safety concerns and describe any actions taken and/or still needed to address these concerns.
5. In the Arrangements Made field, record a narrative identifying the arrangements made with service providers for services that the youth needs upon discharge.
6. Click on the Yes or No radio button, as appropriate, to indicate whether the youth has been advised of the services available to him/her upon discharge. *If you selected No, a Narrative field displays below. If you selected Yes, skip to Step 8.*
7. In the corresponding Narrative field, record the reason why the youth has not been informed.
8. Click on the Save button.
Discharge to Adult Residential Care

The Discharge to Adult Residential Care window provides for the recording and maintenance of information for a foster child being discharged to an adult care situation. This might occur when a youth reaches the age of majority, but is unable to care for him/herself due to developmental disability or mental illness. In addition to the basic discharge information such as effective date of discharge, the window also provides a place for recording the logistics of the residential care facility, the reason the adolescent needs this level of care and any safety concerns that might exist.

From the Select Child grid at the top of the window, workers select the child for whom they are recording information.

In the upper left corner of the tab, workers record the Discharge Effective Date by clicking on the drop-down arrow and selecting from the resulting calendar. (The date can also be entered manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”) In the upper right corner, workers select the appropriate Discharge Setting by clicking on the Trial or Final radio button.

On the left side of the tab, workers record the name, address and phone number of the facility to which the adolescent is being discharged. They should include a contact person, if applicable. To the right of this field, workers explain in narrative form why the adolescent requires Adult Residential Care. If possible, the youth’s view of the move should be included.

Any safety concerns related to this discharge to Adult Residential Care must be recorded. Clicking on the Yes radio button indicates safety concerns exist. Clicking on the No radio button indicates there are no concerns. Selecting the Yes radio button displays a narrative field highlighted in yellow; the actions taken (or still needed) to address the concerns must be recorded in this field.

The Copy, Spell Check, Save and Cancel buttons display in the footer. (See page 14-3 for definitions of these buttons.)
Step-by-Step:
Completing the Discharge to Adult Residential Care Window

1 For an Initial, Comprehensive or Reassessment FASP, click on the Adult Residential Care button on the Discharges window.
-OR-
For a Plan Amendment, click on the Child Discharged to Adult Residential Care node (after adding the appropriate status change).
The Discharge to Adult Residential Care window displays. The Select Child grid displays at the top of the window.

2 In the Select Child grid, click on box to the left of the child’s name for whom you wish to record discharge information.
If the stage is an FSS/CCR, the grid displays the name of the only child in the stage.

3 To record the effective date of the discharge, click on the drop-down arrow for the Discharge Date field and select from the resulting calendar.
You can also enter the date manually one segment at a time—month, date, year—after clicking on the checkbox to make the field “active.”

4 Click on the Trial or Final radio button to indicate the type of discharge.

5 In the Facility Information field, record the name, address and phone number of the facility to which the adolescent is being discharged. If a contact person is known, include that information.

6 In the Adolescent’s Needs Narrative field, record why the adolescent needs this level of care. Include his/her view of the move, if applicable.

7 Click on the Yes or No radio button to indicate whether there are any safety concerns related to the discharge.
If you selected Yes, a corresponding Narrative field displays. If you selected No, skip to Step 9.

8 In the corresponding Narrative field, explain what the safety concerns are and any actions taken or still needed to address them.

9 Click on the Save button.
The following message displays:
“You are Discharging <Last Name, First Name>to Adult Residential Care. Continue?”

10 Click on the Yes button to finish recording the discharge information.
-OR-
Click on the No button to discard all of the changes.
Discharge to Adoption
The **Discharge to Adoption** window is only available for an FSS/CCR and is used to record and maintain information for a foster child being discharged to an adoptive home. This window supports the documentation of the decision-making process involved in the adoption finalization, as well as what kind of post-adoption support services have been offered to the adoptive family.

Because there is only one child for an FSS/CCR stage, the child is already highlighted in the Select Child Grid.

In the upper narrative field, workers must explain why the decision was made to finalize the adoption at this time. Below this field, workers record whether the adoptive family has been told of the availability and scope of post-adoption support services. Clicking on the **Yes** radio button indicates the family has been told. Clicking on the **No** radio button indicates they have not. Selecting the **Yes** radio button displays a narrative field in the lower left corner of the window; the family’s response to the offer of these services must be recorded in this field. Selecting the **No** radio button displays a narrative field in the lower right corner; workers must record why the family has not been told about these services.

The **Copy**, **Spell Check**, **Save** and **Cancel** buttons display in the footer. (See page 14-3 for definitions of these buttons.)
Step-by-Step: Completing the Discharge to Adoption Window

1. For a Reassessment FASP, click on the Adoption button on the Discharges window.
   -OR-
   If you are accessing the window from a Plan Amendment, click on the Child Discharged to Adoption node (after adding the appropriate status change).
   The Discharge to Adoption window displays. The Select Child Grid displays at the top of the window and is populated with the name of the only child in the stage, since this window is only available for an FSS/CCR stage.

2. In the Narrative field, explain why the decision was made to finalize the adoption at this time.

3. Click on the Yes or No radio button, as appropriate, to indicate whether the family has been told of the availability and scope of post-adoption support services.
   If you selected No, a corresponding Narrative field displays below on the left. If you selected Yes, a corresponding Narrative field displays below on the right.

4. In the corresponding Narrative field on the left, explain why the family has not been told about the services.
   -OR-
   In the corresponding Narrative field on the right, record the family’s response to the offer of services.

5. Click on the Save button.
   The following message displays:
   "You are Discharging <Last Name, First Name>to Adoption. Continue?"

6. Click on the Yes button to finish recording the discharge information.
   -OR-
   Click on the No button to discard all of the changes.
Copy to Other Children

Once workers have recorded information on the active tabs for one child, the information may be copied for the entire sub-node and brought forward to other children on the Select Child grid. This permits workers to record information for one child and copy that information to additional children as needed, providing a more effective and efficient documentation process when the children are placed in similar situations. CONNECTIONS supports this process through the Copy to Other Children function.

The Copy to Other Children function is available on the following three nodes in the FASP tree:

- Foster Care Issues (except on the Life Skills Assessment, Visiting Plan and Visiting Grid windows)
- Non-LDSS Custody
- Programmatic Eligibility

In each instance, certain conditions need to be met for the function to be enabled.

On the Foster Care Issues node, the Copy to Other Children function is available on each of the above sub-nodes when all of the following conditions are met:

- There is more than one child with a Program Choice of "Placement."
- The worker saved data (on any of the tabs) for the child currently selected in the grid.
- The information on the selected tab has not been changed since the last save, or no data has been saved or recorded on the selected tab.
- The worker has modify rights to the other child(ren).
- No information was saved on any tabs for the "copy to" child(ren).

On the Non-LDSS Custody node, the Copy to Other Children function is available on each sub-node when all of the following conditions are met:

- There is more than one child with a Program Choice of "Non-LDSS Custody – Relative/Resource Placement."
- The worker saved data (on any of the tabs) for the child currently selected in the grid.
- The information on the selected tab has not been changed since the last save, or no data has been saved or recorded on the selected tab.

It is important to remember that information for any child may only be copied once during any FASP, so you should wait until the majority of information is recorded for the first child before copying it to any other child(ren).

If information is already present for the child who is to be "copied to," the copy function is not available for that child; s/he will not display on the Copy To window.

Also, a Caseworker cannot copy information to a child who is Associated to a different Caseworker. The exception to this rule occurs when the copy function is selected on the Programmatic Eligibility node; on this node, the copy function is available to all workers. The Case Planner can use the Copy function regardless of Association.
On the Programmatic Eligibility node, the Copy to Other Children function is available when both of the following conditions are met:

- The worker saved data (on any of the tabs) for the child currently selected in the grid.
- No information was saved on any tabs for the “copy to” child(ren).
- The information on the selected tab has not been changed since the last save, or no data has been saved or recorded on the selected tab.

Only a Case Planner or a Caseworker who has been Associated to the child(ren) can use the Copy to Other Children function from the Foster Care Issues or the Non-LDSS Custody node of the FASP. On the Programmatic Eligibility node, the copy function is available for all Tracked Children, regardless of Program Choice.

The Copy to Other Children window displays the following label: “All information for <sub-node> will be copied.” The name of the sub-node from which information is being copied (e.g., Appropriateness of Placement) displays in the label. This means that all of the information on all of the tabs on the window will be copied, not just the information on the tab the worker is on when s/he selects the copy function. The name of the source child (the child who was selected in the Select Child grid) displays in the Information is being copied from field. The name(s) of the other child(ren) to whom the worker has modify rights listed in the Select Child grid display in a list on the window. The worker may select any child(ren) from that list by clicking on each applicable child’s corresponding checkbox.

If the source child (whose name displays in the Information to be copied from field) is not the child from whom the worker wants to copy information, s/he clicks on the Cancel button to return to the previous window and select the appropriate child from the Select Child grid. Once you return to the Copy to Other Children window, the worker may select one or more children to whom s/he wants to copy information. Once one or more children is selected and the worker clicks on the Save button, all information copied from the source child is stored in a new record for the selected child(ren).
When a worker initiates the **Copy to Other Children** function in the **Foster Care Issues** or **Non-LDSS Custody** node of the FASP, the function varies based on the following criteria:

- **On the Foster Care Issues node**, a child displays for selection on the list *only* if no Foster Care Issues information has been saved for the child on that sub-node.
- **On the Foster Care Issues node**, only children with a Program Choice of “Placement” display on the list.
- **On the Non-LDSS Custody node**, a child displays for selection on the list *only* if no Non-LDSS Custody information has been saved for that child on that sub-node.
- **On the Non-LDSS Custody node**, only children with a Program Choice of “Non-LDSS Custody” display on the list.
- **Only children to whom a worker has been Associated** display on the list (unless the worker has the role of Case Planner).

On the **Programmatic Eligibility** node, all Tracked Children display on the list for any worker with a role in the stage.

Once you select a child’s name in the **Information to be Copied to** field, the **Save** button enables. If a child’s name is subsequently deselected (leaving no names selected), the **Save** button disables. Clicking on the **Save** button copies information to a newly created row in the database for each selected child. For any windows that contain multiple tabs, all information on all tabs is copied and saved.

- **Clicking on the Cancel button** closes the window.

When information is copied to the child(ren) selected in the **Information to be Copied to** field, the name(s) of those child(ren) no longer display in that field.

### Step-by-Step:
**Copying Information to Other Children via the Appropriateness of Placement Window**

1. On any tab that has the **Copy** button (always the last tab on the window), click on the box to the left of the name of the child *from* whom information is to be copied.

2. Click on the **Copy** button.  
   *The Copy to Other Children window displays.*

3. In the **Information to be Copied to** field, select the child(ren) to whom you want to copy information by clicking on the corresponding checkbox(es).  
   *An “X” displays in the corresponding checkbox for each selected child.*

4. Click on the **Save** button.  
   *The Copy to Other Children window remains open.*

5. Click on the **Cancel** button.  
   *The tab from which you accessed the Copy to Other Children window displays.*
Module 15:  
Non-LDSS Custody

Non-LDSS Custody is a Program Choice, which can only be used in conjunction with a Preventive Program Choice (either Mandated or Non-Mandated). When child(ren) are assessed to be not safe in their own home, they are removed from the home and placed in a safe environment. However, removal does not always mean that a child is placed in the custody of a local Commissioner of Social Services. The child may be placed with an alternative resource, such as a relative. The provision of care of a child by an alternative resource may or may not include court involvement. If the court is involved, it may decide to place the children in the legal custody of a relative or other resource by authorizing temporary custody of the child(ren) via Article 6, or the child(ren) may be placed informally in the physical care of a relative or other resource, such as a family friend. In either case there is no transfer of custody or guardianship to the Commissioner of Social Services. These types of placement are known as Non-LDSS Custody – Relative/Resource Placement. The court may also order an Article 10 petition under which the Local District is directed to supervise the placement, in which case the rules regarding permanency hearings apply.

Even though children may be placed in Non-LDSS Custody, the worker must still evaluate the caretaker(s) to assess the child(ren)’s safety. The worker needs to document all information received regarding this placement setting, just as s/he would if the child(ren) were placed in the care and custody of a local Commissioner of Social Services. This documentation includes all Family Assessments and Service Plans (FASPs), Risk Assessments, and visitation plans, as applicable. CONNECTIONS provides a means of recording all information received throughout the time period during which the children remain in Non-LDSS Custody.

The Non-LDSS Custody – Relative/Resource Placement window supports the recording of placement information for any child with a Program Choice of “Non-LDSS Custody – Relative/Resource Placement.” This window is only available under one of two circumstances:

- Once any child in the Family Services Stage (FSS) is assigned a Program Choice of “Non-LDSS Custody – Relative/Resource Placement” on the Tracked Children Detail window, the Non-LDSS Custody node and Placement and Planning Issues sub-node are automatically added to the Family Assessment and Service Plan (FASP) tree.

- The Non-LDSS Custody node may be added to the FASP tree manually through the Add a Component function.
Any worker with an assigned role in the FSS may view the information on the Non-LDSS Custody - Relative/Resource Placement window. Access to this window is further restricted based on the following:

- The Case Planner may modify or view information for any child, regardless of whether or not the child has been Associated to a worker.
- The Case Manager may modify information on this window only if no Case Planner is assigned to the FSS (i.e., the Case Manager is acting as the Case Planner). Otherwise, the Case Manager has view-only access to this window.
- Any Caseworker who is Associated to one or more children in the FSS (on the Tracked Children Detail window), as well as any worker with access to that Caseworker’s Assigned Workload, can access the Non-LDSS Custody - Relative/Resource Placement window to modify or view information.
- Any worker who has a role in the FSS, but who is not Associated to the selected child, has view-only access to that child’s information.
- If a worker does not have a role in the case, is not Associated to any child in the case, and has no specific security rights to access the case, s/he can neither view nor modify information in that case.

Once the Program Choice of “Non-LDSS Custody” is selected for any child listed on the Tracked Children Detail window, all required sections of the FASP must be completed, including the Non-LDSS Custody node. The child’s Person ID, name and age are carried forward from the Tracked Children Detail window to the Non-LDSS Custody - Relative/Resource Placement window.

Once the Non-LDSS Custody node and Placement and Planning Issues sub-node display on the FASP tree, the worker must record the required information. The questions in this node are similar to those in the Foster Care Issues node, but do not require the same breadth of information.

Non-LDSS Custody Node

The Non-LDSS Custody – Relative/Resource Placement node may consist of three sub-nodes:

- **Placement and Permanency Issues**
  - The Placement and Permanency Issues sub-node opens the Non-LDSS Custody-Relative/Resource Placement window, which does not display until the question on the Appropriateness of Alternative Setting window is answered. The Appropriateness of Alternative Setting window displays each time the Placement and Permanency Issues sub-node is accessed, unless information has already been recorded on the Appropriateness of Alternative Setting tab in the current FASP. (See “The Appropriateness of Alternative Setting Tab” on page 15-8.)
  - The Non-LDSS Custody - Relative/Resource Placement window includes four tabs:
    - **Appropriateness of Alternative Setting**: This tab is used to record general information about the placement of the selected child with a Program Choice of “Non-LDSS Custody,” including the caretaker’s name, the child’s
relationship to the caretaker, the location of placement and a narrative field to explain the appropriateness and safety of the living arrangement. This tab enables only if the Yes radio button is selected on the Appropriateness of Alternative Setting window.

- **Placement Functioning**: This tab is used to record how the selected child is adjusting to the current placement and whether the living arrangement is meeting the child’s needs.
- **Permanency Progress**: This tab is used to record any progress being made toward the selected child’s current permanency goal, whether that goal is reunification with the parent(s) or to remain in the care of the relative/resource.
- **Record Return Home**: This tab is used to record information regarding the plan to return the child to his/her parent(s), whether the parent(s) have met the court-ordered obligations and if there are any ongoing needs that should be addressed once the selected child returns home. Completion of this tab is optional for any child, and should only be completed if the child is returning home.

**Life Skills Assessment**
The Life Skills Assessment sub-node is designed to provide an assessment of the knowledge and capability a child has regarding specific life skills. This information assists the worker in determining whether further instruction in individual areas is necessary to acquire, enhance or maintain those skills and the appropriate placement setting for the child. Completion is optional for children placed in Non-LDSS Custody. This sub-node only displays for children who are age 14 or older.

**Family/Child Visiting Plan**
The Family/Child Visiting Plan sub-node includes specifics regarding the schedule and location of family/child visitations while a child is in Non-LDSS custody. Completion of this window is optional for children placed in Non-LDSS Custody.

**Step-by-Step:**
Accessing the Non-LDSS Custody - Relative/Resource Placement Window via the FASP

1. From the FASP Tree, click on the ‘+’ for the Non-LDSS Custody-Relative/Resource Placement node. The Placement and Planning Issues, Family/Child Visiting Plan and Life Skills Assessment sub-nodes, if applicable, display on the FASP Tree.

2. Click on the Placement and Planning Issues sub-node. The Appropriateness of Alternative Setting window displays.

If you previously answered Yes to the question on the Appropriateness of Alternative Setting window, the Non-LDSS Custody - Relative/Resource Placement window displays, not the Appropriateness of Alternative Setting window.
The Appropriateness of Alternative Setting Window

During the time that a child is placed in the care and custody of a relative/resource, incidents may occur that affect this placement. For example: There were no relatives available to care for the child when s/he was first removed, but after a short time an aunt comes forward and requests temporary custody; or a young child was placed in the care and custody of an elderly grandparent and it is determined that this placement is not in the best interests of the child. When such incidents occur, the child may be moved from one home to another. On the Non-LDSS Custody - Relative/Resource Placement window, information must be recorded regarding any child who is placed in the care and custody of a Relative/Resource during his/her placement. When the worker attempts to open the Non-LDSS Custody - Relative/Resource Placement window, the Appropriateness of Alternative Setting window displays under one of two circumstances:

- The worker is opening the Non-LDSS Custody - Relative/Resource Placement window for the first time in the current Comprehensive or Reassessment FASP or Plan Amendment.
- The worker did not answer the question on the Appropriateness of Alternative Setting window the first time the Placement and Planning Issues sub-node was selected.

When the Appropriateness of Alternative Setting window displays, the worker must indicate whether any child has been given the Program Choice of “Non-LDSS Custody” since the last FASP or Plan Amendment or moved from one such placement to another.

- Clicking on the Yes radio button confirms that at least one child in the current stage has been given the Program Choice of “Non-LDSS Custody” since the last FASP or Plan Amendment or has moved from one such placement to another. If Yes is selected, four tabs display on the Non-LDSS Custody - Relative/Resource Placement window. The worker must complete these tabs for any child who has been given the Program Choice of “Non-LDSS Custody” since the last FASP or Plan Amendment or moved from one such placement to another.
- Clicking on the No radio button confirms that no children were given the Program Choice of “Non-LDSS Custody” since the last FASP or Plan Amendment or moved from one such placement to another. The Appropriateness of Alternative Setting tab displays, but is disabled.
Once a radio button has been selected, the **OK** button enables. Clicking on the **OK** button displays the *Non-LDSS Custody - Relative/Resource Placement* window.

The **Cancel** button closes the *Appropriateness of Alternative Setting* window. This button is always enabled. The next time the worker selects the **Placement and Permanency** sub-node, the *Appropriateness of Alternative Setting* window will display again (and will continue to do so), until the worker selects either the **Yes** or **No** radio button.

<table>
<thead>
<tr>
<th>Step-by-Step: Recording Non-LDSS Custody - Relative/Resource Placement Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 On the <em>Appropriateness of Alternative Setting</em> window, click on the <strong>Yes</strong> or <strong>No</strong> radio button.</td>
</tr>
<tr>
<td>2 Click on the <strong>OK</strong> button. The <em>Non-LDSS Custody-Relative/Resource Placement</em> window displays.</td>
</tr>
<tr>
<td>• If you selected the <strong>Yes</strong> radio button in <strong>Step 1</strong>, the <em>Appropriateness of Alternative Setting</em> tab displays and is active.</td>
</tr>
<tr>
<td>• If you selected the <strong>No</strong> radio button, the <em>Appropriateness of Alternative Setting</em> tab is disabled. The <em>Placement Functioning</em> tab is active.</td>
</tr>
</tbody>
</table>

**The Non-LDSS Custody-Relative/Resource Placement Window**

The *Non-LDSS Custody – Relative/Resource Placement* window provides a convenient and efficient process for recording placement information for any child placed in Non-LDSS Custody. The worker must record the information gathered while working with the child and relative/resource, just as s/he would if the child was placed in a Foster Home. The *Non-LDSS Custody* window provides an historical record for any worker who is currently involved with the family, or may be involved with them in the future. The information recorded is crucial for developing the family history. There may be other workers involved with the family in the case, or with specific members of the family. These workers may have view and/or maintain access to the case, so open communication with these other workers is very important and must be maintained in order to provide accurate, up-to-date information. All information gathered during the FSS should be recorded in CONNECTIONS as soon as possible.
The *Non-LDSS Custody – Relative/Resource Placement* window is divided into three sections:
- **Header**
- **Tabs**
- **Footer**

The header contains the Select Child grid, which pre-fills automatically with information recorded on the *Tracked Children Detail* window. The Select Child grid is always present when the *Non-LDSS Custody – Relative/Resource Placement* window is open. On this window, the Select Child grid displays the names of only those children who have a Program Choice of “Non-LDSS Custody,” unless the *Non-LDSS Custody* node was added via the Add a Component functionality (in which case the Select Child grid displays the names of all children in the Family Services Stage). The Select Child grid includes the following columns:

- **Person ID**
  CONNECTIONS automatically assigns a unique number to each individual entered into the CONNECTIONS system.

- **Child**
  The **Child** column displays the name of the child.

- **Age**
  The **Age** column displays the age of the child, as determined by the FASP due date.

- **In Process**
  When information is already saved for the child, an “X” displays in the **In Process** column to signify that information is present.

The following buttons display along the bottom of the tab:
- **Spell Check**
  This button allows the worker to check the narrative for spelling errors.

- **Save**
  This button saves the information the worker recorded on the *Non-LDSS Custody – Relative/Resource Placement* window.
Cancel  This button discards unsaved data and reverts the window data back to its previously saved version (if one exists). When the worker clicks on the Cancel button before saving his/her work, the following message displays:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes.
- Click on the No button to close the message; all changes remain pending.

The main body of the Non-LDSS Custody - Relative/Resource Placement window contains tabs that provide for the recording of information for each child placed in Non-LDSS Custody. Each tab contains specific information regarding the caretaker(s), child(ren), and/or parent(s). The tabs can be accessed in any order and can be completed incrementally.

**The Select Child Grid**

Only one child can be selected from the Select Child grid at a time. Once a child is selected, the worker answers the questions and records a narrative in each of the active tabs for the selected child.

<table>
<thead>
<tr>
<th>Non-LDSS Custody-Relative/Resource Placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>File Options Help</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Person ID</th>
<th>Child</th>
<th>Age</th>
<th>In Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>26095535</td>
<td>Faye, Child1</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>26095496</td>
<td>Simpson, Joc</td>
<td>3</td>
<td>X</td>
</tr>
</tbody>
</table>

| Appropriateness of Alternative Setting | Placement Functioning |

If a child is end-dated, or the Program Choice of “Non-LDSS Custody” is end-dated while a FASP is still in progress (i.e., the child no longer has an active Program Choice of “Non-LDSS Custody-Relative/Resource Placement”), but Non-LDSS Custody information has already been saved for the child, the child’s name remains in the grid.

**The Copy to Other Children Function**

Information for each child is recorded individually; if the saved information applies to other children in the stage, the Copy to Other Children function can be used. The Copy to Other Children button is on the last tab of the Non-LDSS Custody-Relative/Resource Placement window. After the information is recorded and saved for a selected child, the Copy to Other Children functionality becomes available to the Case Planner and to workers who are Associated to a child listed in the Select Child grid. If information was already saved for the selected child, an “X” displays in the In Process column. The Copy To Other Children function is not available for any child with an “X” in the In Process column.

If the worker is not Associated to the selected child, s/he is restricted from modifying information in any field for that child; this is view-only. The Save and Copy buttons are disabled when the window is in view-only mode.
The Appropriateness of Alternative Setting Tab

The **Appropriateness of Alternative Setting** tab provides the worker with fields to record general information about the placement of a child with a Program Choice of “Non-LDSS Custody,” including the caretaker's name, relationship to the selected child, location of the placement and a narrative field for the worker to explain the appropriateness and safety of the living arrangement.

The upper left corner of the tab contains two fields:

**Caretaker's Name**

The worker records the name of the Caretaker in this field by typing directly into the field. The information is retained only within the **Non-LDSS Custody** node, but is not saved to the database; therefore, a Person Search in CONNECTIONS will not return this name in the results.

The Caretaker's Name should be added to the Stage Composition; a Person Search is required as part of that process.

**Relationship to Caretaker**

The relationship is selected by clicking on the drop-down arrow and selecting the Caretaker's relationship to the child from the resulting list, which contains the same relationship types as those found in the Family Relationship Matrix. (However, the relationships recorded on the Matrix do not carry over to this window.)

The Address Information section is located in the upper half of the tab and consists of the **Street, PO Box/Apt, City, State, ZIP, County, Type** and **CD** fields. This section also contains the **Validate** button, which is disabled until data has been recorded in the **Address** fields. The **State, County** and **Type** fields are completed by clicking on their respective drop-down arrows and selecting from each resulting list. Once the address is validated, the **CD** field is system-populated for stages with New York City addresses.

After the address information is recorded, the **Validate** button enables. Clicking on the **Validate** button performs address validation, which verifies the accuracy of the address and formats the information in accordance with U.S. Postal Service standards. The address validation window displays, showing a side-by-side comparison of the recorded address and the validated
address. Indicate whether CONNECTIONS should replace the recorded address with the validated address by clicking on the Accept or Reject button. (For more detailed information about address validation, see the tip box on page 9.)

The Save button is disabled on the Appropriateness of Alternative Setting tab until the address information is recorded and validated.

Once you record any address information on the Appropriateness of Placement tab, the narrative field highlights in yellow, indicating that comments are required. You must record an explanation regarding the appropriateness and safety of the living arrangement. Once you begin to record text, the Spell Check button enables. This field holds a maximum of 4,000 characters.

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### Step-by-Step: Recording Appropriateness of Alternative Setting

1. On the Appropriateness of Alternative Setting tab, click on the column to the left of a child’s name in the Select Child grid.
2. In the Caretaker Name field, type in the name of the caretaker.
3. Click on the drop-down arrow for the Relationship to Caretaker field and select from the resulting list.
4. In the Street field, record the caretaker’s street address.
5. In the City field, record the city where the caretaker resides. The default setting for the State field is “New York.”
6. Click on the drop-down arrow for the County field and select the county where the caretaker resides.
7. Click on the Validate button. See the tip box at right regarding address validation.
8. Check the accuracy of the address displayed on the address validation window.
9. Click on the Accept button to accept the validated address. —OR—
   Click on the Reject button to reject the address.
10. In the Narrative field, record comments regarding the appropriateness and safety of this living arrangement. The Save button enables.
11. Click on the Save button. The information is saved to the database.

---

### Address Validation

When you click on the Validate button, CONNECTIONS launches a search to verify the validity of the address and format it to comply with U.S. Postal Service standards. The address validation window displays, containing a side-by-side comparison of the address you recorded and the validated address in standardized postal format. Compare the address you recorded to the address provided.

If the validated address is the same as or more complete than the address you recorded, click on the Accept button; otherwise, click on the Reject button.

If a different address (or an address that is not as complete as the address you recorded) is returned and you are certain that the address information you recorded is correct, click on the Reject button.

If a message displays indicating that the address information you recorded is invalid (e.g., “The house number is invalid” or “The street is invalid”), click on the OK button to close the message. Be sure to verify that the address you recorded is correct. If it is not correct, record the correct address in the appropriate fields.

All addresses must be run through the validation process in CONNECTIONS.
**The Placement Functioning Tab**

It is part of the worker’s responsibility to record how the child is functioning in his/her new placement setting. There are times when a child is placed in the home of a relative or family friend and subsequently this setting proves not to be an appropriate placement setting for the child, in that the child’s needs are not being met.

The **Placement Functioning** tab supports the recording of information regarding the functioning of the child in his/her placement setting. This tab consists of two narrative sections for the worker to describe how the child is functioning and the protecting factors that make this setting a safe environment for the child.

You must first select a child from the Selected Child grid. Only one child may be selected from the grid at a time. Information for each child is recorded individually. This is important, since not all workers have access to the same child(ren) in the family, the child(ren) may not live in the same setting, or circumstances could vary from one child to another. If you are not Associated to the selected child and information was previously recorded, you may only view the information on the tab.

When you select a child to whom you have been Associated and information was previously recorded, you may modify the recorded text. If no information was previously recorded, you may record information in the two narrative sections. In the first narrative, describe how the child is functioning in the alternative setting; in the second narrative, describe any protecting factors that are in place to keep the child safe. The **Spell Check** button enables whenever text is recorded in any narrative on the tab.
Step-by-Step: Recording Placement Functioning

1. On the **Placement Functioning** tab, select the child you want to record comments for by clicking on the box to the left of his/her Person ID.

2. Record comments regarding the child’s functioning in his/her new setting in the Narrative field on the left.

3. In the **Narrative** field on the right, record comments regarding the key protecting factors that keep the child safe in his/her new setting.

4. Click on the **Save** button. 
   *The information is saved to the database.*

**The Permanency Progress Tab**

The worker is responsible for establishing a PPG for the child that supports reunification with the parent/caretaker or an alternative permanency outcome for the child. The Case Planner is also responsible for working with the parent(s) to develop a Service Plan that will support the child’s permanency goal. This will assist the parent/caretaker in understanding what specifically must be accomplished, within a specific timeframe, in order to reach the stated permanency goal. For example, the parent/caretaker is to remain drug-free. Specific activities and tasks should provide clear expectations of the parent/caretaker and clearly establish those expectations for the child. The parent should be aware that if s/he does not meet the conditions of the court order and goals, it could result in the termination of parental rights and the child could be placed for adoption. The worker is also responsible for ensuring that the parent(s) and other family members have regular contact with the child in placement, unless it is not in the best interests of the child. The worker is responsible for informing the parent(s) so that they are fully aware of the Permanency Planning Goal and that the relative/resource caring for the child is aware that there is a possibility the child may be placed for adoption if reunification is not achieved.

The **Permanency Progress** tab allows the worker to record progress made toward the child’s Permanency Planning Goal, whether that goal is to reunite the child with his/her parent(s) or to remain with the relative/resource, as well as whether or not the parent(s) are in agreement with this plan. The worker must also record any contact the child has with his/her family members and whether the possibility of guardianship/custody was discussed with the relative/resource who currently cares for the child.

This tab contains four narrative fields and radio buttons to record the outcome of the Permanency Planning Goal for the selected child. The narratives may be mandatory, and may have differing topics, depending on the radio buttons you select.
You must first select a child from the Select Child grid. Only one child may be selected from the grid at a time. Information for each child is recorded individually.

In the upper left corner of the tab, record comments describing whether the Permanency Planning Goal is for the child is to be reunited with the parent(s), or for the child to remain in the care of a relative/resource.

In the lower left corner of the tab, indicate whether the child is having contact with members of his/her family. In this section, select either the Yes or No radio button, as appropriate. Regular visitation between the child and his/her family members is very important in maintaining the child/parent relationship. If the parents are not visiting the child on a regular basis, this information must be documented. If you select the Yes radio button, record comments describing the contact. If you have recorded a Visiting Plan, comments are optional. If you select the No radio button, record why no contact is occurring if you have not completed the No Visiting Plan tab on the Visiting Plan window.

In the upper right corner of the tab, select the Yes, No or N/A radio button (as appropriate) to record whether the parent is in agreement with the Permanency Planning Goal. If you select the Yes radio button, comments are optional. If you select the No radio button, the narrative field highlights in yellow, indicating that comments are required. If you select the N/A radio button, no corresponding comments field displays on the tab.

In the lower right corner, document whether you discussed the Permanency Planning Goal of guardianship/custody or adoption with the relative/resource. If you select the Yes radio button, you are confirming that you have discussed guardianship/custody or adoption with the relative/resource; comments are optional. If you select the No radio button, you are confirming that you have not discussed guardianship/custody or adoption with the relative/resource. The narrative field highlights in yellow, indicating that comments are required to explain why you have not discussed this Permanency Planning Goal.
Step-by-Step: Recording Permanency Progress

1. On the Permanency Progress tab, select the child you want to record comments for by clicking on the box to the left of his/her Person ID.

2. Record comments in the Narrative field (in the upper left corner) regarding whether the plan is to reunite the child with the parent or for child to remain with the relative/resource.

3. Click on the Yes radio button if the child is having contact with his/her family.
   —OR—
   Click on the No radio button if the child is not having contact with his/her family.

4. In the Narrative field in the lower left corner, record comments regarding the contact between the child and members of his/her family (or lack of contact, if you have not completed a Visiting Plan).

5. Click on the Yes radio button if the parent is in agreement with the plan.
   —OR—
   Click on the No radio button if the parent is not in agreement with the plan.
   —OR—
   Click on the N/A radio button if this question is not applicable for the selected child.

6. If you selected No, record comments in the Narrative field in the upper right corner, explaining your answer to the question in Step 5.
   If you selected the Yes or N/A radio button in Step 5, the Narrative field does not display.

7. Click on the Yes radio button if the permanency plan was discussed with the relative/resource.
   —OR—
   Click on the No radio button if the plan was not discussed.
   The Narrative field highlights in yellow, indicating that comments are required.

8. In the corresponding Narrative field, record comments regarding your answer to the question in Step 7.

9. Click on the Save button.
   The information is saved to the database.
The Record Return Home Tab

When a child is being returned to his/her parent(s), the worker must document that the initial reason(s) for the placement were addressed, including all of the conditions of the court order, if applicable. The worker must develop an appropriate discharge plan that addresses the child’s ongoing needs upon reunification with the parent/caretaker (e.g., developmental, medical, behavioral, educational). For example, a child who is living with a relative/resource has been receiving mental health counseling while in placement and it is determined that it is in the child’s best interests to continue counseling after reunification with his/her parent(s).

The Record Return Home tab should be completed only if the child is returning home. This tab consists of three narrative fields and radio buttons. The narratives may be mandatory, and may have differing topics, depending on the corresponding radio buttons selected. See the bulleted list below for details regarding the narrative topics and requirements.

You must first select a child from the Select Child grid. Only one child may be selected from the grid at a time. Information for each child is recorded individually.

This tab is comprised of three sections; if you are completing this tab, a response must be recorded (via the corresponding radio buttons) for the question in each section:

- In the upper left corner, indicate whether the reasons the child was placed have been successfully addressed, including all safety issues.
- In the lower left corner, indicate whether the child has any needs that should be addressed after reunification. If you select the Yes radio button, a corresponding narrative field displays, highlighted in yellow (indicating that comments are required). Record an explanation of identified needs and the services that are required to address those needs. If you select the No radio button, this narrative field does not display.
On the right side of the tab, indicate whether any court orders were issued and, if so, whether the conditions of the order were met. If you select the **No** radio button, a corresponding narrative field displays, highlighted in yellow (indicating that comments are required). In the narrative field, record an explanation of the conditions that were *not* met.

### Step-by-Step: Recording Return Home Information

1. On the **Record Return Home** tab, select the child you want to record comments for by clicking on the box to the left of his/her Person ID.

2. Record in the **Narrative** field (in the upper left corner) whether the parent(s) have met the court-ordered obligations.

3. In the lower left corner, click on the **Yes** radio button if there are any child-related needs that must be addressed after the child’s reunification.
   —**OR**—
   Click on the **No** radio button if there are no needs.
   
   *If you select the **Yes** radio button, a corresponding **Narrative** field displays, highlighted in yellow (indicating that it is a required field); record the child’s needs. If you select the **No** radio button, the **Narrative** field does not display.*

4. On the right side of the tab, click on the **Yes** radio button if the parent(s) have *met* the conditions of the court order.
   —**OR**—
   Click on the **No** radio button if the parent(s) have *not* met the conditions of the court order.
   
   *When the **No** radio button is selected, a corresponding **Narrative** field displays, highlighted in yellow (indicating that comments are required). Record comments explaining the conditions that have not been met.*
   —**OR**—
   Click on the **N/A** radio button if no court orders exist for this child.

5. Click on the **Save** button.
   *The information is saved to the database.*
Copy to Other Children

Once the worker has recorded information on the active tabs for one child, the information may be copied for the entire sub-node and brought forward to other children on the Select Child grid. This permits the worker to record information for one child and copy that information to additional children as needed, providing a more effective and efficient documentation process when the children are placed in similar situations. CONNECTIONS supports this process through the Copy to Other Children function.

The Copy to Other Children function is available when all of the following conditions are met:

- There is more than one child with a Program Choice of “Non-LDSS Custody – Relative/Resource Placement.”
- The worker saved data (on any of the tabs) for the child currently selected in the grid.
- The information on the selected tab has not been changed since the last save, or no data has been saved or recorded on the selected tab.
- The worker has modify rights to other child(ren).
- Information has not been saved for the other children.

Only a Case Planner or a Caseworker who has been Associated to the child(ren) can use the Copy to Other Children function from the Non-LDSS Custody node of the FASP.

The Copy to Other Children window displays the following label: “All information for Non-LDSS Custody Relative/Resource will be copied.” This means that all of the information on all of the tabs on the window will be copied, not just the information on the tab that is displayed/active when you select the copy function. The name of the source child (the child who was selected in the Select Child grid) displays in the Information is being copied from field. The name(s) of the other child(ren) listed in the Select Child grid display in a list on the window. You may select any child(ren) from that list.

It is important to remember that information for any child may only be copied once during any FASP component, so you should wait until the majority of information is recorded for the first child before copying it to any other child(ren).

If information is already present for the child who is to be “copied to,” s/he will not display in the Select Child list.

Also, information cannot be copied to a child who is Associated to a different Caseworker.
The Copy to Other Children window displays the name of the source child you selected from the Select Child grid on the Non-LDSS Custody - Relative/Resource Placement window. If this is not the name of the child from whom you want to copy information, click on the Cancel button to return to the Non-LDSS Custody - Relative/Resource Placement window and select the appropriate child. Once you return to the Copy to Other Children window, you may select one or more children to whom you want to copy information. Once a child(ren) is selected and you click on the Save button, all information copied from the source child is copied and stored in a new record for the selected child(ren).

When a worker initiates the Copy to Other Children function in the Non-LDSS Custody node of the FASP, the function varies based on the following criteria:

- A child displays for selection on the list only if Non-LDSS Custody information has not been saved for that child.
- Only children with a Program Choice of “Non-LDSS Custody” display on the list.
- Only children to whom the worker has been Associated display on the list.

Once a child’s name is selected in the Information to be Copied to field, the Save button enables. If a child’s name is subsequently deselected (leaving no names selected), the Save button disables. Clicking on the Save button copies information to a newly created row in the database for each selected child. For any windows that contain multiple tabs, all information on all tabs is copied and saved.

Clicking on the Cancel button closes the window.

Once information is copied to the child(ren) selected in the Information to be Copied to field, the name(s) of those child(ren) no longer display in the Copy to field. You may only copy to a child once per FASP component.
Step-by-Step: Copying Information to Other Children via the Non-LDSS Custody - Relative/Resource Placement Window

1. On the Non-LDSS Custody - Relative/Resource Placement window, select the child from whom information will be copied.

2. Click on the Options menu and select Copy to Other Children.
   *The Copy to Other Children window displays if more than one child is listed.*

3. In the Information to be Copied to field, select the child(ren) to whom you want to copy information by clicking on the corresponding check box(es).
   *A check mark displays in the corresponding check box for each selected child.*

4. Click on the Save button.
Life Skills Assessment

As children enter adolescence and ultimately attain adulthood, it is important that they possess some basic skills to facilitate that transition. It is possible that a child has not learned how to build healthy relationships, balance a checkbook or access community resources. In order for children in placement to be successful in navigating the transition to adulthood and achieving independence, it is important for the worker to support a child’s skill development. The Life Skills Assessment sub-node is designed to support a worker’s need to record his/her assessment of the knowledge and capability the child has regarding specific life skills. Assessing the child’s level of skill enables a worker to assist in the development of an appropriate Service Plan for the child.

Authorized Caseworkers must access and record all required information pertaining to Life Skills for each child (age 14 and over) who is in placement and to whom they are Associated. This information is optional for children with the Program Choice of “Non-LDSS Custody.”

Step-by-Step:
Accessing the Life Skills Assessment from the Non-LDSS Custody Node

1. From the Non-LDSS Custody – Relative/Resource Placement node, click on the Life Skills Assessment sub-node. The Life Skills Assessment window displays. If the Life Skills Assessment sub-node does not display in the FASP Tree, click on the Options menu to add Life Skills as a component.

2. For each category, select each appropriate check box, rating each tracked child’s level of achievement. A check mark displays in each selected check box. You cannot select more than one Level of Achievement in the same category for the same child.

3. Click on the Save button to save the changes.
The Family/Child Visiting Plan

One of the primary goals of child welfare is preserving the family, consistent with the safety of the children. To achieve this outcome, it’s important for these children to have consistent visitations scheduled with parents, siblings, legal guardians and other appropriate individuals. Visitation should support and encourage regular child and family contact, as well as provide the worker with valuable information regarding family interaction. Workers record the logistics of the visits (e.g., location, participants, frequency, duration, need for supervision, specific concerns) and periodically review the plan based on observations made regarding the dynamics during visitation (e.g., appropriateness of parents’ interaction, punctuality, whether expectations are met). Workers use the Family/Child Visiting Plan window to record all information regarding Visiting Plans in a FASP, as well as the details of new plans. This information may be recorded for all children in non-LDSS custody. While this information is not required for non-LDSS custody, once a Visiting Plan has been established, it must be completed.

<table>
<thead>
<tr>
<th>Step-by-Step: Accessing Family/Child Visiting Plan from the Non-LDSS Custody Node</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> From the Non-LDSS Custody – Relative/Resource node, click on the Family/Child Visiting Plan sub-node. <em>The Visiting Plan window displays.</em></td>
</tr>
</tbody>
</table>

For detailed step-by-step instructions about recording the Family/Child Visiting Plan, see Module 14: Foster Care Issues.

Creating/maintaining a Family/Child Visiting Plan is optional for children with a Program Choice of “Non-LDSS Custody.”
Module 16: Service Plan

The purpose of the Service Plan is to describe the actions planned to meet the most important needs of the family (or the child in a Child Case Record) so that the Permanency Planning Goal (PPG) can be achieved. Service Plans are a required part of a Family Assessment and Service Plan (FASP). Workers have the ability to assess and plan with families continuously over the life of a case, making modifications to changing circumstances and needs as necessary. It is critical that Service Plans include a focus on family strengths and resources and that they be completed in partnership with the family.

The Service Plan component of the FASP is part of the FASP Tree. The Service Plan is required for each Initial, Comprehensive and Reassessment FASP and may be updated for all Plan Amendment status changes. When a child is removed from his/her home, workers must complete a Service Plan Update 90 days from the date of removal.

Workers can create, view and modify Service Plan information and can also print parts of the Service Plan for use in court or when working in the field with the family.

A complete Service Plan includes the following components, which are required prior to submitting the FASP for approval:

**Outcome & Activity Blocks (O&A Blocks)**

This term is used to describe a cluster of the following:

- a problem/concern statement that specifies the behavior, underlying condition or circumstance that needs to change;
- a description of the activities and services that will support that change; and
- a statement of the desired result/outcome of the change.

At least one O&A Block must exist prior to submitting the FASP for approval.

**Services Needed**

Workers use this component to document the services needed for the plan, the beneficiary of the services and the status of those services.

**Family Involvement Narrative**

This component provides for the documentation of the amount and nature of the family's input into the Service Plan, including the family's requests for specific services or changes to the plan.
Access to various parts of the Service Plan is dependent on the worker’s role in the stage and which window is being accessed. Rights are assigned based on the following roles:

**Caseworker**  
Caseworkers can create, modify and view any Outcome & Activity Blocks and Service Needs. They may also create and view Family Involvement narratives. A narrative can only be modified by the worker who created that narrative.

**Case Planner**  
The Case Planner can create, modify and view any Outcome & Activity Blocks, Service Needs and Family Involvement narratives—including those recorded by Caseworkers. The Case Planner is also the only person in a stage who can update the Case Planner Summary and make additions or modifications to this summary.

**Case Manager**  
The Case Manager can view all components of the Service Plan, but cannot directly modify any components unless acting as the Case Planner.

The Service Plan window can be accessed in modify mode from the FASP Tree once a FASP has been launched. Any worker with a role in the stage (except the Case Manager) can initiate a Service Plan and has access to this window.
Step-by-Step: 
Opening the Service Plan Window via the FASP Window

1. Click on the Service Plan node.
The Service Plan window displays.

The Service Plan window can also be accessed through any Plan Amendment window via the Options menu.

The Service Plan Window

The Service Plan window provides workers with a place to create, view and modify Service Plan information. This window also provides workers with access to other assessment information within the current FASP, which assists them in developing a Service Plan. The information displayed on the Service Plan window is a view-only list (index) of Outcome and Activity Blocks and Needed Improvements/Changes. This is the first window workers see when developing a Service Plan. This window will be blank for an Initial FASP.

The Service Plan window contains the Outcome and Activity (O&A) Index, which is view-only and can be sorted by clicking on any column header. When the window is opened, the blocks display in chronological order from newest to oldest, based on the date created. Outcome and Activity Blocks are carried forward from previous FASPs. If no O&A Blocks have been created, the grid is blank, with only the column headings displayed.

Where am I?
Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Service Plan node
The Outcome and Activity Index contains the following columns:

<table>
<thead>
<tr>
<th>Last Modified By</th>
<th>The name of the worker who created or most recently modified the O&amp;A block</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Created</td>
<td>The date the block was created (The date does not change when the block is modified.)</td>
</tr>
<tr>
<td>Outcome Statement</td>
<td>The first 100 characters of the outcome narrative from the Outcome and Activity window</td>
</tr>
<tr>
<td>Status</td>
<td>The status of the problems/concerns, activities and outcome achievement described in each Outcome and Activity Block:</td>
</tr>
</tbody>
</table>
|                  | • **New**  
|                  |   An O&A Block created in the current FASP or a block created in a prior FASP that has not been modified in the current FASP or has not yet been marked as “Retained” in the current FASP |
|                  | • **Retained**  
|                  |   An O&A Block carried over from a prior FASP that a worker has actively marked as “Retained” within the current FASP |
|                  | • **Modified**  
|                  |   An O&A Block from a prior FASP that has been modified in the current FASP; can also be a block that was modified in a Plan Amendment |
|                  | • **Achieved**  
|                  |   Inactive status; indicates that the block’s desired outcome has been successfully achieved |
|                  | • **Discontinued**  
|                  |   Inactive status; indicates that this block is no longer applicable for the current stage |
| Status Date      | The date when the content of the O&A Block was last modified |

The Outcome and Activity Index also contains two radio buttons:

<table>
<thead>
<tr>
<th>View All</th>
<th>When <strong>View All</strong> is selected, the Outcome and Activity Index displays all O&amp;A Blocks for the current FASP and for prior FASPs, including blocks that are no longer active. Active statuses are New, Retained and Modified. Inactive statuses are Achieved and Discontinued.</th>
</tr>
</thead>
<tbody>
<tr>
<td>View Active</td>
<td>When <strong>View Active</strong> is selected, the Outcome and Activity Index displays all O&amp;A Blocks with an active status for the current FASP. Active statuses are New, Retained and Modified. <strong>View Active</strong> is the default setting upon opening the Service Plan window.</td>
</tr>
</tbody>
</table>
The **Needed Improvements/Changes** field, which displays to the right of the Outcome and Activity Index, is system-populated and contains the statement(s) of needed improvements or changes that need to be made within the family functioning, behavior, and/or living conditions pursuant to the assessment analysis. This information is brought forward from the **Assessment Analysis** sub-node of the Family or Child Assessment. The list is only available after the Case Planner Summary on the **Needed Improvements/Changes** tab for the current FASP has been launched. The text box only contains information from the Assessment Summary for the current FASP and is view-only. The list is not brought forward to future FASPs.

The **Needed Improvements/Changes** field is blank if the Case Planner has not launched the Case Planner Summary for this portion of the Assessment Analysis for the current FASP. The scroll bar to the right of the text box allows you to scroll as necessary to view all of the Needed Improvements/Changes.

The **Service Plan** window contains the following buttons:

- **Family Involvement**: This button opens the **Family Involvement** window.
- **Services Needed**: This button opens the **Services Needed** window.
- **O&A Block Details**: This button opens the **Outcome and Activity** window for the selected Outcome and Activity Block for the purpose of modifying the existing O&A Block selected in the Outcome and Activity Index.
- **New**: This button opens the **Outcome and Activity** window for the purpose of adding a new O&A Block to the Service Plan.
- **Assessment Summary**: This button displays the Assessment Summary. If all assessments have not been completed, the following message displays:
  
  “All required Assessments for this FASP are not complete.”

  This button is disabled if the **Service Plan** window was accessed via any Plan Amendment window or if the current FASP was launched for an FSS/CCR stage.

- **Close**: This button closes the **Service Plan** window, displaying the **FASP** window.
The Outcome and Activity Window

The Outcome and Activity window enables workers to create new or modify existing Outcome & Activity (O&A) Blocks. Any worker with a role in the stage (other than the Case Manager, unless the Case Manager is also acting as the Case Planner) may create, view or modify any O&A Block.

Where am I?
Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Service Plan node > Service Plan window > Outcome and Activity window

The Outcome and Activity window consists of the following fields:

**Problem/Concern**
Record the Problem/Concern in narrative format, describing the specific behavior, underlying condition, need or circumstance that needs to improve, change or be managed more effectively. This field allows a maximum of 2,000 characters.

**Outcome**
Record a brief and specific statement describing what will be different and how the change will be shown. Outcomes should be developed with the family and should be realistic, achievable and appropriate for the point in time at which the FASP is developed. Outcome statements and their measures may capture milestones on the path to more significant changes, such as interim steps in gaining sobriety or becoming drug-free. This field allows up to 2,000 characters, but only the first 100 characters of this statement display on the Outcome and Activity Index on the Service Plan window.

**Level of Outcome Achieved**
To support the worker’s and family’s need to assess progress, acknowledge successes, and to support full disclosure to the family of concerns regarding progress and potential consequences, CONNECTIONS provides the worker with
scale for rating the level of success achieved. Workers are required to select one Level of Outcome Achieved status from the drop-down list for each O&A Block. If possible, the choice should reflect a status achieved through consensus with the family. The following selections are available for the Level of Outcome Achieved field:

- Achieved/Needed Change Made
- Substantial Change has occurred
- Some Change has occurred
- Minimal or No Change
- Problem/Concern Worsening

The Level of Outcome Achieved drop-down list only displays for blocks that have been carried forward from previous FASPs where previous problems/concerns and outcomes have been identified. It is modifiable only in active blocks or blocks that have an inactive status (Achieved or Discontinued) within the current FASP. It is not available when its use is not appropriate, such as in the Initial FASP or when a "new" O&A Block is created in subsequent FASPs. The field does not display for blocks created within the current FASP, and it cannot be modified for inactive blocks that were also inactive in a prior approved FASP. An O&A block cannot be saved if this field displays on the screen and is left blank.

If the Level of Outcome Achieved is recorded as “Minimal or No Change” or “Problem/Concern Worsening,” comments must be recorded to support the reasons for this decision. A Comments button is provided for this purpose. Comments for all other statuses are recommended to provide details of the changes that are achieved. The comments should explain progress made and/or barriers to the progress.

Each O&A Block has a status attached to it that indicates whether it is a new block, a block that has been modified or retained from a prior FASP, or a block that has been achieved or discontinued. Blocks that are carried over from previous FASPs also have an achievement level indicated for the desired outcome that describes the progress (or lack of progress) toward the outcome goal.

A status is required for each block. Select only one status from the drop-down list:

- New
- Retained
- Modified
- Achieved
- Discontinued

When a new O&A Block is created, the status defaults to “New.”
The status remains “New” until the worker selects another status from the drop-down list in the next FASP.

**Strengths**
Strengths are the building blocks of change. During the Family Assessment and the Assessment Analysis, the Caseworker(s) identified family, individual and community strengths and resources. Caseworkers use this field to describe the relevant existing family or individual strengths that will be developed and used to achieve the desired outcome. This required field allows a maximum of 2,000 characters.

**Family Activities**
This field is used to describe the specific actions that each family member will take to achieve the desired outcome, and how often these actions will occur. This field allows up to 2,000 characters.

**Worker/Provider Activities**
This field is used to document specific actions that each worker or provider will take to achieve the desired outcome and how often these actions will occur. This field allows up to 2,000 characters.

The **Outcome and Activity** window also contains the following buttons:

**Spell Check**
Click on the **Spell Check** button to verify the spelling of the text recorded in the narrative or comments field.

**Assessment Summary**
Click on this button to display the Assessment Summary. If the individual assessments, which comprise the Assessment Summary, have not been completed, the following message displays:

“All required Assessments for this FASP are not complete.”

This button is disabled if the Service Plan window was accessed via any **Plan Amendment** window or if the current FASP was launched for an FSS/CCR stage.

**Comments**
The **Comments** button opens the **Level of Outcome Activity Achievement** window. This button only displays for Outcome and Activity Blocks that have been carried over from previous FASPs.

**Save**
The **Save** button saves work that has been recorded on the window and closes the window.

**Cancel**
Clicking on the **Cancel** button (when unsaved changes exist) displays the following message:

“Do you want to cancel? Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard all unsaved changes.
- Click on the **No** button to close the message box; all changes remain pending.
Close

Clicking on this button closes the window. If any unsaved changes exist on the window when you click on this button, the following message displays:

"Do you want to exit? Unsaved data and/or narrative(s) will be lost."

- Click on the Yes button to discard any unsaved changes and close the window.
- Click on the No button to close the message without closing the window; all changes remain pending.

Recording a New O&A Block

Workers document newly developed outcomes and activities by creating new Outcome and Activity (O&A) Blocks. Modifications to existing outcomes and activities are documented through the Outcome and Activity window. A case plan can have as few as one O&A Block based on the strengths and needs of the family and each individual family member. To be complete, each O&A Block requires the following information:

- A specific problem, concern, behavior or circumstance that needs to change (e.g., the father becomes violent and hits his children)
- An outcome that defines what will be different and how you will know that the problem or behavior has changed (e.g., the father controls his violent behavior and does not hit the children)
- Strengths of individuals and of the family that will be used to achieve the outcome (e.g., the father expresses love and affection for his children as well as responsibility for his actions)
• Specific family actions that spell out who will do what and how often (e.g., the father will attend Anger Management counseling every Monday and Wednesday)

• Specific worker or provider actions that spell out who will do what and how often (e.g., the Caseworker will drive father to Anger Management counseling)

### Step-by-Step: Recording an Outcome and Activity Block

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>On the Service Plan window, click on the New button. The blank Outcome and Activity window displays.</td>
</tr>
<tr>
<td>2</td>
<td>Record a specific issue in the Problem/Concern narrative field.</td>
</tr>
<tr>
<td>3</td>
<td>Record the desired outcome in the Outcome narrative field. When the O&amp;A Block is saved, the first 100 characters display in the O&amp;A Index.</td>
</tr>
<tr>
<td>4</td>
<td>In the Strengths narrative field, record the relevant individual, family and community strengths that will be developed and used to support outcome achievement.</td>
</tr>
<tr>
<td>5</td>
<td>In the Family Activities narrative field, record the actions the family members will take and the activities in which the family members will participate that will support needed improvements and changes.</td>
</tr>
<tr>
<td>6</td>
<td>In the Worker/Provider Activities narrative field, record the activities that the worker(s) and service providers in the case will complete to assist the family with making the improvements toward achieving the outcome.</td>
</tr>
<tr>
<td>7</td>
<td>Click on the Save button.</td>
</tr>
<tr>
<td>8</td>
<td>Click on the Close button to exit the window. The system populates the O&amp;A Index with the following information: Last Modified by, Date Created, Outcome Statement, Status and Status Date.</td>
</tr>
</tbody>
</table>

### Reviewing/Modifying an O&A Block

As the strengths and needs of families change, it is important that the services the family receives change accordingly to meet those needs. Service Plans need to be updated or modified to reflect those changing needs and the progress that has been made. The Case Planner and any Caseworker with a role in the stage can modify O&A Blocks.

The O&A Blocks from previous FASPs contain the information recorded at the time the FASP was approved. When O&A Blocks are carried forward from one FASP to the next, the **Level of Outcome Achieved** and related comments do not carry forward with the block. The achievement level for each block must be re-evaluated and re-recorded for each new FASP until the block is marked with a status of either “Achieved” or “Discontinued.” If a worker is
Updating an O&A Block that s/he did not create, the new worker’s name and ID are saved on the O&A Block.

Step-by-Step: Modifying an Outcome and Activity Block

1. On the Service Plan window, click on the box to the left of the Outcome and Activity Block that you want to modify or view.

2. Click on the O&A Block Details button. The Outcome and Activity window displays with the previously recorded information.

3. Make changes to any field, as necessary.

4. Click on the drop-down arrow for the O/A Status field and select a status from the resulting list. This field is disabled for a new O&A Block.

5. Click on the drop-down arrow for the Level of Outcome Achieved field and select from the resulting list. If you selected Minimal or No Change or Problem/Concern Worsened, the following message displays: “A comment is required at this level of outcome.” This field does not display for a new O&A Block.

6. Click on the Comments button. The Level of Outcome Activity Achievement window displays.

7. Record specific and concise comments that describe the facts supporting the conclusion.

8. Click on the OK button. The Outcome and Activity window displays.

9. Click on the Save button.

10. Click on the Close button.
The Services Needed Window

The Services Needed window is used to select one or more pre-defined services for adults or children in the current stage. This window must be completed for every tracked child. The Services Needed window is accessible from the Services Needed button on the Service Plan window (or the Services Needed command in the Options menu).

The Services Needed window is comprised of the Person list, the Service Choice grid and the Services Selected grid.

The Person list contains the following columns:

- **Name**: This column displays the names of each person listed in the stage. A corresponding check box displays to the left of each person’s name. To select services for one or more individuals in the stage, click on each applicable person’s corresponding check box.

- **Age**: This column displays the ages of each person listed in the stage at the time of the next due FASP.

The Select Person list also contains the All check box, which allows workers to select all people listed in the stage.
The Select Choice grid contains the following columns:

**Services***
The **Services** column contains a drop-down list of 60 pre-defined services that a worker can select for specific family members. Any service added to the Service Choice grid applies to all family members who have been selected in the Select Person list.

A worker cannot type a non-pre-defined service category into this field; if no service on the pre-defined list fits the actual service being rendered, the worker should select "Other."

**Status***
The **Status** column contains a drop-down list from which the worker can indicate the status of a selected service. Services that are being added for family members can only be paired with one of the following active status choices:

- Provided Direct
- Provided Purchase
- Referred/Waitlisted
- Planned

An inactive status can only be selected for a service in the Services Selected grid, not in the Select Choice grid. When a status has been assigned for a particular service in the Service Choice grid, the system adds another blank row to the grid and the worker may add another service.

The Services Selected grid contains the following columns:

**Name**
This column displays the name of the family member receiving the service.

**Age**
This column displays the age of the corresponding family member receiving the service at the time of the next due FASP.

**Tracked Child**
This column indicates whether or not the listed family member is a tracked child in the current stage. A tracked child is defined as a child who has a Program Choice and Permanency Planning Goal (PPG) recorded on the Tracked Children Detail window.

Each tracked child is identified in this column with a check mark in the corresponding check box; the check box is populated automatically by the system and cannot be modified.

All tracked children are automatically established with the **Case Management Services** service set for them; the status for this service is set to **Provided Direct**. This status cannot be modified for this service, nor can the service be deleted from the Services Selected grid.

**Service***
The **Service** field displays the service listed for the selected family member.
**Service Status**

For services that have already been selected for family members, the Service Status column allows the worker to update the status of these services. By clicking on the Service Status field for a specific service row, the worker selects from a drop-down list of active status types:

- Provided Direct
- Provided Purchase
- Referred/Waitlisted
- Planned

The following are inactive status types:

- Completed
- Discontinued
- Refused by Client
- Unavailable

**Initial Date**

This column displays the date the service was added for the family member.

**Date Last Modified**

This column displays the date the service status was last updated for this service.

---

The Services Needed window contains the following buttons:

**Clear**

Clicking on the Clear button clears all family members selected in the Person list and all services selected in the Service Choice grid.

**Add**

Clicking on the Add button adds the completed Service Choice row to the Services Selected grid. For each service choice made for each selected family member, the system creates a record in the Services Selected grid when the worker clicks on the Add button.

**Delete**

Clicking on the Delete button deletes the currently highlighted row from the Services Choice or Services Selected grid. It can only be used with the Services Selected grid for services that have been added to the grid since the last save. Rows cannot be deleted from the Service Selected grid once they have been saved.

**View All**

When the View All radio button is selected, the Services Selected grid displays all services for all family members, both active and inactive.

**View Active**

The View Active radio button is selected by default, resulting in the Services Selected grid displaying only the following active services:

- Planned
- Provided Direct
- Referred/Waitlisted
- Provided Purchased
The Services Selected grid also contains the Complete check box; the worker must select the check box to indicate that the work is complete. The Complete check box must be selected by the worker before the FASP can be submitted for approval. This check box is not required for districts that do not require the Services Needed window to be completed. If information is recorded on this window, the check box must be selected. If the Local District requires completion of this window, then the worker must record any appropriate services or (at the very least) check the Complete check box. If the district does not require completion of the window, the worker may record services. If any information is recorded on the window, the Complete check box must be checked.

For ACS cases, the Services Needed window must be completed.

### Step-by-Step: Recording Services Needed

2. From the Person list, select the person who is to receive services by clicking on the check box next to his/her name. *Multiple individuals may be selected. The Service Choice grid enables.*
3. Click in the blank row in the Services field. *A drop-down arrow displays in the field.*
4. Click on the drop-down arrow and select a service type from the resulting list.
5. Click in the blank row in the Status field. *A drop-down arrow displays in the field.*
6. Click on the drop-down arrow in the Status field and select a status from the resulting list. *The Add button enables.*
7. Click on the Add button. *The added service(s) displays in the Services Selected list.*
8. If you are finished recording services needed, click on the Complete check box.
9. Click on the Save button.

Services are brought forward from previous FASPs and can be modified if the service has an active status. The statuses of services need to be reviewed as new FASPs become due and need to be modified as changes to services occur. “Case Management Services” populates the Service field for all tracked children; since Case Management Services are required for all tracked children, this cannot be modified.
Step-by-Step: Modifying Services Needed

1. In the Services Selected grid, click on the Service Status column next to the service that needs to be modified. A drop-down arrow displays.
2. Click on the drop-down arrow in the Service Status field and select the new status for the service from the resulting list.
3. Click on the Save button.
The Family Involvement Window

Family involvement in service planning increases the likelihood that the plan will meet the family’s needs, and that there will be a mutual understanding between the worker and the family of what needs to change. Involving families in plan development is an important step in empowering the family to solve its own problems and is key to creating real improvement and lasting change in family dynamics and functioning. Caseworkers need to document their efforts to involve the family, even if those efforts are unsuccessful, in order to establish that the Caseworker is making diligent efforts to resolve issues that led to the need for foster care or other services. Caseworkers are responsible for making a reasonable effort to involve all family members in the development of the Service Plan, including children and youth old enough to participate. The Family Involvement window assists workers in documenting this important piece of the Service Planning process by providing a narrative field. The Case Planner and Caseworkers can record information on this window. Caseworkers can only modify their own narratives; Case Planners can modify all narratives via the Case Planner Summary function.

![Image of the Family Involvement window]

The Family Involvement window contains the Author grid, which displays a list of all Family Involvement narratives recorded for the current Service Plan. The grid contains the following columns:

- **Entry Date**  
The date the narrative was recorded

- **Author**  
The name of the worker who recorded the narrative

- **Status**  
The current status of the narrative

By default, the entries on this grid are listed in chronological order by entry date. Clicking on any column heading sorts the entries in ascending order by that column; an ascending indicator (▲) displays in the column heading. Click on the column heading again to change the sort to descending order; a descending indicator (▼) displays in the column heading.
On the *Family Involvement* window, the instructions for the narrative field read:

> “Describe the family’s input to this service plan. Note specific family requests for services or changes to the plan. Specify which family members contributed, including children. Describe how you obtained family input. If there was limited or no family input, describe your efforts to involve family members.”

The *Family Involvement* window includes the following buttons:

- **Case Planner Summary**
  This button launches the *Case Planner Summary* window. When the *Case Planner Summary* has been initiated, the **Launched** check box is selected automatically. If the Case Planner clicks on this button, the Summary is in update mode. If a Caseworker clicks on this button, the Summary is in view-only mode.

- **Save as Draft**
  Clicking on this button saves the current Family Involvement narrative in Draft status, which allows the author to return to the narrative later to make modifications. Draft narratives are retained in the FASP until the FASP is approved. Draft notes may be saved in Final status at any time before the Case Planner launches the Case Planner Summary. Once the Case Planner Summary is launched, workers can no longer modify their “Draft” entries.

- **Save as Final**
  Clicking on the **Save As Final** button saves the current Family Involvement narrative in Final status, which prevents any further modifications to the narrative. Final narratives are retained in the FASP until the FASP is approved. Final notes cannot be reverted to Draft status.

- **Clear**
  Clicking on the **Clear** button clears all text in the Family Involvement narrative, allowing the worker to create a new narrative.

- **Spell Check**
  Clicking on the **Spell Check** button verifies the spelling of the text recorded in the narrative or comments field.

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**Step-by-Step: Recording a Family Involvement Narrative**

1. On the *Service Plan* window, click on the **Family Involvement** button. The *Family Involvement* window displays.
2. In the narrative field, record information regarding the family’s input in the development of the Service Plan.
3. Click on the **Save as Draft** button.
   *Clicking on the **Save as Draft** button allows you to modify the narrative or make additional comments later.*
   —OR—
   Click on the **Save as Final** button.
   *Clicking on the **Save as Final** button saves the narrative as final; this “freezes” the narrative, preventing any further changes to it.*
Step-by-Step: Accessing the Family Involvement Window to View a Family Involvement Narrative

1. On the Service Plan window, click on the Family Involvement button. The Family Involvement window displays.
2. Click on the box to the left of the entry row. A black arrow indicates which row is selected; the recorded narrative displays in the narrative field.

To modify an entry, the worker must be listed as the author (the worker who originally created the narrative) and the entry must be in Draft status. Workers cannot modify entries in Final status, nor can they modify entries recorded by other authors.

Case Planner Summary

In any Family Services Stage, several workers may be assigned roles (Case Manager, Case Planner, CPS Worker/Monitor or Caseworker).

An FSS can have only one Case Planner at any given time and s/he may be either a Local District or Voluntary Agency staff member. The Case Planner is responsible for coordinating work with other assigned workers, as well as completing and submitting the FASP in a timely fashion. S/he reviews the work of all other workers who have contributed to the FASP and revises that information to provide an accurate, clear and coherent summary.

The Case Planner submits the FASP to his/her Unit Approver and the Case Manager for review and approval, and alerts the CPS Worker/Monitor in circumstances where that individual needs to complete portions of or review the FASP.

The Case Planner Summary functionality is available on several windows within each FASP. This functionality allows the Case Planner to integrate the contributions to case updates and case assessments made by assigned workers. Only the Case Planner can launch the Case Planner Summary. All other workers with a role in the stage can modify their “Draft” entries until the Case Planner initiates the Case Planner Summary. Once it has been launched, these workers can access the Case Planner Summary in view-only mode.

The Case Planner Summary does not eliminate the need for all workers involved with a family (i.e., Caseworkers and the Case Planner) to discuss events and share their thoughts on assessments. Each worker has a perspective that contributes to building a shared, holistic understanding of the family, including the problems they face, the strengths and needs of individual members, and the factors that contribute to maintaining those strengths and needs. The assessment protocol is designed to guide workers in reaching a conclusion about what really needs to change in order to activate existing strengths and stop harmful behavior or conditions from continuing. The system supports each member of the family’s casework team in...
contribution to that assessment and analysis process; it is the Case Planner who is ultimately responsible for integrating the team's best ideas into the final FASP.

The Case Planner Summary must be completed in order to submit the FASP for approval. The Case Planner can complete Case Planner Summary in either of two ways: S/he may use the Case Planner Summary to integrate written contributions of other Caseworkers with his/her own, or record an appropriate narrative after discussion with other workers. Prior to launching the FASP, the Case Planner should communicate to other Caseworkers regarding their assessment conclusions so that all relevant aspects of family and child strengths and needs are documented, and, to the extent possible, that the Case Planner and Caseworker(s) have agreed on the underlying conditions and behaviors that need to improve or change. This will increase the likelihood that the Caseworker’s contributions to the various FASP components will be able to be incorporated easily into the Case Planner Summary and that the narrative will address all important family needs in a holistic way.

The Case Planner Summary functionality appears in six places within each FASP:

- **Case Update tab (Family Update node):** Workers use the Case Update tab to record a summary of the key family or child events, as well as services and casework activities completed during the period leading up to the FASP that is in progress. For the Initial FASP, this tab is customized based upon Program Choice and whether critical concerns were identified and emergency services were provided to the family prior to opening the FSS in a non-CPS case. If the FSS was created from an Indicated CPS Investigation, the Protective version of the Case Update tab displays. The Case Planner Summary functionality is available in two of the three presentations: The first is when the FASP is an Initial and the Program Choice is “Protective” or the FASP is Comprehensive or Reassessment, regardless of the Program Choice (View A). The second is when the FASP is Initial, the Program Choice is not “Protective” and there were no concerns or emergency issues identified at Intake (View C). The Case Planner Summary window that displays follows the general format mentioned below.

- **Family View/Child View tab (Assessment Analysis node):** Workers use this tab to document the family’s (or child’s) view and what they perceive to be their most pressing needs and concerns. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

- **Behavioral Concerns and Contributing Factors tab (Assessment Analysis node):** Workers use this tab to document—based on the assessment of safety, risk and family functioning—the factors and underlying conditions that interact to sustain the behaviors or conditions that warrant child welfare intervention. Integrate the observations and assessments that have been made to determine how these various elements combine and contribute to the need for intervention. The Case Planner Summary button and
Strengths tab (Assessment Analysis node)  

Launched check box always display on this window. The standard Case Planner Summary window displays.

For an FSS/CWS, workers use the Strengths tab to identify and focus on the strengths that exist within the family unit and the community that support the family’s ability to meet the child’s needs for safety, permanency and well-being. For an FSS/CCR, the focus is on the child’s strengths. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

Needed Improvements/Changes tab (Assessment Analysis node)  

This tab supports workers in determining, based on the answers to the Assessment Analysis questions, what improvements and/or changes need to be made to the family’s or child’s situation and/or behavior to promote the child(ren)’s safety and well-being. Although the Case Planner Summary button and Launched check box display on this tab, the Case Planner Summary functionality that exists here is significantly different than on other tabs. Instead of a Narrative field, the Case Planner selects “Draft” entries made by other workers, placing them in a Case Planner list. Once a “Draft” entry is added to the Case Planner list, the Case Planner may modify it.

Family Involvement button (Service Plan node)  

The purpose of this process is to enable the worker to document the efforts that s/he has taken to involve the family in developing the Service Plan, as well as the actual input and involvement the family has in the Service Plan’s creation. The Case Planner Summary button and Launched check box always display on this window. The standard Case Planner Summary window displays.

The Case Planner Summary is accessed by clicking on the Case Planner Summary button. This button is displayed in conjunction with a Launched check box. If the check box is populated, this indicates that the Case Planner Summary has been launched and workers’ individual entries are no longer modifiable. The check box is system-populated once the Case Planner launches the Case Planner Summary and saves the information recorded on the window. The FASP cannot be submitted for approval until all Case Planner Summaries are complete.
The Case Planner Summary Window
When ready to complete the FASP, the Case Planner clicks on the Case Planner Summary button on one of the above-mentioned windows. The Case Planner Summary window opens and displays a Narrative field that is populated with the individual entries for that window that have been recorded by other workers assigned to the stage. The Narrative field holds a virtually unlimited amount of text and features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check.

Launching the Case Planner Summary from the Needed Improvements/Changes tab on the Assessment Analysis node generates a list, rather than a narrative. For more information, refer to Module 13: Family Assessment Analysis.

The following buttons display at the bottom of the Case Planner Summary window:

- **Save**
  - Clicking on this button saves work that has been recorded or changes that have been made in the Case Planner Summary; the window remains open.

- **Cancel**
  - Clicking on the Cancel button discards any unsaved data. The following message displays:
    
    "Do you want to cancel? Unsaved data and/or narrative(s) will be lost."

    - Click on the Yes button to discard the unsaved changes. The Case Planner Summary window remains open.
    - Click on the No button to leave the window open without discarding the unsaved changes.
Clicking on the **Close** button closes the *Case Planner Summary* window and displays the window from which it was accessed. If all of the changes have not been saved prior to clicking on the **Close** button, the following message displays:

*Do you want to exit? Unsaved data and/or narratives will be lost.*

- Click on the **Yes** button to discard the unsaved changes. The *Case Planner Summary* window closes and the previous window displays.
- Click on the **No** button to remain on the *Case Planner Summary* window with the unsaved changes displayed.

In the **Narrative** field, the Case Planner summarizes the information recorded by the individual workers into a comprehensive narrative. This can be done by reorganizing (using Cut/Paste) and/or deleting existing entries as well as adding new entries. Although CONNECTIONS provides functionality to support cutting and pasting workers' entries into the comprehensive narrative, it is important for the Case Planner to create a narrative that captures all relevant information because once the Case Planner Summary is launched, the Case Planner becomes the author of the entry. At that point, the other workers assigned to the stage may no longer add or modify "Draft" or "Final" entries. Individual entries made by all of the workers are retained as long as the FASP is in process. Workers may print a specific portion of the in-process FASP by selecting the corresponding command from the **Reports** menu on the FASP window. (The command name varies, depending on the component being printed.) The in-process FASP differs from the final FASP in that the individual entries made by all workers are included. The final FASP includes the Case Planner’s summarization in lieu of the individual entries. This narrative is never brought forward into subsequent FASPs.

**Step-by-Step: Recording the Case Planner Summary**

1. On the appropriate window, click on the **Case Planner Summary** button. *The Case Planner Summary window opens and displays the entries recorded by assigned workers for the specific window.*

2. Record a narrative that integrates the individual entries made by other workers with your own into a coherent summary. You can also modify or delete the existing entries. *You can change the order of entries and modify them by using the cut and paste functionality.*

3. Click on the **Save** button.
Module 17: Plan Amendment and Removal Update

A Plan Amendment is a type of FASP that is used to record any significant changes that occur between FASP cycles. They are completed for a variety of status changes during the life of a Family Services Stage. A status change marks a significant change in a case that often coincides with a change in Program Choice (e.g., a family with mandated preventive services has a child placed in foster care).

Certain status changes require documentation if they occur outside the timeframes for periodic assessment and service planning. When a child is removed from the home, a review of this status change is required to be completed no later than 30 days from the date of removal. To meet this requirement a worker can launch and complete a Plan Amendment. In addition to the initial 30-day requirement, workers must complete a Service Plan Update 90 days from the date of removal. This requirement can be met by launching and completing a plan amendment or recording the updated Service Plan information directly into a FASP.

When a Case Planner or Caseworker launches a Plan Amendment, s/he selects the desired status change(s) and CONNECTIONS dynamically builds the necessary sub-nodes on the FASP Tree. This enables the worker to navigate to the appropriate window(s) to record and maintain any required Plan Amendment information. The Case Planner submits the Plan Amendment for approval using the same method used for other types of FASPs. When a Plan Amendment is submitted, all workers in the stage receive an Alert To-Do on their Staff To-Do List.

Your access to the Plan Amendment node depends on your role in the Family Services Stage. If you are the Case Planner (or an individual who is able to access the Assigned Workload of the Case Planner in modify mode), you can create, view and modify Plan Amendment information. If you are a Caseworker (or an individual who is able to access the Assigned Workload of the Caseworker in modify mode), you can create, view and modify Plan Amendment information only for those children to whom you have been Associated on the Tracked Children Detail window. For all other children, Caseworkers have view-only access. A CPS Worker/Monitor cannot launch a Plan Amendment.

Plan Amendments are launched from the FASP window and can only be launched between FASP cycles for an approved FASP. One cannot be launched if there is an In-Process FASP or a Pending FASP. If this is the case, the following message displays:

“A FASP or Planned Amendment is currently open. Record all necessary assessment and planning information in the open FASP or Plan Amendment.”

In these cases, the changes that need to be made must be recorded in the appropriate FASP rather than in a Plan Amendment, unless the Plan Amendment is for the purpose of closing the
Family Services Stage. If a FASP is available for launch and you select the Plan Amendment, the following message displays, depending on the FASP type available (Comprehensive or Reassessment):

“A FASP is available for launch. Are you closing the Family Services stage?”

- If you click on the **Yes** button in response to the message, the Plan Amendment displays on the FASP tree.
- If you click on the **No** button, the following message displays:

  “Complete the required documentation within the FASP.”

Once launched, the **Plan Amendment** node displays on the tree and provides access to the **Plan Amendment Maintenance** window. The worker can then select the appropriate status change(s) for the stage on this window. The status changes selected then display as sub-nodes on the FASP Tree and are accessed individually.

A Plan Amendment may be completed for any approved FASP type (i.e., Initial, Comprehensive or Reassessment) and is supported for both FSS/CWS and FSS/CCR stages. All FSS/CCR stages begin with a Plan Amendment (Child Legally Freed). Information that has been previously recorded on these windows is brought forward from the most recently approved FASP or Plan Amendment. The specific status changes available vary depending on the FSS type (CWS or CCR) and the Program Choice.

Program Choice directly impacts the status change options available to you in the **Plan Amendment Maintenance** window.

For example, to select the status change of “Preventive Services Ended,” you must do so **after** launching the Plan Amendment, but **before** end-dating the corresponding Program Choice on the **Tracked Children Detail** window.

In another example, if you are using a Plan Amendment to record that a child receiving Preventive Services was placed in foster care, you must launch the Plan Amendment, add the Program Choice of “Placement” on the **Tracked Children Detail** window, and only then will the status change of “Child Entering/Reentering Foster Care” display on the **Plan Amendment Maintenance** window.
The Plan Amendment Maintenance window displays the same system-populated fields in the header for both FSS/CWS and FSS/CCR stages.

- **FASP Type**: Displays the last approved FASP type:
  - Initial, Comprehensive or Reassessment (for CWS)
  - Reassessment (for CCR)
- **Next FASP Type**: Comprehensive or Reassessment (for CWS)
  - Reassessment (for CCR)
- **Approved Date**: Date the last FASP was approved
- **Next FASP Due Date**: Date the next FASP is due

Below the header, two fields display. The first is labeled **Status Changes** and the second is Selected Status Changes. The Status Changes field displays a list of all available status changes based on the FSS Type and Program Choice.

For an FSS/CWS, the following list displays:

<table>
<thead>
<tr>
<th>This Status Change displays in the Status Changes list:</th>
<th>If any child in the stage has a Program Choice of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services Started</td>
<td>Preventive</td>
</tr>
<tr>
<td>Preventive Service Ended</td>
<td>Preventive</td>
</tr>
<tr>
<td>Case Open to CPS</td>
<td>Protective</td>
</tr>
<tr>
<td>Case Closed to CPS</td>
<td>Protective</td>
</tr>
<tr>
<td>Child Entering/Reentering Foster Care</td>
<td></td>
</tr>
<tr>
<td>Child Moved from One Foster Care Setting to Another</td>
<td></td>
</tr>
<tr>
<td>Child Discharged to Home, Relative or Other Caretaker</td>
<td>Placement</td>
</tr>
<tr>
<td>Adolescent Discharged to Independent Living</td>
<td></td>
</tr>
<tr>
<td>Child Discharged to Adult Residential Care</td>
<td></td>
</tr>
<tr>
<td>Child Entering/Reentering Direct Placement with a Relative/Resource</td>
<td>Placement OR Non-LDSS</td>
</tr>
<tr>
<td>Child Returned Home from Non-LDSS Placement</td>
<td>Non-LDSS</td>
</tr>
<tr>
<td>Visitation Plan Changed</td>
<td>Placement OR Non-LDSS</td>
</tr>
<tr>
<td>Other Status Change</td>
<td>Any Program Choice</td>
</tr>
</tbody>
</table>
For an FSS/CCR, the following list displays:

<table>
<thead>
<tr>
<th>This Status Change displays in the Status Changes list:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services Started</td>
</tr>
<tr>
<td>Preventive Services Ended</td>
</tr>
<tr>
<td>Child Entering/Reentering Foster Care</td>
</tr>
<tr>
<td>Child Moved from One Foster Care Setting to Another</td>
</tr>
<tr>
<td>Child Discharged to Home, Relative or Other Caretaker</td>
</tr>
<tr>
<td>Adolescent Discharged to Independent Living</td>
</tr>
<tr>
<td>Child Discharged to Adult Residential Care</td>
</tr>
<tr>
<td>Child Discharged to Adoption</td>
</tr>
<tr>
<td>Child is Legally Free</td>
</tr>
<tr>
<td>Visitation Plan Changed</td>
</tr>
<tr>
<td>Other Status Change</td>
</tr>
</tbody>
</table>

If the child in the stage has a Program Choice of:

- Preventive
- Placement
- Any Program Choice

For both FSS/CWS and FSS/CCR stages, the Selected Status Changes field displays “Update Service Plan” as a default when you open the window. (See “Update Service Plan” on page 17-31.) To add the desired status change(s) to the Selected Status Changes list, highlight the item(s) in the Status Changes field and click on the >> (Add) button, which is located between the two fields. You can also move any status change(s) from the Selected Status Changes list (including “Update Service Plan”) back to the Status Changes list by highlighting the item(s) and clicking on the << (Remove) button. The option to remove a status change is only available if no Plan Amendment information has been saved for that status change. The item is disabled once information has been saved to it; it cannot be removed from the Selected Status Changes list.

The following buttons display at the bottom of the window:

- **Save**: Clicking on this button saves any status changes that have been added or removed.
- **Cancel**: Clicking the Cancel button discards any unsaved data. The following message displays:

  “Do you want to cancel?
  Unsaved data and/or narrative(s) will be lost.”

  - Click on the Yes button to discard the unsaved changes. The FASP window displays.
  - Click on the No button to keep the window open without discarding the unsaved changes.
Step-by-Step: Creating a Plan Amendment and Selecting a Status Change

1. On the FASP window, click on the drop-down arrow for the Launch New FASP… field and select Plan Amendment from the resulting list.

2. Click on the Launch button. The preliminary launch edits begin.

3. Once the edits have been completed, Plan Amendment is added as a node on the FASP Tree. Several secondary edits must be passed to launch a Plan Amendment successfully.

4. Click on the Plan Amendment node. The Plan Amendment Maintenance window displays. “Update Service Plan” displays on the Selected Status Changes list.

5. Highlight the desired status change(s) on the Status Change list.

6. Click on the >> (Add) button. The selected status changes are added to the Selected Status Changes list. If necessary, repeat Steps 5 and 6 to add more status changes.

7. Click on the Save button when you have added the desired status changes.
Preventive Services Started

A Plan Amendment must be completed if Preventive Services are started for one or more children in the case between FASP cycles; once this status change is selected on the Plan Amendment Maintenance window, the Preventive Services Started sub-node displays below the Plan Amendment node on the FASP Tree. This selection is available for both FSS/CWS and FSS/CCR stages.
For an FSS/CWS and an FSS/CCR, the Preventive Services Started window displays the Select Child grid at the top. This grid displays the following fields for each child:

- **ID**: The CONNECTIONS system-generated Person ID
- **Name**: The child’s name
- **Age**: The child’s age, calculated by the difference between the child’s date of birth and the system date (today’s date)
- **In Process**: An “X” in this field indicates that information has already been saved for the corresponding child

Only children with a Program Choice of “Preventive” display in this grid on the Preventive Services Started window. (For an FSS/CCR, the name of the solitary child in the stage displays in the grid.) The scroll bar to the right of the grid allows vertical scrolling to view the entire list; it only displays when there are multiple children to view. Selecting a child from this list applies information to that specific child; only one child may be selected at a time. (See below for information about the Copy button.) Once a child is selected from the grid, the Narrative field enables for that child, allowing the worker to record a narrative that describes the reasons for initiating Preventive Services. The Narrative field holds up to 4,000 characters of text.

The following buttons display at the bottom of the Preventive Services Started window:

- **Spell Check**: Clicking on this button verifies the spelling of the text recorded in the narrative field.
- **Copy**: After you record and save information for a child, you can duplicate that information to one or more children in the stage using the Copy to Child functionality. The Copy button enables when information has been recorded and saved for the child. When you click on the Copy button, the Copy to Other Children window displays, containing the name of the child for whom you recorded information and a list of all other children in the stage to whom you have not already copied the selected information. Select one or more children to whom you want to copy information. Click on the Save button on the Copy to Other Children window to complete the copying process and save the information to the database. Only the Case Planner or the Caseworker who is Associated to a child can copy information to that specific child.
- **Save**: Clicking on this button saves work that has been recorded or changes that have been made in the Narrative field.
- **Cancel**: Clicking on the Cancel button discards any unsaved data. The following message displays:

  “Do you want to cancel? Unsaved data and/or narrative(s) will be lost.”
  - Click on the Yes button to discard the unsaved changes. The window remains open.
  - Click on the No button to leave the window open without discarding the unsaved changes.
Close

Clicking on this button closes the window and displays the FASP window with the FASP Tree. If any unsaved changes remain on the window, clicking on the Close button displays the following message:

“Do you want to exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes. The window closes and the FASP window displays.
- Click on the No button to keep the window open; the changes remain pending.

Step-by-Step: Completing the Preventive Services Started Window

1. On the FASP Tree, click on the Preventive Services Started sub-node under the Plan Amendment node.
   The Preventive Services Started window displays. The status change type of Preventive Services Started must already have been added to the Plan Amendment via the process outlined on page 17-6.

2. On the Select Child grid, click on the box to the left of the child for whom you wish to record information.
   If this is an FSS/CCR stage, the grid displays the only child in the stage.

3. In the Narrative field, record a narrative that explains why Preventive Services have been initiated at this time.

4. Click on the Save button.

Where am I?
Assigned Workload > FSS > Tasks > FASP tab > FASP Tree > Plan Amendment node

Once you have recorded a narrative, be sure to save the information in CONNECTIONS.

Before you can complete any Plan Amendment node, you must select the appropriate status change.
(See page 17-6.)
Preventive Services Ended

A Plan Amendment must be completed if Preventive Services end between FASP cycles. The worker should record the reason for ending the services, identify the key protecting factors, and explain how those factors support the safety of the child(ren), family and community; once a worker selects this status change on the Plan Amendment Maintenance window, the Preventive Services Ended sub-node displays below the Plan Amendment node on the FASP Tree. This selection is available for both FSS/CWS and FSS/CCR stages.

The Preventive Services Ended window displays identically for both FSS/CWS and FSS/CCR stages; the Select Child grid displays at the top. (See page 17-8 for more information.) Only children with a Program Choice of “Preventive” display in this grid on the Preventive Services Ended window. The scroll bar to the right of the grid allows vertical scrolling to view the entire list and only displays when there are multiple children. Selecting a child from this list applies information to that specific child; only one child may be selected at a time. Once a child is selected from the grid, the Narrative field enables for that child allowing the worker to record a narrative that describes the reasons for ended Preventive Services.

The following buttons display at the bottom of the window:

- Spell Check
- Copy
- Cancel
- Save
- Close

You must provide all required information for every child to whom you have been Associated on the Tracked Children Detail window.

Refer to page 17-8 for more information about these buttons.
Step-by-Step: Completing the Preventive Services Ended Window

1. On the FASP window, click on the Preventive Services Ended sub-node under the Plan Amendment node from the FASP Tree. The Preventive Services Ended window displays. The status change type of Preventive Services Ended must already have been added to the Plan Amendment via the process outlined on page 17-6.

2. On the Select Child grid, click on the box to the left of the child for whom you wish to record information. If this is an FSS/CCR stage, the grid displays the only child in the stage.

3. In the Narrative field, record a narrative that explains why Preventive Services have been ended at this time.

4. Click on the Save button.
**Child Entering/Re-Entering Foster Care and Child Moved from One Foster Care Setting to Another**

A Plan Amendment must be completed when a child enters (or re-enters) foster care, or is moved from one foster care setting to another and this occurs between FASP cycles. During a FASP cycle, this information is recorded on the *Appropriateness of Placement* window, which is accessed through the *Foster Care Issues* node. These status changes are available for both FSS/CWS and FSS/CCR stages. Once this status change is selected on the *Plan Amendment Maintenance* window, a sub-node for each status change displays on the FASP Tree.

Entry/Re-entry into Foster Care and moves from one setting to another may involve either the creation of a new Visiting Plan for the child(ren) or the review and possible modification of an existing one. For both of these types of status change, an additional sub-node—*Visitation Plan Changed*—also displays and allows the worker to record a new Visitation Plan or modify the existing Visitation Plan as a result of either of these status changes. If no changes have been made to the Visitation Plan (and no Plan Amendment information was recorded here), you can delete the *Visitation Plan Changed* sub-node via the *Plan Amendment Maintenance* window.

If you select the **Child Entering/Re-entering Foster Care** status change, the resulting sub-node and the window’s corresponding title bar display that title.
If you select the **Child Moved From One Foster Care Setting to Another** status change, the resulting sub-node and corresponding window's title bar display that title.

For either of these types of status change, the Select Child grid displays only those children with a Program Choice of “Placement.” (See page 17-8 for more information.) As many as four tabs display below the grid; these are the same tabs that would display on the **Appropriateness of Placement** window in the **Foster Care Issues** node (see Module 14: Foster Care Issues for details regarding these tabs) if this information was being recorded during a FASP cycle:

### Activities Prior to Placement
If a child has entered or re-entered foster care, the alternatives that were explored prior to placement should be recorded here. If a child changed foster care locations, the major events that led to the move should be recorded here.

### Location of Child
This tab displays CCRS information pertaining to the location where the child has been placed. If a child is placed a substantial distance from his/her parents, an explanation regarding why this placement is in the best interests of the child should be documented. If the child was moved to a higher level of care, the narrative should specify which of the child's needs, if any, cannot be met at a lower level of care.

### Continuity of Environment
(FSS/CWS only)
This tab is available only in FSS/CWS stages and allows workers to answer questions regarding the types of familial and other continuity issues supported by this placement. Should the child’s placement not support continuity, workers must document a supporting narrative to explain the reason.

### Continuity of Culture for
This tab displays the following question with corresponding **Yes** and **No** radio buttons:

**Ethnicity information does not carry over from the Stage Composition tab.**
American Indian Children

“Is the child in placement an American Indian child?”

The response to this question is pre-filled; however, you can modify this response. When the No radio button is selected in response to the original question, this is the only question that displays on the tab. If Yes radio button is selected, two additional questions display with corresponding Yes and No radio buttons. If you click on the No radio button in response to either of these additional questions, a Narrative field displays.
Child Discharged to Home, Relative, Other Caretaker

A Plan Amendment (also referred to as a Discharge Protocol) should be completed when a child in foster care is discharged to his/her home, to a relative or to some other caretaker, and the discharge takes place between FASP cycles. The Child Discharged to Home/Relative/Other Caretaker window is the same window found in the Foster Care Issues node of the FASP and is available in both FSS/CWS and FSS/CCR stages. (For more information about this window, see Module 14: Foster Care Issues.) The worker should first add the Program Choice of “Placement” and the appropriate PPG on the Tracked Children Detail window, as necessary; otherwise, this status change will not display. Once the worker selects the appropriate status change on the Plan Amendment Maintenance window, the Child Discharged to Home, Relative, Other Caretaker sub-node displays on the FASP Tree.

The Select Child grid on this window displays only those children with a Program Choice of “Placement.” (See page 17-8 for more information about the Select Child grid.)
Three tabs display on the Discharge to Home/Relative/Other Caretaker window:

**Situations/Behaviors/Concerns**
This tab provides for the recording of the type (i.e., Trial or Final) and effective date of the discharge and enables the worker to specify whether the child is being discharged to a home, relative, or other caretaker. The tab displays two Narrative fields in which the worker describes any situations that created the need to place the child in foster care initially, as well as a description of what has changed to create a safe environment for the child. If issues exist in the discharging household that may affect the child’s safety, the worker must record a narrative to describe these circumstances, as well as the protecting factors that are in place to provide for the child’s safety upon discharge.

**Decision Support**
This tab guides the worker regarding key factors that must be considered when determining whether the discharge from foster care is safe and appropriate. The worker uses this tab to record information pertaining to the parent’s or caretaker’s completion of any court-ordered conditions and the level of support by the parent/guardian and the child regarding the discharge plan. If any court-ordered conditions have not been met, the worker must record a narrative explanation that specifically details the condition(s) that have not been met and the actions/activities required. In addition, if either the parent or the child is not fully supportive of the decision to discharge, the worker should document the reason why.

**Needs/Resources**
This tab provides for the documenting of information regarding the review of the living conditions in the home and any resources to support the child upon discharge, as well as the parent’s/caretaker’s ability to support the child financially, physically and emotionally. If the living conditions were not reviewed, the worker must record a narrative explaining why this was not done.
Adolescent Discharged to Independent Living

A Plan Amendment (also referred to as a Discharge Protocol) must be completed when a foster child is being discharged to an Independent Living situation between FASP cycles. First, the worker should add the Program Choice of “Placement” and the appropriate PPG on the Tracked Children Detail window; otherwise, this status change will not display. The worker can then select the “Adolescent Discharged to Independent Living” status change on the Plan Amendment Maintenance window. The window that displays is the same window found in the Foster Care Issues node of the FASP and is available in both FSS/CWS and FSS/CCR types.

The Select Child grid displays only those children with a Program Choice of “Placement.” (See page 17-8 for more information about the Select Child grid).

The window displays three tabs:

- **Discharge Type/Dates** This tab allows the worker to record the effective date of the discharge and indicate whether the youth received a 90-day written notice of the intent to discharge. The date the notice was given should be documented. If no notice was given, the worker should document why.

- **Needs/Resources** This tab allows the worker to answer a series of yes/no questions and record a narrative regarding the youth’s success in securing a residence, a source of income, medical...
coverage, essential documents, and an adult resource to provide emotional support upon discharge.

**Safety/Services**

This tab allows the worker to record any safety concerns that exist related to the youth’s discharge and to identify and describe the arrangements made with service providers needed by the youth upon discharge. If no arrangements have been made for services after discharge or the youth has not been made aware of the services available, the worker should document the reason this did not take place.
Child Discharged to Adult Residential Care

A Plan Amendment (also referred to as a Discharge Protocol) must be completed when a foster youth is being discharged to an adult care situation between FASP cycles. First, the worker should add the Program Choice of “Placement” and the appropriate PPG on the Tracked Children Detail window; otherwise, this status change will not display. The worker can then select the “Child Discharged to Adult Residential Care” status change on the Plan Amendment Maintenance window. The Discharge to Adult Residential Care window is the same window found in the Foster Care Issues node of the FASP and is available in both FSS/CWS and FSS/CCR types.

The Select Child grid displays only those children with a Program Choice of “Placement.” (See page 17-8 for more information about the Select Child grid.)

There are no tabs on this window, but several fields display. The worker should record the effective date of the discharge, as well as a narrative describing the logistics of the Adult Residential Care facility and justification of the youth’s need for Adult Residential Care. In addition, the worker should document here the existence of any safety concerns associated with the youth’s discharge and how those concerns have been or will be addressed. (For more information about this window, see Module 14: Foster Care Issues.)
Child Entering/Reentering Direct Placement with a Relative/Resource

A Plan Amendment must be completed when a child is being placed directly with relatives or any other suitable person between FASP cycles when a Plan Amendment can be launched; if this is not the case, document the information in the next due FASP. First, the worker should add the Program Choice of “Non-LDSS Custody” and the appropriate PPG on the Tracked Children Detail window. The worker can then select the “Child Entering/Reentering Direct Placement with a Relative/Resource” status change on the Plan Amendment Maintenance window; otherwise, this status change will not display. When the worker adds this status change, Visitation Plan Changed is automatically added to the Selected Status Changes list and both status changes display in the FASP Tree.

Once added as a status change, the Child Entering/Reentering Direct Placement with a Relative/Resource sub-node displays on the FASP Tree; clicking on this sub-node opens the Child Entering/Reentering Direct Placement with a Relative/Resource window. This window contains a Select Child Grid, the Appropriateness of Alternative Setting tab, and various buttons (Validate, Spell Check, Save, Cancel, Copy and Close).

The Appropriateness of Alternative Setting tab supports the recording of general information about the placement of a child with a Program Choice of “Non-LDSS Custody,” including the caretaker’s name, relationship to the selected child, address information and a narrative field to explain the appropriateness and safety of the living arrangement.

For more information about the Appropriateness of Alternative Setting tab, see Module 15 of the CONNECTIONS Case Management Step-by-Step Guide: Non-LDSS Custody.
**Child Legally Freed**

When a child is legally freed for adoption, a Plan Amendment must be completed as the first FASP for the newly created CCR stage. The worker should select the *Child is Legally Free* status change on the *Plan Amendment Maintenance* window. **This status change is only available for FSS/CCR stages.** Prior to selecting this status change, the Case Manager must create the FSS/CCR stage by selecting the *Completely Freed for Adoption* check box for the appropriate child on the *Tracked Children Detail* window in the FSS/CWS stage. Once the FSS/CCR is created and reassigned (if necessary) by the Case Manager, the worker can complete the Plan Amendment. The *Child is Legally Free* sub-node is built under the *Plan Amendment* node on the FASP Tree, but is disabled and, therefore, cannot be selected. There are no additional documentation requirements associated with this sub-node. The *Update Service Plan* sub-node is also built on the FASP Tree. The worker must add Outcome and Activity (O&A) Blocks to start the Service Plan on the *Update Service Plan* window. The window that displays when accessed through this path is identical to the *Service Plan* window that displays when accessed via the *Service Plan* node on the FASP Tree, except Needed Improvements/Changes and the *Assessment Summary* button do not display.

When the *Service Plan* window initially displays, all fields in all sections on the window are blank to allow you to create a new plan.
Child Discharged to Adoption

A Plan Amendment must be completed when a foster child is discharged to an adoptive home. The worker should select the status change of **Child Discharged to Adoption** on the Plan Amendment Maintenance window. **This is only available for an FSS/CCR stage** and the child must have a Program Choice of “Placement.” The **Child Discharged to Adoption** sub-node is built on the FASP Tree; clicking on the sub-node displays the Discharged to Adoption window. The worker records and maintains the details of the child’s discharge on this window. This is the same window that displays when you access the Discharge to Adoption window via the Discharges sub-node in the **Foster Care Issues** node. (For more detailed information about this window, see Module 14: Foster Care Issues.)

The Select Child grid displays at the top of the window. Because there is only one child in an FSS/CCR, only that child’s name displays; it is selected by default. (See page 17-8 for more information about the Select Child grid).

There are several fields displayed on this window. The worker should record a narrative to document the reasons why this is an appropriate time to finalize the adoption. The worker should document on this window the adoptive family’s response to the offer of post-adoption support services. If they have not been informed of available post-adoption services, the worker should record a narrative explaining the reason. (For more detailed information about this window, see Module 14: Foster Care Issues.)
Child Returned Home from Non-LDSS Placement

A Plan Amendment must be completed when a child who was in Non-LDSS Placement returns home between FASP cycles. The worker should select the “Child Returned Home from Non-LDSS Placement” status change on the Plan Amendment Maintenance window after adding the Program Choice of “Non-LDSS Custody-Relative/Resource Placement” and the appropriate PPG on the Tracked Children Detail window; otherwise, this status change will not display. The Child Returned Home from Non-LDSS Placement sub-node is built on the FASP Tree; clicking on this sub-node displays the Non-LDSS Placement window. This status change is only available for an FSS/CWS stage. This window collects the same information as the Record Return Home tab on the Non-LDSS Custody node of the FASP and is used to document that the initial reasons for placement were addressed. (For more detailed information, see Module 14: Foster Care Issues.)

The Select Child grid displays at the top of the window. Only children with a Program Choice of “Non-LDSS Custody Relative/Resource Placement” display. (See page 17-8 for more information about the Select Child grid.)

When a child is being returned to his/her parent(s), the worker must document that the initial reasons for the placement were addressed, including all of the conditions of the court order, if applicable. The worker must develop an appropriate discharge plan that addresses the child's ongoing needs upon reunification with the parent(s)/caretaker(s) (e.g., developmental, medical, behavioral, educational).
Visitation Plan Changed

A Plan Amendment must be completed in conjunction with a child’s new placement into foster care. It may also be completed when a child’s Visiting Plan changes between FASP cycles. The worker should select the “Visitation Plan Changed” status change on the Plan Amendment Maintenance window after selecting the Program Choice of “Placement” or “Non-LDSS Custody-Relative/Resource Placement” and the appropriate PPG on the Tracked Children Detail window; otherwise, this status change will not display. The Visitation Plan Changed sub-node is built on the FASP Tree; clicking on this sub-node displays the Visiting Plan window. The worker should take this opportunity to review all information regarding Visiting Plans that were previously recorded during the FASP cycle before documenting the details of the new plan. In addition, s/he should record the effective date of the new Visiting Plan. With the exception of the Visiting Plan Effective Date field, this is the same window found in the Foster Care Issues component of the FASP during the FASP cycle and contains the same tabs. A Visiting Plan Review is not required in a Plan Amendment if the last approved in-sequence FASP did not have an associated Visiting Plan; the tab only displays on this window when information was previously recorded in the Visiting Plan. When appropriate, the worker should perform the review and record its details on this tab. The Visitation Plan window is available in both FSS/CWS and FSS/CCR types. Existing information from the last approved FASP displays in the appropriate fields on these tabs.

The Visitation Plan Effective Date field displays at the top of the window. This field fills with the system date by default. Change the date by clicking on the drop-down arrow and selecting from the resulting calendar. (You can also record a new date by clicking on the check box to make the field “active,” then typing directly into each segment [m/d/yy] in the field.)
Below this field, three tabs display:

**Visiting Plan Review** (only displays if Visiting Plan information was previously recorded)

This tab provides a place in the FASP to review any Visiting Plans that were developed, to gauge their effectiveness in building parenting capacity and supporting child well-being, and to record changes to the plan to meet the child’s needs more effectively. If the last approved in-sequence FASP had an associated Visiting Plan with a designated Plan Description, a Visiting Plan Review is required.

On the **Visiting Plan Review** tab, select the degree to which the parent met the frequency of visits as documented in the previous Visiting Plan. Also record the degree to which the parent’s behavior during visits supported a healthy relationship between parent and child. The tab displays a grid containing information for all active Visiting Plans since the last FASP. Based on a review of the Visiting Plan, indicate whether the expectations of the plan were met, and, if necessary, explain why they were not.

**Visiting Plan**

On this tab, record logistical information pertaining to the Visiting Plan, including indicating whether the plan is active or inactive. In addition, record the frequency, duration and location of visits, provide an explanation of any special conditions that must be met, and describe what must occur during visits to support the parent/child relationship.

**No Visiting Plan**

If no visiting plan will be recorded, provide a narrative to justify this.
Case Open to CPS

There are times when an FSS/CWS is open for Preventive and/or Foster Care Services only and a CPS report is received on the family. If the report is Indicated and Protective Services will be authorized for the family (and this occurs between FASP cycles), a Plan Amendment needs to be completed. Once the CPS report is Indicated, CONNECTIONS automatically changes the Program Choice to “Protective.” The worker should select the “Case Open to CPS” status change on the Plan Amendment Maintenance window. This can be done by the Caseworker or the Case Planner (or, if no Case Planner is assigned, by the Case Manager, who acts as the Case Planner in this situation), but not by the CPS Worker/Monitor (nor by the Case Manager if a Case Planner is assigned). The Case Open to CPS sub-node is built under the Plan Amendment node on the FASP tree, but is disabled because all information about the CPS Investigation (INV) stage is recorded by the Primary or Secondary CPS caseworker in the INV stage. For any changes that need to be made to the Service Plan, an Update Service Plan sub-node is also built. The worker can view the most recently approved Service Plan(s) and make any necessary changes. This does not modify the previously approved Service Plan; any modifications made on the Plan Amendment are carried over to the next FASP. The window that displays when accessed through this path is identical to the Service Plan window that displays when accessed via the Service Plan node on the FASP Tree, except the Family Involvement functionality is not available. Before a FASP can be submitted, the worker must access the Service Plan window. (See “Update Service Plan” on page 17-31 for more information.)
Case Closed to CPS

When an FSS/CWS stage is closed to CPS (meaning Protective Services are no longer needed) and this occurs between FASP cycles, a Plan Amendment must be completed. The Caseworker, Case Planner or Case Manager (not the CPS Worker/Monitor) should select the “Case Closed to CPS” status change on the Plan Amendment Maintenance window after selecting the Program Choice of “Placement” and the appropriate PPG on the Tracked Children Detail window; otherwise, this status change will not display. The Case Closed to CPS sub-node is built under the Plan Amendment node on the FASP tree, but is disabled if the Risk Assessment Profile (RAP) risk rating is not “High” or “Very High.” If the RAP risk rating is “High” or “Very High,” the Case Closed to CPS sub-node is enabled and the Caseworker should record a narrative explaining why Protective services are being removed for the child(ren). A Safety Assessment sub-node is also automatically built under the Plan Amendment node; clicking on this sub-node displays a blank Safety Assessment for the Caseworker to complete in conjunction with the decision to end Protective services. Because the CPS Investigation encompasses the entire family, the Plan Amendment will apply to all of the children in the stage.

When the RAP risk rating is “High” or “Very High,” the Case Closed to CPS window displays a Narrative field. Record the justification for removing Protective services at this time.

The following buttons display at the bottom of the window:

- Spell Check
- Save
- Cancel
- Close

Refer to page 17-7 for more information about these buttons.
Step-by-Step: Completing the Case Closed to CPS Window when the RAP Risk Rating is “High” or “Very High”

1. On the FASP window, click on the Case Closed to CPS sub-node under the Plan Amendment node from the FASP Tree. The node is enabled only when the RAP has a risk rating of “High” or “Very High.” The Case Closed to CPS window displays. The Status Change type “Case Closed to CPS” must already have been added to the Plan Amendment via the process outlined on page 17-6.

2. In the Narrative field, record a narrative that justifies the removal of Protective Services at this time. The Spell Check button enables.

3. Click on the Save button.
Other Status Change

If there is a status change between FASP cycles that does not fit into any other category, a Plan Amendment may be completed. This status change should only be selected based on Local District policy and procedure. The worker should select the Other Status Change status change from the Plan Amendment Maintenance window after making appropriate changes to the Program Choice or PPG on the Tracked Children Detail window. The Other Status Change sub-node is built below the Plan Amendment node on the FASP Tree. It is available for both an FSS/CWS and FSS/CCR. The worker should record a narrative explaining the status change and describing the effect the change has on the child(ren) and family. Certain status changes require documentation.

The Select Child grid displays at the top of the window. Children with any Program Choice display. (See page 17-8 for more information about the Select Child grid).

A Narrative field displays on the window. For an FSS/CWS, record the details of the status change and the effect it has on the family and child(ren). For an FSS/CCR, record the details and the effect it has on the child.

The following buttons display at the bottom of the window:

- Spell Check
- Copy
- Save
- Cancel
- Close
Step-by-Step:
Completing the Other Status Change Window

1. On the FASP window, click on the Other Status Change sub-node under the Plan Amendment node from the FASP Tree.
   *The Other Status Change window displays. The status change type of Other Status Change must already have been added to the Plan Amendment via the process outlined on page 17-6.*

2. On the Select Child grid, click on the box to the left of the child for whom you wish to record information.
   *If this is an FSS/CCR, stage the grid displays the only child in the stage.*

3. In the Narrative field, record a narrative.

4. Click on the Save button.
Update Service Plan

When various changes take place between FASP cycles, the Service Plan may need to be updated. The Service Plan describes the actions planned to meet the most important needs of the family so that the Permanency Planning Goal (PPG) can be achieved.

When a child is removed from his/her home, workers are required to complete a Service Plan Update within 90 days from the date of removal. To do this, a Plan Amendment can be launched and completed or information from the updated Service Plan can be directly recorded into the FASP. When the update is completed using a Plan Amendment, the “Update Service Plan” status change helps meet that requirement.

The “Update Service Plan” status change always displays as a sub-node under the Plan Amendment node, unless you deselect the status change on the Plan Amendment Maintenance window. Clicking on this sub-node displays the Update Service Plan window. On this window, you can modify existing Service Plans as a result of changing circumstances, evolving needs, and lessons learned from past approaches. Any Service Plan created or modified in a Plan Amendment carries forward into the next FASP. It is available in both FSS/CWS and FSS/CCR types.

The Update Service Plan window is the same window found in the Service Plan section of the FASP with the following exceptions:

- The Assessment Summary button is disabled.
- Performing a Case Planner Summary is optional.
Removal Update

The Removal Update process in CONNECTIONS pulls a sub-set of information from the Foster Care Issues (or Non-LDSS Custody), Visiting Plan and Service Plan components of an in-process FASP into a Removal Update Report, which can be reviewed and approved. This process is helpful when a Permanency Hearing Report is due and a FASP is in process and cannot be completed or approved in time. The Removal Update Process extracts the necessary information from the in-process FASP to generate the Removal Update Report, which is then submitted for approval for use in the Permanency Hearing Report. This process allows the worker to have an approval of a status change within 30 days, and complete a required Service Update within 90 days from the date of removal to remain in compliance with regulations. The Removal Update functionality is available only in FSS/CWS stages for children with a Program Type of “Placement” or “Non-LDSS Custody.”

Removal Update Button

A Removal Update button appears next to the Check FASP Detail button on the Family Assessment and Service Plan window; this button provides access to the Removal Update functionality. The Removal Update button enables when a FASP is in-process and at least one child in the stage has a Program Choice of “Placement” or “Non-LDSS Custody.” The Case Manager, Case Planner and Caseworker(s) in an FSS/CWS stage can click on the Removal Update button; however, if a Case Planner is not assigned, only the Case Manager can submit the Removal Update Report for approval.

When a worker clicks on the Removal Update button and there are no children in the stage with a Program Choice of “Placement” or “Non-LDSS Custody” who have a removal date within the last 90 days, the following message displays:

“No children have been removed within the last 90 days. Removal Update cannot be generated.”

- Click on the OK button to close the message and return to the FASP window.
Select Child Window

When a worker clicks on the Removal Update button on the FASP window, the Select Child window displays; this window contains the Child(ren) Information grid, which is view-only and lists all children in the stage with a Program Choice of “Placement” or “Non-LDSS Custody” who have a removal date within the last 90 days. The worker can select only one child from the grid at a time. Upon opening the window, the first (or only) child in the Child(ren) Information grid is automatically selected.

The Child(ren) Information grid is comprised of the following columns:

- **Child Name**: The child’s name (Last, First, Middle Initial).
- **Sex**: The child’s gender.
- **Person ID**: The child’s unique, CONNECTIONS system-generated identification number.
- **Age**: The child’s age (computed using the child’s date of birth and current system date).
- **DOB**: The child’s date of birth.
- **CIN**: The child’s unique, system-generated WMS client identifier number.
The following buttons display on the *Select Child* window:

**Check Removal Detail**
Clicking on this button initiates system submission edits, which check for completeness of certain sections of the in-process FASP for the selected child.

For children with a Program Choice of “Placement,” edits occur for the following:
- Appropriateness of Placement component
  - Activities Prior to Placement tab
  - Location of Child tab
  - Continuity of Environment tab
  - Continuity of culture for American Indian Children tab
- Visiting Plan component
- Service Plan component

For children with a Program Choice of “Non-LDSS Custody,” edits occur for the following:
- Appropriateness of Alternative Setting tab
- Visiting Plan component
- Service Plan component

Once the submission edits are complete, the *Check FASP Detail Component Status* window displays, listing any incomplete components. When no incomplete components display on the *Check FASP Detail Component Status* window, the **Submit** button enables on the window for the Case Planner only. If there is no Case Planner for the stage, the button enables for the Case Manager only.

If there are incomplete components, the worker must access the in-process FASP and complete any listed components for the selected child. The worker can then click on the **Removal Update** button on the FASP window, select the child on the *Select Child* window and click on the **Check Removal Detail** button. Workers must repeat this process until no incomplete components display in the *Check FASP Detail Component Status* window.

If the in-process FASP used to populate a Removal Update Report is approved while the Removal Update Report is pending approval, the Approval Task To-Do's for the Removal Update Report are deleted along with the Removal Update Report since the approved FASP contains the most recent removal information. Throughout the Removal Update process, all sections of the in-process FASP remain modifiable so that it can be completed and submitted for approval within the required timeframe.

**Cancel**
Clicking on this button closes the *Select Child* window.
Module 18: Service Plan Review

Service Plan Reviews provide an important opportunity for workers, families and service providers to meet and discuss progress, problems and the changing needs of a family. They also provide the district and agency with an important Quality Assurance tool: a Third Party Reviewer must be present to review the family’s progress and to determine whether the proposed plan will meet the family’s needs and achieve the permanency goal. Once a Service Plan has been implemented for a family, periodic reviews are conducted to verify that changing circumstances are being considered and progress is being made toward the Service Plan goals. The Service Plan Review (SPR) functionality in CONNECTIONS is a scheduling, notification and documentation tool that helps organize the necessary activities and includes the participants who will attend the SPR. This might include scheduling meetings, using alerts to notify attendees and generating the appropriate letters. The same FASP can have multiple Service Plan Reviews.

Preparing for a Service Plan Review incorporates several steps:
- Scheduling a meeting (See page 18-17.)
- Adding persons (See page 18-8.)
- Inviting individuals (See page 18-12.)
- Notifying individuals (See page 18-12.)

Once an SPR has taken place, attendance may also be recorded. (See page 18-15.)

Accessing the Service Plan Review Window

The Service Plan Review is not part of the Family Assessment and Service Plan (FASP). There are several paths a worker can take to access the SPR, depending on his/her role in the stage and assigned Business Functions.

The following individuals can create and modify Service Plan Reviews:
- An assigned worker who has a role in the FSS
- Any worker who is in the assigned worker's hierarchy
- Any worker with the ACC SERPLAN REV Business Function (e.g., clerical staff, Third Party Reviewer)

The ACC SERPLAN REV Business Function gives clerical staff the ability to create and/or modify Service Plan Review information for their specific district or agency. This access is limited to the Service Plan Review: individuals with this Business Function do not have access to other information in the FSS. Clerical staff (or any individuals with this Business Function) access the Service Plan Review functionality via a Case Search.
If you:

<table>
<thead>
<tr>
<th>Access the Service Plan Review via:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have a role of Case Manager, Case Planner, Caseworker or CPS Worker/Monitor</td>
</tr>
<tr>
<td>Assigned Workload</td>
</tr>
<tr>
<td>Are in the assigned worker's unit hierarchy</td>
</tr>
<tr>
<td>Case Search</td>
</tr>
<tr>
<td>Have been assigned the ACC SERPLAN REV Business Function (e.g., clerical staff or Third Party Reviewer)</td>
</tr>
<tr>
<td>Are accessing the stage after it has been closed</td>
</tr>
</tbody>
</table>

**Step-by-Step:**

**Accessing the Service Plan Review Window from the Assigned Workload**

1. On the Assigned Workload, click on the FSS stage for which you need to record a Service Plan Review. 
   *The Tasks... button enables.*

2. Click on the Tasks... button. 
   *The Family Services Stage displays.*

3. On the FSS window, click on the Service Plan Review tab. 
   *The Service Plan Review window displays.*

**Step-by-Step:**

**Accessing the Service Plan Review Window via a Case Search**

1. Click on the CASE button on the CONNECTIONS Toolbar. 
   *The Case Search Criteria window displays.*

2. Enter the 8-digit Stage ID number into the Stage ID field (or the 8-digit Case ID number into the Case ID field).

3. Click on the Search button. 
   *The Case List displays with the one case that matches the search criteria.*

4. Click on the case to select it from the Case List.

5. Click on the Summary button. 
   *The Case Summary window displays with a list of all stages in the selected case.*

6. Click on the Family Services Stage to select it from the list.

7. Click on the Options menu and select the Service Plan Review... command. 
   *The Service Plan Review window displays.*
Step-by-Step:
Accessing the Service Plan Review Window from the Event List

1. Click on the CASE button on the CONNECTIONS Toolbar.
   The Case Search Criteria window displays.
2. Enter the 8-digit Case ID number into the Case ID field (or the 8-digit Stage ID number into the Stage ID field).
3. Click on the Search button.
   The Case List displays with one case that matches the search criteria.
4. Click on a case to select it from the Case List.
5. Click on the Events button.
   The Event List displays for the selected case.
6. Click on the Family Services Stage Opened event to select it from the Event List.
7. Click on the Detail… button.
   The FSS window displays.
8. Click on the Service Plan Review tab.
   The Service Plan Review window opens in view-only mode.

The Service Plan Review Window
There may be several FASPs for a stage. Clicking on the Service Plan Review tab displays the Service Plan Review window, which contains an index of all FASPs in the stage. Although the SPR isn’t considered part of the FASP, it is FASP-specific. For this reason, the worker must select the desired FASP to view or maintain information regarding the SPR. Any FASP due within the next six months is listed here, as well as historical FASP information.
The Service Plan Review window displays a header with Case Name and Case Initiation Date fields. These fields are system-filled and cannot be modified.

Two sections display below the header:
- Select FASP
- SPR Activity for Selected FASP

The Select FASP section lists (in view-only mode) all of the FASPs associated with the stage. They are listed in descending order by FASP Due Date, with the most current FASP at the top. Sort the fields individually, if desired, by clicking on a column heading. This section contains four columns:

<table>
<thead>
<tr>
<th>FASP Type</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Comprehensive</td>
</tr>
<tr>
<td></td>
<td>Reassessment</td>
</tr>
<tr>
<td>(for FSS/CCR stages, this is the only FASP Type)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FASP Due Date</th>
<th>Date the FASP is due</th>
</tr>
</thead>
<tbody>
<tr>
<td>FASP Status</td>
<td>In-Process, Pending, Approved, Not Launched</td>
</tr>
<tr>
<td>SPR Activity</td>
<td>The number of SPRs associated with the FASP</td>
</tr>
</tbody>
</table>

The SPR Activity for Selected FASP section has the following three column headings:

<table>
<thead>
<tr>
<th>Date Scheduled</th>
<th>Date the SPR is scheduled to take place</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Held</td>
<td>Date the SPR was held</td>
</tr>
<tr>
<td>Date Last Modified</td>
<td>A date that is system-generated each time any component of the SPR is updated</td>
</tr>
</tbody>
</table>

These columns are sorted in descending order by the Date Scheduled, with the most recent Service Plan Review at the top. They can also be sorted individually by clicking on a column heading. Multiple SPRs may be associated with one FASP and a new SPR can be recorded for an approved FASP.

The following buttons display in the footer (with corresponding commands in the Options menu):

- **New**
  - Clicking on this button opens the Service Plan Review Detail window to record new Service Plan Review information. (See page 18-12 for information on scheduling an SPR.)

- **SPR Details**
  - Use this button to modify or view SPR information. This button opens the Service Plan Review Detail window with the Persons tab active.
Click on the Close button to close the Service Plan Review window and return to the window from which you accessed the Service Plan Review window. There is no need to save before closing this window, since all fields are view-only.

Clicking on the selected FASP brings forward any associated SPRs. At this point, you can opt to modify information for an existing SPR or record a new one. All of the fields on this window are system-populated and view-only.

The Service Plan Review Details Window
The Service Plan Review Details window displays a header, four tabs and footer. In addition to the File, Options and Help menus, this window displays a Notification menu. The header contains the following system-populated fields, which display regardless of which tab is active: Case Name, Case Initiation Date and Case ID.

Below the header, the following tabs display:

- **Persons**
  
  Workers use this tab to designate invitees to the Service Plan Review and to record attendance after the SPR is held. This may include assigned workers as well as outside participants.

- **SPR Scheduling**
  
  Workers use this tab to record the SPR time, date, location and contact information.

- **SPR Summary**
  
  On this tab, workers record a narrative including the family’s input, involvement and view; input from any others who were present, including foster parents; and a summary of the decisions reached.

- **Third Party Reviewer**
  
  This tab captures Third Party Reviewer comments on the process and content of the plan.

The footer of this window contains the Close button. This button closes the Service Plan Review Detail window and displays the Service Plan Review window. If you have not saved all of your changes prior to clicking on the Close button, the following message displays:

“Do you want to exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes and close the Service Plan Review Details window.
- Click on the No button to remain on the Service Plan Review Detail window; unsaved changes remain pending.
The Persons Tab
As part of a Service Plan Review, there are many individuals who might participate in the review process. The Persons tab, which displays upon opening the Service Plan Review Details window, is used to designate invitees to the Service Plan Review. This might include assigned workers, any active individuals in the stage, parents, foster parents, law guardians and children over ten years old. Once the SPR has been held, the participants in attendance can be recorded on this window. If any invited participants did not attend the meeting, workers can record the reason for non-attendance here as well.

The Persons tab displays four grids:
- Stage Composition
- Workers
- Outside Participants
- Service Plan Review Invitees

The footer of the Persons tab contains three buttons:

**Delete**
Clicking on this button removes a selected individual from the Service Plan Review Invites grid. It also clears any highlighting in the other sections for this individual.

**Save**
Clicking on this button saves work that has been recorded or changes that have been made on the window.

**Cancel**
Clicking the Cancel button discards any unsaved data. The following message displays:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes.
- Click on the No button to leave the tab open without discarding the unsaved changes.
The Stage Composition Grid

The Stage Composition grid lists all of the active individuals in the stage, in the order that they appear on the Stage Composition tab on the Family Services Stage window. The following system-populated, view-only fields display:

- **Person Name**: The individual’s name
- **FC**: A check box to indicate children who are age ten and older and who have a Program Choice of “Placement”
- **Date of Birth**: The individual’s date of birth
- **Age**: The system-calculated age as of the Due Date of the FASP (or the date the FASP was launched, if no Due Date is available)

For an FSS/CWS stage, the following buttons display below the grid and enable once an individual is selected:

- **Relationship Matrix**: Navigates to the Family Relationship Matrix window in view-only mode
- **Add to Invitees**: Adds individuals selected on the Stage Composition grid to the Service Plan Review Invitees grid

For an FSS/CCR stage, only the **Add to Invitees** button enables.

The Workers Grid

The Workers grid lists all active workers with an assigned role in the stage and indicates what their role is. The following system-populated, view-only fields display:

- **Worker Name**
- **Worker Role**

The **Add to Invitees** button displays below the grid and enables once an individual(s) is selected.

Outside Participants Grid

Often there are individuals participating in Service Plan Reviews who do not display on the Stage Composition tab in the FSS and are not workers assigned to the stage. The Outside Participants grid lists all of the individuals who participate in the Service Plan Review and who are not included in the Stage Composition.

The following system-populated, view-only fields display:

- **Participant Name**
- **SPR Role**

Two buttons display below the Outside Participants grid:

- **Add Outside Participants**
- **Add to Invitees** (enables once an individual(s) is selected)
**Adding Outside Participants**

When planning a Service Plan Review, workers select the individuals who should take part in the review meetings. At times, these individuals are not involved in the stage and therefore are not part of the Stage Composition. This includes extended family, Law Guardians and service providers. The Add Outside Participants functionality allows these individuals to be added as participants in the SPR.

The *Outside Participants* window can also be accessed from the *Visiting Plan* window in the *Foster Care Issues* sub-node.

The *Outside Participants* list displays at the top of this window. This is a list of any outside participants who have already been added to the stage through the Visitation functionality in the *Foster Care Issues* node. The columns displayed are **Participant Name**, **SPR Role** and **Relationship**. Once an individual is selected from the grid, all of the demographic information recorded for him/her is displayed in the fields below. These fields can be modified by selecting a row, editing the information that populates in the detail fields below the list and clicking on the **Modify** button.

The Add Outside Participants process adds the person to the SPR, but not to the database. The individual will not be returned as a result of any CONNECTIONS search.
Below the list section, the following fields display in the detail section:

**Last Name**  Record the last name of the Outside Participant in this required field.

**First Name**  Record the first name of the Outside Participant in this required field.

**MI**  Record the middle initial of the Outside Participant in this field.

**SPR Role**  Record the individual’s role in the Service Plan Review by clicking on the drop-down arrow and selecting from the resulting list:
- CASA Volunteer
- Caseworker
- Foster Child
- Foster Parent
- Guardian
- Law Guardian
- Other
- Other District/Agency Staff
- Parent/Guardian Attorney
- Pre-adoptive Parent
- Probation
- Relative
- School Personnel
- Service Provider
- Third Party Reviewer
- Tribal Representative
- Qualified Expert Witness

**Relationship**  This field is disabled when the window is accessed from the Service Plan Review Details window.

**Agency**  Record the individual’s agency, if applicable.

The Participant Address section contains the following fields, along with a **Validate** button:
- Street
- PO Box/Apt. #
- City
- State
- Zip

The following additional contact information fields display:
- Phone
- Fax
- Email

All required fields highlight in yellow until information is recorded. The **Add** button enables only after required fields are completed.

All address information must be run through address validation by clicking on the **Validate** button.
The footer contains seven buttons:

**Add** 
Adds new participant information to the Outside Participants list

**Modify** 
Modifies previously recorded information for outside participants

**Delete** 
Deletes previously recorded participants from the list

**Clear** 
Clears all fields and previous row selections on the list

**Save** 
Saves the records to the Outside Participants list

**Cancel** 
Clicking the **Cancel** button discards any unsaved data. The following message displays:

“Do you want to cancel?
Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard the unsaved changes.
- Click on the **No** button to leave the tab open without discarding the unsaved changes

**Close** 
Closes the Outside Participants window and displays the Persons tab. If you have not saved all of your changes prior to clicking on the **Close** button, the following message displays:

“Do you want to exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the **Yes** button to discard the unsaved changes and close the Outside Participants window.
- Click on the **No** button to remain on the Outside Participants window; unsaved changes remain pending.

---

### Step-by-Step:
Adding an Outside Participant to the Service Plan Review

1. On the Service Plan Review Detail window, click on the **Add Outside Participants** button. The Outside Participants window displays. Any outside participants who were previously added to the stage display in the list section. Required fields highlight in yellow.

2. Record the person’s name in the **Last Name** and **First Name** fields.

3. In the **SPR Role** field, click on the drop-down arrow and select the individual’s role from the resulting list.

4. In the **Agency** field, type in the name of the individual’s agency, if applicable.

5. In the Participant Address section, record the individual’s address in the appropriate fields.
6 When you have recorded the address, click on the **Validate** button. 
*The address validation window displays.*

7 Click on the **Accept** button to accept the validated address, as applicable.

8 Record phone, fax and e-mail information in the respective fields.

9 When you are finished recording information for this person, click on the **Add** button. 
*The information is added to the Outside Participants list.*

10 Click on the **Save** button.

11 Click on the **Close** button. 
*The Persons tab displays. The Outside Participants field now displays the name of the individual you just added.*

---

**Step-by-Step:**
**Modifying an Outside Participant for the Service Plan Review**

1 On the **Service Plan Review Detail** window, click on the **Add Outside Participants** button. 
*The Outside Participants window displays. Any outside participants who were previously added to the stage display in the list section. Required fields highlight in yellow.*

2 Select the person you wish to modify from the Outside Participants list. 
*The selected person’s information populates the data fields.*

3 Make any necessary changes in the respective fields.

4 When you have finished recording information for this individual, click on the **Modify** button.

5 Click on the **Save** button.

6 Click on the **Close** button. 
*The Service Plan Review Details window displays with the Persons tab active.*
The Service Plan Review Invitees Grid

As a worker determines who should be invited to the Service Plan Review, s/he adds them to the Service Plan Review Invitees grid on the Persons tab. Each time a worker clicks on the Add to Invitees button in any grid on the tab, the individual selected displays on the Service Plan Review Invitees grid. Workers can also record who attended the meeting in this section, as well as any reason for non-attendance.

The grid contains the following fields:

- **Person Name**: The invitee’s name; not modifiable from this grid
- **Role**: The invitee’s role, as determined in the list from which s/he was added (e.g., Third Party Reviewer, Guardian)
- **FC**: A check box to indicate children age ten and older who have a Program Choice of “Placement”; not modifiable from this grid
- **Notification Method**: The method by which the individual was notified of the SPR (e.g., letter, alert, phone call)
- **Notification Date**: The date the individual was notified of the SPR meeting
- **Attended**: A check box to indicate whether an invitee attended the meeting
- **Reason for Non-Attendance**: A narrative field to record the reason for non-attendance at the SPR

Notifying Invitees

Once a worker adds the desired invitees to the Service Plan Review Invitees grid and records Service Plan Review scheduling information (see Page 18-17), s/he must notify them of the date, time and location of the review. This can be done through a system-generated Alert To-Do, a system-generated letter or in non-system ways described below.

**System-Generated Alert**

To generate an Alert To-Do for any worker displayed in the Workers grid, select the Generate Alerts command from the Notification menu. The following information is required before an Alert To-Do can be generated: Location Name, Date Review Scheduled, and Meeting Time. This information is recorded on the SPR Scheduling tab. Once a worker is notified via an Alert To-Do, the Notification and Notification Date fields are system-populated and cannot be modified.

The Alert To-Do contains the following description:

“SPR for Stage ID XXXXXXXX is Scheduled.”

Select the Alert To-Do and click on the Detail... button on the Staff To-Do List to open the To-Do Detail window; in the Description field, the following information (which was recorded on the SPR Scheduling tab) displays:

“The SPR for [Stage Name], [Stage ID], is scheduled to be held on [Meeting Date] at [Meeting Time] at [Location].”
**System-Generated Letter**

Invitees can also be notified by a system-generated letter the worker sends. This letter is accessed by selecting from the Service Plan Review Invitees grid the individual who is to receive the letter and selecting the **Generate Letters** command from the **Notification** menu. The **Notification** and **Notification Date** fields are system-populated and cannot be modified. A letter is generated and populated based on the individual selected from the grid.

**Other Methods of Notification**

If a worker notifies an invitee by a method other than an Alert To-Do or system-generated letter, s/he needs to click on the drop-down arrow for the **Notification** field and select from the resulting list. The following items display:

- Manual letter
- E-mail
- Phone
- Fax
- Face-to-face

If the worker selects one of these methods, s/he must record the date manually in the **Notification Date** field. When a worker attempts to save the information recorded on the window and a date has not been recorded, the following message displays:

*“Notification Date is required.”*

- Click on the OK button to close the message, then record the date.

---

**Step-by-Step: Adding an Invitee**

1. If there is no existing Service Plan Review, select the desired FASP from the list and click on the **New** button on the **Service Plan Review** window.  
   —OR—  
   If you are modifying an existing Service Plan Review, select the desired FASP and Service Plan Review and click on the **SPR Details** button.  
   *The Service Plan Review Details window displays; the Persons tab is active.*

2. Click on the individual(s) you wish to invite to the SPR by highlighting the row(s) in the Stage Composition, Workers and/or Outside Participants grids.

3. Click on the **Add to Invitees** button below the corresponding grid.  
   The selected individuals now display on the Service Plan Review Invitees grid.

4. Click on the **Save** button.
Step-by-Step: Notifying an Invitee via an Alert To-Do

1. On the **Persons** tab, click on the **Notification** menu and select **Generate Alerts**.
   - The following message displays: “Alerts have been generated for all workers invited to this Service Plan Review meeting.”

2. Click on the **OK** button.
   - The **Notification** field in the Service Plan Review Invitees grid populates with “Alert”; the **Notification Date** field populates with today’s date.

Step-by-Step: Notifying an Invitee via Letter

1. Select an individual from the Service Plan Review Invitees grid.
   - Only an individual who was added to the invitees grid from the Stage Composition grid or the Outside Participants grid can be selected to receive a letter.

2. Click on the **Notification** menu and select **Generate Letters**.

3. To print the letter, click on the **Print** icon.
   - The Print window displays. Verify that the prompted printer choice is correct.

4. Click on the **OK** button.
   - The document is sent to the selected printer.

5. To close the letter, click on the **Close** button.
   - The **Persons** tab on the Service Plan Review Details window displays. The **Notification** field in the Service Plan Review Invitees grid populates with “Letter”; the **Notification Date** field populates with today’s date.

Notifications can only be generated after the Service Plan Review has been scheduled.
Recording SPR Attendance

In addition to providing workers with a place to record the details of the SPR and notify invitees of the conference, the Service Plan Review functionality provides a method for recording attendance and reason(s) for non-attendance, when necessary. To record attendance, click on the **Attended** check box on the Service Plan Review Invites list. If the invitee did not attend the conference, double-clicking the **Reason for Non-Attendance** field opens the *Reason for Non-Attendance* window. Record a brief narrative of any known reasons for non-attendance (e.g., illness, scheduling conflicts) and also note instances when the invitee does not provide a reason.

![Reason for Non Attendance - Invitee Name](image)

This comment window displays a narrative field that allows a maximum of 2,000 characters. The following buttons display below the narrative field:

- **Spell Check**: This button verifies the spelling of the text in the narrative and is disabled until a narrative is recorded.
- **OK**: This button closes the *Reason for Non-Attendance* window, returning you to the **Persons** tab. The **OK** button is disabled until you begin recording a narrative. The narrative is not saved until you click on the **Save** button on the **Persons** tab.
- **Cancel**: Clicking on this button discards any unsaved data. The following message displays:

  "Do you want to exit? Unsaved data and/or narrative(s) will be lost."

  - Click on the **Yes** button to discard the unsaved changes; the **Persons** tab displays.
  - Click on the **No** button to leave the comment window open without discarding the unsaved changes.

### Step-by-Step: Recording SPR Attendance

1. From the *Service Plan Review Details* window, select an individual from the Service Plan Review Invites grid.

2. Click to select the **Attended** check box to indicate that the selected individual attended the Service Plan Review. If s/he did *not* attend, double-click the **Reason for Non-Attendance** field and record a short narrative explaining the reason for non-attendance.
3 Click on the **Save** button.
4 Click on the **Close** button.
   *The Service Plan Review window displays.*
   —OR—
   Click on another tab.
The SPR Scheduling Tab

Before any invitees can be notified about a Service Plan Review, the meeting needs to be scheduled. Workers use the SPR Scheduling tab to record the time, date, location and contact information for the SPR. If an SPR was previously scheduled, the details of the meeting are pre-populated by the system using the most recently recorded information; this information can be modified by the worker. If no SPRs were recorded for this stage, all fields are clear. This information is used to generate alerts and letters from the Persons tab.

The SPR Scheduling tab is comprised of the Location of Conference section, which contains the following fields:

- **Date Review Scheduled**: Record the date of the SPR.
- **Meeting Time**: Record the time of the SPR, specifying AM or PM.
- **Contact Person**: Record the name of the contact person for the SPR.
- **Contact Phone**: Record the phone number for the SPR contact person.
- **Location Name**: Record the location of the SPR.
- **Room Number**: The room number of the SPR is optional.
- **Floor Number**: The floor number of the SPR is optional.
The following fields display in the Address Information section:

- **Street**  
  Record the street address for the SPR location.

- **PO Box/Apt**  
  Any PO Box or apartment information for the SPR is optional.

- **City**  
  Record the city in which the SPR will take place.

- **State**  
  The drop-down list displays all 50 states and defaults to “New York.”

- **Zip**  
  Record the ZIP Code.

The **Validate** button displays in the Address Information section. All addresses must be run through address validation before the **Save** button will enable.

The **Save** and **Cancel** buttons display at the bottom of this tab. (For more information about these buttons, see page 18-6.)

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### Step-by-Step: Completing the SPR Scheduling Tab

1. On the *Service Plan Review Details* window, click on the **SPR Scheduling** tab.

2. In the **Date Review Scheduled** field, click on the check box for the current date to accept that date.  
   *To select a different date, click on the drop-down arrow and select a different date from the resulting calendar.*

3. In the **Meeting Time** field, record the time of the meeting.

4. In the **Contact Person** field, record the name of the contact person for the SPR.

5. In the **Contact Phone** field, record the telephone number for the contact person.

6. In the **Location Name** field, record the location of the SPR.

7. In the **Room Number** field, record the room number where the SPR will take place (if applicable).

8. In the **Floor Number** field, record the floor number where the SPR will take place (if applicable).

9. In the **Street** field, record the street address for the SPR location.  
   *Any additional address information (such as an apartment number) can be recorded in the **PO Box/Apt** field.*

10. In the **City**, **State** and **Zip** fields, record the city, state and ZIP Code for the SPR location.  
    *The **State** field defaults to “New York”; if necessary, click on the drop-down arrow to select from a list of all states.*

11 Click on the **Validate** button to validate the address information.  
*The address validation window displays.*

12 Click on the **Accept** button to accept the validated address.

13 Click on the **Save** button.

14 Click on the **Close** button.  
*The Service Plan Review window displays.*

—OR—

Click on another tab

**The SPR Summary Tab**

Narrative comments regarding the Service Plan Review are recorded on the **SPR Summary** tab in two separate fields:

- The **Family Input, Involvement and View** field captures information regarding the family’s (and child’s, if appropriate) level of participation in the SPR and specific contributions that they made, as well as their perception of whether the Permanency Planning Goal is being met.

- The **Meeting Summary** field captures special circumstances surrounding this SPR or the participating individuals, descriptions of the issues discussed, and the resolution.

The **SPR Summary** tab displays a **Date Review Held** field above two narrative fields. If the stage is an FSS/CWS, the fields are titled **Family’s Input, Involvement and View** and **Meeting Summary**. If the stage is an FSS/CCR, the fields are titled **Child’s Input, Involvement and View** and **Meeting Summary**. These fields hold up to 4,000 characters. Each narrative is saved as final; multiple entries can be made in the fields.
The following buttons display below the narrative fields:

- **Spell Check** (For more information about this button, see page 18-15.)
- **Save** (For more information about this button, see page 18-6.)
- **Cancel** (For more information about this button, see page 18-6.)

### Step-by-Step: Completing the SPR Summary Tab

1. From the Service Plan Review Details window, click on the **SPR Summary** tab.

2. In the **Date Review Held** field, click on the drop-down arrow and select from the resulting calendar the date when the review was held.  
   *This date can not be a future date.*

3. In the **Family's Input, Involvement, and View** field, record a narrative detailing the family’s (or child’s if the stage is FSS/CCR) input, involvement and view.

4. In the **Meeting Summary** field, record a narrative summarizing the meeting.

5. Click on the **Save** button.

6. Click on the **Close** button.  
   *The Service Plan Review window displays.*
   —OR—
   Click on another tab.

### The Third Party Reviewer Tab

Each Service Plan Review must include at least two participants: the Case Planner, and an administrator or other person not responsible for the case management or delivery of services in the case (a Third Party Reviewer). The **Third Party Reviewer** tab is used to collect the comments of the Third Party Reviewer. The Reviewer or support staff (if the Reviewer does not have direct access) records any conclusions and/or recommendations regarding the Service Plan. By default, the Third Party Reviewer is only able to access the **Service Plan Review** tab on the FASP. If necessary, the Case Planner can give the Third Party Reviewer a hard copy of the complete FASP. To access other parts of the FASP, the Third Party Reviewer’s Business Function Profile must be adjusted or s/he must be provided with Agency Access, as appropriate. If a Third Party Reviewer feels additional Business Functions are needed, s/he should contact his/her supervisor. (For more information see “Accessing the Service Plan Review Window” on Page 18-1.)
The tab displays a narrative field titled **Third Party Reviewer Conclusion(s) and Recommendation(s)**. This field holds an unlimited amount of text and features the Text Control tools, which work similarly to many of the basic formatting functions in Microsoft Word, such as bold, italics, bulleted and numbered lists, copy/paste and Spell Check. The Third Party Reviewer comments freeze upon saving and are not modifiable. The comments are stamped with the date, time and worker ID of the person who recorded the narrative.

Two buttons display at the bottom of the tab: **Save** and **Cancel**.

(For more information about these buttons, see page 18-6.)

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**Step-by-Step: Completing the Third Party Reviewer Tab**

1. From the Service Plan Review Details window, click on the **Third Party Reviewer** tab.

2. In the **Narrative** field, record a narrative detailing the conclusions and recommendations of the third-party reviewer.

3. Click on the **Save** button.

4. Click on the **Close** button.
   
   *The Service Plan Review window displays.*
   
   —OR—
   
   Click on another tab.
The Service Plan Review Conference Summary Report
The Service Plan Review Conference Summary Report provides workers with the detailed information recorded in CONNECTIONS for a Service Plan Review. This report includes basic information (e.g., Case Name, CID), FASP information (e.g., FASP Type, FASP Due Date), SPR attendance information (e.g., names of invitees, whether the invitee[s] attended, reasons for non-attendance) and narratives recorded on the SPR Summary tab and Third Party Reviewer tab. The report can be viewed in CONNECTIONS or printed.

Step-by-Step:
Launching the Service Plan Review Conference Summary Report

1. From the Service Plan Review window, click on the Comprehensive FASP in the Select FASP grid. The newly created SPR displays in the SPR Activity for Selected FASP grid.
2. Click on the arrow in the SPR Activity for Selected FASP grid to select the newly created SPR.
4. If desired, click on the Print button to print the report.
5. Click on the Close button to close the report when you are finished. The Service Plan Review window displays.
Module 19: Placement Key Dates

Prior to the Permanency Bill, Chapter 3 of the Laws of 2005, the Key Dates window was used to assist workers with completing work in a timely manner for children placed in foster care in order to meet state and federal statutes established through the Adoption and Safe Families Act (ASFA).

With the implementation of Build 18.7, the Key Dates window became obsolete (on December 16, 2005), since the timeframes established on the previous Key Dates window were not in accordance with the new legislation. The legislation refocuses the timeframes based on the date of physical removal, not the ASFA Day 1 date.

Previously, clicking on the Key Dates tab on the Family Services Stage window provided access to the Key Dates window. Now, the Key Dates tab is only enabled for stages that were closed prior to the implementation of Build 18.7. The Key Dates window no longer receives updates from CCRS and instead displays the last data received from CCRS prior to December 16, 2005.

For all open FSS stages and FSS stages closed after December 16, 2005, the Key Dates tab is disabled; workers assigned to these stages cannot access the Key Dates functionality.

Step-by-Step:
Accessing the Key Dates Tab (for stages closed prior to December 16, 2005)

1. Click on the CASE button on the CONNECTIONS Toolbar.
2. Enter information into the appropriate search fields and click on the Search button. The Case List displays.
3. Select the appropriate case and click on the Events button. The Event List displays.
4. Select the Family Services Stage Opened event and click on the Detail… button. The Family Services Stage window displays.
5. Click on the Key Dates tab. The Key Dates window displays. The fields populate with the data received from the last interface with CCRS prior to December 16, 2005.
The **Key Dates Window**

The *Key Dates* window contains the Select Child grid, which displays a list of children in a foster care placement and who had a Program Choice of “Placement.”

The fields in the lower half of the *Key Dates* window display information pertaining to the selected child. To select a child, click on the box to the left of the child's name; a black arrow displays to indicate which child has been selected.

The Select Child grid contains the following fields:

- **Name**: This field displays the full name of the child in placement.
- **Date Of Placement For This Episode**: This field displays the date the child first entered a Foster Care home or facility.
- **Total Time for This Placement Episode As Of Today**: This field displays the total number of days the child was in the placement arrangement for the incident or episode of removal.

The *Key Dates* window contains the following fields:

- **CCRS Data as of**: This field displays the date the information on the *Key Dates* window was last updated from CCRS at the time of Build 18.7 implementation.
- **ASFA Day 1**: This is the date on which the ASFA “clock” began calculating the 15 out of the most recent 22 months in care. This date would be either 60 days after the child was removed from the home, or the date of the first judicial finding that the child was subjected to abuse or maltreatment.
The ASFA Day 1 Modifier field displays the type of date. This field displays one of the following:

- “Removal” displays if the ASFA Day 1 date was based on the date the child was removed from the home.
- “Adjudicated” displays if the ASFA Day 1 date was based on the date of the first judicial finding.

TPR Decision Due

This field displays the date the child was, or would have been, in care for any 15 months out of the most recent 22 months (at the time of Build 18.7 implementation). Once this date was reached, ASFA required the local district to take legal action to terminate the parents’ right to their child unless an exception or compelling reason had been documented in the case record. If this date was in the future, the date was calculated based on the assumption that the child would continuously remain in care until that date.

This field only displays for an FSS/CWS stage; it does not display if an exception or compelling reason was documented in the FASP (Foster Care Issues node, Permanency Progress/Concurrent Planning window, TPR Petition tab).

Next Permanency Petition Filing Due

This field displays the due date of the next permanency petition filing. If the petition filing was overdue, “Overdue” displays next to the date.

Petition Type

This field displays the type of petition that was due (e.g., extension of placement, TPR, permanency, etc.).

Next Permanency Hearing Due

This field displays the due date of the next permanency petition hearing. If the hearing was overdue, “Overdue” displays next to the date.

Hearing Type

This field displays the type of hearing that was due.

The Key Dates window also contains the Close button. By clicking on the Close button, the Key Dates window closes and the Stage Composition tab displays.
Module 20:  
Case Summary

The Case Summary window displays in an FSS stage, is accessed via the Case Summary tab and has three important functions:

- The window displays all of the workers, both current and historical, who have worked with the family. This information is important so the workers can make appropriate contact with each other and collaborate on case planning and other activities. This is critical since there may be several workers from Voluntary Agencies or Local Districts involved with the family at the same time. For example, a Caseworker working with a family may discover an inconsistency between the information provided in the progress notes and the court record. The current Caseworker would be able to locate the name of the former Caseworker and call him/her to discuss this inconsistency. Access to the list of all of the open and closed stages is based on a worker’s security rights (e.g., no Unfounded stages will be displayed for Voluntary Agency or Local District staff who do not have the VIEW UNFOUNDED Business Function). Workers in Voluntary Agencies will not have access to information in CPS Intake and Investigation stages. This window does not provide for navigation to any stage; it only provides a list with stage and worker information.

- A Case Planner or Case Manager closes an FSS stage from the Case Summary window.

- A Case Manager changes an FSS stage type, when appropriate, from this window.

When the Case Summary window displays, the information pre-fills in the fields based on the worker’s security privileges (determined by his/her Business Function Profile). If the worker does not have rights to modify certain information, buttons and options are disabled.

To view stages on the Case Summary window, the following rules apply:

- If a worker (i.e., Case Manager, Case Planner, Caseworker or CPS Worker/Monitor) has a role in an open INT, INV or ARI stage, all stages display on the tab.

- If a worker has a role in an FSI or FSS stage, all stages except Unfounded INV and ARI stages display (unless the worker has the VIEW UNFOUNDED and/or VIEW ARI Business Functions).

- If a worker has a historical role in an INT, INV or ARI stage that is now closed, all stages except Unfounded INV and ARI stages display (unless the worker has the VIEW UNFOUNDED and/or VIEW ARI Business Functions).

- If a worker has a historical role in an FSI or FSS stage, FSI and FSS stages that precede the date the worker was last unassigned from the FSI or FSS stage display. S/he will still need the appropriate Business Function to view specific stages (e.g., Unfounded, Indicated).

- If a worker has no role in the case and has Agency Access, all FSI and FSS stages display. To view INT and INV stages, s/he still needs the appropriate Business Function (e.g. VIEW UNFOUNDED). Keep in mind that workers in Voluntary Agencies will not have access to information in CPS Intake or Investigation stages.
Case Summary Window

The Case Summary window is accessed via the Case Summary tab, which is located on the Family Services Stage window. It can be accessed via two paths:

- The Assigned Workload
- The Event List

Accessing the Case Summary window via the Assigned Workload displays the FSS in modify mode; accessing it via the Event List displays the FSS in view-only mode. Workers who have not had previous involvement with the case may use this path to familiarize themselves with this information prior to meeting with the family.

Step-by-Step: Accessing the Case Summary Window via the Family Services Stage Window

1. On the FSS window, click on the Case Summary tab.
   The Case Summary window displays with a list of all stages in the selected case.

   The Case Summary window is divided into two sections:

   - Grids (with radio buttons)
   - Buttons

   Two grids display on the Case Summary window: the Stage Information grid and the Worker Information grid.

   The Stage Information grid, in the upper half of the window, displays basic identifying information for each stage in the case. This list includes all open and closed stages within the case. Case Planners can modify an FSS’s Closure Reason; Case Managers can modify the Stage Type and Closure Reason for an FSS.
The Stage Information grid consists of ten columns:

**Stage ID**  The Stage ID number is a unique, system-generated identification number assigned to a stage.

**Stage Name**  This column displays the name of the family receiving services. The Stage Name is the name by which the stage is identified in CONNECTIONS. Stages are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. In an FSS/CCR stage, the Line 1 person is the solitary child in the CCR.

**Stage**  This column displays the stage of service that the selected item represents: INT, INV, FSI, FSS, ARI, Information and Referral (I&R), or Special Request (SPC).

**Stage Type**  This column displays the type of stage listed. Case Managers may use this field to change the FSS type. Other workers may only view this information.

There are five stage types for FSI stages:
- Child Welfare Services (CWS)
- Out of Town Inquiry (OTI)
- Court Ordered Investigation (COI)
- Interstate Compact for the Placement of Children (ICPC)
- Advocate Preventive Only (ADVPO)

There are six stage types for FSS stages:
- Child Welfare Services (CWS)
- Child Case Record (CCR)
- Out of Town Inquiry (OTI)
- Court Ordered Investigation (COI)
- Interstate Compact for the Placement of Children (ICPC)
- Advocate Preventive Only (ADVPO)

There are five stage types for INT stages:
- Institutional Abuse (IAB)
- Initial (INI)
- Subsequent (SUB)
- Additional Information (ADD)
- Duplicate (DUP)

There are four stage types for INV stages:
- Institutional Abuse (IAB)
- Initial (INI)
- Subsequent (SUB)
- Duplicate/Consolidated Investigation (DUP)
<table>
<thead>
<tr>
<th>Stage Opened</th>
<th>This column displays the date the stage was opened in CONNECTIONS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage Closed</td>
<td>This column displays the date the stage was closed.</td>
</tr>
<tr>
<td>Reason Stage Closed</td>
<td>The recorded closure reason displays for all closed stages. Case Planners and Case Managers use this field to assign a closure reason to a currently open FSS stage. For open FSS stages, this field contains a drop-down list of 10 reasons:</td>
</tr>
<tr>
<td></td>
<td>• Services no longer needed</td>
</tr>
<tr>
<td></td>
<td>• Services no longer accepted</td>
</tr>
<tr>
<td></td>
<td>• Programmatically ineligible</td>
</tr>
<tr>
<td></td>
<td>• Death</td>
</tr>
<tr>
<td></td>
<td>• Moved out of district</td>
</tr>
<tr>
<td></td>
<td>• Agency cannot locate client</td>
</tr>
<tr>
<td></td>
<td>• End of court ordered services</td>
</tr>
<tr>
<td></td>
<td>• Adulthood attained</td>
</tr>
<tr>
<td></td>
<td>• Adoption Finalized – with Subsidy</td>
</tr>
<tr>
<td></td>
<td>• Adoption Finalized – without Subsidy</td>
</tr>
<tr>
<td>Determination</td>
<td>This column only applies to CPS INV stages and displays for those workers with the VIEW UNFOUNDED, VIEW UNDER INV and/or VIEW INDICATED Business Functions. The determination shows whether the CPS Investigation resulted in a determination of “Suspended,” “Indicated” or “Unfounded.” Workers in Voluntary Agencies will not be able to access or view information in the CPS Intake or Investigation stages.</td>
</tr>
<tr>
<td>Stage CD</td>
<td>This column displays the Community District (CD) code for the New York City address associated with the stage, if applicable.</td>
</tr>
<tr>
<td>Local Case Number</td>
<td>This column displays the Local District case number used by the Welfare Management System (WMS).</td>
</tr>
</tbody>
</table>

The Worker Information grid consists of eight columns:

| Worker Name | This column displays the name of the Caseworker. |
| Role        | This column displays the worker’s role in the stage: |
|             | • Primary |
|             | • Secondary |
|             | • Case Manager |
|             | • Case Planner |
|             | • Caseworker |
|             | • CPS Worker/Monitor |
| Telephone Number | This column displays the worker’s office telephone number. |
| Agency/County | This column displays the worker’s agency or county code. |
| Site        | This column displays the worker’s office site number. |
Unit
This column displays the worker’s unit number.

Zone
This column displays the worker’s zone, if applicable. The zone only applies to New York City.

End Date
This column displays the date that the worker’s assignment to the stage ended.

Next to the Worker Information grid, two radio buttons display: View Active and View All. By default, the View Active radio button is selected when the window displays. Only workers who are currently assigned a role in the selected stage display in the grid. If the worker selects the View All radio button, the grid displays all current workers, plus all workers with a historical role in the stage.

Below and to the right of the grids, the following buttons display:

Closure Question (not always visible)
This button only displays on the Case Summary window when information has been recorded on the Stage Closure Question window. (See “The Stage Closure Question Window” on page 20-8.) The Stage Closure Question window displays when a Case Planner or Case Manager attempts to close an FSS stage with no Plan Amendment, with an “ending or discharge” type, and that does not have a currently pending FASP or a FASP approved within the last 30 days.

Submit
The Submit button is used by the Case Planner or Case Manager to submit the closure of an FSS stage. A Case Planner submits the closure to his/her Unit Approver and to the Case Manager (via a single Task To-Do, which is system-generated when the Case Planner clicks on the Submit button). If the Case Manager initiates the closure, the submission is forwarded to the Case Manager’s Unit Approver.

Save
This button saves information that has been recorded on the window.

Cancel
Clicking on the Cancel button discards any unsaved data. The following message displays:

“Do you want to cancel? Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes; the window remains open.
- Click on the No button to leave the window open without discarding the unsaved changes.
Clicking on the Close button closes the Case Summary window and displays the Family Services Stage window. If all of the changes have not been saved prior to clicking on the Close button, the following message displays:

“Do you want to exit?
Unsaved data and/or narrative(s) will be lost.”

- Click on the Yes button to discard the unsaved changes. The Case Summary window closes and the FSS window displays.
- Click on the No button to return to the Case Summary window with the unsaved changes displayed.

Changing a Stage Type
There are times when one type of FSS stage may need to be changed to a different type. For example, an FSS may begin as an Out of Town Inquiry (OTI) and the worker subsequently determines that the family requires services. The stage might then be changed to an FSS/CWS to provide the worker with the ability to record any assessment and service planning information. Only the Case Manager can change an FSS stage type and only the following non-child welfare stage types can be changed:

- Out of Town Inquiry (OTI)
- Court Ordered Investigation (COI)
- Interstate Compact for the Placement of Children (ICPC)
- Advocates Preventive Only (ADVPO) (NYC only)

These FSS types can be changed to any of the types listed or to the CWS type. A CCR type is initiated when a child is freed for adoption; therefore, no stage can ever be manually changed to CCR.

FSS stages (except CCR and CWS) in agency A66 (NYC) can be changed to the ADVPO type. Only a Case Manager in A66 can change an ADVPO type to a CWS type.

The Case Manager selects the stage to be changed and clicks on the drop-down menu in the Stage Type field. S/he selects a new stage type from the resulting list and clicks on the Save button. This change does not need to be submitted for approval. When a stage is changed to a CWS type and saved, the FASP, Service Plan Review and Key Dates are enabled on the FSS window. After saving, the following Alert To-Do is sent to all workers with a role in the FSS stage:

“The stage type for FSS stage # <Stage ID> has been changed from <Type> to <Type>.”

A system-generated event with a status of COMP is recorded on the Event List stating:

“FSS Stage ID <Stage ID> has had the type changed from <Type> to <Type>.”
Step-by-Step: Changing an FSS Stage Type

1. On the Case Summary window, select the stage you wish to change in the Stage Information grid.

2. In the Stage Type field, click on the drop-down arrow and select the desired stage type from the resulting list. The drop-down arrow only displays for the Case Manager. The Save and Cancel buttons enable.

3. Click on the Save button.

Stage Closing Process
Only the Case Planner or the Case Manager may close an FSS. If the Case Planner or Case Manager is submitting an FSS/OTTI, FSS/COI, FSS/ADVPO or FSS/ICPC stage for closure, the closure can be submitted without any further work or checks by the system. If the Case Planner or Case Manager is submitting an FSS/CWS or FSS/CCR for closure, CONNECTIONS determines whether a Plan Amendment with an “ending or discharge” type exists for this stage, or if there is a FASP for this stage currently in Pending status or approved within the last 30 days. If one of these criteria exists, the system proceeds with the stage closure.

Plan Amendment Ending or Discharge types include the following:
- Preventive Services Ended
- Child Discharged to Home, Relative or Other Caretaker
- Adolescent Discharged to Independent Living
- Child Discharged to Adult Residential Care
- Child Discharged to Adoption
- Child Returned Home from Non-LDSS Placement
- Case Closed to CPS

To close a stage, the Case Planner or Case Manager selects the desired stage from the Stage Information grid and clicks on the drop-down arrow for the Reason Stage Closed field. The desired closure reason is then selected from the resulting list. S/he then clicks on the Submit button to submit the stage closure to the appropriate person(s) for approval.

If the Case Planner initiates the stage closure, s/he submits it to his/her Unit Approver and Case Manager for approval.

If the Case Manager initiates the stage closure, s/he submits it to his/her Unit Approver for approval.

The Adoption Finalized-with Subsidy and Adoption Finalized-without Subsidy Closure Reasons will not display on the Closure Reason menu on the Case Summary window unless the Finalize Adoption window has been completed and saved.

If you completed and saved the Finalize Adoption window, the Closure Reason field pre-fills appropriately based on whether you responded “Yes” or “No” to the Adoption Subsidy question.
The Stage Closure Question Window

In an FSS/CWS or FSS/CCR, if there is no Plan Amendment with an “ending or discharge” type, or there is no FASP currently in a Pending status or approved within the last 30 days, the Stage Closure Question window displays.

When first displayed, the Stage Closure Question window contains a yes/no question asking the Case Planner or Case Manager if s/he would like to stop the stage closure process and complete the Plan Amendment. S/he must indicate, by selecting either the Yes or the No button, whether s/he would like to complete a Plan Amendment or FASP prior to closing this stage. Clicking on the Yes button closes the window and the Case Summary window displays. After closing the Case Summary window, the Family Assessment and Service Plan tab may be selected and the required work can be completed.

If the No button is selected, a Narrative field displays, directing the Case Planner or Case Manager to describe the level of achievement for outcomes essential to the child(ren)’s safety, permanency and well-being. This field holds a maximum of 3,000 characters and is required if the No button is selected.

Once comments are recorded in the Narrative field, the OK button enables. Click on the OK button to allow the closure action to proceed.

Closing an FSS stage also closes the corresponding case if the FSS is the only open stage in the case, other than an ARI stage. The case cannot be closed if there is an open FSI, FSS, CPS Intake or CPS Investigation. When closing the FSS would result in closing the case, the following message displays:

“Closing this stage will close the case. Do you wish to proceed?”

- Clicking on the Yes button closes the FSS and the case.
- Clicking on the No button cancels the closure action and displays the Case Summary window.

The Stage Closure Question should only be used as an alternative to completing a Plan Amendment or FASP under specific circumstances. Refer to your supervisor regarding your agency’s policy.
Step-by-Step:
Closing an FSS Stage Without a Completed Plan Amendment

1. From the Case Summary window, select the stage you wish to close from the Stage Information grid.

2. Click on the drop-down arrow for the Reason Stage Closed field and select from the resulting list.

3. Click on the Submit button.
   The Stage Closure Question window displays.

4. On the Stage Closure Question window, click on the No button.
   The narrative field highlights in yellow, indicating that comments are required.

5. Record comments in the Narrative field.

6. Click on the OK button.
   The following message displays:
   “Closing this stage will close the case. Do you wish to continue?”

7. Click on the Yes button.
   The following message displays:
   “This action will close this window. Do you wish to continue?”

8. Click on the Yes button.
   The To-Do Detail window displays with the name of the appropriate Approver.

9. Click on the Save button.
   The Assigned Workload displays.
Approvals

Once all of the submission criteria are met, an Approval Task To-Do is created. The Case Planner saves this Task To-Do and the FSS stage is submitted to the Case Manager and the Case Planner’s Unit Approver for review and approval. The Case Manager and Unit Approver are both notified of the submission by a Task To-Do on the Staff To-Do List. The Unit Approver navigates from the Task To-Do to the Case Summary window to review the information recorded there. After reviewing the closure information, s/he cancels out of the Case Summary window and the Approval Status window displays. From the Approval Status window, the Unit Approver selects his/her name and clicks on the Approve button. The following message displays:

“Approval completion will freeze Events. Do you wish to add another approver?”

If no other approver is needed, the Unit Approver clicks on the No button and then the Save button on the Approval Status window. If this FSS stage was one in which the Stage Closure Question was required and answered, the following message displays:

“The Closure Question has been Answered.”

The Unit Approver clicks on the OK button on this message window and the response recorded for the Closure Question displays. After clicking on the OK button, the Case Summary window displays.

The Case Manager follows the same steps to approve the FSS. The Case Manager can only approve the FSS after the Unit Approver (and any other approvers) has completed the approval process. If the Case Planner is initiating the FSS closure, s/he must submit the closure to his/her Unit Approver. When the Case Planner clicks on the Submit button on the Case Summary window, a Task To-Do is generated to both the Case Planner’s Unit Approver and the Case Manager. The Case Manager cannot approve the closure until the Case Planner’s Unit Approver does so.

Once the approval is complete, the following Alert To-Do displays on the Case Planner’s Staff To-Do List:

“Approval Complete! Events have been frozen.”

CONNECTIONS notifies WMS that the FSS stage is closed; WMS updates the codes to reflect the stage closure. Although the WMS codes are updated, the worker must also close the case in WMS separately.

If someone other than the Case Manager or Unit Approver attempts to approve an FSS stage closure, s/he receives a message “Case Manager/Supervisor Approval is needed” and the To-Do Detail window displays the appropriate person.

If the FSS stage being submitted for closure involves a child who is in the custody of OCFS and has been placed in a Voluntary Agency, the Case Planner’s submission is first directed to the Division of Rehabilitative Services (DRS) worker assigned to the stage, then to the Case Manager of the FSS.

Workers are not allowed to record progress notes for a stage when an approval for a stage closure is pending. Workers may only enter progress notes if they first invalidate the pending approval.

All PPGs and Program Choices in the stage are end-dated when the FSS stage closure is approved.
Glossary

30-Day Family Permanency Conference

*Elevated Risk:* The purpose of this conference is to evaluate the progress made on the initial Service Plan to assess whether the family’s crisis has been resolved, and whether the risk to the child has decreased or has been alleviated. This conference serves to refine the service plan or to evaluate the need for placement, should the crisis have escalated despite service provision. This conference is held 30 – 35 days after the 72-Hour Elevated Risk Conference.

*Post-Removal:* The purpose of this conference is to share updated information, follow up on the Service Plan developed at the 72-Hour conference, discuss any need for additional services or change in services, discuss the child’s adjustment to placement, update the visiting plan, discuss newly identified kinship resources, and begin permanency planning. It is held 30 – 35 days after the protective removal.

40-Day Child Protective manager Child Safety Review (ACS cases only)

The purpose of this conference is:

- for the Child Protective Manager (CPM) to obtain first-hand information about the family and to provide guidance and support on the case;
- to ensure that the children are safe;
- to verify that all necessary information has been obtained in preparation for the 45-Day Family Services Planning Conference;
- to review the Family Services Preliminary Assessment.

This conference is held within 40 days of the case assignment to the Family Services Unit at ACS Division of Child Protection (DCP).

45-Day Child Protective Child Safety Review (ACS cases only)

The purpose of this conference is to:

- create and strengthen partnerships among all family members, the FS Team and other service providers;
- ensure that expectations and responsibilities of service providers, family members and the FS Team are clear and being carried out to ensure the child’s safety;
- develop a comprehensive service plan that meets the family’s needs;
- obtain family members’ signatures on the Family Services Planning Conference Agreement.

This conference is held within 45 days of the case assignment to the Family Services Unit at ACS Division of Child Protection (DCP).
<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-Month Service Plan Review</td>
<td>The purpose of this conference is to review the progress toward reunification or other permanency plan, verify the safety and well-being of the child in foster care, review past service plans, identify critical concerns for immediate action and develop a service plan for the future.</td>
</tr>
</tbody>
</table>
| 72-Hour Child Safety        | *Elevated Risk:* The purpose of this conference is to share information, discuss risk factors and create a community-based service plan that will keep children safe at home. It is held within three (3) days of a worker’s assessment that risk to a child has increased.  
*Post-Removal:* The purpose of this conference is to share information; discuss safety, visiting and educational issues; and identify prospective kinship resources and potential service providers. It is held within three (3) to five (5) business days after a protective removal has occurred. |
| 90-Day Service Plan Review  | The purpose of this conference is to review the progress toward reunification or other permanency plan, verify the safety and well-being of the child in foster care, review past service plans, identify critical concerns for immediate action and develop a service plan for the future. |
| Access                      | This term refers to a worker’s ability to maintain or view information in CONNECTIONS.                  |
| Address Validation          | Address validation is a computer software application that interfaces with CONNECTIONS to verify addresses and format them according to U.S. Postal Service standards. All addresses recorded in CONNECTIONS must be run through the address validation process. |
| Adoption Album              | The Adoption Album is designed to keep a history of a child’s photo listing, from the child’s legally freed date to the point of adoption finalization or removal from the album at age 21. The New York State Adoption Service (NYSAS) administers and supervises the child photo listing process, in which children are published in the Adoption Album. *(See also “New York State Adoption Service.”)* |
| Adoption and Safe Families Act| The Adoption and Safe Families Act (ASFA) is a federal law that introduced new expectations in case practice and reemphasized the themes of safety and permanency for children in the Child Welfare system. New York State revised its statute to conform to the federal requirements. |
Adoption Monitoring System (AMS)  The Adoption Monitoring System (AMS) uses information recorded in CCRS to track a child’s movement and milestones through the adoption track, as well as identify delays toward permanency. Individual and aggregate reports are produced in this system.

Advocates Preventive Only  This is a specific FSI or FSS type that is applicable only for Administration of Children’s Services (ACS) cases in New York City. The Advocates Preventive Only (ADVPO) type is used exclusively for Family Services Stages in New York City when ACS is the Case Manager for a preventive services case and the Voluntary Agency that will be directly providing only preventive services to the family is exempt from the responsibility of recording the FASP and progress notes online, in accordance with the conditions of the Advocates Preventive lawsuit settlement.

ADVPO  See “Advocates Preventive Only.”

Approved FASP  Completed Family Assessment and Service Plans (FASPs) must be submitted for approval. When a FASP has been approved by the LDSS Case Manager (or the Case Manager’s supervisor, if the Case Manager is also the Case Planner), CONNECTIONS generates a navigable event on the Event List for the case. Approved FASPs are read-only.

ASFA  See “Adoption and Safe Families Act.”

Assessment Analysis  Assessment Analysis is the process of analyzing and documenting the inter-relationships of relevant factors and influences in a family services case that leads to the identification of needed changes in behavior, underlying conditions and home environment that will facilitate the achievement of safety, permanency and well-being for the child(ren). The Assessment Analysis is completed in the FASP by the Case Planner/Case Manager and integrates the information documented in all of the other assessment components.

Assignee  An Assignee is an individual who assigns his/her system access rights to another person (who is known as the Designee).

Associated Caseworker  When a Caseworker is Associated to a child, that Caseworker is responsible for completing Foster Care Issues documentation and Child Scale information in the FASP, to the exclusion of all other Caseworkers assigned to the FSS. Associating a Caseworker does not prevent other workers from working with that child or completing other parts of the FASP for that child in the overall Service Plan. The Case Planner can always complete Foster Care Issues documentation and Child Scale information for any child, regardless of whether or not a Caseworker has been Associated to the child.
Caseworkers can Associate themselves to any child currently not Associated to another Caseworker, and may Un-Associate themselves from any child at any time. In addition, Case Planners may Associate or Un-Associate any Caseworker to any child. CONNECTIONS does not retain any historical information regarding Caseworkers who were previously Associated to one or more children.

The **Associate Worker** tab on the *Tracked Children Detail* window is used to Associate Caseworkers to one or more specific children in the current FSS/CWS or FSS/CCR.

**Author**

The author is the person who recorded a particular progress note. In circumstances where a worker is authorized to record a progress note on behalf of another worker (e.g., a clerical staff person with the ENTER PROG NOTE Business Function recording a progress note on behalf of a Caseworker), the Author refers to the worker on whose behalf the note was recorded; in this situation, the worker who actually recorded the note is referred to as the Entered By worker. *(See also “Entered By.”)*

**BCFI**

See “Behavioral Concerns and Family Issues.”

**Behavioral Concerns and Family Issues**

The Behavioral Concerns and Family Issues (BCFI) is a non-CPS intake screening tool used to document any requested services, immediate or long-term service needs and appropriate emergency or crisis-related referrals. It is recorded as part of a Family Services Intake (FSI) that did not originate from a CPS case. The BCFI is not required for Advocates-Preventive Only (ADVPO) stages. *(See also “Family Services Intake.”)*

**BFP**

See “Business Function Profile.”

**Business Function**

Each worker is assigned Business Functions that provide system access to view or maintain system information. A Business Function is designed to allow a worker to perform a particular function or group of functions. Each Business Function is comprised of one or more Security Attributes that determine access; state OCFS staff create Business Functions from these Security Attributes, then Security Coordinators at the local level grant access by assigning Business Functions to staff members, in accordance with Guidelines issued by OCFS.

**Business Function Profile**

Each CONNECTIONS user has a Business Function Profile (BFP), which is comprised of all of the Business Functions assigned to that individual.
Case Initiation Date

The Case Initiation Date is the first day of a Family Services Stage. The CID is the earliest of the following events:

- Date of CPS indication
  (The approval date of the CPS Investigation Conclusion when a report is indicated)
- Date of application for services
  (The date an application for services that has been signed by a parent/client was received by the Local District)
- Date of placement
  (The date on which a child is placed in foster care)
- Date of court order
  (The date of the court order for preventive services, commitment of care and custody, or custody and guardianship to the LDSS commissioner for placement).

Case Manager

The Case Manager is a programmatic and regulatory role, as well as one of the system roles for a Family Services Stage (FSS). Every FSS has a single Case Manager, who must be Local District staff. The Case Manager provides oversight of the case (including authorizing services and approving eligibility determination) and must approve the Family Assessment and Service Plan (FASP). In instances where Local Districts are providing services directly, the Case Planner and the Case Manager may be the same individual. Under these circumstances, the Case Manager’s supervisor/Unit Approver must approve the FASP.

Case Name

The Case Name is the name by which the case is identified in CONNECTIONS. Cases are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. In an FSS/CCR stage, the Line 1 person is the solitary child in the CCR. (A CCR is a case for a child who has been freed for adoption. See also “Child Case Record.”)

Case Number

Each case in CONNECTIONS is identified by a unique, system-generated number.

Case Planner

The Case Planner is a programmatic and regulatory role, as well as one of the system roles for a Family Services Stage (FSS). The Case Planner, who may be either Local District or Voluntary Agency staff, is responsible for the coordination of work with a family and for communicating with Caseworkers who may be assigned a role in the case. The Case Planner is also the author of the FASP and is responsible for the entirety of its contents and the timeliness of its submission for approval. There can be only one Case Planner in an FSS.
Caseworker

The Caseworker is a programmatic and regulatory role, as well as one of the system roles for a Family Services Stage (FSS). One or more Caseworkers (who may be either Local District or Voluntary Agency workers) may be assigned to an FSS. Caseworkers who are assigned to an FSS complete work within the FASP, such as the Parent/Caretaker Scales, Family Scales, Child Scales and/or Foster Care Issues (for children in foster care). Caseworkers also contribute to other narrative questions in the FASP.

A Caseworker may also be responsible for a specific child, multiple children or no children in the FSS. Caseworkers may also be Associated to a specific child or children in the FSS; if so, those Caseworkers can complete specific work within the FASP regarding the child(ren) to whom they are Associated. Multiple Caseworkers can be assigned to an FSS. (See also “Associated Caseworker.”)

CCR

See “Child Case Record.”

CCRS

See “Child Care Review Service.”

Child Care Review Service

The Child Care Review Service (CCRS) records the tracking of children in receipt of Child Welfare services (children in receipt of preventive, protective or foster care services), additional child demographics and case information, and tracks all child movements (placements), legal and adoption activities, and assessment and service plans for tracked children. It is also the source of data for the Adoption Monitoring System (AMS).

Child Case Record

A Child Case Record (CCR) is created in CONNECTIONS when a child is legally freed for adoption. This record is separate from the FSS/CWS stage in which the child had been involved prior to being legally freed for adoption. Each FSS/CCR contains only one child.

Child Welfare Services

The FSS type of Child Welfare Services (CWS) is the most commonly used type of Family Services Stage. It includes child welfare cases that provide adoption, foster care, preventive and/or protective services.

CID

See “Case Initiation Date.”

CIN

Each individual involved in a WMS services case is assigned a unique, WMS-generated Client Identification Number (CIN).

COI

See “Court-Ordered Investigation.”
**Comprehensive FASP**
The Comprehensive FASP is a type of Family Assessment and Service Plan; it must be completed by the Case Planner and approved by the Case Manager within 90 days of the Case Initiation Date. *(See also “Initial FASP” and “Reassessment FASP.”)*

**Court Extension Review (ACS cases only)**
This conference is held with family members, the FS Team, service providers and the Child Protective Manager (CPM). Its purpose is to assess the status of the case and to determine case direction—extension, closing or transfer. This conference is conducted four (4) months before Court-Ordered Supervision expires.

**Court-Ordered Investigation**
Court-Ordered Investigation (COI) is a specific FSI or FSS type that is used for a case that was initiated by a court-ordered investigation, rather than by a CPS Investigation.

**CPS Caseworker**
CPS caseworkers are responsible for responding to reports of child abuse and maltreatment, assessing safety and investigating allegations. A CPS caseworker may be assigned the role of CPS Worker/Monitor when the FSS stage is opened to provide services to the family. *(See also “CPS Worker/Monitor”)* This term should *not* be confused with the CONNECTIONS role of Caseworker for a Family Services Stage. *(See also “Caseworker.”)*

**CPS Worker/Monitor**
The CPS Worker/Monitor is a programmatic and regulatory role, as well as one of the system roles for a Family Services Stage (FSS). The CPS Worker/Monitor is responsible for overseeing case activities when:

- the case was opened from an Indicated CPS investigation;
  
  —AND—

- the CPS worker is *not* the primary service provider for the case;
  
  —AND—

- ongoing safety and/or risk concerns have been identified.
Critical Case Planning

The purpose of the Critical Case Planning conference is to:

- evaluate a voluntary placement request for foster care;
- evaluate an Early Permanency Planning Case request for a terminally ill parent;
- discuss the placement and service needs of a destitute child.

This conference is held after a family has had a 72-Hour Child Safety Conference and a 30-Day Family Permanency Conference, yet needs additional service planning prior to transfer to a preventive agency (for an Elevated Risk case) or prior to the 90-Day or 6-Month Service Plan Review (for foster care placement cases).

CWS

See “Child Welfare Services.”

Cycle

The cycle is the service planning timeframe in which the Family Assessment and Service Plan (FASP) is due.

Date of Indication

The Date of Indication reflects the date on which the CPS Investigation Conclusion was approved for an Indicated child protective report; this date may correspond to the FSS Case Initiation Date for open, Indicated CPS stages. *(See also “Case Initiation Date.”)*

Date of Placement

The Date of Placement is the date on which a child is placed in foster care, or when the child has been placed in an alternate family setting with LDSS supervision but without LDSS custody. This date *may also* correspond to the FSS Case Initiation Date under specific circumstances. *(See also “Case Initiation Date.”)*

Decision Summary

This tab on the Family Services Intake window is used to record a recommendation regarding whether the FSI should be progressed to a Family Services Stage (FSS) or closed with no further action.

Discharge Resource

The Discharge Resource is the non-parent relative or non-relative to whom a child in foster care is planned to be discharged.

Due Date for the FASP

The due date is the date the FASP is due, in accordance with New York State regulations. This date is based upon the Case Initiation Date (CID).
<table>
<thead>
<tr>
<th>Entered By</th>
<th>The Entered By worker is the person who recorded the progress note; this information is system-generated, based on the log-on ID of the person who is signed onto CONNECTIONS. In circumstances where a worker is authorized to record a progress note on behalf of another worker (e.g., a clerical staff person with the ENTER PROG NOTE Business Function recording a progress note on behalf of a Caseworker), the Entered By worker is the individual who actually recorded the note; the worker on whose behalf the note was recorded is referred to as the Author. (See also “Author.”)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entry Date</td>
<td>This system-generated date identifies the date a progress note was recorded in CONNECTIONS.</td>
</tr>
<tr>
<td>Event</td>
<td>An event is a specific activity that is documented in the case record. Most events are navigable from the Event List. (See also “Event List.”)</td>
</tr>
<tr>
<td>Event Date</td>
<td>The Event Date reflects the date a particular activity occurred.</td>
</tr>
<tr>
<td>Event List</td>
<td>The Event List contains a list of CONNECTIONS tasks and case/stage-related activities that have been completed or are in progress. Events are recorded on the list, for example, when a worker receives a new assignment or when the Case Manager approves or rejects a submitted FASP. Events are recorded automatically (“system-generated”) by CONNECTIONS. There are two types of Event Lists in CONNECTIONS—one for a stage and one for a case. Since each type of Event List is specific to the stage (or case) with which it is associated, you need to select a stage from the Assigned Workload (or access a case from a Case Search) in order to open its associated Event List.</td>
</tr>
<tr>
<td>Event Time</td>
<td>In Progress Notes, the Event Time reflects the time a specific contact occurred.</td>
</tr>
<tr>
<td>Facility ID</td>
<td>Every facility recorded in CONNECTIONS is identified by a system-generated numeric code identifying that specific facility. When this information displays in the FSS, it refers to the facility where a particular child is placed.</td>
</tr>
<tr>
<td>Family Assessment and Service Plan</td>
<td>The Family Assessment and Service Plan (FASP) contains the electronic documentation of assessments and service planning for the case. FASPs are classified by due date and purpose. Four types of FASP exist: Initial, Comprehensive, Reassessment and Plan Amendment. (See also “Initial FASP,” “Comprehensive FASP,” “Reassessment FASP” and “Plan Amendment.”)</td>
</tr>
</tbody>
</table>
A Family Services Intake (FSI) is the initiation of a child welfare service. Every Family Services Stage (FSS) in CONNECTIONS progresses from a Family Services Intake (FSI). For CPS cases, the FSI serves as a “bridge” between the CPS Investigation stage and the FSS; certain information recorded in the CPS Investigation carries forward into the FSI. For non-CPS cases, the FSI is recorded by the Local District or Voluntary Agency that received the services inquiry; in these cases, the Behavioral Concerns and Family Issues (BCFI) component needs to be completed before the FSI can be considered for progression to an FSS. The BCFI is completed only for FSIs that do not originate from a CPS case. (See also “Behavioral Concerns and Family Issues.”)

Once an FSI is created, it can be accepted or rejected by the Local District, closed by the Local District or Voluntary Agency, or progressed to an FSS. Once an FSI is closed (whether or not its closure results in the opening of an FSS), all of the information it contains is “frozen” and cannot be modified in the FSI. Information recorded in the FSI is carried forward into the FSS upon stage progression.

Five types of FSI exist in CONNECTIONS:

- **ADVPO**
  The Advocates Preventive Only (ADVPO) type is used exclusively for Family Services Intakes in New York City when ACS is the Case Manager for a preventive services case and the Voluntary Agency that will be directly providing only preventive services to the family is exempt from the responsibility of recording the FASP and progress notes online, in accordance with the conditions of the Advocates Preventive lawsuit settlement.

- **COI**
  The Court-Ordered Investigation (COI) type is used for cases that were initiated by a court-ordered investigation, but were not received as a result of a registered child protective report.

- **CWS**
  The Child Welfare Services (CWS) type is the most commonly used type of FSS. It includes child welfare cases that provide adoption, foster care, preventive and/or protective services.

- **ICPC**
  The Interstate Compact for the Placement of Children (ICPC) type is used for cases where the Local District or Voluntary Agency is receiving a child from another state. All children who were in foster care in New York State and are being placed via ICPC in another state already have an open FSS/CWS in CONNECTIONS and will continue to be tracked in that stage.
• **OTI**

There are two types of Out-of-Town Inquiry (OTI): *out-of-state* and *county-to-county*. An *out-of-state* OTI is a written request for assistance or follow-up on a specific matter that usually involves a family (or family members) now residing in New York State. A *county-to-county* OTI is a request made by one Local District to another Local District for assistance or follow-up on a specific matter that involves a family (or family members) residing outside the requesting district. The request usually requires an action that cannot be completed by the requesting district.

**Family Services Stage**

The Family Services Stage (FSS) is the CONNECTIONS stage for the authorization of services. The FSS is the shell that contains all of the documentation for providing Child Welfare services. Six types of FSS exist in CONNECTIONS:

- ADVPO
- CWS
- CCR
- ICPC
- COI
- OTI

Five of these types (all except CCR) are described under “Family Services Intake” above; for information about the CCR type, see “Child Case Record.”

**Family Strengths, Needs and Risk Scales**

This set of scales in the FASP is used to assess a family’s strengths, needs and risk of maltreatment or abuse.

**FASP**

See “Family Assessment and Service Plan.”

**Final Discharge Conference**

This is a collaborative team meeting designed to give all those involved with a child and his/her family an opportunity to evaluate the trial discharge and arrive at a safe, supported and consensus-based decision to:

- finalize the discharge;
- extend the trial discharge period; or
- end the trial discharge period and return the child to foster care.

This conference is held between 60 and 75 days after the beginning of a 90-Day Trial Discharge period.

**Foster Care**

Foster Care refers to any situation in which a child has been legally removed from his/her parent/guardian and placed in the care and custody (or custody and guardianship) of the local Commissioner of Social Services.
FSS

See “Family Services Stage.”

FSS/CWS

See “Family Services Stage” and “Child Welfare Services.”

Functional Approval

Functional approval refers to programmatic case management oversight based on a worker’s functional role versus system role in CONNECTIONS. A functional role dictates the programmatic roles and responsibilities that a worker has outside of the CONNECTIONS system. (See also System Approval on page 19.)

Household

A Household is defined by physical residence. A maximum of three (3) Households, defined by three (3) separate addresses, may be listed in the FASP. Family Strengths, Needs and Risk Scales may be assessed for each Household listed in the FASP. One Household is created for each primary residence in the Stage Composition. If the FSS/CWS has a Program Choice of “Protective,” all persons comprising the RAP Family Unit must be listed in the Stage Composition and defined by Household in the FASP. (See also “RAP Family Unit” and “Primary Household.”)

I&R

See “Information and Referral.”

ICPC

See “Interstate Compact for the Placement of Children.”

Implied Role

A worker who is assigned to a case in the same or another agency has an implied role in another case if there is a person in common between the cases. Workers with implied roles have view-only access to information in the other case, since it may be pertinent to their case. Workers in Voluntary Agencies cannot access information in CPS Intake or Investigation stages.

In Process FASP

An In Process FASP is a Family Assessment and Service Plan that has been launched and in which some information has been recorded and saved, but which has not yet been submitted for approval.

In Sequence FASP

An In Sequence FASP is a Family Assessment and Service Plan that was approved in the defined order of assessment cycles required by OCFS regulation 18 NYCRR §428 (i.e., Initial, Comprehensive, Reassessment) by the prescribed due date.

Independent Living

Independent Living is a Permanency Planning Goal (PPG) for an adolescent, signifying that the child’s goal is to be able to live independently, once s/he is discharged from foster care as an adult.
**Information and Referral (I&R)**
Information and Referral is an FSI feature used to document requests for information, services and/or service referrals. No demographic or other case information is recorded in the system.

**Initial FASP**
The Initial FASP is a type of Family Assessment and Service Plan; it must be completed by the Case Planner and approved by the Case Manager within 30 days of the Case Initiation Date, except when the indication of the CPS Investigation determines the CID. In those cases, the Initial FASP is due seven (7) days after the approval of the Investigation Conclusion. *(See also “Comprehensive FASP,” “Reassessment FASP” and “Case Initiation Date.”)*

**Intake Source**
The Intake Source refers to the individual contacting the Local District or Voluntary Agency to indicate that a family may require services. This person could be a CPS caseworker, some other concerned individual or a member of the family/household. This applies *only* to a Family Services Intake (FSI).

**Interstate Compact for the Placement of Children**
The Interstate Compact for the Placement of Children (ICPC) is the process for monitoring/tracking the placement of children into New York State from other states, and from New York State into other states. Standards of safety and service are established in ICPC. The ICPC type of FSI or FSS is used for cases where the Local District or Voluntary Agency is *receiving* a child from another state. All children who were in foster care in New York State and are being placed via ICPC in another state already have an open FSS/CWS in CONNECTIONS and will continue to be tracked in that stage.

**Key Dates**
This is a display of dates that caseworkers must be aware of for critical case processing.

**Launching a FASP**
“Launching” refers to the *first* time a specific FASP (Initial, Comprehensive, Reassessment or Plan Amendment) is opened and saved.

**LDSS**
See “*Local Social Services District.*”

**Level of Placement**
Level of Placement refers to the type of care provided and the restrictive level of the placement setting in which a foster child is placed. From the least restrictive level to highest, they are: foster home, agency-operated boarding home, group home, group residence and institution.

**Link FSI**
This option provides the ability to link the current FSI with any previous case information to reuse the same Case ID number.
<table>
<thead>
<tr>
<th><strong>Local District</strong></th>
<th>See “Local Social Services District.”</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Local Social Services District</strong></td>
<td>This is the local government agency that provides and oversees child welfare services (protective, foster care, preventive and adoption) and other services to children and families within a specific geographical area. It also provides other programs, such as Temporary Assistance, Medicaid and Food Stamps.</td>
</tr>
<tr>
<td><strong>Maintain</strong></td>
<td>Maintain capability in CONNECTIONS refers to the process of adding, modifying or deleting information.</td>
</tr>
<tr>
<td><strong>Narrative</strong></td>
<td>Several CONNECTIONS components provide narratives in which workers can record information regarding a specific area of the case record.</td>
</tr>
<tr>
<td><strong>National Child Abuse and Neglect Data System</strong></td>
<td>The National Child Abuse and Neglect Data System (NCANDS) is the primary source of national information about abused and neglected children known to public child protective services agencies. Specific data elements recorded in CONNECTIONS are sent to NCANDS as part of federal reporting requirements.</td>
</tr>
<tr>
<td><strong>NCANDS</strong></td>
<td>See “National Child Abuse and Neglect Data System.”</td>
</tr>
<tr>
<td><strong>New York State Adoption Service</strong></td>
<td>The New York State Adoption Service (NYSAS) administers the Family Adoption Registry of prospective adoptive parents who are interested in adopting a child from the Adoption Album. NYSAS reviews adoption subsidy requests for maintenance and medical coverage, based on the special needs of adoptive children. NYSAS also maintains a registry of putative fathers and children born out-of-wedlock. (See also “Adoption Album.”)</td>
</tr>
<tr>
<td><strong>Non-LDSS Custody</strong></td>
<td>Non-LDSS Custody refers to cases in which children are placed by a court in the care of a relative or other resource, but for whom no legal relationship is established with the local Commissioner of Social Services. The Local District provides supervision and services for these cases. “Non-LDSS Custody” also refers to cases in which a child(ren) is not living with his/her parent(s), for which no court action has been initiated, but for which the Local District provides services to the child(ren) and his/her caretaker(s).</td>
</tr>
<tr>
<td><strong>NYSAS</strong></td>
<td>See “New York State Adoption Service.”</td>
</tr>
<tr>
<td><strong>Organizational Hierarchy</strong></td>
<td>CONNECTIONS system access is provided on a need-to-know basis. Agencies have the option of establishing Agency Access that is determined by a person’s or unit’s position within an established organizational structure.</td>
</tr>
</tbody>
</table>
**Other Participant**
An “Other Participant” is an individual, other than a family member listed in the Case Composition, who participated in the case contact.

**OTI**
See “Out-of-Town Inquiry.”

**Outcome and Activity Block**
An Outcome and Activity block is a component of the Service Plan that identifies a problem or concern, a desired outcome, strengths to be used in addressing the problem/concern, and activities that the family and worker will engage in to achieve the outcome.

**Out-of-Town Inquiry**
There are two types of Out-of-Town Inquiry (OTI): *out-of-state* and *county-to-county*. An *out-of-state* OTI is a written request for assistance or follow-up on a specific matter that usually involves a family (or family members) now residing in New York State. A *county-to-county* OTI is a request made by one Local District to another Local District for assistance or follow-up on a specific matter that involves a family (or family members) residing outside the requesting district. The request usually requires an action that cannot be completed by the requesting district.

**Participant**
For purposes of casework contacts, a Participant is a family member (who is listed in the Case Composition) who was present during a casework contact.

**Pending FASP**
A Pending FASP is a Family Assessment and Service Plan that has been submitted by the Case Planner for Case Manager approval, but has not yet been approved.

**Permanency**
Permanency refers to a permanent living arrangement that provides a safe, caring and nurturing environment for a child to grow up in. Safety, permanency and well-being for children and families are the primary goals of the Child Welfare system in New York State.

**Permanency Hearing Court Due Date**
This term refers to the date on which the permanency hearing is due to be held in Family Court and is based on the date of the permanency hearing that is due next. This is one of the dates displayed on the Key Dates tab in the FSS. (See also “Key Dates” and “Adoption and Safe Families Act.”)

**Permanency Hearing Petition File Due Date**
This term refers to the date on which the petition for a permanency hearing is due to be filed in Family Court. This is one of the dates displayed on the Key Dates tab in the FSS. (See also “Key Dates” and “Adoption and Safe Families Act.”)
Permanency Planning Goal

The Permanency Planning Goal (PPG) is the goal of service provision that describes the most desirable and realistic permanent living arrangement to be secured for each child receiving services.

Person Demographics

The Person Demographics tab in the FSI is used to record/modify demographic information about the individuals/family requesting services. This tab supports address and phone updates, as well as the addition of individuals in the FSS (or, in FSI stages, the addition or removal of individuals) and case maintenance.

Plan Amendment

The Plan Amendment is a specific classification of Family Assessment and Service Plan (FASP) that is completed not by a prescribed schedule, but upon a status change in the case.

Post Court Extension Review (ACS cases only)

This conference is held with family members, the FS Team, service providers and the Child Protective Manager (CPM). Its purpose is to assess the status of the case and to determine case direction—extension, closing or transfer. This conference is conducted as determined by family court requirements or at the 6-Month Service Plan Review.

PPG

See “Permanency Planning Goal.”

Primary Caretaker (PC)

The Primary Caretaker is an adult (usually the mother) who resides with and is legally responsible for the child(ren). When more than one person who is legally responsible for the child(ren) resides in the household, the biological mother is presumed to be the Primary Caretaker. If the mother does not physically reside with the child(ren), the Primary Caretaker is the adult who resides in the child(ren)'s home and assumes primary responsibility for the care of the child(ren). There can only be one Primary Caretaker.

For children in foster care or alternative placement, the Primary Caretaker refers to a member of the child's family of origin.

Primary Household

This term refers to the residence (address) where the child resides with the Primary Caretaker.

Problem/Concern

A problem or concern is a description of the behavior, the underlying condition that supports the behavior, or the issue or family need that is identified as needing improvement or change, in order to provide for the safety, permanency and well-being for the child(ren). The statement of problem/concern becomes the focus of an Outcome and Activity block. (See also “Outcome and Activity Block.”)
<table>
<thead>
<tr>
<th><strong>Program Choice</strong></th>
<th>Program Choice refers to a classification of services related to the circumstances of the child’s situation and purpose for service provision.</th>
</tr>
</thead>
</table>
| **RAP Family Unit** | For the purposes of the Risk Assessment, the RAP Family Unit consists of all of the following:  
  - All persons listed in the CPS Investigation (report), including but not limited to all persons residing in the child(ren)’s home at the time of the report  
  - Any person who has some child care responsibility or frequent contact with the child(ren) and assumes a caretaker role (e.g., a parent with weekend visitation or a relative who cares for the children daily while the parent(s) work)  
  - Any child who is in foster care or an alternative placement with a Permanency Planning Goal of "Return Home" or "Independent Living"  
  - Any child who has run away or is temporarily in another living situation (e.g., living with relatives, in a youth facility, or in a hospital or residential treatment facility), but who is expected to return home |
| **Reassessment FASP** | The Reassessment FASP is a type of Family Assessment and Service Plan; it must be completed by the Case Planner and approved by the Case Manager within 210 days of the Case Initiation Date (CID) and every six (6) months thereafter. (See also “Initial FASP” and “Comprehensive FASP.”) |
| **Relative/Resource:** Non-LDSS Custody | This term refers to the individual (who may be either a relative or a non-relative resource) in whose custody or guardianship a child was legally placed by virtue of a court order or via an informal placement. In either case, there was no transfer of care and custody (or custody and guardianship) of the child to the local Commissioner of Social Services. |
| **Re-Placement Conference** | The purpose of the Re-Placement Conference is to assess any request concerning the movement of a child to a higher level of care. This conference is conducted when necessary. |
| **Resource ID** | Every resource (e.g., agency, facility, foster home) recorded in CONNECTIONS is issued a unique, system-generated numerical identification number. In a Family Services Stage, this refers to the facility or foster home in which a child is placed while in foster care. |
| **Risk Assessment Profile (RAP)** | The RAP is a research-based (actuarial) assessment tool used to determine the presence of risk factors and predict the likelihood of future abuse and/or maltreatment (or repeat maltreatment). |
Role in a Case

A worker with a role in the case can access all information in the case record. Voluntary Agency workers do not have access to information in CPS Intake or Investigation stages. Roles can be classified into three types:

- **CPS Roles**
  - Primary worker
  - Secondary worker (if applicable)

- **FSS Roles**
  - Case Manager
  - Case Planner
  - Caseworker
  - CPS Worker/Monitor

- **Implied Role**

*(For definitions for each of these roles, see their respective entries in this glossary.)*

Safety Assessment

Safety assessment is a process of information gathering and analysis of selected safety factors that may suggest there is an immediate threat to a child, which, if not controlled or alleviated, will be likely to cause serious harm to the child. This process also documents these factors and the resulting safety decision in the form and manner prescribed by OCFS. Safety Assessments must be completed on all CPS investigations and throughout the life of an FSS/CWS with a Program Choice of “Protective.”

SC

See “Secondary Caretaker.”

Secondary Caretaker

The Secondary Caretaker is:

- an adult who lives in the child(ren)’s home and assumes some responsibility for the care of the child(ren); or
- an adult who does not reside in the child(ren)’s home, but cares for the child(ren) on a regular basis.

Use the following order to identify the Secondary Caretaker:

- If the mother has a spouse or intimate partner who is the subject of the CPS Investigation—whether alleged or confirmed—for a CPS-initiated Family Services Stage, select this person as the Secondary Caretaker.
- If two or more potential candidates exist and one of them is a subject of the CPS Investigation—whether alleged or confirmed—for a CPS-initiated Family Services Stage, select this adult as the Secondary Caretaker.
- In all other situations, select the adult who assumes the most responsibility for the care of the child(ren), either within or outside of the Household Constellation.
Not every Family Services Stage will have a Secondary Caretaker. For children in foster care or alternative placement, the Primary Caretaker refers to a member of the child’s family of origin.

**Service Plan Review**

The Service Plan Review (SPR) is a required process of plan review by key individuals, including families receiving services, the Case Planner and other service providers, and an independent third-party reviewer. SPRs are conducted in conjunction with the Comprehensive and Reassessment FASPs. SPRs are required for foster care cases and encouraged for preventive services cases.

**Services Provided**

This term refers to direct and/or purchased assistance, care or services that were provided since the previous Family Assessment and Service Plan (FASP).

**Source**

See “Intake Source.”

**Split FSI**

CONNECTIONS provides functionality to split an FSI created from a CPS Investigation into two separate intakes.

**Stage Name**

The Stage Name is the name by which the stage is identified in CONNECTIONS. Stages are named after the Line 1 person (typically the mother of the children) in the Stage Composition for the CPS Investigation stage or the Family Services Stage. In an FSS/CCR stage, the Line 1 person is the solitary child in the CCR. (A CCR is a case for a child who has been freed for adoption. See also “Child Case Record.”)

**Stage Progression**

Stage Progression refers to the process that supports the movement from one stage to the next in sequence (e.g., from FSI to FSS).

**System Approval**

System approval refers to approvals within CONNECTIONS from a system processing perspective. System approvals are enforced within CONNECTIONS based on a worker’s system role a worker is assigned within the CONNECTIONS system, e.g. Case Manager, Case Planner, CPS Worker/Monitor, Case Worker. (See also Functional Approval on page 12.)

**Tracked Child**

A Tracked Child is any child in an FSS who has a Permanency Planning Goal (PPG) and an active Program Choice. (See also “Permanency Planning Goal” and “Program Choice.”)
**Trial Discharge Conference**

For children with a goal of reunification, the Trial Discharge Conference is a collaborative team meeting designed to give all those involved with a child and his/her family an opportunity to agree on a safe, supported and consensus-based discharge plan. It is also intended to minimize disruptions by identifying community-based services and providers, as needed, during the trial discharge period. This conference is held at least 30 days before the date on which it is anticipated that the trial discharge, if approved by the Case Manager, would begin.

**Trigger Dates**

*See “Case Initiation Date.”*

**View**

This term refers to the ability to see, inquire or look up (but not modify) information in CONNECTIONS.

**Welfare Management System**

The Welfare Management System (WMS) is the legacy data management system that collects, records and tracks specific information, including case and child demographics, eligibility data, and authorizations for services being provided to children and families.

**WMS**

*See “Welfare Management System.”*
Appendix A:
Family Services Intake (FSI) Appendices
Appendix A1: Requested Services

Adoption Services

Adoption services means assisting a child to secure an adoptive home through: counseling with birth parent or legal guardian concerning surrender of, or legal termination of parental rights with regard to a child; the evaluation of child’s placement needs; pre-placement planning; the recruitment, study and evaluation of interested prospective adoptive parents; counseling for families after placement; supervision of children in adoptive homes until legal adoption; and counseling of adoptive families after legal adoption. [18 NYCRR 421.1(b)]

Adoption is one of several ways to provide legal permanence for children in foster care who are unable to return to the birth parent(s)’s home safely. A Permanency Planning Goal (PPG) of adoption, for children in foster care, provides the broadest legal protection for a life-long parent-child relationship into adulthood and beyond. Adoption services encompass a wide variety of services that determine whether the prospective adoptive parent(s) or prospective adoptive-foster parents are prepared to provide life-long permanency, nurturing and support for the adoptive child without agency supervision, once the adoption is finalized.

After School Programs

District/Agency workers may be requested to assist a parent or legal guardian to secure a safe environment and adult supervision for their child through enrollment in an after school program. After school programs generally cover the hours immediately following the end of the school day up to the end of the parent’s workday. After school programs may also be available year-round, including periods of school breaks/vacations. After school programs may be sponsored by and therefore fall under the auspices of one of the following organizational types: state, county or local government, church or religious groups, private organizations, youth agencies, private non-profit schools, public schools, or for-profit agencies. After school programs are generally structured towards the provision of recreational activities, improvement of child academic skills, provision of cultural/enrichment opportunities or a combination of the above.

Aftercare

Assisting children, youth and families to reduce the likelihood that those children or youth return to either child welfare or juvenile justice placement. Aftercare consists of an array of services, provided and/or arranged for during placement and after placement, designed to reduce lengths of stay in out-of-home settings, reduce the need for re-placement of youth following their return home from out-of-home placement, and increase the long-term positive outcomes for children and families who have experienced out-of-home care.

Services may include, but are not necessarily limited to, the following:

1. Provide and arrange services that help maintain the child/youth safely in returning to the community.
2. Provide and arrange support services that assist the child/youth and family in the return and reintegration of the child/youth with family, home, school and community life.
3. Provide, arrange and evaluate post-residential counseling for the child/youth who has been returned to the community.
4. Provide a range of levels of supervision for the child/youth, such as agency placement programs, and contracted day placement programs that provide home-based supervision services.

(Title XX – SSBG Services Definitions)
**Alcohol Counseling/Treatment**

Alcohol and Other Drug (AOD) Counseling/Treatment programs may include client detoxification, rehabilitation, outpatient services, intensive outpatient services, Therapeutic Communities and/or residential care.

**Assisted Living**

Assisted living program means an entity which is approved to operate pursuant to section 485.6 of OCFS Regulations, and which is established and operated for the purpose of providing long-term care, room, board, housekeeping, personal care, supervision, and providing or arranging for home health services to five or more eligible adults unrelated to the operator. [18 NYCRR 494.2]

**Batterer’s Counseling**

Batterer’s treatment programs provide individual or group counseling to perpetrators of domestic violence. Often times, individuals are ordered by the court to attend such programs. The primary goal of an effective batterer’s treatment program is to end the use of violence by the program participants in their intimate relationships and protect the safety of the victim. Batterer’s treatment programs employ a variety of educational and psychological approaches aimed at increasing the participant’s awareness of violent behaviors; increasing the participant’s acceptance of responsibility of their actions; and replacing violent behaviors and languages with acceptable responses.

**Casework Counseling**

Individual or group face-to-face counseling sessions between the caseworker or person providing specialized rehabilitative services or supportive services and the child and/or family towards a course of action agreed to by the child and/or family as the best method of attaining personal objectives or resolving problems or needs of a social, emotional, developmental or economic nature.

**Case Management Services**

Case Management is defined as the responsibility of the local department of social services to authorize the provision of preventive services, to approve the client eligibility determination according to the criteria of section 423.3 of 18 NYCRR and, to approve in writing, the service plans as defined in Part 428, Standards For Uniform Case Records and Child Service Plans.

**Child Care Services**

Assessing the need for, arranging for, providing, supervising, monitoring and evaluating the provision of child care for less than 24 hours per day when such care is provided by an eligible caregiver operating in compliance with State laws and regulations for child care. Child care services may only be provided to children under 13 years of age except in the following circumstances:

- Children with special needs may receive care up to age 18
- Children under court supervision may receive care until age 18
- Children who attain the maximum age of 12 during the school year may continue to receive child care services, if otherwise eligible, through the end of the school year OR up to age 19 if a full-time student in a secondary school or an equivalent level of vocational or technical training and may reasonably be expected to complete this training before reaching age 19.

(Title XX – SSBG Services Definitions)

**Clinical Services**

The arrangement for clinical services to a child and/or adult family member and defined as assessment, diagnosis, testing, psychotherapy, and specialized therapies provided by a person who has received a master’s degree in social work, a licensed psychologist, a licensed psychiatrist or other recognized therapist in human services. [18 NYCRR 423.2(b)(9)]

Clinical services, as they apply to Alcohol and Other Drug (AOD) treatment programs, refers to all AOD treatment needs, including counseling and therapy, which most likely begin after detox.
Community Advocacy

Community advocacy includes community-based programs designed to protect and advocate for the legal rights of individuals in need. Advocacy services may include, but not be limited to, information and materials; referrals to programs and services for persons with disabilities; services to represent individuals (investigation, mediation negotiation, advice, and representation in administrative and legal proceedings); systems advocacy services (monitoring and commenting on state agency policies and regulations, legislative activities), training for persons with disabilities on their rights and how to advocate for themselves and access state and local services.

Crisis Response Services

Emergency services provided to children or adults in crisis and requiring immediate and/or emergency intervention or assistance in an effort to reduce the risk of serious physical, mental or emotional harm to that individual and/or others.

Day Care Services

Child day care means care for a child on a regular basis provided away from the child's residence for less than 24 hours per day by someone other than the parent, step-parent, guardian or relative within the third degree of consanguinity of the parents or step-parents of such child. A relative within the third degree of consanguinity of the parent or step-parent includes: the grandparents of the child; the great-grandparents of the child; the great-great-grandparents of the child; the aunts and uncles of the child, including the spouses of the aunts and uncles; the great-aunts and great-uncles of the child, including the spouses of the great-aunts and great-uncles; the siblings of the child; and the first cousins of the child, including the spouses of the first cousins.

Child day care does not refer to care provided in:

- a summer day camp, traveling summer day camp or children's overnight camp as defined in the State Sanitary Code;
- a program for school-age children operated solely for the purpose of religious education, sports, classes, lessons or recreation;
- a facility providing day services under an operating certificate issued by the Office;
- a facility providing day treatment under an operating certificate issued by the Office of Mental Health or by the Office of Mental Retardation and Developmental Disabilities; or
- a kindergarten, pre-kindergarten or nursery school for children three years of age or older, or a program for school-age children conducted during non-school hours, operated by a public school district or by a private school or academy which is providing elementary or secondary education or both in accordance with the compulsory education requirements of the Education Law, provided that such kindergarten, pre-kindergarten, nursery school or program is located on the premises or campus where the elementary or secondary education is provided.

[18 NYCRR 413.2]

Day Services

Day services shall mean a program offering a combination of services, including at least social services, psychiatric, psychological, educational and/or vocational services and health supervision, and also including, as appropriate, recreational and transportation services, for at least 3 but less than 24 hours per day, and at least four days per week, excluding holidays. If it can be demonstrated that one or more of these services is not needed by the population served, that service may be waived.

[18 NYCRR 425.1(a)]
Day Treatment
Day treatment programs serve individuals who are at risk due to a mental, psychological or physical condition/disability. Day treatment provides an alternative to removal from the home/family and placement in an institution or residential setting. Day treatment programs may include, but not necessarily be limited to, case assessment, case planning, treatment, rehabilitation and support services, i.e., individual and/or group counseling, life skills training and psycho-educational groups.

Detox Services
Services for and related to ridding the body of substances. Detox (detoxification) treatment needs to be medically supervised and is usually done on an inpatient basis, but can be supervised on an outpatient basis as well. See definition for Alcohol Counseling Treatment.

Developmental Disability Services
A developmental disability is a severe and chronic mental or physical impairment that begins before the age of 22. This disability must substantially limit the person’s abilities in three or more life activities, such as self-care, language, learning, mobility, self-direction, independent living and/or economic self-sufficiency.

Developmental Disability, as defined by NYS Mental Hygiene Law part 624.20, includes, but is not limited to, a disability of a person which is attributable to mental retardation, cerebral palsy, epilepsy, neurological impairment or autism or any other condition related to mental retardation and resulting in similar impairment of general intellectual functioning or adaptive behavior and/or requiring similar treatment and services. Services, for consumers classified as developmentally disabled, are provided through a large network of state and voluntary agencies across the state. For example, local Associations for Retarded Citizens (ARC) are non-profit organizations, which provide a wide array of assistance, including medical, transportation and vocational services. Office of Mental Retardation and Developmental Disabilities (OMRDD) outpatient services include such things as evaluations for occupational therapy and physical therapy, psychological testing and the coordination of a possible array of bundled services by a service coordinator.

Diagnostic Evaluation
The evaluation of an individual’s medical and/or mental condition and the identification of a corresponding medical and/or mental diagnosis, if applicable. Medical or mental diagnoses may be determined through such means as client interviews, obtaining client(s) social history and/or prescribed medical or psychiatric tests. Conversely, a diagnostic evaluation may rule out the existence of a medical and/or mental condition. In either case, the diagnostic evaluation is a valuable tool in determining the client’s individual treatment and service needs.

Domestic Violence Services
Emergency shelter and supportive services provided to: persons who are 16 years of age or older; married persons; or, parents of a minor child or children who are the victim of an act or they are the parent of a minor child or children who is a victim of an act which would constitute a violation of the Penal Law and such act has been committed by a family or household member which includes; persons related by blood or marriage; persons legally married to one another; persons formerly married; persons who have a child in common; unrelated persons who are continually or at regular intervals living in the same household or who have in the past continually lived in the same household; or unrelated persons who have had intimate or continuous social contact with one another and who have access to one another’s household. (Title XX – SSBG Services Definitions)

Domestic Violence services are available to assist individuals and families affected by domestic violence. This includes adult and teen victims, abusive partners, and children and youth. Such services are provided by public and private organizations throughout the state, and include a wide range of interventions such as: safety planning, shelter, legal services, counseling and support groups for victims, batterer intervention programs, and child and youth witness to violence counseling and psycho-educational programs.
<table>
<thead>
<tr>
<th>Drug Counseling/Treatment</th>
<th>See Alcohol Counseling/Treatment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Intervention</td>
<td>Article 25, Title II-A of the Public Health Law establishes the Early Intervention Program (EIP), a voluntary program offering a variety of therapeutic and support services to eligible infants and toddlers with disabilities and their families. To be eligible for early intervention services a child must be under 3 years of age and have a disability or developmental delay. The following services may be included in the EIP individualized family service plan: assistive technology devices and services, family training and counseling, home visits, parent support groups, special instruction, speech-language pathology and audiology, occupational therapy, physical therapy, psychological services, service coordination, nursing services, nutritional services, social work services, vision services, and transportation/related costs necessary to participate in early intervention and health services.</td>
</tr>
<tr>
<td>Educational and Training Services</td>
<td>Services which support the assessment of the need for, and arrangement of, educational counseling and training for a person; for an educational service which is not generally made available by a local public school district to any individual without cost and without regard to income (such programs should be discussed with local school officials prior to proposing their funding). Educational service areas may include, but are not limited to, health education, safety related education, literacy education programs, General Equivalency Diploma (GED) programs, and other referrals to community resources related to education and training. (Title XX SSBG – Services Definitions)</td>
</tr>
<tr>
<td>Emergency Cash/Goods</td>
<td>Emergency cash or goods is defined as money or the equivalent thereto, food, clothing or other essential items that are provided to a child and his/her family in an emergency or acute problem situation in order to avert foster care placement. [18 NYCRR 423.2(b)(14)]</td>
</tr>
<tr>
<td>Emergency Food</td>
<td>See Emergency Cash/Goods.</td>
</tr>
<tr>
<td>Emergency Shelter</td>
<td>Emergency shelter is defined as providing or arranging for shelter where a child and his/her family who are in an emergency or acute situation reside in a site other than their own home in order to avert foster care placement. [18 NYCRR 423.2(b)(15)]</td>
</tr>
</tbody>
</table>
Employment Services are defined as:

(a) Exploring interests and potential for self-support, individual counseling necessary to deal with family and/or individual barrier(s) which prevent or limit individuals in their use of training and employment opportunities and providing for referral to and use of public and voluntary agencies in the field of health, education and employment; arranging for vocational services including but not restricted to vocational diagnosis, vocational education and vocational training for individuals who appear to possess the necessary talents, aptitudes and skills. For the blind and handicapped, consideration should be given to utilization of the services available through the Office of Vocational and Education Services for Individuals with Disabilities (VESID) of the State Department of Education or the Commission for the Blind and Visually Handicapped at the State Office of Children and Family Services.

(b) Providing diagnostic assessment, when necessary, to determine the employability of an applicant for or recipient of TANF or Safety Net financial assistance.

(c) Arranging for other necessary services to support, gain or retain the employment including counseling and legal services.

(Title XX SSBG – Services Definitions)

Family Planning Services

Services to enable individuals (including minors who may be sexually active) to plan their families in accordance with their wishes, to limit family size, space their children, to correct infertility, or prevent or reduce incidence of unwanted pregnancies by arranging for and providing the following component services:

Component A: Social and educational services which include the distribution of printed material, group discussions and individual sessions to discuss family planning, educational and medical resources available in the community.

Component B: Medical services, which include diagnosis, treatment, drugs, supplies and related counseling furnished or prescribed by or under the supervision of a physician.

(Title XX SSBG Services Definitions)

Family Preservation Services (Intensive Home Based)

Intensive, home-based, family preservation services are defined as casework services and direct therapeutic services provided to families in order to reduce or avoid the need for foster care placements of children who are in imminent danger of such placements. Intensive home-based, family preservation services may include arranging on behalf of the families housing assistance, child care, job training, education services, emergency cash grants and basic support needs. [18 NYCRR 423.2(b)(17)(i)]

The Family Preservation Program (FPP), as administered within the five boroughs of New York City, provides short-term (six to eight weeks) crisis intervention and family preservation services through specially trained workers who are assigned only two families at a time. FPP workers include Community and Family Advocates who access community resources and organize activities to alleviate negative community conditions. In addition, mature individuals who serve as Family Mentors act as ongoing role models while working with families. After a successful FPP intervention period, families are referred to preventive services programs, when needed.

Family Support Services

Supportive services, as defined in NYCRR, are those services provided as a component of a service plan to a child and/or family including, but not limited to, parent aide services, homemaker services, home health aide services, parent training services, housekeeper/chore services, and home management services. (See 18 NYCRR 423.2.)
### Financial Management
Assessing the need for, arranging for, providing and evaluating the provision of formal or informal instruction and training in the management of individual and family financial resources, including but not limited to, the preparation of household budgets and the appropriate disbursement of such resources and the provision of adequate food, clothing and shelter. The formal and informal instruction and training may be provided by a caseworker, home economist or a trained homemaker. (See Home Management Services.)

### Foster Care Services for Children
Assessing the need for, arranging for and providing for placement of and services to individuals under the age of 18 (under 21 in cases of children in foster care prior to age 18) in a foster home or appropriate group care facility as a result of either a judicial determination to the effect that continuation of care in a child's own home would be contrary to the safety or welfare of such child, or at the request of the parent or legal guardian. A foster care home or facility used for care of children shall be certified, approved, or licensed by the State in which it is situated or has been approved by the agency of such State responsible for licensing or certifying homes or facilities of this type as meeting required standards. (See Title XX – SSBG Services Definitions)

### Health Related Service
Assisting individuals and families to attain and maintain a favorable condition of health by helping them to identify and understand their immediate and comprehensive health needs; helping them locate appropriate resources and obtain the necessary therapeutic and preventive medical care and treatment, counseling and health maintenance services and provide follow-up services as needed to achieve the objective. Included are the following:

(a) General health care for all eligible clients, including such activities as assisting in enrollment in a medical managed care program or finding a doctor who will accept Medicaid and/or Medicare, locating an appropriate clinic or hospital, and helping clients secure transportation necessary to obtain services.

(b) Services to assist chronic drug or alcohol abusers to identify the existence and status of their drug or alcohol problems; to seek and use needed medical services; and to seek and participate in appropriate treatment programs.

(c) Services to help identify need for vocational rehabilitation services; to seek and use the services available through the Office of Vocational and Education Services for Individuals with Disabilities (VESID) of the State Education Department or the Commission for the Blind and Visually Handicapped of the State Office of Children and Family Services; to help provide the medical and other services necessary for such clients; to be maintained in the rehabilitation program.

(d) Child/Teen Health Program (CTHP) Services (not otherwise provided under Medical Assistance) to implement this program in accordance with 18 NYCRR Part 508.

(e) Services to help eligible clients find and gain admission to necessary institutional placement such as nursing homes, adult homes, State hospitals, health-related facilities.

(See Title XX – SSBG Services Definitions)
**Home and Community Based Waiver Services**

Medicaid home and community based waiver services (HCBW) are individualized services that support a child’s ability to remain in their own home or community. These services use an individualized care approach to assessment, services delivery, and planning. It is based upon a partnership between the family members and service providers and focuses upon the unique service needs of the individual. These services are deemed essential for the individual in order to prevent them from entering a more restrictive residential environment such as a hospital or institutional setting. All persons must meet the specific eligibility criteria for the respective waiver program. Waiver programs for children are currently provided through the Office of Mental Retardation and Developmental Disabilities and the Office of Mental Health.

**Home Management**

Assessing the need for, arranging for, providing and evaluating the provision of formal or informal instruction and training in management of household budgets, maintenance and care of the home, preparation of food, nutrition, consumer education, child rearing and health maintenance. The formal and informal instruction and training may be provided by a caseworker, home economist or a trained homemaker who meets Social Services standards, or be referred to appropriate community resources. These services include the evaluation, in appropriate cases, of the need for protective and vendor payments and related services. (See Title XX- SSBG Service Definitions.)

**Homemaker Services**

Assessing the need for, arranging for, providing and evaluating the provision of personal care, home management and incidental household tasks through the services of a trained homemaker, who meets Social Services standards, for the following:

- **Component A**: For children because of illness, incapacity or absence of caretaker relative.
- **Component B**: For individuals, families, caretaker relatives and/or children to achieve adequate household and family management.
- **Component C**: For individuals because of illness or incapacity.

Component C is mandated for those eligible for SSI but optional for others. Component A and Component B are optional.

(See Title XX – SSBG Services Definitions)

**Housekeeper/Chore Services**

Assessing the need for, arranging for, providing in accordance with standards of the Office and evaluating the provision of light work or household tasks (including such activities as help in shopping, lawn care, simple household repairs and running errands) which families and individuals in their own homes are unable to perform because of illness, incapacity or absence of a caretaker relative, and which do not require the services of a trained homemaker. Cash reimbursement may be provided to the recipient for irregular or intermittent services, which are specifically identified in the service plan, approved by the agency prior to the purchase and secured by the individual within an authorized period at an authorized cost and upon presentation of a receipt. (See Title XX – SSBG Services Definitions)
**Housing Improvement Services**

Assessing the need for and arranging for individuals and families to improve their housing conditions includes:

**Component A:** Helping individuals and families to obtain necessary repairs, be protected from abuse or exploitation by landlords or other tenants, identify and correct substandard rental housing conditions or code violations, find suitable and adequate alternative housing, and obtain needed assistance or relief from public agencies that regulate housing, including arrangement for legal services, if necessary. Component A is mandated for SSI recipients.

**Component B:** Helping functionally impaired or frail older adults to maintain community residency by identifying such adults who would otherwise require care in a domiciliary care facility or similar institution, arranging for placement in an appropriate small group living arrangement, and/or locating, contracting for, and preparing suitable housing sites, including providing minor installations such as appropriate furniture and furnishings, grab bars, and hand rails, ramps, skid-proof floor covering and other safety measures as required. Component B is optional and provided on the basis of group eligibility to selected older adults who meet the program definitions.

(See Title XX SSBG – Services Definitions)

**Housing Services**

Housing services are defined as rent subsidies, including payment of rent arrears, or any other assistance necessary to obtain adequate housing will be considered preventive services, but will only be available to families of children already in foster care if such families satisfy the definition set forth in 18 NYCRR 423.2(c)(2) and the eligibility standards set forth in sections 430.9(e)(2) and 430.9(f) of the SSL. [See 18 NYCRR 432.2(b)(16).]

**Independent Living Services**

Note: OCFS practice guidance paper on adolescent services issued July 8, 2004 (04-OCFS-INF-07) indicated that the new framework of practice for NYS includes new terminology. Services formerly known as Independent Living Services will now be referred to as Life Skills Services and are defined as follows:

Life Skills Services means services designated to assist foster care youth and former foster care youth as set forth in this Part, to prepare for employment and post secondary education, and to make the transition to responsible adulthood. Life Skills Services include, but are not limited to, structured programs of vocational training, life skills instruction, post discharge services and supervision until 21.

**Information and Referral Services**

Providing information about services provided under the Comprehensive Annual Social Services Program Plan and other human service programs including legal, educational and consumer services; brief assessment (but not diagnosis and evaluation) to facilitate appropriate referral to and follow-up with community resources that provide such services. (See Title XX – SSBD Services Definitions)

**Legal Services**

Individuals in need of legal consultation and/or representation may be referred to community legal services/providers, including but not limited to, the local Legal Aid Society and those legal services/providers specializing in such areas as immigration law, marital and family law, social security disability, elder law, evictions, and mediation.
Maternity Services
Maternity services encompass a wide range of community-based services to pregnant and parenting adolescents, children and families. Services may include, but not be limited to, preventive case planning and support services, pre-adoptive counseling services for birth-parents, community education and prevention programs (teen pregnancy prevention, sex education, parent education and support, alcohol/drug treatment and education, violence prevention and counseling), crisis intervention, mental health counseling, health services, foster care and homecare.

Mediation Services
Child Permanency Mediation is a consensual dispute resolution process in which a neutral third party helps disputants to identify issues, clarify perceptions and explore options for a mutually acceptable outcome for all participants in a child permanency case. Mediators do not offer their own opinions regarding likely court outcomes or the merits of the case. Instead, mediators offer the opportunity to expand the settlement discussion beyond the legal issues in dispute and focus on developing creative solutions, which emphasize the parties' practical concerns.

Mediation, by definition, creates a new process and environment for decision-making:

- One that empowers parents and family members as decision-makers and actively engages them in the decision-making process;
- One that takes a more holistic view of parent and family issues;
- One that requires an extended commitment of time to engage the process and to listen to the various perspectives and opinions at the table; and
- One that substitutes a more consensus-based, discussion-oriented process for making decisions.

Mental Health Services
To live successfully in the community, most individuals with severe mental illness need both treatments that control or eliminate their psychiatric symptoms and a range of support services that meet the complex needs caused by the disabling effects of their illness. For adults, this range of services can also include a combination of health care, financial assistance and employment and housing supports, as well as supports for developing skills in social relationships. For children and their families, these services can include family treatment and supports that enable children to live at home and in the community, helping them and their families to live more normal lives.

Mental Health services are generally grouped in four major categories: emergency, inpatient, outpatient, and community support. All four categories include both state and locally operated programs. Individuals may receive services from more than one category depending upon need. The overall goal is to promote recovery and full community living for individuals with severe mental illness, while preserving public safety, and ensuring that respect, empowerment, and quality of life are incorporated into every aspect of care.

Mentoring
A mentor has knowledge, expertise, and experience in a particular area and is willing and able to pass all of that on to others. Mentors are often individuals who volunteer to participate in a specific mentoring program sponsored by an employer or organization. Mentoring programs vary in scope, purpose and the type of individual served. For example, youth focused mentoring programs may provide mentoring activities and discussions on planned academic projects, career education exercises and/or life skills development. Adult focused mentoring programs may be designed to deliver professional and career development guidance.

OASAS Residential Services
The New York State Office of Alcoholism and Substance Abuse Services (OASAS) directly operates 13 Addiction Treatment Centers (ATCs) throughout New York State, which provide inpatient services to addicted persons and their families.
OCFS Residential Program

The Office of Children and Family Services (OCFS), Division of Rehabilitative Services, is responsible for residential and community treatment of court-placed youth, including intake, management of over 2,000 beds throughout the State in residential programs/facilities ranging from secure centers to community residences. OCFS operates 42 accredited juvenile residential facilities statewide for more than 2,000 youth remanded to the agency’s custody and care from the family and criminal courts. The extensive rehabilitative services provided to youth in residential care includes counseling, health, education and employment services as well as programs for youth with special needs. Through its Aftercare Program, the agency provides post-residential counseling and supervision for youth returning to the community. During their period of residential placement, the Family Advocacy Bureau works with the family and youth to provide services and transition assistance.

OMH Residential Program

The Office of Mental Health (OMH) is responsible for treatment and/or services for individuals with mental disorders. The majority of individuals in New York State’s public mental health system receive services because they are diagnosed with a mental disorder where their symptoms have led to serious impairment of their day-to-day functioning. The following residential programs/facilities provide diagnosis, care and treatment of individuals with mental disorders and are operated or certified by OMH: Psychiatric Centers State Operated Family Care Facilities, Voluntary Operated Family Care Facilities, Residential Treatment Facilities For Children And Youth (RTF), Community Residence (CR), Family Based Treatment (FBT) and Teaching Family Community Residences (TFCR).

OMRDD Residential Program

Office of Mental Retardation and Developmental Disabilities (OMRDD) Residential Programs include, but are not limited to, family care homes, individual residential alternatives (small group homes), supported apartment living, intermediate care facilities (ICF), and secure residential care. Consumers continue to reside in the community for the most part. Secure residential care and ICF care is primarily provided at any one of the Developmental Disabilities Services Offices (DDSO) campuses located in NYS. All OMRDD Residential Programs are operated by state or voluntary agencies funded by or through OMRDD.

Parent Aide Services

Parent aide services as defined as those services provided in the home and community that focus on the need of the parent for instruction and guidance and are designed to maintain and enhance parental functioning and family/parent role performance. Techniques may include but are not limited to role modeling, listening skills, home management assistance and education in parenting skills and personal coping behavior. [See 18 NYCRR 423.2(b)(10).]

Parent Training

Parent training is defined as group instruction in parent skills development and the developmental needs of the child and adolescent for the purpose of strengthening parental functioning and parent/child relationships in order to prevent a disruption in a family or help a child in foster care return home sooner than otherwise possible. Parent training may include child-parent interaction groups formed to enhance relationship and communication skills. [See 18 NYCRR 423.2(b)(12).]

Physically Handicapped Services

Programs, information and referral services available for disabled and handicapped individuals.

PINS Diversion Services

PINS Diversion/Designated Assessment Services (DAS) programs provide short-term assessment, counseling and referral services to families referred by the Probation Department as an alternative to applying to Family Court for a PINS (Person in Need of Supervision) petition for a troubled child under the age of 18.
**Post Adoption Services**

Post adoption services means counseling, training parents on how to care for children with special needs, providing clinical and consultative services, and coordinating access to community supportive services for the purpose of ensuring permanence of the placement. Such services may be designed to treat problems which developed after the date of the adoption decree. Post-adoption services may extend for three years from the date of the adoption decree. [See 18 NYCRR 421.8(h)(2)(ii).]

**Post Discharge Services (18-21 years)**

Note: OCFS practice guidance paper on adolescent services issued July 8, 2004 (04-OCFS-INF-07) indicated that the new framework of practice for NYS includes new terminology. The discharge planning goal formerly known as "Discharge to Independent Living Services" will be renamed "Discharge to Another Planned Living Arrangement with Permanency Resources."

Post Discharge Services for foster care youth discharged to Another Planned Living Arrangement with Permanency Resources and former foster care youth who remained in foster care until 18 years of age or older must continue to be provided with any needed services until they attain the age of 21, including financial, housing, counseling, employment, education and other appropriate support and services to support their successful transition to self-sufficiency.

**Preventive Services for Children**

Preventive services shall mean those supportive and rehabilitative services provided to children and their families for the purpose of: averting a disruption of a family which will or could result in placement of a child in foster care; enabling a child who has been placed in foster care to return to his/her family at an earlier time than would otherwise be possible; or reducing the likelihood that a child who has been discharged from foster care would return to such care. Preventive services may include, but not be limited to, professional counseling, parent skills training, substance abuse treatment, homemaking services or housing assistance. [See 18 NYCRR 423.2(b) for the types of services, when provided for the above-stated purpose, are considered preventive services.]

**Public Health Nurse**

Under general direction, Public Health Nurses promote community health through detection, prevention, and control of disease; provide assessment, education, and counseling in the care and prevention of illness and injury and in wellness promotion; and perform related duties as required. Public Health Nurses work in their assigned communities, providing the full scope of public health nursing services, including but not limited to Maternal/Child Health; Tuberculosis and other Communicable Disease Control programs; Older Adults; and field evaluations.

**Respite Care**

Respite care and services means the provision of brief and temporary care and supervision of children for the purpose of relieving parents or foster parents of the care of such children or foster children when the family or foster family needs immediate relief in order to be able to maintain or restore family functioning or to provide relief for foster parents from the stress of providing care for a severely handicapped or emotionally disturbed foster child or for a foster child with a chronic or recurring illness. [See 18 NYCRR 435.2(b)(7)(d).]

The Preventive Respite Care Program, as administered by the New York City Administration for Children's Services (ACS), provides services to families who are in need of brief and temporary care and supervision for their children. The purpose is to provide immediate relief to families in order to maintain and restore family functioning, and is provided for at least 24 hours, up to a maximum of 21 days (30 days if the parent is in an inpatient detoxification program). Respite Care is provided in the home of certified Respite Providers who are trained in the needs of families and in the provision of Respite Care, or in the congregate facility of the New York Foundling Crisis Nursery.
Sex Offender Treatment

Sex offender treatment may be provided by either a facility, agency or individual provider to either adjudicated sex offenders or individuals (children, adolescents, adults) with sexual issues, i.e. sexual acting out, sexual deviancy, sexual abuse. Treatment is most often on an outpatient basis. Treatment includes the provision of therapy by licensed professionals with an advanced degree in social work, psychology and/or psychiatry.

Transportation Services

Providing or arranging for transportation of the child and/or his family to and/or from services arranged as part of the child’s service plan, except that transportation may not be provided as a preventive service for visitation of children in foster care with their parents and may only be provided if such transportation can not be arranged or provided by the child’s family. [See 18 NYCRR 423.2(b)(13).]

Unmarried Parent Services

Providing or arranging for supportive health and social services for an unmarried parent and a child born or to be born out-of-wedlock; if possible, involving the putative father and the grandparents in planning for the future care of the child; and providing or arranging for the counseling of the parents and their families. Such services shall include discussion of alternative plans for the child's future; arranging for the care of the unmarried parent before and after delivery and the child after delivery in an approved foster family home, group home, institution or independent living arrangement; arranging for legal and other services if required; and arranging for establishment of paternity and support.

In addition to the above, services for unmarried parents under the age of 21 may include providing or arranging for one or more of the following types of service delivery:

(a) Individual, couple and group counseling for pregnant adolescents, adolescent parents and their families, including pregnancy counseling, preparation for childbirth, 24-hour emergency supportive aid, and use of parent aides, supportive friends or peer counselors to provide outreach and referral to professional services in the community.

(b) Social and educational group services for pregnant adolescents and/or adolescent parents, which provide education and information on parenting, child development, family planning, health and nutrition, household management, and use of community resources in addition to opportunities for peer support. Respite child care services and transportation may be included in adolescent parent group services.

(c) Parenting training for pregnant and parenting adolescents which includes individual and group counseling or workshops on parent/child relationships in family life, formal and informal instruction in child care and child development, and trained parent aides or other home visitation services (not to include homemaker/housekeeper services).

(d) Education or employment services for pregnant and parenting adolescents, which are designed to promote self-sufficiency by assisting them to complete their high school educations, improve work-related skills and job readiness, and find and maintain employment.

(See Title XX – SSBG Services Definitions)
Wraparound Services provide intensive, comprehensive assistance to troubled youth and their families in their own home. The wraparound concept revolves around five fundamental principles:

- Address problems in youths' natural environment - i.e., home- rather than an artificial environment, where lessons learned will be difficult to translate when youth return home.
- Work with and listen to the whole family, especially parents. Evidence increasingly finds that the family system is both the most important determinant of behavior problems and the most important ally for therapists in reversing negative behavior patterns. Unlike most mental health modalities, where the professional is "expert" and the individual and/or family has the problems, wraparound is based on the belief that families know best what they need. Thus, the job of professionals is to help families achieve their own goals and build the skills to sustain success.
- Individualize services based on the needs of each youth and family, rather than employing the one-size-fits-all approach typical in residential treatment programs. This notion of "wrapping" needed services "around" each individual young person lies at the core of the wraparound concept.
- Focus on strengths. Even the most troubled adolescents and families have hidden aptitudes, interests, and desires. Tapping these strengths and building families' capacities to anticipate and solve problems can be critical to avoiding crisis in the future.
- Build a support system. Most youth have relatives, family friends, or other interested adults who care about them and are willing to provide guidance and support. Recruiting support from these natural allies- to be mentors, or provide a respite for beleaguered parents- can be an invaluable step in creating a stable environment for young people.

Other

Check if no other services listed apply.
Appendix A2: Reports Available for the FSI

Family Services Intake Report

SENSES CASE FAMILY SERVICES
INTAKE REPORT

****WARNING****
CONFIDENTIAL INFORMATION
AUTHORIZED PERSONNEL ONLY
DRAFT

Case Name: XXXXXXXXXXXX, XXXXXXXX
Stage ID: XXXXXXXXXX
Case ID: 123456t
Stage Name: XXXXXXXXXX
Case Initiation Date: MM/DD/YYYY
Report Date: MM/DD/YYYY
District With Case Management: XXX
District/Agency With Case Planning: XXXXXXXXXX

PERSON DEMOGRAPHICS

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SENSITIVE CASE

FAMILY SERVICES

INTAKE REPORT

****WARNING****
CONFIDENTIAL INFORMATION
AUTHORIZED PERSONNEL ONLY
DRAFT

Case Name: XXXXXXXXXXXXX, XXXXXXXX
Case ID: 123456t
Case Initiation Date: MM/DD/YYYY
District With Case Management: XXX

INTAKE SOURCE

Status: XXXXX Date Closed: 99/99/9999
Progressed to Family Services Stage Id: 9999999999
Recommended Case Id Upon Closing: 9999999999
Split from Case Id: 9999999999
Intake Date/Time       Intake Method       Source Type       Agency Name
99/99/9999  HH:MM:SS       Xxxxxxxxxx       Xxxxxxxxxxxxxxxxxxxxxxxx  Xxxxxxxxxx

Source Name
Xxxxxxxxxxxxxx  Xxxxxxxxxx

Street       City       State       Zip
Xxxxxxxxxxxxxxxxxxx  Xxxxxxxxxxxxxxx  Xxx  99999

County       Address Type       CD
Xxxxxxxxxxxxxxxxxxxxxxxx  Xxx  99

Phone       Ext.       Type       Phone       Ext.       Type
(P) (999)999-9999  9999999999   Xxx             (999)999-9999  9999999999   Xxx

NARRATIVE

____________________________________________________________________________________

Type of Services Being Requested: Xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
Reasons for Involvement with Family:
DATE OF ENTRY: MM/DD/YYYY  AUTHOR: Xxxxxxxxxxxxxxxxxxxxxxxxxxxxx
DATE OF ENTRY: MM/DD/YYYY  AUTHOR: Xxxxxxxxxxxxxxxxxxxxxxxxxxxxx

SENSITIVE CASE  FAMILY SERVICES  *****WARNING*****
INTAKE REPORT  CONFIDENTIAL INFORMATION  AUTHORIZED PERSONNEL ONLY
DRAFT

Case Name: Xxxxxxxxxxxxxxx, Xxxxxxxxxx  Stage ID: Xxxxxxxxxx
Case ID: 123456t  Stage Name: Xxxxxxxxxx
Case Initiation Date: MM/DD/YYYY  Report Date: MM/DD/YYYY
District With Case Management: XXX  District/Agency With Case Planning: Xxxxxxxxxxxx
BEHAVIORAL ISSUES AND FAMILY CONCERNS

Child Issues:
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX (C)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX(C)  XXXXXXXXXXXXXXXXXXXXXXXXX (C)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX(C)

Relevant Behaviors and/or Circumstances Identified:

Caretaker Issues:
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX (C)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX(C)  XXXXXXXXXXXXXXXXXXXXXXXXX (C)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX(C)

Relevant Behaviors and/or Circumstances Identified:

Family Issues:
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX (C)  XXXXXXXXXXXXXXXXXXXXXXXXX(C)
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX (C)

Relevant Behaviors and/or Circumstances Identified:

Emergency Services Required to Address Identified Critical Issues:
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Emergency Services Offered and Immediate Actions Taken, Including Family and Community Resources:

SENSITIVE CASE ISSUES

REQUESTED SERVICES

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**DECISION SUMMARY**

Is this case being evaluated for Preventive Services Only? XXX

Needs for Mandated Preventive Services:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

**THIS INTAKE IS (NOT) ELIGIBLE FOR MANDATED PREVENTIVE SERVICES **

Date Application Sent: 

Date LDSS Received Application Signed by Parent/Client:

Application Signed By CPS Worker:

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Comments:
**Family Services Face Sheet**

**SENSITIVE CASE**

**FAMILY SERVICES INTAKE FACE SHEET**

**WARNING *****

**CONFIDENTIAL INFORMATION**

**AUTHORIZED PERSONNEL ONLY**

---

**Case Name:** Doe, Family  
**Stage ID:** 12345678  
**Case ID:** 12345Y  
**Stage Name:** Doe, John  
**Case Initiation Date:** 06/24/2003  
**Report Date:** 07/24/2003

**District With Case Management:** XXX

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**CONNECTIONS Case Management Step-by-Step Guide:** Family Services Intake Appendices  
(v1.5 rev 05/05/2006)
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**Family Services Intake Log Report**

This is a demonstration of how the log will look in different situations and a definition of how the log will function.

SEARCH PARAMETERS USED

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**Voluntary Agency:** Little Flower

Blank because not sent to LDSS yet

FAMILY SERVICES INTAKE LOG SEARCH RESULTS

Example to case in VA – caseworker to supervisor

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Jane is probably a supervisor in the Voluntary Agency who received Intake from Mary Meyer the caseworker in the Voluntary Agency.

Example of a case from the VA sent to the LDSS

The VA knows the LDSS received and acknowledged it

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FSI stages can be open or closed – if a case is closed there will not be a great deal of information showing on the log because one can go and look at the FSI stage for the information. This is only intended to be a thumbnail view of what came in, got processed, and where to look for it.

ASSIGN

There are 3 ways to assign an FSI to another worker.

1--using the Assign pushbutton or menu item
2--using the Submit for LDSS Acceptance pushbutton or menu item
3--using the Submit for Review pushbutton or menu item

If the FSI was assigned to the current worker using #2 or #3 then we wanted a way to show this on the FSI Log.

The field labeled Submit Type will be blank when the Assign pushbutton (or menu item) was used to assign the FSI to the current worker (the FSI was not submitted to the current worker)

Example of an FSI that was sent from the caseworker to another worker in the VA (maybe a supervisor)
Example of an FSI, that was sent from the caseworker to another worker in the VA (maybe a supervisor), who then sent it to the LDSS who hasn’t yet acknowledged receipt.

Case rejected from the county worker to the worker in the VA. The case was sent for acceptance from Mary Meyers to Jo Clark, but when Jo rejected, his name got to be the “Assigned From” worker. The word “Accept” shows that the reassignment of the case was assigned to the Albany County Worker from using “Submit for LDSS Acceptance.” When Albany County rejected the case it was automatically reassigned to Mary Meyer at Little Flower.

This case is closed. It gives the information about when the case came in, and indicates that it is closed.

If there is a need for information about the Intake then one can go to the actual FSI stage.
This case was not accepted by the Local District. Possibly it was incomplete and they wanted the VA to do more work. To get the case back to the VA - the Albany worker has 2 options. They could reject the case and it would automatically go back to the worker that sent it, or go through Assign. In this case the worker that sent it, went on vacation.

The LDSS worker accepts the case and goes through Assign and assigns it to the On Call worker or worker specified by the VA. The Submit type is blank because it was Assigned back – not submitted. It was not rejected because it had to go to a new worker.
### Definition of Terms for the Intake Log Report

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Status</strong></td>
<td>OPEN or CLOSED</td>
</tr>
<tr>
<td><strong>Submit Type</strong></td>
<td>Blank means that the case has been Assigned through the Assign button or menu command instead of the Submit for LDSS Acceptance or Submit for Review.</td>
</tr>
<tr>
<td><strong>Review</strong></td>
<td>Submitted to Supervisor.</td>
</tr>
<tr>
<td><strong>Accept</strong></td>
<td>Submitted to the District.</td>
</tr>
</tbody>
</table>
| **Acceptance Types:** | A = Accepted by the district.  
N = Not acknowledged (The District has not yet acknowledged the case and nothing has been done.)  
R = Rejected (The District rejected the case and it was automatically sent back to the same worker at the Voluntary Agency.) |
| **Date Assigned**  | When the last worker (previous to the current worker) assigned the case to the current worker. |
| **Assigned From**  | Name of the previous worker.                                              |
| **Assigned from Dist/Agy** | Agency of the previous worker whose name is listed just above.            |
| **Date Closed**    | Date that the Family Service Intake is Closed                             |
Appendix A3: Requirements to Submit an FSI to an FSS

If the decision is to open an FSS, the following system edits will be performed before passing off to the Family Assign process. These are components that **must** be complete:

<table>
<thead>
<tr>
<th>Tab</th>
<th>Required</th>
<th>Additional Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source</td>
<td>• Source Type</td>
<td>An address must be validated if the address did not originate from a CPS INV.</td>
</tr>
<tr>
<td></td>
<td>• Intake Date</td>
<td>A Phone Type is required if a phone number is recorded.</td>
</tr>
<tr>
<td></td>
<td>• Intake Method</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• First and Last names</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Address (street 1, City, State, Zip, County)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Address Type</td>
<td></td>
</tr>
<tr>
<td>Narrative</td>
<td>• Narrative</td>
<td>Behavioral Concerns and Family Issues</td>
</tr>
<tr>
<td></td>
<td>• Type of Services Requested</td>
<td>If the FSI did not originate from CPS and the Type of Services Request is Child Welfare Services, the BCFI is required with the following items completed:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a. At least one item must have been selected from either the Child, Family or Caretaker tabs.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b. Comments regarding the children must be recorded if an item was selected from the Child tab.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c. Comments regarding the family must be recorded if an item was selected from the Family tab.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d. Comments regarding the caretaker(s) must be recorded if an item was selected from the Caretaker tab.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>e. If an item was selected from the Emergency Services check list, at least one item must have been selected from the Emergency Services list.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Comments must explain the Emergency Services selected</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If an LDSS requires completion of the Requested Services check list, at least one item must be selected.</td>
</tr>
<tr>
<td>Tab</td>
<td>Required</td>
<td>Additional Requirements</td>
</tr>
<tr>
<td>---------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Person Demographics</td>
<td>All of the following must be recorded for each person in the stage:</td>
<td>A Person Search must be conducted and viewed on all persons not originated from the CPS stage.</td>
</tr>
<tr>
<td></td>
<td>• First and Last names</td>
<td>An address must be validated if the address did not originate from a CPS INV.</td>
</tr>
<tr>
<td></td>
<td>• Address (street 1, City, State, Zip, County)</td>
<td>A Phone Type is required if a phone number is recorded.</td>
</tr>
<tr>
<td></td>
<td>• Address Type</td>
<td>If the Type of Services is Child Welfare Services, there must be at least one person under the age of 18 in the FSI.</td>
</tr>
<tr>
<td></td>
<td>• Race</td>
<td>If the case was converted from WMS, there must be at least one person under the age of 21 in the FSI.</td>
</tr>
<tr>
<td></td>
<td>• Ethnicity</td>
<td>If the Type of Services is not Child Welfare Services, there must be at least one person in the FSI.</td>
</tr>
<tr>
<td></td>
<td>• DOD or Approximate DOB</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Sex</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• One current primary address</td>
<td></td>
</tr>
<tr>
<td>Decision Summary</td>
<td>• A decision</td>
<td>For Programmatic Eligibility:</td>
</tr>
<tr>
<td></td>
<td>• A Programmatic Eligibility determination</td>
<td>If the FSI did not originate from CPS and the Type of Services Requested is Child Welfare Services, the question asking if the Intake is being evaluated from Preventive Services ONLY must have been answered (Yes or No).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• If Yes was selected, at least one need must have been selected from the list of needs.</td>
</tr>
</tbody>
</table>
Appendix A4:
Umbrella Case Concept

Overview
When a CONNECTIONS case number is established it will be the umbrella number for all stages – open and closed – within a CONNECTIONS case. This concept enables users to view – dependent on his or her “need to know”—all of the history on that particular family or household in one place. In some instances, multiple counties may have involvement with the case. CONNECTIONS accommodates cross county involvement by using the umbrella case number with open stages in different counties.

To clarify these terms:

- Linking an FSI to an active or closed case: This is the ability to link the current FSI to any previous case that enables the worker to view historical case information by utilizing the same case number, thus creating an umbrella case. (Please see the Step-By-Step guide, Linking an FSI to a Case for detailed instructions.)

- Merging Cases. This is a function performed in CONNECTIONS that must be initiated by a user who has the Merge/Split Business Function Profile. In effect, it merges one case into another and should be used when there are two completely different case numbers in the CONNECTIONS database and the Family Services Intake for the case is closed. Therefore, it is an after-the-fact decision, to be used when two cases were not originally linked in the FSI stage.

Program Guidelines to use when linking an FSI to another case or merging two different cases:

- Is this the same family?
- There must be at least one person, age 18 or older in common.
- The primary caretaker should be the same in both cases.
- Does this support continuity of casework through access to all information relevant to the children and family including progress notes, assessments and service plans?
- Caution should be used when linking or merging cases with multiple person(s) in the respective cases that may not be family members.

Rules for Linking an FSI:

1. A Family Services Intake (FSI) should not be linked to a closed FSI (FSI was closed without progression to a Family Services Stage - FSS).
2. An FSI cannot be linked to another open FSI
3. An FSI cannot be linked to an already open FSS in the same district; the services should be provided under the current FSS. An FSI can be linked to an open FSS in another district.
4. An FSI cannot be linked to an open or closed CPS/INT (Intake) stage that has not been staged progressed to the CPS INV (Investigation) stage.
Rules for Merging Two Cases:

1. Cases should be merged chronologically. In other words, merge newer cases into older cases. There may be some exceptions to this rule in, for example, converted cases (if a new case was created by the conversion program that should have been linked to an existing CPS case).

2. For merges, some caseworker discretion should be used to determine the “merge to” and “merge from”. By using the oldest case as the retained case, more historical information on stage composition will exist and will not need to be re-entered.

3. In the same district:
   - An open Family Services Stage (Child Welfare Services only) can be merged to a case with a closed Family Services Stage.
   - Two open Family Services Stages cannot be merged; one must be closed (then it can be merged).
   - Two FSS stages of different stage types can be merged (CWS, OTI, COI, ADVPO)

4. In Different Districts:
   - Two FSS stages of different stage types can be merged (CWS, OTI, COI, ADVPO)
   - An open FSS stage and a closed FSS stage can be merged
   - Two open FSS stages (each in separate local districts) can be merged to the same case.

5. An open or closed Child Case Record (CCR-child freed for adoption) cannot be merged with any other stage.

Results of a merge:

1. The “Merge to” case number will be used.
2. The “Merge to” case county (District) will be used.
3. Stages in the “Merge from” case will become stages in the “Merge to” case.
4. Individual stages merged to the case will keep their appropriate county (District) designation.
5. All caseworkers with a role in the case will continue as before the merge.
6. Open stages merging into a closed case will reopen the case. The case remains open until all stages are closed.
7. All caseworkers in open stages will get alerts in CONNECTIONS notifying them that the cases were merged.
8. Case searches for the “Merged from” case will return the “Merged to” case.

What is the definition of a “Cross-County” case?

1. The family (caretaker and at least one child) received child welfare services in one county, has moved to another county and still requires ongoing child welfare services.
2. Some family members live in one county while others live in a different county. Child welfare services are concurrently provided in both counties.
Transfers:

1. In Build 18, it is not possible to “transfer” a case by reassigning it to another county. When a family moves from one county to another, the open FSS stage (and WMS case) must be closed in the original county and a new FSI must be completed and FSS created in CONNECTIONS (and WMS case) in the new county.

2. The CID does NOT come forward from the original county. A new CID is established based upon the earlier date of the following four events: signed application for services, foster care placement, indicated CPS report or court order in the new district.

3. When there is an existing court order for child protective supervision or preventive services, the date of the court order should be clearly noted in the FSI. The prior district may wish to petition the Family Court for a change of venue to the new district.

4. To keep both cases under the same umbrella case number, the new county must open the FSI, enter the required data on the person demographics tab and then link one person, who is at least 18 years old and the primary caretaker, to the original case by selecting the “Link this FSI Stage to Active or Closed Case Number” from the Stage Maintenance menu.

Multi-County Involvement:

1. The Umbrella case concept also applies when two (or more) counties are involved in serving the family concurrently. For example, a child may be in foster care in one county, while the mother is living in a different county and receiving preventive services for the children remaining at home with her. Each county can open its own FSI under the same CONNECTIONS case number. If appropriate, one county can treat their involvement as an FSI/FSS “CWS” type while the other county can use an FSI with an Out of Town Inquiry (OTI) type using the same umbrella case number. (See Transfers, Number 3 for instructions on how to do this).

2. There will be two separate WMS cases if each county has created a CWS FSS; each county’s FSS will be associated with the correct WMS case in the respective county. Opening a WMS case in each county should only be done if the county without primary authority is providing a service that will be reimbursed, for example, contracted preventive services for the father.

3. The children in common can only be “tracked children” (entry of PPG/Program Choice) in one county.

4. Workers assigned to the case will have access to information in other stages through an “Implied Role” as long as there is a person in common between the two stages (and the information is relevant to that worker).
Frequently Asked Questions:

Question:
I have a case with an adult (Dad) in common with another case, however the Moms are different (former wife, current girlfriend). Should I merge these cases?

Answer:
No. These are two different cases. Within CONNECTIONS, there is an “implied” relationship between the two cases because they share individual(s). Thus, if a CPS report is taken on Dad in the first case, the Case Manager in the second case will be notified (and vice versa). Do not confuse the umbrella case with an implied relationship.

Question:
Should I merge the services case with a case consisting only of an unfounded investigation?

Answer:
If the criteria are met (Caretaker in common), you should merge the case. The family history should remain together. If a new CPS report comes in involving the same subject and/or child the unfounded reports will be easier to access by CPS staff. The existence of prior unfounded CPS reports is also related to one of the Risk Assessment elements.

Question:
I have a family who is requesting preventive services. This family had a prior CPS Investigation three years ago. Should I link the new FSI to the case?

Answer:
If the criteria are met (Caretaker in common), you should link the case at the FSI stage. Regardless of how long ago the CPS stages were opened or closed, the family history should remain together.

Question:
There are two open FSS stages with different case numbers in my county. What should I do?

Answer:
The most recent case should be merged to the older case.

Question:
The only case I can find for the new service stage was closed last year. Should I merge the services stage to a closed case?

Answer:
If the criteria are met (Caretaker in common), you should merge the case. The family history should remain together.

Question:
Why is it important to maintain the same case number when two different counties are serving the same family?

Answer:
Workers should have easy access to any other stages that may exist for a family either currently open or closed. Use of the same case number provides for a single electronic case record where all information about the family resides.
Appendix B:
Programmatic Eligibility Standards

430.9 Appropriate Provision of Mandated Preventive Services

(a) For cases authorized for Mandated Preventive Services for the first time after April 1, 1982, the provision of Preventive Services shall be considered Mandated if one of the following standards, as set forth in subdivision (c), (d), (e) or (g) of this section is met:

- the standard for the provision of mandated preventive services to clients at risk of placement;
- the standard for the provision of mandated preventive services to clients at risk of replacement in foster care;
- the standard for the provision of mandated preventive services to return children to their parents; or
- the standard for recertification of mandated preventive services.

For cases receiving Mandated Preventive Services before April 1, 1982, the standard for recertification of Mandated Preventive Services, as set forth in subdivision (g) of this section, shall be met. In all other cases, the provision of Preventive Services shall be considered Non-mandated and the decision to provide such services shall be made solely by the Local Social Services District.

(b) General requirements. The appropriateness of the provision of Mandated Preventive Services shall be documented on the forms prescribed by the department in Part 428 of OCFS regulations (18 NYCRR) according to the standards for documentation defined under the standards set forth in subdivision (c), (d), (e) or (g) of this section. These include the standard for the provision of Mandated Preventive Services to clients at risk of placement, the standard for the provision of Mandated Preventive Services to clients at risk of replacement in foster care, the standard for the provision of mandated preventive services to return children to their parents, and the standard for recertification of mandated preventive services. In the absence of documentation in the uniform case record, the provision of such services shall be deemed inappropriate.

(c) Standard for the provision of Mandated Preventive Services to clients at risk of placement.

The provision of Preventive Services shall be considered Mandated when such services are essential to improve family relationships and prevent the placement of a child into foster care. The circumstances in which preventive services shall be considered essential for these purposes are the following:

(1) Health and safety of child

   (i) Circumstance: One or more children in the family has been subjected by the parents or caretakers within the 12-month period prior to the date of application for services to serious physical injury
by other than accidental means, or to the risk of serious physical injury by other than accidental means, or to a serious impairment or risk of serious impairment of their physical, mental or emotional condition as a result of the failure of the parents or caretakers to exercise a minimum degree of care and such action by the parents has resulted in a determination that an allegation of abuse or maltreatment is indicated.

(ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services shall contain a description of instances within the 12 months immediately prior to the date on which the Program Choice of "Preventive" is chosen when the child has been harmed emotionally or physically. The required uniform case record form shall contain a description of the type of harm which has resulted or shall indicate that, at the time of application for service, conditions existed which placed the child or siblings in danger of serious emotional or physical harm and contain a description of the type of physical or emotional harm which would have been likely to result from these conditions. The record shall also contain the date of indication.

(2) Parental refusal

(i) Circumstance: The parents or caretakers have refused to maintain the child in the home or have expressed the intention of surrendering the child for adoption.

(ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services shall contain a description of the actions taken by the parents or caretakers which indicate a refusal to maintain the child in the home or shall include the date and a summary of the circumstances of the parents' or caretakers' verbal refusal or expression of intent to surrender the child.

(3) Parent unavailability

(i) Circumstance: The child's parents or current caretakers have become unavailable due to:

(a) hospitalization;
(b) arrest, detention or imprisonment;
(c) death; or
(d) the fact that their whereabouts are unknown.

(ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services shall contain a description of the reason for the parents' or caretakers' absence from the home, and the expected duration of the absence if the parents or caretakers are living and their whereabouts known. In the event of the death of the parents or caretakers or in the cases in which their whereabouts are unknown, such uniform case
record form shall indicate the likelihood of finding a new permanent caretaker or the previous caretaker, and an estimated time in which that will be accomplished.

(4) Parent service need

   (i) Circumstance:

      (a) The child is placed at risk of serious physical or emotional harm due to an emotional, mental, physical, or financial condition of the parent or caretaker which seriously impairs the parent's or caretaker's ability to care for the child.

      (b) a parent or caretaker has been diagnosed as having acquired immune deficiency syndrome (AIDS), human immunodeficiency virus (HIV)-related illness or HIV infection, as those terms are defined by the AIDS Institute of the State Department of Health and are contained in directives issued by the department from time to time, and such condition seriously impairs, or exacerbates other conditions which seriously impair, the parent's or caretaker's ability to care for his or her child, and places the child at risk of foster care placement.

   (ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services must contain:

      (a) a description of the type of emotional, physical or mental condition which is impairing the parent's functioning, the functions which are impaired, and instances in which the impairment has seriously harmed the child emotionally or physically or has placed the child in danger of such harm, or a summary of what financial needs, including a lack of adequate housing, impairs the parents' or caretakers' ability to care for the child adequately, and what specific risk to the child exists if such needs are not met; or

      (b) a medical report showing a diagnosis by a licensed physician that a parent or caretaker has AIDS, HIV-related illness or HIV infection and a description of how this condition seriously impairs, or exacerbates other conditions which seriously impair, the parent's or caretaker's ability to care for his or her child and places the child at risk of foster care placement. Records which include information regarding AIDS, HIV-related illness or HIV infection must be maintained in accordance with subpart 360-8 and section 431.7 of OCFS regulations (18 NYCRR).

(5) Child services needs

   (i) Circumstances: The child has special needs for supervision or services which cannot be adequately met by the child's parents or caretakers without the aid of intensive services and this results in the child being at risk of foster care placement
without such services. This need for services is the result of one of the following:

(a) the child has a diagnosed or diagnosable physical, mental or emotional condition which severely impairs the child's ability to carry out daily, age-appropriate activities; or

(b) the child's behavior, although not dangerous, results in severe management problems in the home, the school or the community;

(c) the child's behavior presents a serious danger to other people or to the child himself; or

(d) the child is the subject of a petition under article 7 of the Family Court Act or has been determined by the assessment service established pursuant to section 243-a of the Executive Law, or by the probation service where no such assessment service has been designated, to be at risk of being the subject of such a petition, and one of the following conditions applies:

(1) the family would have been eligible for preventive services at some time in the past, if application had been made;

(2) some child in the family has been placed in foster care at some time in the past;

(3) the child's behavior leading to the filing of the petition or to the risk of such filing is similar to the behavior described in clause (b) of this subparagraph but is less severe and this behavior has been exhibited over a period exceeding six months; or

(4) the family, or some member of the family has in the past or is currently receiving services from the social services district, the local mental health or mental retardation agency, the probation service, or the youth board for at least six months. The services which are or have been provided by the social services district must be those services which are set forth in the district's consolidated services plan; or

(e) the child has been diagnosed as having AIDS, HIV-related illness or HIV infection. The condition which results in such diagnosis must impair the child's ability to carry out daily, age-appropriate activities or result in a need for supportive services, other than medical or health-related services, to allow the parents or caretakers to maintain the child in their home.

(ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services shall show the services which are to be provided to the child and/or other
family members which will prevent the child's placement in foster care and assist in alleviating the behavior or condition or assist the parents or caretakers in dealing with the child's behavior or condition. In addition, such uniform case record form shall contain:

(a) a description of behavior patterns or limitations which illustrate a serious impairment of the child's ability to carry out everyday activities at an age-appropriate level. A diagnosis by a licensed psychiatrist or psychologist, including a permanently certified school psychologist, or by a certified social worker other than the Case Manager or Case Planner shall be deemed appropriate documentation for this subparagraph;

(b) a description of repeated instances of behavior within the 12 months immediately prior to the date on which the Program Choice of "Preventive" is chosen in which the child has exhibited behaviors leading to severe management problems in the home, school or community;

(c) a description of instances within the 12 months immediately prior to the date on which the Program Choice of "Preventive" is chosen in which the child has intentionally harmed or attempted to harm other persons or himself, or indicate that a licensed psychiatrist or psychologist, including a school psychologist with a master's degree in psychology, or a certified social worker other than the Case Manager or Case Planner has stated in writing that the child presents a serious danger to himself or others; or

(d) a description of the contents of any petition filed, pursuant to article 7 of the Family Court Act, concerning the child, including the allegations made, the date of filing, and the person or persons who filed, or a summary of the determination of the assessment service or the probation service that the child is at risk of becoming the subject of such a petition, and either:

(1) a description of the circumstances in which the family would have been eligible for preventive services in the past, including the standard under which it would have qualified;

(2) a description of the circumstances which led to the placement of any child in the family in foster care, including the dates of placement, which child was placed, and the reason for placement;

(3) a description of instances of behavior similar to that leading to the filing of the petition, extending over a period of at least six months, and presenting a potential for severe management problems in the home, school or community; or
(4) a description of the services received by the family, including the time period during which services were provided, the family member or members receiving services, the agency providing services, and the reason the services were sought; or

(e) a description of the condition(s) resulting from the child having AIDS, HIV-related illness or HIV infection, and examples of instances in which the condition(s) impairs the child's ability to carry out daily, age-appropriate activities or results in a need for supportive services, other than medical or health-related services, to allow the parents or caretakers to maintain the child in their home. A medical report showing the relevant diagnosis by a licensed physician must also be included as part of the documentation for this subparagraph. Records which include information regarding AIDS, HIV-related illness or HIV infection must be maintained in accordance with subpart 360-8 and section 431.7 of OCFS regulations (10 NYCRR).

(6) Pregnancy.

(i) Circumstance: A woman is pregnant or has given birth and has shown an inability to provide adequate care for her unborn or infant child.

(ii) Documentation: The first uniform case record form required after the date of authorization for Preventive Services shall indicate whether the woman is pregnant or has given birth and shall include a description of the parental functions which the woman is unable to perform. In addition, such uniform case record form shall show that services are to be delivered to the woman which will assist her in performing these functions.

(d) Standard for the provision of Mandated Preventive Services to clients at risk of replacement in foster care. The provision of Preventive Services shall be considered Mandated when such services are essential to prevent the replacement of a child into foster care. The circumstances in which Preventive Services shall be considered essential for these purposes include all of the circumstances described in the standard for the provision of Mandated Preventive Services to clients at risk of placement, as set forth in subdivision (c) of this section, and all of the following circumstances.

(1) Family Court contact

(i) Circumstance: The child is the subject of a juvenile delinquency or persons in need of supervision petition, or has been determined by the Family Court Intake or Family Court Probation Service to be at risk of being the subject of such a petition.

(ii) Documentation: The first uniform case record form required after the date of authorization for preventive services shall include a description of the child's previous placement, and a
description of the petition or other disposition by the Family Court, including the date of the petition or disposition.

(2) Unplanned discharge

(i) Circumstance: The child has been discharged from foster care within the two years immediately prior to the date of application for services and that discharge took place at least three months prior to the anticipated discharge date and without the achievement of all the client goals set forth in the service plan as required by the uniform case record and being pursued at the time of discharge.

(ii) Documentation: The first uniform case record form required after the date of authorization for preventive services shall contain a description of the child's previous placement, including the dates during which the child was in foster care, show the anticipated discharge date at the time of discharge, and describe which client goals could not be met due to the early discharge. If no service plan had been completed during the previous placement, information in the progress notes shall be used to the extent possible.

(3) Recurrence of reason for placement

(i) Circumstance: The child or the parents or caretakers have exhibited a pattern of behavior or a condition which is substantially similar to one or more of the behaviors or conditions which contributed to the child's previous placement in foster care and which is likely to lead to the necessity of replacement of the child.

(ii) Documentation: The first uniform case record form required after the date of authorization for preventive services shall contain a description of the child's previous placement, including the dates and reason for placement, contain a description of the behavior or circumstances occurring at the time of application for services which are similar to the factors contributing to the original placement, and provide reasons why this behavior or condition is likely to become serious.

(e) Standard for the provision of Mandated Preventive Services to return children to their parents

(1) The provision of Preventive Services, other than housing services, will be considered mandated to safely return a child currently in foster care to his/her parents sooner than would otherwise be possible, only if all of the conditions in subparagraphs (i), (ii), and (iii) of this paragraph are met.

(i) Service appropriateness

(a) Condition: The Preventive Services provided must be directly related to one or more of the reasons the child is currently in foster care.
(b) Documentation: The most recent assessment and service plan required by the uniform case record must show only preventive services to be delivered to the child and family which relate to one or more documented reasons establishing or maintaining the necessity of the child's placement.

(ii) Discharge plan

(a) Condition: Discharge of the child from foster care must be anticipated within six months.

(b) Documentation: The required uniform case record form must show the anticipated discharge dates to be in conformance with the standard in clause (i) of this subparagraph and must include a service plan for discharge consistent with the goals set forth in the most recent service plan as required by the uniform case record.

(iii) Safety and appropriateness

(a) Condition: Return to the child's parents or caretakers may only occur where the placement will be safe and appropriate.

(b) Documentation: The most recent assessment and service plan required by the uniform case record must include a written consideration and determination that return of the child to his/her parents or caretakers will be safe and appropriate.

(2) The provision of housing services as defined in subdivision (16) of section 423.2(b) of OCFS regulations, will be considered mandated to discharge a child from foster care to his/her parents or caretakers only if the conditions in subparagraphs (i), (ii) and (iii) of this paragraph are met.

(i) Service appropriateness

(a) Condition: At the time housing services are authorized, the Case Manager must determine that the primary factor preventing the discharge of the child from foster care is the family's lack of adequate housing.

(b) Documentation: Such determination can be made only in the following circumstances as documented in the first uniform case record form due after authorization for housing services:

(1) the child has been in foster care at least 30 days and the child can safely be returned to the parents or caretakers if housing services are provided, or the child has been in foster care for any length of time and since the placement date the family has moved to a different residence that is inadequate to house the child and the child...
can be safely returned to the parents or caretakers if housing services and any other available Preventive Services are provided;

(2) there is a description of the family's housing situation and a determination has been made that one or more of the following circumstances exist: the family is homeless or is residing temporarily in a shelter, hotel/motel, or other temporary housing; the family is residing in its own home, in a room and board situation or in the home of friends or relatives and that by the addition of the child to be discharged to the family would exceed the capacity of such residence as specified in local law, ordinances, or rules and regulations, would result in eviction or would create an unreasonable and unsafe degree of overcrowding as determined by the Case Manager; and family has a home, however rent or mortgage arrears places the family at imminent risk of losing the home; the family is residing in a building which is the subject of a vacate order; or the condition of the family's home poses a health and safety risk that would place the children to be discharged at imminent risk of harm, and

(3) where appropriate, there is a description of the home that the family has moved into or will move into in order for the child to be returned, or if a home has not yet been located the type of home the family will need, in order to provide adequate housing for the child(ren) to be returned safely.

(ii) Discharge plan

(a) Discharge of the child from foster care must occur no later than two months after housing services are authorized, or paid or, where relevant, adequate housing was located, provided and, if necessary renovated, such that the child could be safely discharged to such housing. Where adequate housing is made available and the child is not discharged from care, the reason for the child remaining in care will be deemed to be due to a factor other than inadequate housing and housing services must be terminated.

(b) Documentation: The uniform case record must document the actual date of discharge, the date that housing services were authorized or paid and, if relevant, the date adequate housing was located, renovated and provided. If the child is not discharged within two months of either the authorization date of such services or the actual provision of adequate housing, the case record must
document the specific circumstances which prevented the child's discharge from care, and a termination date no later than two months after either the date of the authorization of housing services or the date adequate housing was made available for the family to move in.

(iii) Safety and appropriateness

(a) Condition: Return to the child's parents or caretakers may only occur where the placement will be safe and appropriate.

(b) Documentation: The most recent assessment and service plan required by the uniform case record must include a written consideration and his/her parents or caretakers will be safe and appropriate.

(f) Standard for the provision of housing services as a mandated preventive service to children with a goal of discharge to independent living.

(1) Service appropriateness

(i) Condition: The provision of housing services as a Preventive service will be considered a Mandated service for the discharge of a child to Independent Living only if:

(a) the Case Manager has determined that housing services, as defined in paragraph (16) of section 423.2(b) of OCFS regulations (10 NYCRR), are necessary and such services have been authorized; and

(b) the Case Manager has determined that, at the time housing services are authorized, the child has been in foster care at least 30 days, is prepared for discharge to independent living and can be discharged only if housing services are provided.

(ii) Documentation: The required uniform case record form must include a description of the home that has been located or if none has been located the type of home the child will need in order to be discharged from foster care.

(2) Discharge plan

(i) Discharge of the child from foster care must occur no later than two months after housing services are authorized, unless an unforeseen circumstance, other than the child's inability to locate adequate housing, occurs and results in the Case Manager's determination that discharge must be postponed. In such instances, the reason for the child remaining in care will be deemed to be due to a factor other than inadequate housing and housing services must be terminated.

(ii) Documentation. The uniform case record must document the actual date of discharge and the date that housing services
were authorized, paid and, if relevant, the date adequate housing was located, renovated and provided. If the child is not discharged within two months of either the authorization date of such services or the actual provision of adequate housing, the case record must document the specific circumstances which prevented the child's discharge from care and a termination date no later than two months after either the date of authorization or the date adequate housing was made available.

(g) Court orders: Notwithstanding any other provision of this section, the provision of preventive services shall be considered mandated when placement of the child in foster care has been ordered by the Family Court but such order has been stayed or reversed upon an appeal or a request for rehearing by the Local Department of Social Services. In addition, the provision of Preventive Services shall be considered Mandated when a Family Court orders such services to be provided.

(h) Standard for the recertification of Mandated Preventive Services.

(1) The provision of Preventive Services, other than those described in paragraph (2) of this subdivision, for a period beyond the initial six-month eligibility period will be considered Mandated only if the most recent assessment and service plan required by the uniform case record for the family and the child indicates that not all client goals which are related to the reasons establishing the initial mandate for Preventive Services and which are currently being pursued have been achieved, or that removal of services at the present time would lead to a deterioration of the progress made.

(2) The provision of housing services as defined in section 423.2(b)(16) of OCFS regulations (10 NYCRR) beyond the initial six-month eligibility period will be considered Mandated only if the most recent assessment and service plan required by the uniform case record for the family and the child indicates that termination of the housing services would result in the family's inability to maintain or secure adequate housing. In no case may the provision of housing services exceed a period of 36 months commencing on the date housing services were authorized and provided. Housing services may not be provided as a Non-mandated Preventive Service. (e) Notwithstanding any other provisions of this section, reimbursement cannot be withheld for any placement that is continued beyond 90 days where a determination has been made by the Case Manager and documented in the assessment and service plan required in the uniform case record that the primary factor necessitating continued placement is the family's lack of adequate housing and that Preventive Services, including housing services as defined in subdivision (16) of section 423.2(b) of OCFS regulations (10 NYCRR), have been authorized to facilitate the child's or children's discharge from care and the child or children will be or have been discharged within two months of the date of authorization of such services or the date adequate housing is made available to the family.

(i) Standard for the provision of Mandated Preventive Services for children placed in designated emergency foster family boarding homes.

(1) Standard: The provision of Preventive Services is Mandated if a child is placed in a designated emergency foster family boarding home as defined in section 446.2 of OCFS regulations (10 NYCRR) and is expected at the time of
placement to return home within 60 days. If the child does not return home within
60 days as initially planned, the continued provision of Preventive Services may
not be considered Mandated, unless he or she meets the eligibility requirements
of subdivision (e) of this section.

(2) Documentation: The required uniform case record form must show that
Preventive Services are being provided for a child who is expected at the time of
placement to return home within 60 days after entering care in a designated
emergency foster family boarding home.

(j) Standard for the provision of Mandated Preventive Services as a follow-up service for
children discharged from designated emergency foster family boarding home care.

(1) Standard: The provision of Preventive Services is Mandated as a follow-up
service for six months, including the time the child was in a designated
emergency foster family boarding home care, if a child is returned home
within 60 days after entering designated emergency foster family
boarding home care.

(2) Documentation: The required uniform case record form must indicate the
child's discharge date from a designated emergency foster family boarding home and the follow-up Preventive Services to be provided to the child and family.

Revisions

(8/14/91 subd. (c), para. (4) amended; subd. (c), subpara. (5), clause (d), subclause (4)
amended; subd. (c), para. (5), subpara. (i), clause (e) added; subd. (c), para (5), subpara. (ii),
clause (d), subclause (4) amended; subd. (c), para. (5), subpara. (i), clause (e) added.)

(06/02/93 subd. (c), para. (5), subpara. (i), clause (d) amended.)

(08/23/99 subd. (e), paras. (1) and (2) are amended.)

(3/26/01 Part 430 filed)

(6/25/01 Part 430 re-filed, effective 6/25/01)

(7/30/01 Part 421 re-filed, effective date 7/30/01)

(8/10/01 Notice of Adoption filed)

(8/29/01 Regulations in the State Register and became effective as final regulations) (There
have been no changes to the regulations since the last two filings (April 30 and July 30, 2001.))

(12/24/01 filed as emergency regulation, effective 12/24/01)

(6/24/02 filed as emergency regulation and effective this date)

(9/23/02 filed as emergency regulation and effective this date, no changes to the regulatory
amendment since 6/24/02 filing)
430.10 Necessity of Placement

(a) General requirements

(1) For purposes of this section, the placement of a child in foster care after April 1, 1982, shall be considered necessary if the standard for necessary activities prior to the placement and the standard for placement, as set forth in subdivisions (b)-(c) of this section, are met.

(2) The necessity of a child's placement shall be documented on the forms prescribed by the department in Part 428 of OCFS regulations (18 NYCRR) according to the standards for documentation defined under the standard for necessary activities prior to placement and the standard for placement as set forth in subdivisions (b) and (c) of this section. In the absence of documentation in the uniform case record for the standard for placement, the placement shall be deemed unnecessary. To the extent permitted by the Mental Hygiene Law and the regulations of the Office of Mental Health and the Office of Mental Retardation and Developmental Disabilities, social services officials shall obtain copies of the case records and service plans and any updates to such records and plans for children whose care and custody have been transferred to such officials and who are receiving care in facilities operated or supervised by such offices. Such records, plans and updates shall be made a part of the uniform case record. It shall be the responsibility of the district to show that the standard for necessary activities prior to placement has been met, and a failure to provide evidence that this standard has been met shall be deemed equivalent to a failure to meet the standard.

(b) Standard for necessary activities prior to placement. For each foster care placement, the district shall:

(1) provide Preventive Services to the family and child prior to placement, unless the offer of Preventive Services has been refused or the placement is the result of a court order or due to the circumstance described as health and safety of the child as defined in paragraphs (c)(1) and (d)(2) of this section or unless the parents or caretakers are dead, their whereabouts unknown, or their absence is anticipated to be longer than six months or the child has been placed in a facility operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities;

(2) attempt prior to the placement of a child in foster care to locate adequate alternative living arrangements with a relative or family friend which would enable the child to avoid foster care placement, unless the child is placed as a result of a court order or surrender agreement as defined in paragraphs (d)(2) and (c)(2) of this section or the child has been placed in a facility operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities; and

(3) document in the first uniform case record form required after the date of authorization for foster care services that Preventive Services have been offered and the reasons why they were not able to avert the placement, except when the placement is the result of a court order or due to the circumstances described as health and safety of the child, as defined in paragraphs (d)(2) and (c)(1) of this section, or when a child is placed in a facility operated or supervised by the
Office of Mental Health or Office of Mental Retardation and Developmental Disabilities, or when the child's parents or caretakers are dead, their whereabouts are unknown, or their absence is expected to last longer than six months, and that no adequate alternative arrangements are available except in placements resulting from court orders or surrender agreements, as defined in paragraphs (d)(2) and (c)(2) of this section or when a child is placed in a facility operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities.

(4) prior to placing in foster care the child or children of a minor parent who is in foster care, attempt to place such child or children in the same foster family home or residential facility without assuming care and custody of the child or children of the minor parent, unless foster care placement is necessitated by a court order as described in paragraph (d)(2) of this section; and

(5) document in the first uniform case record form required after the date of authorization for foster care services that it was not possible to place the child or children in foster care with the minor parent; or why it was necessary to seek care and custody of such child or children despite placing the minor parent and his or her child or children in the same foster family home or residential facility.

(c) Standard for placement. Placement of a child in foster care shall occur when removal from the home is essential for ensuring the child receives proper care, nurturance or treatment. The circumstances in which placement may be considered essential for this purpose are the following:

(1) Health and safety of child

   (i) Circumstance: The child or a sibling has been subjected by the parents or caretakers, within the 12 months immediately prior to the date on which the Program Choice of "Placement" is selected, to serious physical injury by other than accidental means, or to risk of serious physical injury by other than accidental means, or to serious impairment of their physical, mental or emotional condition as a result of the failure of the parents or caretakers to exercise a minimum degree of care.

   (ii) Documentation

      (a) The first uniform case record form required after the date of authorization for foster care services shall contain a description of instances within the 12 months immediately prior to the date on which the program choice "Placement" is selected in which the child has been harmed emotionally or physically and the type of harm which has resulted, or shall indicate that at the time of placement conditions existed which placed the child or siblings in danger of serious emotional or physical harm which would have been likely to result from these conditions.

      (b) If the child has continued in placement beyond the date the first service plan review is required, the most recent assessment and service plan required by the
uniform case record shall indicate that conditions persist which, if the child were to be returned home, would continue to place the child in danger of serious physical or emotional harm. In order to establish a continuing danger to the child, the assessment and service plan shall cite one or more of the following factors: the parents' or caretakers' willingness to maintain regular contact with the child, their behavior during visits, their response to services offered or provided by the district or other involved agencies, their expressed willingness to take the child home and to plan for his or her welfare, the present status of environmental or any other factors which contributed to the original problems which necessitated the placement, and the overall progress of the parent toward the accomplishment of the goals established in the most recent service plan required by the uniform case record.

(2) Parental refusal or surrender

(i) Circumstance: The parent or caretakers refuse to maintain the child in the home or have voluntarily surrendered the child for adoption.

(ii) Documentation

(a) The first uniform case record form required after the date of authorization for foster care services shall show that, prior to the placement, the Local Social Services District attempted without success to persuade the parents or caretakers to maintain the child in the home, and offered services to assist in maintaining the child in the home and that these services were refused. The most recent assessment and service plan required by the uniform case record shall show that the district continues to make such efforts, and that these efforts continue to fail and/or be refused for as long as the child's discharge objective is "return to parents" or until the parents have signed a surrender agreement.

(b) If a surrender has been completed, the assessment and service plan required by the uniform case record shall also:

(1) include a copy of the surrender agreement, or a description of the date and conditions of the agreement;

(2) indicate whether the agreement of any other putative parent is necessary before the child can be adopted;

(3) document efforts beginning within 30 days of the date of the surrender agreement to locate and assess the suitability to care for the child
of any other putative parent whose agreement is necessary before the child can be adopted; and

(4) show efforts, if the parent is suitable, to place the child with the parent, if the other parent is unsuitable, to obtain a surrender agreement from this person or as soon as legally appropriate, to initiate an action to terminate this person's parental rights pursuant to section 384-b of the Social Services Law, or if the parent's whereabouts are not known and efforts to locate him or her are unsuccessful, to initiate an action to terminate this parent's rights on the basis of abandonment once he or she has failed to maintain contact with the child or the child's caretakers for a six-month period, pursuant to section 384-b of the Social Services Law.

(3) Parent unavailability

(i) Circumstance: The child's parents or caretakers are unavailable due to:

(a) hospitalization;
(b) arrest, detainment or imprisonment;
(c) death; or
(d) the fact that their whereabouts are unknown.

(ii) Documentation

(a) The first uniform case record form required after the date of authorization for foster care services shall contain the reason for the absence of the parents and the expected duration of that absence if the parents or caretakers are living and their whereabouts known, and a summary of the efforts to find an alternative living arrangement for the child, as defined in subdivision (b) of this section.

(b) If the parents or caretakers are living and their whereabouts known, and if the child has continued in placement beyond the date the first service plan review is required, the most recent assessment and service plan required by the uniform case record shall indicate whether any change has occurred in the reason for the parents' or caretakers' absence or in the expected duration of that absence. For parents or caretakers whose whereabouts are unknown, the most recent assessment and service plan required by the uniform case record shall indicate what progress has been made in attempting to locate them. When parental rights have been terminated, no further documentation is required to establish necessity of placement.
(4) Parent service needs

(i) Circumstance: The child is placed at risk of serious physical or emotional harm due to an emotional, mental or physical condition of the parents or caretakers, which seriously impairs the parents' or caretakers' ability to care for the child.

(ii) Documentation

(a) The first uniform case record form required after the date of authorization for foster care services shall contain documentation of the specific type and degree of parental impairment and a summary of instances in which the parental impairment seriously harms the child emotionally or physically or has placed the child in danger of such harm.

(b) If the child has continued in care beyond the date the first service plan review is required, the most recent assessment and service plan required by the uniform case record shall show that the impairment persists and that it would continue to pose a risk of serious emotional or physical harm to the child if he or she were to return home. In order to establish a continuing danger to the child, such assessment and service plan shall cite one or more of the following factors: the parents' or caretakers' willingness to maintain regular contact with the child, their behavior during visits, the adequacy of and their response to services offered or provided by the district or other involved agencies, their expressed willingness to take the child home and to plan for his or her welfare, the present status of the condition which necessitated the placement, and the overall progress of the parent toward the accomplishment of the goals established in the service plan.

(5) Child service needs

(i) Circumstance: The child has special needs for supervision or services which cannot be adequately met by the child's parents or caretakers, even with the aid of intensive services in the home. This need for services is the result of one of the following:

(a) The child has a diagnosed or diagnosable, physical, mental or emotional condition which severely impairs the child's ability to carry out daily, age-appropriate activities and which presents treatment needs which are too extensive or specialized for the child's parents to be able to maintain the child in the home.

(b) The child's behavior, although not dangerous, cannot be managed in the home, the school, or the community, even with extensive support to the parents and child.
(c) The child’s behavior presents a serious danger to other people or to the child himself.

(d) The child is eligible for admission to a facility operated or supervised by the Office of Mental Health or the Office of Mental Retardation and Developmental Disabilities.

(ii) Documentation: The most recent assessment and service plan required by the uniform case record shall show the services which are to be provided to the child which will assist in alleviating the child’s behavior or condition.

(a) The first uniform case record form required after the date of authorization for foster care services, shall contain:

(1) a description of behavior patterns which inhibit the child’s ability to carry out everyday activities in school, home or community; diagnosis by a licensed psychiatrist or psychologist, including a permanently certified school psychologist, or by a certified social worker other than the Case Manager or Case Planner, shall be deemed appropriate documentation for this subparagraph;

(2) a description of repeated instances of behaviors which cannot be managed in the home, the school, or the community, and efforts to ameliorate these problems through the provision of extensive support services; or

(3) a summary of instances within the 12 months immediately prior to the date on which the Program Choice of "Placement" is chosen in which the child has intentionally harmed or attempted to harm other persons or himself, or indicate that a licensed psychiatrist or psychologist, including a permanently certified school psychologist, or a certified social worker other than the Case Manager or Case Planner, has stated, in writing, that the child presents a serious danger to himself or others.

(b) If the child has continued in placement beyond the date at which the service plan review is required, the most recent assessment and service plan required by the uniform case record shall indicate that the behavior or condition continues at the present to require services at a level sufficient to justify continued placement, including:

(1) examples or a description of
the child’s recent behavior which illustrates that the child continues to require the provision of an extensive set of services and that without these services his behavior would be cause for placement; and

(2) the reasons why necessary services or supervision still cannot be provided in the child’s home.

(c) If the behavior which led to the placement has stopped or greatly diminished over a six-month period, the most recent assessment and service plan required by the uniform case record shall show which services needed by the child to prevent or diminish the behavior cannot be provided in the home and the reasons why they cannot be provided.

(d) If a child has been placed in a facility operated or supervised by the Office of Mental Health or the Office of Mental Retardation and Developmental Disabilities, documentation in the uniform case record which indicates that the child has been admitted to such facility shall be deemed to fulfill the documentation requirements of this subparagraph.

(6) Pregnancy

(i) Circumstance. A woman is pregnant or has given birth, and foster care placement would enable the mother and child to remain together and would significantly aid the mother in preparing to assume responsibility to care for her child or in making a decision to surrender the child for adoption.

(ii) Documentation. The first uniform case record form required after the date of authorization for foster care services shall:

(a) indicate whether the woman is pregnant or has given birth; and

(b) contain a description of the parental functions which the woman is unable to perform, as well as the availability of the woman’s parents or other relatives as resources.

(d) Notwithstanding any other provisions of this section, reimbursement shall not be withheld for any placement undertaken for the following reasons:

(1) Diagnostic evaluation: The child has been placed in a foster care program for no longer than 90 days specifically for the purpose of conducting a comprehensive diagnostic evaluation of the child. The first uniform case record form required after placement in the foster care program shall indicate the specific questions to be answered by the evaluation, examples of the child’s behavior or problems which necessitate this type of evaluation for this child, the reasons why the evaluation could not be completed while the child remains at
Court-ordered placement: The child was placed or remanded to the custody of the Commissioner of Social Services by the Family Court and foster care placement has been ordered by the court pursuant to article 3, 7 or 10 of the Family Court Act. Documentation shall include a copy of the court order or a description of the date and condition of the order in the first uniform case record form required after the court-ordered placement. In the event that a utilization review has occurred and found the court-ordered placement to be the sole reason for placement, the district shall request a rehearing of the placement within 30 days of the notification of such finding and shall present such finding as documentation for the court review.

(e) Notwithstanding any other provisions of this section, reimbursement cannot be withheld for any placement that is continued beyond 90 days where a determination has been made by the Case Manager and documented in the assessment and service plan required in the uniform case record that the primary factor necessitating continued placement is the family's lack of adequate housing and that Preventive Services, including housing services as defined in subdivision (16) of section 423.2(b) of OCFS regulations (10 NYCRR), have been authorized to facilitate the child's or children's discharge from care and the child or children will be or have been discharged within two months of the date of authorization of such services or the date adequate housing is made available to the family.

Revisions

(07/14/93 subd. (b), new paras. (4) and (5) added.)

430.11 Appropriateness of Placement

(a) The type and level of a foster care placement for a particular child shall be considered appropriate for the purposes of this section if the standard for continuity in the child's environment and the standards for appropriate level of placement, as set forth in subdivisions (c) and (d) of this section, are met.

(b) The requirements of this section shall pertain to all children OCFS regulations (18 NYCRR), is required. The appropriateness of a foster care placement shall be documented on the forms prescribed by the department in Part 428, according to the standards for documentation defined in the standard for continuity in the child's environment and the standards for appropriate level of placement, as set forth in subdivisions (c) and (d) of this section. In the absence of documentation in the uniform case record, the placement shall be deemed inappropriate.

(c) Continuity in the child's environment

(1) (i) Standard: Whenever possible, a child shall be placed in a foster care setting which permits the child to retain contact with the persons, groups and institutions with which the child was involved while living with his parents, or to which the child will be discharged. It shall be deemed inappropriate to place a child in a setting which conforms to this standard only if the child's service needs can only be met in another available setting at the same or a lesser level of care.
(ii) Any Indian child who is placed into foster care pursuant to the provisions of section 384, 384-a or 384-b of the Social Services Law or article 3, 7 or 10 of the Family Court Act shall be placed in the least restrictive setting which most approximates a family and in which his or her special needs, if any, may be met. Placement in accordance with the order of preference set forth in subdivision (f) of section 431.18 of OCFS regulations (10 NYCRR) supersedes other continuity factors in the placement of an Indian child. Any placement made pursuant to this subparagraph shall, in the absence of good cause to the contrary, as defined in section 431.18(f)(2) or (g)(2) of OCFS regulations (10 NYCRR), be made according to the preferences set forth in section 431.18(f) of OCFS regulations (10 NYCRR).

(2) Documentation: The uniform case record, as described in Part 428 of OCFS regulations (18 NYCRR), shall:

(i) show in the first uniform case record form required after the child's placement in his current setting that the child has been placed in a setting which enables him or her to maintain ties to his or her previous school, neighborhood, peers and family members, or show the reasons why such placement was not practicable or in the best interests of the child;

(ii) show in the first visiting plan required by the uniform case record after the child's placement in his current setting that biweekly visits with the parents or significant others are possible or the reasons why a placement was chosen which made such visits impossible;

(iii) show in the first uniform case record form required after the child's placement in his current setting that the child is placed under the supervision of a person or persons of a religious faith the same as that of the child or is placed with an agency, association, corporation, society or institution which is under the control of an incorporated or unincorporated church, as defined in article one of the Religious Corporation Law, representing a religious faith the same as that of the child, or, if that is not possible, show that the child's religious faith will be protected, and preserved in the current setting, or show the reasons why placement was not practicable or in the best interests of the child;

(iv) (Reserved.)

(v) for foster care placement involving Indian children, contain documentation which evidences the efforts made by social services districts to comply with the order of preference set forth in section 431.18(f) of OCFS regulations (18 NYCRR). Information concerning efforts by Social Services Districts to comply with the order of preference contained in the case record shall be made available to the Indian child's tribe and the Secretary of Interior upon request; and
(vi) if the setting is a foster family home or agency-operated boarding home, document in the first uniform case record form required after the placement of the child in the current setting that a determination has been made of the appropriateness of placing the child with his or her siblings or half-siblings in accordance with the provisions of section 431.10 of OCFS regulations (18 NYCRR).

(vii) the uniform case record must include a written consideration of the safety and appropriateness of the placement;

(viii) if the child has been placed in a foster care placement a substantial distance from the home of the parents of the child or in a State different from the State in which the parent's home is located, the uniform case record must contain documentation why such placement is in the best interests of the child; and

(ix) if the child has been placed in foster care outside of the State in which the home of the parents of the child is located, the uniform case record must contain a report prepared every 12 months by a Caseworker either of the authorized agency with case management and/or case planning responsibility over the child or the State in which the home or facility is located documenting the caseworker's visit to the child's placement within the 12 month period.

(3) For purposes of paragraphs (1) and (2) of this subdivision, the term Indian child shall have the meaning which is given to such term by subdivision (a) of section 431.18 of OCFS regulations (10 NYCRR).

(d) Standard for appropriate level of placement

(1) The most appropriate level of placement for each child will always be considered to be the least restrictive and most homelike setting in which the child can be maintained safely and receive all services specified in his or her service plan.

(2) Family foster homes and agency boarding homes. The placement of a child in a foster family home or an agency boarding home shall be considered placement at an appropriate level for the purposes of this section, if the services required in the most recent assessment and service plan required by the uniform case record are available to the child as part of the placement.

(3) Group homes and group residences.

(i) Standard: The placement of a child in a group home or group residence shall be considered placement at an appropriate level of care for the purposes of this section only if:

(a) the child is 10 years of age or older and the necessity of the child's placement is based, in whole or in part, on one or both of the reasons described in paragraphs (c)(5) and (6) of section 430.10 of OCFS regulations (18 NYCRR), as child service needs or pregnancy; and

(b) the services or supervision needed by the
child cannot currently be provided in a foster boarding home setting.

(ii) Documentation: The first uniform case record form required after the placement of the child in the current setting shall show the child's age and contain adequate documentation of the necessity of placement, and shall specify the services needed by the child which cannot be provided in a family foster home or agency boarding home.

(iii) Subparagraph (i) of this paragraph notwithstanding, the placement of any child 10 years of age or older in a group home or group residence shall be deemed placement at an appropriate level even when the services or supervision needed by the child which cannot be provided in a foster boarding home setting cannot be specified, if one or more previous placements in family foster homes or agency boarding homes have been terminated due to the child's refusal to stay in the home or the foster parents' refusal is due to the child's behavior. In this event, the first uniform case record form required after the placement of the child in the current setting shall contain a description of the previous placements and the reasons for their terminations.

(iv) Subparagraph (i) of this paragraph notwithstanding, the placement of any child in a group home or group residence shall be deemed placement at an appropriate level if such placement is necessary for the child to remain with his mother and/or siblings. In this event the first uniform case record form required after the placement of the child in the current setting shall indicate:

(a) that the child or his mother requires foster care due to pregnancy, as defined in paragraph (c)(6) of section 430.10 of OCFS regulations (10 NYCRR); or

(b) that one or more siblings requires care in a group home or group residence and that it is in the best interests of the child to maintain him or her with his or her siblings.

(v) Subparagraph (i) of this paragraph notwithstanding, the placement of any child 10 years of age or older in a group home or group residence shall be deemed placement at an appropriate level for the purposes of this section, if the child has been a victim of incest and this is shown in the first uniform case record form required after the placement of the child in the current setting to be one of the reasons for placement. (vi) Subparagraph (i) of this paragraph notwithstanding, the placement of any child 10 years of age or older in a group home or group residence shall be deemed placement at an appropriate level, if the first uniform case record form required after the placement of the child in the current setting shows that the parents resist placement of the child in a foster family home or agency boarding home, that the group home or group residence would provide better access to the parents than
would a foster family home or agency boarding home, that the
child's permanency planning goal is discharge to parents, and that
the State Commissioner of Social Services or his or her
representative has approved placement in this setting.

(4) Institutional placement

(i) Standard: The placement of a child in an institution, as
defined in Part 442 of OCFS regulations (10 NYCRR), other than a
group residence, shall be considered placement at an appropriate
level for the purposes of this section only if the child is 12 years of
age or older, and:

(a) the necessity of the child's placement is
based, in whole or in part, on one or more reasons described
in paragraph (c)(5) of section 430.10 of OCFS regulations
(10 NYCRR) as child service needs; and

(b) if services or a level of supervision are
needed by the child which cannot currently be provided in
any other level of care and which can be provided in the
institution in which the child is placed.

(ii) Documentation: The first uniform case record form
required after the placement of the child in the current setting shall
show the age of the child, and contain adequate documentation of
the necessity of placement, which services or level of supervision
needed by the child cannot currently be provided in any other level
of care, and efforts to obtain necessary services or supervision in a
less restrictive level of care.

(5) Supervised Independent Living

(i) Standard: The placement of a child in supervised
independent living shall be considered placement at an appropriate
level for the purposes of this section only if the child:

(a) is at least 16 years of age and (1) has been
in foster care for at least 90 consecutive days during period
immediately preceding the date on which the child entered
the program, or (2) is in the care and custody of a Social
Services official but has been discharged from foster care on
a trial basis at the time that the child entered the program;

(b) has a permanency planning goal of
discharge to Independent Living; and

(c) will be discharged from care within 12
months after placement in the program and has an
established service plan for discharge; a child in a supervised
independent living program may be discharged from care
within 18 months after placement in the program if is
determined that the child would be unable to complete a
vocational training or educational program if the child was
discharged from the program to an alternative address within 12 months after placement in the program.

(ii) Documentation: The first uniform case record form required after placement of the child in the program must show that the child was at least 16 years of age and was in foster care for at least 90 consecutive days during the period immediately preceding the date on which the child was placed in supervised independent living, or was in the care and custody of a Social Services official but had been discharged from foster care on a trial basis at the time the child entered such program, that he or she has a permanency planning goal of discharge to Independent Living, and that the anticipated discharge date is no later than 12 months after the placement of the child in supervised independent living, unless the child will be unable to complete a vocational training or educational program if the child was discharged from the supervised independent living program to an alternative address. In such instances the discharge date must be no later than 18 months after the child entered the program, and documentation must be provided that details why the child would be unable to continue in the vocational/educational program if the child was discharged to an alternative address.

(6) Child placed in facilities operated or supervised by the Office of Mental Health or the Office of Mental Retardation and Developmental Disabilities.

(i) Standard: The placement of a child in a facility operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities shall be considered placement at an appropriate level of care for the purposes of this section only if the child meets the criteria for admission to a facility operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities.

(ii) Documentation: For children placed in facilities operated or supervised by the Office of Mental Health or Office of Mental Retardation and Developmental Disabilities, the name and location of such facility shall be included in the uniform case record. The inclusion of such information in the case record shall be deemed to fulfill the documentation requirements of this subparagraph.

(e) Court placements: Notwithstanding any other provision of this section, a placement shall not be subject to denial of reimbursement due to inappropriate placement if a court has ordered that the child be placed in that particular setting. The first uniform case record form required after the placement of the child in the current setting shall include either a copy of the court order or a description of the terms of the order. In the event that a utilization review of the case has been completed, and has found that the child's placement does not comply with the requirements of this section, other than that defined in this subdivision, the district shall petition the court for a rehearing of the case within 30 days of the notification to the district that the placement is not appropriate. The district shall submit the finding of the utilization review to the court as documentation for the court review.
(f) Notwithstanding any other provision of this section, the placement of a child under 10 years of age in a group home or group residence and the placement of a child under 12 years of age in an institution other than a group residence shall be deemed necessary and excepted from the age standards, as defined in clause (d)(3)(i)(a) and subparagraph (d)(4)(i) of this section, only if:

(1) the child’s service needs, as documented in the first uniform case record form required after placement in such setting require:

   (i) sufficient supervision that professional staff are required who are awake and on duty 24 hours per day, where professional staff shall include all those whose primary responsibility is to supervise, teach, provide therapy to, or otherwise deal directly with the children; and

   (ii) at least three of the following:

      (a) intensive therapy from a licensed psychologist or psychiatrist or a certified social worker;

      (b) for a group home or group residence onsite medical staff on a daily basis, and for institutions onsite medical staff at least 16 hours per day;

      (c) a licensed speech pathologist;

      (d) a licensed physical therapist;

      (e) any other licensed or certified therapist;

      (f) onsite educational services;

      (g) structured recreational therapy; and

(2) the group home, group residence, or institution has been granted written approval to care for children of these ages by the Commissioner of the State Department of Social Services or by his or her representative, and the review of the agency’s program which precedes this approval includes consideration of the ratio of staff to children in care; or

(3) if the considerations in paragraph (1) or (2) of this subdivision are not met but the placement has been approved by the State Commissioner of Social Services or by his or her representative.
Revisions

(10/18/95 subd. (c), para. (2), subpara. (iv) repealed.)

(08/23/99 subd. (c), subparas. (v) and (vi) are amended and new subparas. (vii), (viii) and (ix) are added.)

(3/26/01 Part 430 filed)

(6/25/01 Part 430 re-filed, effective 6/25/01)

(7/30/01 Part 421 re-filed, effective date 7/30/01)

(8/10/01 Notice of Adoption filed)

(8/29/01 Regulations in the State Register and became effective as final regulations) (There have been no changes to the regulations since the last two filings (April 30 and July 30, 2001.))

(12/24/01 filed as emergency regulation, effective 12/24/01)

(6/24/02 filed as emergency regulation and effective this date)
Appendix C:
Progress Notes
Appendix C1:
Progress Notes Guidelines

Progress notes record the caseworker’s investigative, assessment and intervention activities in an objective and behaviorally descriptive way and should support the caseworker’s conclusions about safety, risk, family functioning, and the credible evidence that exists or fails to exist to substantiate allegations of child abuse and maltreatment. Additional casework activity which supports decision making and service and permanency planning is to be documented in progress notes for cases open for services and for cases in which children have been placed in out of home care. Progress notes should be recorded contemporaneously with the event, interview, observation or activity to preserve the integrity of the information being recorded.

Use clear, descriptive, factual information. Impressions or opinions of workers may be included and labeled as such. Relevant information that supports the worker’s opinions and impressions should be included, wherever possible. Also describe results of the contact, as appropriate, including any decisions made, actions planned, next steps or planned follow-up.

All CPS staff are instructed to record any identifying information related to contacts with the reporter/source in Investigation stage Progress Notes only, selecting Reporter/Source in the Other Participant field. Social Services District staff must not include any identifying information regarding the reporter/source of the CPS reports, including the institution, organization, etc., with which the person is affiliated, in any narrative field in Safety Assessments, the Risk Assessment Profile, Investigative Findings or Investigative Actions.

Progress notes must begin on the case initiation date or upon receipt of a report of suspected abuse or maltreatment for child protective service cases, and must continue until the case is closed to all services.

Progress Notes, as the record of service provision, case events, activities and contacts, must include, but are not limited to:

1. descriptions of contacts with children and parent(s) receiving services, including missed or cancelled appointments, and the reasons therefor;

2. actions taken in the investigation of a reported case of child abuse or maltreatment, including emergency and/or controlling interventions taken, and descriptions of collateral contacts and other activities relating to the collecting of information needed to formulate an assessment, and/or assist with making a determination regarding the report of abuse or maltreatment (All CPS staff are instructed to record any identifying information related to contacts with the reporter/source in Investigation stage Progress Notes only, selecting Reporter/Source in the Other Participant field. Social Services District staff must not include any identifying information regarding the reporter/source of the CPS reports, including the institution, organization, etc., with which the person is affiliated, in any narrative field in Safety Assessments, the Risk Assessment Profile, Investigative Findings or Investigative Actions);

3. efforts made to engage the family members in the development of the service plan, their level or degree of participation in the process and the family and children's reactions to services;

4. referrals and communications with other service providers involved in the case, and information received from specialized rehabilitative and supportive service
providers concerning casework contact activities with a child and/or family receiving preventive and/or protective services;

(5) referrals and communications with the local probation department regarding a child in the case;

(6) descriptions of contacts with educational/vocational personnel on behalf of a child;

(7) court hearings or other legal activities;

(8) significant events such as births, marriages, and divorces; and

(9) documentation of caseworker / supervisor conferences, including a description of the nature of the discussions and any required follow-up activities.

(10) For children in foster care or an alternative placement setting progress notes must also include:

   (i) casework contacts with child’s parent(s), guardian, and/or relatives, the child and the child’s day-to-day caretaker(s) including casework contacts required in accordance with OCFS regulations;

   (ii) descriptions of activities related to medical and dental examinations required on a regularly scheduled basis, including the initial medical examination, and any significant results, diagnosis, referrals and prescribed medications arising from such medical and dental examinations in accordance with OCFS regulations;

   (iii) descriptions of parental and/or guardian visits with a child, and any missed visits and the reasons therefore;

   (iv) descriptions of visits with the child, including but not limited to visits with siblings and/or half-siblings not placed with the child, potential permanency resources and any other persons of significance to the child;

   (v) chronological documentation of diligent efforts, as required by OCFS regulations, by an authorized agency to assist, develop and encourage a meaningful relationship between the parent(s) and the child;

   (vi) efforts by parent(s) to provide an adequate home and provide parental care for the child, or when it is determined that permanency for a child cannot be achieved within the child’s own family, discussions between the parent(s) and the authorized agency regarding the pursuit of adoption or another permanency planning goal for the child; and

   (vii) documentation that the parent(s) were advised of the possible consequences if a child remains in foster care for 15 of the most recent 22 months, and of discussions with parent(s) regarding the deleterious effects of foster care on the child and the child’s need for permanency.

(11) For children in foster care with certified or approved foster parents:

   (i) documentation that foster parents have been informed of the visiting plan for the child’s parent(s), guardian(s), siblings or half-siblings, or others for whom a visiting plan with the child exists;
(ii) documentation that the foster parents or prospective foster parents have been asked whether they will accept a sibling group, if appropriate;

(iii) documentation that the foster parents have been provided with information on the existence and location of all siblings or half-siblings of any child placed with them;

(iv) documentation that foster parents have been apprised of any special needs that the foster child has and the available supports and services to address the special needs; and

(v) documentation that the foster parents have been informed that diligent efforts will be made to facilitate regular biweekly visitation or communication between minor siblings or half-siblings who have been placed apart, unless such contact would be contrary to the health, safety or welfare of one or more of the children or unless the lack of geographic proximity precludes visitation.

(12) Progress notes need not include clinical notes, daily logs or other written material created by service providers who act in roles other than caseworker, child protective services monitor, case planner and case manager.

Progress Notes need to include the following documentation when consolidating investigation:

Prior to supervisory approval, document the following statement in the Investigation (INV) Conclusion for the Investigation that is being “closed as duplicate”:
For information regarding the allegation(s) contained in this associated Intake report, please see the Investigation Summary Report for Investigation (INV) stage ID ________.

Prior to supervisory approval, document the following statement in the Investigation Conclusion for the Investigation that information is being consolidated into:
This Investigation Conclusion pertains to the allegation(s) contained in the associated Intake reports for Investigation (INV) Stage ID __________ and Investigation (INV) Stage ID: __________.
## Appendix C2:
### Progress Notes Data Fields

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## Exceptions to the Rule

The Edit Matrix table on the previous page provides the circumstances in which each field is required, enabled or disabled. There are exceptions to the rule; these are listed below. These exceptions are indicated by a footnote in the Edit Matrix table.

### Exceptions to the Rule

<table>
<thead>
<tr>
<th>Footnote Number</th>
<th>Type</th>
<th>Method</th>
<th>Required Field(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Casework Contact</td>
<td>Face to Face</td>
<td>Either Participant or Other Participant</td>
</tr>
<tr>
<td>2</td>
<td><strong>Stage Type</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>FSS/CWS, OTI, COI, ICPC or ADVPO</td>
<td>Family/PDR Visitation, Sibling Visitation or Other Visitation</td>
<td>Face to Face (only possibility) At least two Participants or one Participant and an Other Participant</td>
</tr>
<tr>
<td>3</td>
<td>Casework Contact</td>
<td>All possible choices</td>
<td>Focus (if Foster/Adoptive Parent or Congregate Care is selected in the Other Participant field)</td>
</tr>
</tbody>
</table>

### Footnote

*Summary and Supervisor/Managerial Review cannot be selected in addition to any other Types.*
5 Casework Contact cannot be selected in addition to Attempted Casework Contact.

6 Family/PDR Visitation cannot be selected in addition to Attempted Family/PDR Visitation.

7 Sibling Visitation cannot be selected in addition to Attempted Sibling Visitation.

Edits 8-10 are higher-level edits, used when the Primary worker in the stage is a member of a district that has requested additional requirements or when the Case Manager of the FSS stage is a member of a district which has requested the higher-level edits and data values, is identical to the above, with the following addition(s):

8 Event Time is required when:
   • Type is Attempted Family/PDR Visitation, or
   • Type is Casework Contact or Attempted Casework Contact and Method is Face to Face or Phone; or
   • Type is Collateral Contact and the Method is Phone.

9 Purpose is required for all combinations of Type and Method in INV and FSS stages except Type of Summary where Purpose is disabled.

10 Notice/ Approval Type note is Higher Level of Edits and should display only if the district has opted to have higher
Appendix C3:  
Progress Notes Data Values

Some choices are available on the Progress Notes Detail window only under specific circumstances which are described using the following notation:

1. **Review Note** and **Review Case** are only available as choices for **Purpose** when the **Type** is “Supervisor/Managerial Review” for all stage types.

2. **24 Hour** is available as a choice for **Purpose** when the **Type** is “Casework Contact” or “Attempted Casework Contact” only for Investigation (INV) stages.

8. **Reporter/Source** is available as a choice for **Other Participant** only for CPS Investigation stages. It is **not** available for Family Services Stages.

HIGHER-LEVEL EDITS

There are higher-level edits and values that some districts may request. These edits are additional requirements that are in place when the Primary worker in the stage is a member of a district which has requested higher-level edits. These edits affect the choices that are available to the worker, depending on responses made to specific fields:

3. **24 Hour, 48 Hour** and **Initial** will be available as a choice for **Purpose** when the **Type** is “Casework Contact” or “Attempted Casework Contact” and the stage type is Investigation (INV).

4. **Case Transfer Review, Initial, 48 Hour, 5 Day, 10 Day, 25 Day, 30 Day, 50 Day and 55 Day** are only available as choices for **Purpose** when the **Type** is Supervisor/Managerial Review and the stage type is Investigation.

5. “Child Evaluation Specialist” and “Third Party Reviewer” are available as a choice for **Other Participant** for all contact types in all stage types.

6. The following **Purpose** options are available when the **Type** selected is “Case Conference” only for Investigation (INV) stages:

   - 72 Hour Elevated Risk Child Safety Conference
   - 72 Hour Post Placement Child Safety Conference
   - 30 Day Elevated Risk Family Permanency Conference
   - 30 Day Post Placement Family Permanency Conference
   - 40 Day FSU Case Transfer Conference
   - 10 Day FSU Conference
   - 40 Day FSU/ CPM Conference
   - 45 Day FSU Conference
   - Replacement
   - Critical Case Planning
   - Court Extension Review
   - Post Court Extension Review
   - Trial Discharge, Final Discharge
   - 90 Day Service Plan Review
   - 6 Month Service Plan Review
   - Protective Placement Decision Making
   - Voluntary Placement Decision Making
   - Persons in Need of Supervision (PINS)
   - Family Team Conference follow-up
The following **Purpose** options are available for all contact types when the stage type is Investigation:

- Investigation
- Child's Account
- Parent's Account
- Other Household Member's Account
- Alleged Subject's Account

**Initial** is available as a choice for **Purpose** when the **Type** is “Attempted Casework Contact” and the stage type is FSS.

**Initial, 30 Day** and **30 Day FSU** are available as choices for **Purpose** when **Type** is “Casework Contact” and the stage type is FSS.

**Initial, 10 Day, 40 Day, and 10 Day FSU Review, 40 Day FSU/CPM Review, 45 Day FSU Conference** and **45 Day FSU Review** are available as choices for **Purpose** when **Type** is Supervisor/Managerial Review and the stage type is FSS.

The following **Purpose** options are available when the **Type** selected is “Notice/Approval” and the stage is an ACS staff member:

- Return of Child During Trial Discharge
- Request to file FCA Article 10 Petition On Voluntarily Placed Child
- Homemaking Services
- Day Care Services for Child In Care
- Consent for Medical Care/ HIV Testing
- Special/ Exceptional Board Rate
- Suspend Payment/ Lift Suspended Payment(Other than Trial Discharge)
- Out of State Visits
- Initiate Interstate Compact
- Termination of Parental Visitation
- Request for Utilization Review Level of Care Exceptions
- Change in PPG
- Enlistment In the Armed Forces or Job Corps
- Marriage
- Report of Accident or Illness
- Other,
- Preventive Services Are Started/ Ended for a Child
- Case is Closed to CPS
- Child is Entering/Re-Entering Foster Care
- Child is Moved From One Foster Setting to Another
- Child Becomes Legally Free for Adoption
- Trial Discharge
- Final Discharge
## Appendix C4:
### Progress Notes Field Options

<table>
<thead>
<tr>
<th>Type</th>
<th>Method</th>
<th>Location</th>
<th>Other Participant</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Conference</td>
<td>Face to Face</td>
<td>Adoptive Home</td>
<td>Community Resource</td>
<td>Adoption Activities</td>
</tr>
<tr>
<td>Casework Contact</td>
<td>Mail</td>
<td>Congregate Care Facility</td>
<td>Indian Tribe/Council</td>
<td>Pre-Adoption Activities</td>
</tr>
<tr>
<td>Collateral Contact</td>
<td>Fax</td>
<td>Court</td>
<td>Juvenile Detention</td>
<td>Aftercare Services</td>
</tr>
<tr>
<td>Court</td>
<td>Phone</td>
<td>Day Care</td>
<td>Law Enforcement</td>
<td>Assessment</td>
</tr>
<tr>
<td>Family/Primary Discharge Resource Visitation</td>
<td>E-mail</td>
<td>Foster Home</td>
<td>Legal/ Attorney</td>
<td>Counseling</td>
</tr>
<tr>
<td>Sibling Visitation</td>
<td>Other</td>
<td>Hospital/Health Facility</td>
<td>Medical</td>
<td>Child Preparation</td>
</tr>
<tr>
<td>Other Visitation</td>
<td></td>
<td>LDSS Office/ Field Office</td>
<td>Mental Health</td>
<td>Crisis Intervention</td>
</tr>
<tr>
<td>Summary</td>
<td></td>
<td>OMR Facility</td>
<td>Probation</td>
<td>Educational Planning</td>
</tr>
<tr>
<td>Supervisor/ Managerial Review</td>
<td></td>
<td>OMRDD Facility</td>
<td>Service Provider</td>
<td>Employment/Training</td>
</tr>
<tr>
<td>Attempted Casework Contact</td>
<td>Service Provider/ Contract Agency</td>
<td></td>
<td>School Staff</td>
<td>Family Planning</td>
</tr>
<tr>
<td>Attempted Family/Primary Discharge Resource Visitation</td>
<td>Precinct/Law Enforcement Office</td>
<td></td>
<td>Alcohol/Other Drug Service</td>
<td>Housing</td>
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<tr>
<td>Attempted Sibling Visitation</td>
<td>Parent’s Home</td>
<td>Volunteer/Mentor</td>
<td>Independent Living Services</td>
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</tr>
<tr>
<td></td>
<td>Prison</td>
<td>Foster/Adoptive Parent</td>
<td>Coordinate/Monitor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public Location</td>
<td>Relative</td>
<td>Case Planning</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relative’s Home</td>
<td>Primary Resource Person</td>
<td>Parent Training</td>
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</tr>
<tr>
<td></td>
<td>School</td>
<td>Caseworker</td>
<td>Placement</td>
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<tr>
<td></td>
<td>Shelter-Domestic Violence</td>
<td>Supervisor</td>
<td>Investigation&lt;sup&gt;7, 9&lt;/sup&gt;</td>
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<tr>
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<td>Shelter-Homeless</td>
<td>Child Advocacy Center</td>
<td>Medical</td>
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<td>Child Advocacy Center</td>
<td>Case Address</td>
<td>Notifications and Letters</td>
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<td></td>
<td>Case Address</td>
<td>Community Resource</td>
<td>Review Notes&lt;sup&gt;1&lt;/sup&gt;</td>
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<td>24 Hour&lt;sup&gt;2, 3&lt;/sup&gt;</td>
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<td>48 Hour&lt;sup&gt;3, 4&lt;/sup&gt;</td>
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</tbody>
</table>

<sup>1</sup> Indicates Observed noting to the reporter. <sup>2</sup> Represents a 24-hour period. <sup>3</sup> Represents a 48-hour period.
<table>
<thead>
<tr>
<th>Type</th>
<th>Method</th>
<th>Location</th>
<th>Other Participant</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notice/ Approval (con't)</td>
<td>Administrator</td>
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<td>District/ Agency Staff</td>
<td>Initial 3,4,8,9,10</td>
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<td>Child Evaluation Specialist</td>
<td>5 Day 4</td>
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<td>Third Party Reviewer</td>
<td>10 Day 4,6,10</td>
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<td>Other</td>
<td>25 Day 4</td>
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<td>Friend</td>
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<td>Parent Advocate</td>
<td>30 Day 4,9</td>
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<td>Clergy</td>
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<td>50 Day 4</td>
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<td>Alleged Subject's Account 7</td>
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<td>72 Hour Elevated Risk Child Safety Conference 6</td>
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<td>30 Day Elevated Risk Permanency Conference 6</td>
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<td>40 Day 6,10</td>
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<td>45 Day FSU Conference 6,10</td>
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<td>Replacement 6</td>
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<td>Other Participant</td>
<td>Purpose</td>
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<td>Notice/ Approval (con't)</td>
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<td>90 Day Service Plan Review</td>
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<td>6 Month Service Plan Review</td>
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<td>45 Day FSU Review</td>
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<td>40 Day FSU/CPM Review</td>
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<td>30 Day FSU</td>
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<td>FSU Case Transfer Conference</td>
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<td>40 Day FSU/CPM Conference</td>
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<td>45 Day FSU Conference</td>
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<td>Protective Placement Decision Making</td>
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<td>Voluntary Placement Decision Making</td>
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<td>Persons in Need of Supervision (PINS)</td>
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<td>Return of Child During Trial Discharge</td>
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<td>Request to file FCA Article 10 Petition on Voluntary Placed Child</td>
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<td>Day Care Services for Child In Care</td>
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<td>Consent for Medical Care/ HIV testing</td>
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<td>Special/Exceptional Board Rate</td>
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<tr>
<td>Notice/ Approval(^{11}) (cont)</td>
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<td>(Other than Trial Discharge)(^{11})</td>
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<td>Out of State Visits(^{11})</td>
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<td>Initiate Interstate Compact(^{11})</td>
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<td>Termination or Limitation of Parental Visitation(^{11})</td>
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<td>Request for Utilization Review Level of Care Exceptions(^{11})</td>
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<td>Change PPG(^{11})</td>
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<td>Enlistment in the Armed Forces or Job Corps(^{11})</td>
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<td>Marriage(^{11})</td>
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<td>Report of Accident or Illness(^{11})</td>
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<td>Other(^{11})</td>
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<td>Preventive Services Are Started/ Ended for a Child(^{11})</td>
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<td>Case is Closed to CPS(^{11})</td>
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<td>Child is Entering or Re-entering Foster Care(^{11})</td>
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<td>Child is Moved from One Foster Care Setting to Another(^{11})</td>
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<td>Child Becomes Legally Freed for Adoption(^{11})</td>
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<td>Trial Discharge(^{11})</td>
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<td>Final Discharge(^{11})</td>
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</tbody>
</table>

* See the note below regarding these purposes. Refer to Appendix C3 for complete information on notations regarding the purposes.
# Appendix C5: Progress Notes Types

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attempted Casework Contact</td>
<td>Select when a contact was initiated, but unsuccessful, i.e. client was unavailable at the attempted time.</td>
</tr>
<tr>
<td>Attempted Family Visitation</td>
<td>Select when a visit was planned between a child in foster care and his or her family members, but was unsuccessful, i.e. family member did not appear at the arranged date/time.</td>
</tr>
<tr>
<td>Attempted Sibling Visitation</td>
<td>Select when a visit was planned between a child in foster care and his or her sibling(s), but was unsuccessful, i.e. sibling(s) were ill.</td>
</tr>
<tr>
<td>Case Conference</td>
<td>Select for service plan reviews and any other meetings involving case members, district/agency staff and/or service providers.</td>
</tr>
<tr>
<td>Casework Contact</td>
<td>Select for a contact made with a member of the case; note if method is 'face-to-face' then either a 'participant' or 'other participant' is required.</td>
</tr>
<tr>
<td>Collateral Contact</td>
<td>Select for a contact with a non-case member.</td>
</tr>
<tr>
<td>Court</td>
<td>Select to record narrative concerning court related activities or events.</td>
</tr>
<tr>
<td>Family Visitation</td>
<td>Select when recording information regarding a visit made between a foster child and one or more family members, regardless of whether caseworker was present; note at least two 'participants' must be selected or one 'participant' and an 'other participant' of 'relative.'</td>
</tr>
<tr>
<td>Sibling Visitation</td>
<td>Select when recording information regarding a visit made between siblings, when at least one sibling is in foster care and others live at home or in a different foster care facility regardless of whether caseworker was present.</td>
</tr>
<tr>
<td>Summary</td>
<td>Select when a series of contacts is being recorded in summary fashion, across a date range for a specific purpose, such as a report to the court or other agency; note no other types may be selected when choosing 'summary.'</td>
</tr>
<tr>
<td>Supervisor/Managerial Review</td>
<td>Selection provided for a supervisor or manager to annotate the progress note recorded that a review of a specified group of contacts has occurred.</td>
</tr>
<tr>
<td>Other Visitation</td>
<td>Select when recording information regarding any other type of visit that does not fall into the Types noted above regardless of whether caseworker was present or not.</td>
</tr>
<tr>
<td>Notice/Approval</td>
<td>All requests for approvals and notifications to ACS must be documented in Progress Notes using the Progress Notes Type, Notice/Approval.</td>
</tr>
</tbody>
</table>

---

Appendix C5: Progress Notes Types

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Attempted Casework Contact</td>
<td>Select when a contact was initiated, but unsuccessful, i.e. client was unavailable at the attempted time.</td>
</tr>
<tr>
<td>Attempted Family Visitation</td>
<td>Select when a visit was planned between a child in foster care and his or her family members, but was unsuccessful, i.e. family member did not appear at the arranged date/time.</td>
</tr>
<tr>
<td>Attempted Sibling Visitation</td>
<td>Select when a visit was planned between a child in foster care and his or her sibling(s), but was unsuccessful, i.e. sibling(s) were ill.</td>
</tr>
<tr>
<td>Case Conference</td>
<td>Select for service plan reviews and any other meetings involving case members, district/agency staff and/or service providers.</td>
</tr>
<tr>
<td>Casework Contact</td>
<td>Select for a contact made with a member of the case; note if method is 'face-to-face' then either a 'participant' or 'other participant' is required.</td>
</tr>
<tr>
<td>Collateral Contact</td>
<td>Select for a contact with a non-case member.</td>
</tr>
<tr>
<td>Court</td>
<td>Select to record narrative concerning court related activities or events.</td>
</tr>
<tr>
<td>Family Visitation</td>
<td>Select when recording information regarding a visit made between a foster child and one or more family members, regardless of whether caseworker was present; note at least two 'participants' must be selected or one 'participant' and an 'other participant' of 'relative.'</td>
</tr>
<tr>
<td>Sibling Visitation</td>
<td>Select when recording information regarding a visit made between siblings, when at least one sibling is in foster care and others live at home or in a different foster care facility regardless of whether caseworker was present.</td>
</tr>
<tr>
<td>Summary</td>
<td>Select when a series of contacts is being recorded in summary fashion, across a date range for a specific purpose, such as a report to the court or other agency; note no other types may be selected when choosing 'summary.'</td>
</tr>
<tr>
<td>Supervisor/Managerial Review</td>
<td>Selection provided for a supervisor or manager to annotate the progress note recorded that a review of a specified group of contacts has occurred.</td>
</tr>
<tr>
<td>Other Visitation</td>
<td>Select when recording information regarding any other type of visit that does not fall into the Types noted above regardless of whether caseworker was present or not.</td>
</tr>
<tr>
<td>Notice/Approval</td>
<td>All requests for approvals and notifications to ACS must be documented in Progress Notes using the Progress Notes Type, Notice/Approval.</td>
</tr>
</tbody>
</table>
Appendix D: FASP Edits

Preliminary Edits  These first-level edits are in place to ensure that the preliminary information necessary [e.g., to populate the scales, determine the primary caretaker and tracked child(ren)] is in place.

- At least one child in the FSS (listed in the current Stage Composition) must have both a Permanency Planning Goal (PPG) and a Program Choice (i.e., there must be a tracked child). Otherwise, the following message displays:

  “One person must have a PPG and Program Choice to launch a FASP.”

- Each child with a Program Choice must have a PPG. If no PPG exists, the following message displays:

  “Every person with a Program Choice must also have a PPG.”

- If any person in the active Stage Composition has a date of death (DOD), the launch fails and the following message displays:

  “All persons with a date of death must be end dated.”

- If the FASP is part of an FSS/CWS, the Family Relationship Matrix must be completed. If it has not been completed, the following message displays:

  “The Family Relationship Matrix is incomplete.”

Otherwise, CONNECTIONS will not know whom to populate in the assessment scales. The Family Relationship Matrix does not need to be completed for an FSS/CCR, since this is a case/stage of one person.

- If the FASP type is either the Comprehensive or a Reassessment and the preceding FASP in the FSS is In Process, Pending or Not Launched, the following warning message displays:

  “One or more preceding FASPs is not approved. Information carried forward from the last approved FASP may be outdated. In process or pending FASPs will be marked to Template Format. Not Launched FASPs will be marked missed.”

Secondary Edits  These edits are in place to ensure that a Case Initiation Date has been set, enabling CONNECTIONS to establish when to open the launch window and notify you of the next coming due activity. These Secondary Edits are performed for every FASP launched except a Plan Amendment FASP. To launch a Plan Amendment FASP, an alternative
set of edits are performed. (See “Secondary Plan Amendment (PA) Edits” on page 3.)

►CID Edits

- If a Case Initiation Date (CID) exists, no further edits are performed (unless the FASP type is Reassessment); the process should return successfully to the FASP Launch for the final FASP launch edits. The Default CID, established during Stage Progression, is not a valid CID for these purposes; it is used only to calculate FASP due dates.

- If there is no CID and the FASP type is Comprehensive or Reassessment, the launch fails, meaning that the Initial FASP was never completed and no CID was established. The following message displays:

  “Enter either a Date of Placement, Date of Application Received from Parent/Client, or Date of Court Order in order to launch the FASP.”

  You are returned to the FASP window, where you can record information in one of the date fields.

- If no CID has been established and the FASP type is Initial, the following additional checks must be performed:
  - There must be an open Investigation stage in this case to continue checking, implying that you wish to use the date of indication of that Investigation as the CID.
  - If there is no open Investigation stage in the case, the launch fails. The following message displays:

    “Enter either a Date of Placement, Date of Application Received from Parent/Client, or Date of Court Order in order to launch the FASP.”

    - If there is an open Investigation stage in the case and an approved 7-Day Safety Assessment exists, CONNECTIONS continues the launch process.
    - If there is an open Investigation stage in the case and there is not an approved 7-Day Safety Assessment, the launch fails. The following message displays:

      “Initial FASP cannot be launched without a Case Initiation Date until a safety assessment is approved within the CPS Investigation stage.”
**Reassessment Edits**

If a Reassessment FASP is being launched and more than one reassessment exists in Not Launched status, you must select which reassessment to launch. This would happen if several Reassessment cycles have passed without any FASP being done. The *Choose Reassessment FASP* window displays with a list of possible reassessments in Not Launched status from which you can select. Once you select a reassessment, the *Continue* button enables. The *Cancel* button is always enabled.

Keep in mind that if you want to preserve the ability to complete all of the overdue Reassessment FASPs, select the FASP with the *oldest* date and work your way forward in time.

**Secondary Plan Amendment (PA) Edits**

- For FSS/CWS stages, there must be an approved FASP in order to launch a PA.
- For FSS/CCR stages, a PA can be launched without an approved FASP in the stage.
- If there is already a FASP or PA currently open (In Process or Pending), a PA cannot be launched. The following message displays:
  
  "A FASP or Plan Amendment is currently open. Record all necessary assessment and planning information in the open FASP or Plan Amendment."

- If the next FASP that is due is a Reassessment and it *is not* past its due date or if the Reassessment FASP is *not* launched and *is* past its due date, the following message displays:

  "A Reassessment FASP is available for launch. Are you closing this Family Services Stage?"

  - Click on the *Yes* button to continue with the launch.
  - Click on the *No* button to cancel the launch and return to the FASP window. The following message displays:

  "Complete the required documentation within the FASP."

- If the next FASP due is the Comprehensive and it *is not* past its due date, or if the Comprehensive FASP has *not* been launched yet and *is* overdue, the following message displays:

  "The Comprehensive FASP is available for launch. Are you closing this Family Services Stage?"

  - Click on the *Yes* button to continue with the launch.
  - Click on the *No* button to cancel the launch and return to the FASP window. The following message displays:

  "Complete the required documentation within the FASP."
Final Edits

With this final level of edits, CONNECTIONS checks to see if any other FASP work is in process or pending approval. You are presented with choices if those conditions exist. Remember that only one FASP can be open and worked on at a time.

- If an In Process FASP exists and you attempt to launch a new one, the existing FASP changes to Template Format. This can be done by anyone with a role in the stage. The following message displays:

  "Please confirm your decision to mark the In Process or Pending FASP to Template Format."

  o Click on the Continue button to confirm this message; the information from the In Process or Pending FASP is transferred to the FASP Template Format output report. If the FASP is pending approval, the approval Task To-Do is invalidated.

  o Click on the Cancel button to cancel the operation. The following message displays:

    "The user cancelled the current operation."

- If a FASP or Plan Amendment (PA) exists in pending approval status and you attempt to launch another FASP, CONNECTIONS checks the length of time the FASP or PA has been in Pending status. If the FASP or PA has been in Pending status for seven (7) days or less, the launch process fails and the following message displays:

  "The pending FASP or PA cannot be moved to Template Format until it has been in pending status for more than 7 days."

  If the FASP or PA has been in Pending status for more than seven (7) days, it may be converted to Template Format. This can only be done by the Case Planner. You should make every effort not to drop a Pending FASP, because once a FASP is in Template Format, the information does not carry over to future FASPs.

- If there is a FASP that you missed that comes before the FASP you are currently launching, the following message displays:

  "Please confirm your decision to mark the not launched FASP as Missed."

  If you decide you want to complete work on the FASP that you missed, complete that work first. Otherwise, CONNECTIONS marks it as Missed and you cannot launch the previous FASP.

  o Click on the Continue button to update the status to Missed and return to the Final Edits launch process.

  o Click on the Cancel button to end the launch process and discard any changes. The following message displays:

    "The user cancelled the current operation."
Appendix E:  
FASP Legal Codes

**Court Type**
- Family Court
- Supreme Court
- Surrogate Court

**Legal Event**
- Agreement Signed
- Anticipated Discharge
- Appeal
- Hearing
- Petition Filed
- Removal
- TPR Petition Not Required

**Legal Type**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCC</td>
<td>384-a Transfer of Care and Custody</td>
</tr>
<tr>
<td>CAV</td>
<td>358-a Court Action - Voluntary</td>
</tr>
<tr>
<td>CRV</td>
<td>392 Court Review - Voluntary</td>
</tr>
<tr>
<td>TAN</td>
<td>Article 10 - Abuse/Neglect</td>
</tr>
<tr>
<td>RAN</td>
<td>1055 Court Review - Abuse Neglect</td>
</tr>
<tr>
<td>APN</td>
<td>Article 7 - PINS</td>
</tr>
<tr>
<td>AJD</td>
<td>Article 3 - JD</td>
</tr>
<tr>
<td>CPN</td>
<td>756-a Court Review - PINS</td>
</tr>
<tr>
<td>VSA</td>
<td>384 Voluntary Surrender for Adoption</td>
</tr>
<tr>
<td>CGC</td>
<td>384b Commitment of Guardianship and Custody</td>
</tr>
<tr>
<td>RAP</td>
<td>651b Refugee Assistance Program</td>
</tr>
<tr>
<td>VOD</td>
<td>Violation of Disposition</td>
</tr>
<tr>
<td>OFC</td>
<td>Other Family Court</td>
</tr>
<tr>
<td>OCN</td>
<td>Other Court - Non-Family</td>
</tr>
<tr>
<td>JPH</td>
<td>355.5 JD 12 month Permanency Hearing</td>
</tr>
<tr>
<td>CFC</td>
<td>1055-a Court Review - Freed Children</td>
</tr>
<tr>
<td>CIC</td>
<td>383c Voluntary Surrender for Adoption - Child in Care</td>
</tr>
<tr>
<td>EPH</td>
<td>355.3 JD Initial Extension of Placement Hearing</td>
</tr>
<tr>
<td>SPH</td>
<td>7355.5/355.3 JC Subsequent Permanency/Extension of Placement Hearing</td>
</tr>
<tr>
<td>CRE</td>
<td>Compelling Reason(s) Exist</td>
</tr>
<tr>
<td>SNP</td>
<td>Services Not Provided</td>
</tr>
<tr>
<td>ARH</td>
<td>Approved Relative Home Placement</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Description</td>
</tr>
<tr>
<td>--------------</td>
<td>-------------</td>
</tr>
<tr>
<td>TRC</td>
<td>Temporary Removal With Consent - 1021</td>
</tr>
<tr>
<td>ERC</td>
<td>Emergency Removal Without Court Order - 1024</td>
</tr>
<tr>
<td>POR</td>
<td>Approved Relative Home Placement</td>
</tr>
<tr>
<td>POP</td>
<td>Approved Relative Home Placement</td>
</tr>
<tr>
<td>COO</td>
<td>Court Ordered Other Services</td>
</tr>
<tr>
<td>RAC</td>
<td>Reasonable Efforts to Reunite Child/Family Are Not Required—Aggravated Circumstances</td>
</tr>
<tr>
<td>RPC</td>
<td>Reasonable Efforts to Reunite Child/Family Are Not Required—Parent Conviction</td>
</tr>
<tr>
<td>RTP</td>
<td>Reasonable Efforts to Reunite Child/Family Are Not Required—Involuntary TPR</td>
</tr>
<tr>
<td>CTR</td>
<td>Custody Transferred to Relative or Non-Relative (Non-Foster Care)</td>
</tr>
<tr>
<td>GAR</td>
<td>Guardianship Assigned to Relative or Non-Relative (Non-Foster Care)</td>
</tr>
<tr>
<td>ATR</td>
<td>Article 10 Remand</td>
</tr>
<tr>
<td>DTN</td>
<td>Detention</td>
</tr>
<tr>
<td>JDE</td>
<td>JD (Initial Placement Exceeds 12 Months)</td>
</tr>
<tr>
<td>COM</td>
<td>Court in its Own Motion</td>
</tr>
<tr>
<td>DAC</td>
<td>District Attorney, Co. Attorney or Corporation Counsel</td>
</tr>
<tr>
<td>OPE</td>
<td>Other Petitioner</td>
</tr>
<tr>
<td>PLR</td>
<td>Child or Person Legally Representing Child</td>
</tr>
<tr>
<td>AOI</td>
<td>Any Other Interested Party Acting on the Child's Behalf</td>
</tr>
<tr>
<td>AAR</td>
<td>Authorized Agency Responsible for the Care of the Child</td>
</tr>
<tr>
<td>PUT</td>
<td>Putative Father</td>
</tr>
<tr>
<td>COA</td>
<td>Court Ordered Adoption/Preventive Services</td>
</tr>
<tr>
<td>WTH</td>
<td>Withdrawn</td>
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<tr>
<td>ACD</td>
<td>Adjourned in Contemplation of Dismissal</td>
</tr>
<tr>
<td>SJD</td>
<td>Suspended judgment</td>
</tr>
<tr>
<td>DOP</td>
<td>Dismissal of Petition</td>
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<tr>
<td>ADJ</td>
<td>Adjourned</td>
</tr>
<tr>
<td>ABU</td>
<td>Abuse</td>
</tr>
<tr>
<td>NEG</td>
<td>Neglect</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Description</td>
</tr>
<tr>
<td>--------------</td>
<td>-------------</td>
</tr>
<tr>
<td>PIN</td>
<td>PINS (Person in Need of Supervision)</td>
</tr>
<tr>
<td>JDP</td>
<td>JD (If Placed, Placement Cannot Exceed 12 mos.)</td>
</tr>
<tr>
<td>PEN</td>
<td>Permanent Neglect</td>
</tr>
<tr>
<td>ABN</td>
<td>Abandonment</td>
</tr>
<tr>
<td>PMI</td>
<td>Parental Mental Illness--Retardation</td>
</tr>
<tr>
<td>SRA</td>
<td>Severe/Repeated Abuse</td>
</tr>
<tr>
<td>PAD</td>
<td>Parents Deceased</td>
</tr>
<tr>
<td>OOP</td>
<td>Order of Protection</td>
</tr>
<tr>
<td>TCG</td>
<td>Transfer Custody and Guardianship- (SURRENDER OR TPR ONLY)</td>
</tr>
<tr>
<td>CCL</td>
<td>Care and Custody to Local Social Services District</td>
</tr>
<tr>
<td>FCC</td>
<td>Foster Care Placement to Continue</td>
</tr>
<tr>
<td>PCR</td>
<td>Diligent Effort to Strengthen and Encourage Parent Child Relationships</td>
</tr>
<tr>
<td>RCP</td>
<td>Return Child to Parent</td>
</tr>
<tr>
<td>RCG</td>
<td>Return Child to Guardian</td>
</tr>
<tr>
<td>RCR</td>
<td>Return Child to Relative</td>
</tr>
<tr>
<td>PLA</td>
<td>Another Planned Permanent Living Arrangement</td>
</tr>
<tr>
<td>FCA</td>
<td>Begin Efforts to Free Child for Adoption</td>
</tr>
<tr>
<td>CFA</td>
<td>Child is Free for Adoption</td>
</tr>
<tr>
<td>CAH</td>
<td>Place Freed Child into Adoptive Home</td>
</tr>
<tr>
<td>NLC</td>
<td>Not LDSS Custody</td>
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<tr>
<td>COS</td>
<td>Court Ordered Supervision</td>
</tr>
<tr>
<td>COE</td>
<td>Court Ordered Services</td>
</tr>
</tbody>
</table>
Appendix F: Strengths, Needs and Risks Scales
Appendix F1: Initial Scales FSS/CWS

**Parent/Caretaker Functioning Scales**

1. **Relationships Among Caretakers and Other Significant Adults**
   a) Supportive, nurturing relationships
   b) Generally positive relationships with minor conflicts; no threatening physically or emotionally abusive relationships
   c) Non-supportive, negative relationships with serious conflicts, threatening and controlling behaviors or minor physical violence
   d) Repeated and/or severe physical violence or emotional abuse
   e) Insufficient information

2. **Ability to Cope with Stress**
   a) Consistently uses effective coping skills to manage stress
   b) Uses adequate coping skills in most situations to manage stress
   c) Coping skills are not consistently used or effective in managing stress
   d) Coping skills are very limited or ineffective in managing stress
   e) Insufficient information

3. **Motivation/Readiness to Change**
   a) Accepts responsibility for problematic behaviors/conditions and has taken steps to initiate change
   b) Recognizes problematic behaviors/conditions and demonstrates willingness to change
   c) Limited recognition of problematic behaviors/conditions and is resistant to change
   d) Denies responsibility for problematic behaviors/conditions; no willingness to change
   e) Insufficient information

4. **Parent/Caretaker Expectations of Children**
   a) Has and applies realistic expectations of all children.
   b) Has, but inconsistently applies, realistic and developmentally appropriate expectations of any of the children.
   c) Has and applies unrealistic and developmentally inappropriate expectations of any of the children.
   d) Has and applies very unrealistic and developmentally inappropriate expectations of any of the children.
   e) Insufficient information

5. **Parent/Caretaker Acceptance of Children**
   a) Very accepting and affectionate of all children
   b) Fairly accepting and affectionate of all children
   c) Indifferent and aloof to any of the children
d) Rejecting or hostile to any of the children  
e) Insufficient information

6. Parent/Caretaker Discipline of Children  
a) Uses discipline appropriate to child’s age, development and conduct; no physical discipline used  
b) Uses discipline appropriate to child’s age, development and conduct; some physical discipline used  
c) Uses discipline inappropriate to child’s age, development or conduct that causes minor physical or emotional harm to child  
d) Uses discipline inappropriate to child’s age, development or conduct that causes serious physical or emotional harm to child  
e) Insufficient information

7. Parent/Caretaker Supervision  
a) Consistently provides age appropriate care and supervision  
b) Usually provides age appropriate care and supervision  
c) Occasionally provides age appropriate care and supervision  
d) Rarely or never provides age appropriate care and supervision  
e) Insufficient information

8. Problem Solving Skills  
a) Strong ability to anticipate and solve problems in a timely manner  
b) Adequate ability to anticipate and solve most problems before crises erupt  
c) Difficulty in anticipating and solving problems before crises erupt  
d) Inability to address problems until crises occur  
e) Insufficient information

9. Physical Health  
a) Good or excellent health  
b) Minor illness or physical disability  
c) Moderately serious illness or physical disability  
d) Debilitating illness or physical disability  
e) Insufficient information

9. Mental Health  
a) No mental health concerns  
b) Minor mental health concerns  
c) Moderately serious mental health problems  
d) Serious mental health problems  
e) Insufficient information
11. Child Development/Cognitive Skills
   a) Advanced development in one or more areas; above average cognitive skills
   b) Age appropriate development; average cognitive skills
   c) Minor developmental delays; developmental or learning disability
   d) Serious developmental delays; serious developmental or learning disability
   e) Insufficient information

12. Child Behavior
   a) Age appropriate behavior at home and within the community
   b) Some minor behavioral problems at home and/or within the community
   c) Moderately serious behavioral problems or criminal activity at home and/or within the community
   d) Serious behavioral problems or criminal activity at home and/or within the community
   e) Insufficient information

13. Alcohol Use Within the Past Two Years
   a) No alcohol use
   b) Light to moderate alcohol use
   c) Frequent alcohol use
   d) Alcohol dependence
   e) Insufficient information

14. Drug Use Within the Past Two Years
   a) No use of illegal drugs or misuse of prescription drugs
   b) Occasional use of illegal drugs or misuse of prescription drugs
   c) Frequent use of illegal drugs or misuse of prescription drugs
   d) Drug dependence or addiction
   e) Insufficient information

15. Child/Family Relationships
   a) Mutual respect and tolerance among child and family members; very few conflicts
   b) Generally positive relationships among child and family members; minor conflicts
   c) Disruptive relationships among child and family members, but no requests for separation/placement
   d) Serious conflict and mistrust among child and family members with threat of separation/placement
   e) Insufficient information
Appendix F2:
Comprehensive/Reassessment Scales
for an FSS/CWS Stage

Family Functioning Scales

*1. Support System
   a) Multiple sources of reliable and useful support from extended family, friends or neighbors
   b) Some reliable and useful support from extended family, friends or neighbors
   c) Some support from extended family, friends or neighbors, but unreliable or of limited usefulness
   d) Effectively isolated

   a) Financial resources are sufficient and adequately managed to meet basic family needs
   b) Financial resources are limited, but are adequately managed to meet basic family needs
   c) Financial resources are limited or not adequately managed to the degree that basic family needs are occasionally unmet
   d) Financial resources are severely limited or mismanaged to the degree that basic family needs are chronically unmet

3. Stability of Housing
   a) Housing is currently stable; no risk of loss of residence
   b) Housing is currently stable, but some risk of loss of residence in future
   c) Housing is unstable; imminent risk of loss of residence or multiple relocations
   d) Currently homeless or residing in a shelter

*4. Living Conditions
   a) Good to excellent; no overcrowding and sufficient furnishings, utilities and sanitation
   b) Adequate; some overcrowding or minor problems with furnishings, utilities and sanitation
   c) Inadequate; moderate overcrowding or significant problems with furniture, utilities and sanitation
   d) Severely inadequate; no housing, housing with serious health and safety hazards, or extreme overcrowding

5. Neighborhood Environment
   a) Very safe; rare instances of violence or criminal gang activity
   b) Safe; relatively few occurrences of violence or criminal or gang activity
   c) Unsafe; occasional occurrences of violence or criminal or gang activity
   d) Very unsafe; frequent occurrences of violence or criminal or gang activity
Parent/Caretaker Functioning Scales

6. Current Age of Parent/Caretaker (Pre-Filled by System)
   a) 22 years and over
   b) 19 – 21 years
   c) 16 – 18 years
   d) 15 years and under

7. Caretaker Abused/Neglected as a Child (Family Grid Will Identify PC/SC)
   a) No childhood history of abuse or neglect
   b) Some childhood history of abuse or neglect
   c) Serious childhood history of neglect
   d) Serious childhood history of physical and/or sexual abuse

*8. Physical Health
   a) Good or excellent health
   b) Minor illness or physical disability
   c) Moderately serious illness or physical disability
   d) Debilitating illness or physical disability

9. Physical Health Care
   a) Regular preventive health care is practiced
   b) Receives appropriate medical care for illness or condition
   c) Some unmet medical care needs
   d) Serious unmet medical care needs

*10. Mental Health
    a) No mental health concerns
    b) Minor mental health concerns
    c) Moderately serious mental health problems
    d) Serious mental health problems

11. Mental Health Care
    a) No mental health concerns or able to self-monitor and take appropriate steps to stabilize emotional well-being
    b) Receives mental health care; fully complies with treatment recommendations
    c) Receives mental health care; partially complies with treatment recommendations
    d) Receives little or no mental health care or is non-compliant with treatment recommendations

12. Ability to Cope with Stress
    a) Consistently uses effective coping skills to manage stress
    b) Uses adequate coping skills in most situations to manage stress
c) Coping skills are not consistently used or effective in managing stress
d) Coping skills are very limited or ineffective in managing stress

*13. Cognitive Skills
a) Appears to have above average cognitive skills
b) Appears to have average cognitive skills
c) Appears to have limited cognitive skills
d) Appears to have very limited cognitive skills

*14. Relationships Among Caretakers and Other Significant Adults
a) Supportive, nurturing relationships
b) Generally positive relationships with minor conflicts; no threatening physically or emotionally abusive relationships
c) Non-supportive, negative relationships with serious conflicts, threatening and controlling behaviors or minor physical violence
d) Repeated and/or severe physical violence or emotional abuse

*15. Alcohol Use Within the Past Two Years (Family Grid will Identify PC/SC)
a) No alcohol use
b) Light to moderate alcohol use
c) Frequent alcohol use
d) Alcohol abuse, with risk of not meeting responsibilities

*16. Drug Use Within the Past Two Years (Family grid will identify PC/SC)
a) No use of illegal drugs or misuse of prescription drugs
b) Occasional use of illegal drugs or misuse of prescription drugs
c) Frequent use of illegal drugs or misuse of prescription drugs
d) Drug abuse, with risk of not meeting responsibilities

17. Criminal History
a) No known criminal offense
b) Minor criminal offense; isolated incident
c) Moderate to serious criminal offense or multiple incidence of minor criminal offenses
d) Very serious criminal offense

18. Motivation/Readiness to Change
a) Accepts responsibility for problematic behaviors/conditions and has taken steps to initiate change
b) Recognizes problematic behaviors/conditions and demonstrates willingness to change
c) Limited recognition of problematic behaviors/conditions and is resistant to change
d) Denies responsibility for problematic behaviors/conditions; no willingness to change
19. Parent/Caretaker Expectations of Children
   a) Has and applies realistic and developmentally appropriate expectations of all children
   b) Has, but inconsistently applies realistic and developmentally appropriate expectations of any of the children
   c) Has and applies unrealistic and developmentally inappropriate expectations of any of the children
   d) Has and applies very unrealistic and developmentally inappropriate expectations of any of the children

20. Parent/Caretaker Acceptance of Children
   a) Very accepting of and affectionate to all children
   b) Fairly accepting of and affectionate to all children
   c) Indifferent and aloof to any of the children
   d) Rejecting of or hostile to any of the children

21. Parent/Caretaker Discipline of Children
   a) Uses discipline appropriate to child’s age, development and conduct; no physical discipline used
   b) Uses discipline appropriate to child’s age, development and conduct; some physical discipline used
   c) Uses discipline inappropriate to child’s age, development or conduct that causes minor physical or emotional harm to child
   d) Uses discipline inappropriate to child’s age, development or conduct that causes serious physical or emotional harm to child

22. Parent/Caretaker Supervision
   a) Consistently provides age appropriate care and supervision
   b) Usually provides age appropriate care and supervision
   c) Occasionally provides age appropriate care and supervision
   d) Rarely or never provides age appropriate care and supervision

23. Problem Solving Skills
   a) Strong ability to anticipate and solve problems in a timely manner
   b) Adequate ability to anticipate and solve most problems before crises erupt
   c) Difficulty in anticipating and solving problems before crises erupt
   d) Inability to address problems until crises occur

24. Recognizes and Attends to Needs of All Children
   a) Always recognizes and attends to the needs of all the children
   b) Usually recognizes and attends to the needs of all the children
   c) Occasionally recognizes and attends to the needs of all the children
   d) Rarely recognizes and attends to the needs of all the children
Child Functioning Scales

25. Physical Health
   a) Good or excellent health
   b) Minor illness or physical disability
   c) Moderately serious illness or physical disability
   d) Debilitating illness or physical disability

26. Physical Health Care
   a) Regular preventive health care is practiced
   b) Receives appropriate medical care for illness or condition
   c) Some unmet medical care needs
   d) Serious unmet medical care needs

27. Mental Health
   a) No mental health concerns
   b) Minor mental health concerns
   c) Moderately serious mental health problems
   d) Serious mental health problems

28. Mental Health Care
   a) No mental health concerns or able to self-monitor and take appropriate steps to stabilize emotional well-being
   b) Receives mental health care; fully complies with treatment recommendations
   c) Receives mental health care; partially complies with treatment recommendations
   d) Receives little or no mental health care or is non-compliant with treatment recommendations

29. Bonding and Attachment of Child Under Age 2
   (Only displays for children under age 2 as of the FASP due date)
   a) Deep sense of connection, familiarity between infant/toddler and parent/caretaker
   b) Adequate bonding; infant/toddler recognizes and responds to parent/caretaker contact
   c) Distinct lack of positive connection and remoteness between infant/toddler and parent/caretaker
   d) Infant/toddler appears anxious and fearful upon parent/caretaker contact

30. Child Development/Cognitive Skills
   a) Advanced development in one or more areas; above average cognitive skills
   b) Age appropriate development; average cognitive skills
   c) Minor developmental delays; developmental or learning disability
   d) Serious developmental delays; serious developmental or learning disability
31. **Academic Performance** (Children 6 years and older)
   a) Outstanding
   b) Satisfactory
   c) Below average
   d) Poor

32. **Child Behavior**
   a) Age appropriate behavior at home and within the community
   b) Some minor behavioral problems at home and/or within the community
   c) Moderately serious behavioral problems or criminal activity at home and/or within the community
   d) Serious behavioral problems or criminal activity at home and/or within the community

33. **Alcohol Use Within the Past Two Years**
   a) No alcohol use
   b) Light to moderate alcohol use
   c) Frequent alcohol use
   d) Alcohol dependence

34. **Drug Use Within the Past Two Years**
   a) No use of illegal drugs or misuse of prescription drugs
   b) Occasional use of illegal drugs or misuse of prescription drugs
   c) Frequent use of illegal drugs or misuse of prescription drugs
   d) Drug dependence or addiction

35. **Child/Family Relationships**
   a) Mutual respect and tolerance among child and family members; very few conflicts
   b) Generally positive relationships among child and family members; minor conflicts
   c) Disruptive relationships among child and family members, but no requests for separation/placement
   d) Serious conflict and mistrust among child and family members with threat of separation/placement

36. **Interpersonal Skills** (Children 6 years and older)
   a) Strong interpersonal skills that facilitate positive interactions and supportive relationships with non-family members
   b) Appropriate interpersonal skills that allow for generally effective interactions and relationships with non-family members
   c) Inappropriate interpersonal skills that create barriers to effective interactions and relationships with non-family members
   d) Hostile, passive or destructive interpersonal skills that frequently result in problematic interactions or poor relationships with non-family members
37. Nutrition, Clothing and Personal Hygiene
   a) Good or appropriate; meets or exceeds societal standards
   b) Adequate; meets but does not exceed societal standards
   c) Poor or inappropriate; does not meet societal standards
   d) Inadequate; absence of either food, clothing or personal hygiene
Appendix F3:  
Reassessment Scales  
for an FSS/CCR Stage

<table>
<thead>
<tr>
<th>Child Case Record Child Functioning Scales</th>
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<tbody>
<tr>
<td>1. Physical Health</td>
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c) Minor developmental delays; developmental or learning disability
d) Serious developmental delays; serious developmental or learning disability

7. Academic Performance (Children 6 years and older)
a) Outstanding
b) Satisfactory
c) Below average
d) Poor

32. Child Behavior
a) Age appropriate behavior at home and within the community
b) Some minor behavioral problems at home and/or within the community
c) Moderately serious behavioral problems or criminal activity at home and/or within the community
d) Serious behavioral problems or criminal activity at home and/or within the community

33. Alcohol Use Within the Past Two Years
a) No alcohol use
b) Light to moderate alcohol use
c) Frequent alcohol use
d) Alcohol dependence

8. Drug Use Within the Past Two Years
a) No use of illegal drugs or misuse of prescription drugs
b) Occasional use of illegal drugs or misuse of prescription drugs
c) Frequent use of illegal drugs or misuse of prescription drugs
d) Drug dependence or addiction

9. Interpersonal Skills (Children 6 years and older)
a) Strong interpersonal skills that facilitate positive interactions and supportive relationships with non-family members
b) Appropriate interpersonal skills that allow for generally effective interactions and relationships with non-family members
c) Inappropriate interpersonal skills that create barriers to effective interactions and relationships with non-family members
d) Hostile, passive or destructive interpersonal skills that frequently result in problematic interactions or poor relationships with non-family members

10. Nutrition, Clothing and Personal Hygiene
a) Good or appropriate; meets or exceeds societal standards
b) Adequate; meets but does not exceed societal standards
c) Poor or inappropriate; does not meet societal standards
d) Inadequate; absence of either food, clothing or personal hygiene
Appendix G: FASP Safety Assessment Definitions
Appendix G1:  
FASP Safety Factor Definitions

The examples for each safety factor listed below are intended to guide your selection of safety factors currently present. The examples should not be considered as an all-inclusive list of possible circumstances, conditions or behaviors related to each safety factor. Other circumstances, conditions or behaviors may be associated with each safety factor that may indicate the possibility of immediate danger of serious harm.

Caretaker(s) previously committed or allowed abuse or maltreatment of a child(ren), and the caretaker's prior response to that incident was not commensurate with the severity of the abuse or maltreatment.

- Prior abuse or maltreatment (may include non-reported accounts of abuse or maltreatment) that were serious enough to cause or could have caused severe injury or harm to the child(ren).
- Caretaker(s) has retaliated or threatened retribution against child(ren) for past incident(s) of abuse or maltreatment.
- Escalating pattern of abuse or maltreatment.
- Caretaker(s) does not acknowledge or take responsibility for prior inflicted harm to the child(ren) or explains incident(s) as not deliberate.

Caretaker(s) currently abuses alcohol to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

- Caretaker(s) has misused alcohol to the extent that control of his/her actions is significantly impaired. As a result, the caretaker(s) is unable or likely to become unable to care for the child, or has harmed the child, or is likely to harm the child.
- Newborn child with positive toxicology for alcohol in his/her bloodstream or urine and/or was born with fetal alcohol effect or fetal alcohol syndrome.
Caretaker(s) currently abuses drugs to the extent that it seriously affects his/her ability to supervise, protect or care for the child(ren).

- Caretaker has misused illegal and/or prescription drugs to the extent that control of his or her actions is significantly impaired. As a result, the caretaker is unable or likely to become unable to care for the child, or has harmed the child, or is likely to harm the child.
- Newborn child with positive toxicology for illegal drugs in his/her bloodstream or urine and/or was born dependent on drugs or with drug withdrawal symptoms.

Child(ren) has experienced or is likely to experience physical or psychological harm, as a result of domestic violence in the household.

*Examples of direct threats to child(ren):*

- Observed or alleged domestic violence batterer is confronting and/or stalking the caretaker/victim and child(ren) and has threatened to kill, injure, or abduct either or both.
- Observed or alleged domestic violence batterer has had recent violent outbursts that have resulted in injury or threat of injury to the child(ren) or the other caretaker/victim.
- Caretaker/victim is forced, under threat of serious harm, to participate in or witness serious abuse or maltreatment of the child(ren).
- Child(ren) is forced, under threat of serious harm, to participate in or witness abuse of the caretaker/victim.

*Other examples of Domestic Violence:*

- Caretaker/victim appears unable to provide basic care and/or supervision for the child because of fear, intimidation, injury, incapacitation, forced isolation, fear or other controlling behavior of the observed or alleged domestic violence batterer.
- Psychological abuse examples: undermining a person’s sense of self-worth, instilling fear, attempting to isolate one from family and/or friends.
- Physical abuse examples: inflicting or attempting to inflict physical injury, withholding access to resources necessary to maintain health, forced drug use.
- Sexual abuse example: coercing any sexual contact without consent.
- Economic abuse example: making or maintaining one financially dependent.

Caretaker(s)’s apparent or diagnosed mental health status or developmental disability seriously affects his/her ability to supervise, protect or care for the child(ren).

- Caretaker exhibits behavior that seems out of touch with reality, fanatical, bizarre, and/or extremely irrational.
- The caretaker(s) lacks or fails to utilize the necessary supports related to his/her developmental disability, which has resulted in serious harm to the child or is likely to harm the child seriously in the very near future.
Caretaker(s) is violent and appears out of control.

- Extreme physical and/or verbal abuse, angry or hostile outbursts of anger or hostility aimed at the child(ren).
- Excessive, brutal or bizarre punishment of child(ren), e.g., scalding with hot water, burning with cigarettes, forced feeding.
- Threatens, brandishes or uses guns, knives or other weapons against or in the presence of other household members.
- Violently shakes or chokes baby or young child(ren) to stop a particular behavior.
- Behavior that is reckless, unstable, raving, or explosive.

Caretaker(s) appears unwilling and/or unable to meet the child(ren)’s basic needs for food, clothing, shelter and/or medical care.

- No food provided or available to child, or child starved or deprived of food or drink for prolonged periods.
- Child without minimally warm clothing in cold months, clothing extremely dirty.
- No housing or emergency shelter, child must or is forced to sleep in street, car, etc.; housing is unsafe, without heat, etc.
- Caretaker does not seek treatment for child’s immediate and dangerous medical condition(s) or does not follow prescribed treatment for such condition(s).
- Child appears malnourished.

Caretaker(s) appears unwilling and/or unable to provide adequate supervision of the child(ren).

- Caretaker does not attend to child to the extent that need for adequate care goes unnoticed or unmet (e.g., although caretaker present, child can wander outdoors alone, play with dangerous objects, play on unprotected window ledge or be exposed to other serious hazards).
- Caretaker leaves child alone (time period varies with age and developmental stage).
- Caretaker makes inadequate and/or inappropriate child care arrangements or demonstrates very poor planning for child’s care.
- Caretaker routinely fails to attempt to provide guidance and set limits, thereby permitting a child to engage in dangerous behaviors.

Caretaker(s) likely caused serious physical harm to the child(ren) or has made a plausible threat of serious harm.

- Other than accidental, caretaker likely caused serious abuse or physical injury, i.e., fractures, poisoning, suffocating, shooting, burns, bruises/welts, bite marks, choke marks.
- Caretaker, directly or indirectly, makes a believable threat to cause serious harm, e.g., kill, starve, lock out of home.
- Caretaker plans to retaliate against child for CPS investigation or disclosure of abuse or maltreatment.
• Caretaker has used torture or physical force that bears no resemblance to reasonable discipline, or punished child beyond the duration of the child's endurance.

Caretaker(s) views, describes or acts toward the child(ren) in predominantly negative terms and/or has extremely unrealistic expectations of the child(ren).
• Describes child as evil, possessed, stupid, ugly or in some other demeaning or degrading manner.
• Curses and/or repeatedly puts child down.
• Scapegoats a particular child in the family.
• Expect a child to perform or act in a way that is impossible or improbable for the child's age (e.g., babies and young children expected not to cry, expected to be still for extended periods, be toilet trained or eat neatly).

Child(ren)'s current whereabouts cannot be ascertained and/or there is reason to believe that the family is about to flee or refuses access to the child(ren).
• Family has previously fled in response to a CPS investigation.
• Family has removed child from a hospital against medical advice.
• Family has history of keeping child at home, away from peers, school, or others for extended periods.
• Family could not be located despite appropriate diligent efforts.

Child(ren) has been or is suspected of being sexually abused and the caretaker(s) is unable or unwilling to provide adequate protection of the child(ren).
• It appears that caretaker has committed rape, sodomy or has had other sexual contact with child.
• Child may have been forced or encouraged to sexually gratify caretaker or others, or engage in sexual performances or activities.
• Access by possible, or confirmed, sexual abusers to child continues to exist.

The physical living conditions are hazardous.
• Leaking gas from stove or heating unit.
• Dangerous substances or objects stored in unlocked lower shelves or cabinets, under sink or in open.
• Lack of water or utilities (heat, plumbing, electricity) and no alternate provisions made.
• Peeling lead-based paint accessible to young child.
• Hot water/steam leaks from radiator.
• No guards or open windows/broken/missing windows.
• Garbage not disposed of properly.
• Perishable food not properly stored or already rotted or spoiled.
• Evidence of human or animal waste throughout living quarters.
- Serious illness or significant injury has occurred due to living conditions and these conditions still exist.

**Child(ren) is afraid of and/or extremely uncomfortable around people living in or frequenting the home.**

- Child cries, cowers, cringes, trembles or otherwise exhibits fear in the presence of certain individuals or verbalizes such fear.
- Child exhibits severe anxiety related to situation associated with a person(s) in the home, e.g., nightmares, insomnia.
- Child reasonably expects retribution or retaliation from caretakers.

**Child(ren) has a positive toxicology for drugs and/or alcohol. (NYC Required)**

- Child(ren) (0-6 mos.) is born with a positive toxicology for drugs and/or alcohol.

**Child(ren) is on Sleep Apnea Monitor. (NYC Required)**

- Child(ren) is required to be on a sleep apnea monitor. A diagnosed medical condition, or suspicion thereof, exists that places the child(ren) at risk of involuntarily ceasing to breathe.

**Weapon noted in CPS report or found in home. (NYC Required)**

- A firearm, such as a gun, rifle or pistol is in the home and may be used as a weapon.
- If a firearm is in the home, it may be assumed that ammunition is available and that the firearm may be discharged at will.

**Other (specify):**

*Possible examples:*

- Child(ren)’s behavior likely to provoke caretaker to harm the child(ren).
- Unexplained injuries to a child(ren).
- Abuse or neglect to related child(ren)’s death, or unexplained child(ren)’s death.
- Serious allegations with significant discrepancies or contradictions by caretaker(s), or between caretaker(s) and collateral contacts.
- Caretaker(s) refuses to cooperate or is evasive.
- Criminal behavior occurring in the presence of the child(ren), or the child(ren) is forced to commit a crime(s) or engage in criminal behavior.

**No Safety Factors Identified**
Appendix G2: Safety Interventions/Definitions

1. **Intensive Home Based Family Preservation Services**: Short term, intensive, in-home intervention aimed at restoring family functioning to enable maximum impact of case planning. Program elements include small caseloads (6-10) per caseworker, caseworkers on-call 24 hours to enable intervention at peak crisis points, counseling and parent skill-building services provided primarily in-home, 4-6 week intervention aimed at preparing families to be discharged and to avoid dependency and promote skill building.

2. **Emergency Shelter**: Arranging for placement of caretaker(s) and child(ren) in a public or privately run emergency shelter, due to factors such as homelessness, eviction or catastrophe and in the absence of any alternative supportive resources. Emergency shelter situations are intended to be a temporary, rather than a permanent solution to shelter needs.

3. **The non-Offending Caretaker Is Moving to a Safe Environment with the Children**: Arranging for a residential program for victims of domestic violence and their children. This may include domestic violence shelters, safe dwellings, or safe homes, which are usually undisclosed, secure locations that provide for the immediate and basic needs of victims of domestic violence. Services may include food, clothing, shelter, victim advocacy and information and referral.

4. **Authorization of emergency food/cash/goods**: Arranging for, referring or providing emergency food, clothing, furniture and other basic household items to those clients in need. Resources may include emergency food stamps, emergency authorization payment for clothing, furniture and/or other basic necessities, community-based food pantries and other religious or civic organizations assisting those in need.

5. **Judicial Intervention**: May include filing petitions for Neglect or Abuse (Article 10), PINS (Article 7), JD (Article 3), Orders of Protection, Termination of Parental Rights and related requests for court-ordered supervision and/or services.

6. **Law Enforcement Involvement**: May include contacting local, county or state law enforcement agencies to report a crime and/or to seek law enforcement intervention.

7. **Emergency Medical/Mental Health Services**: Arranging for or referring to emergency medical and mental health services including, but not limited to, hospital emergency rooms, ambulance/EMT services, mobile mental health crisis units, walk-in health clinics, and suicide hotlines.

8. **Immediate and regulated in-home supervision/monitoring**: Includes CPS in-home supervision and monitoring, including increased frequency and regularity (above the norm) of home visits and referring or arranging for the provision of immediately necessary in-home services, such as visiting nurse services, public health nurses, home health aides, homemaker services and supervised visitation.

9. **Emergency Alcohol Abuse Services**: Referring or arranging for the provision of emergency alcohol services including, but not limited to, emergency in-patient medical treatment/detoxification, outpatient treatment for an alcohol overdose and/or placement in a substance abuse residential treatment facility.

10. **Emergency Drug Abuse Services**: Referring or arranging for the provision of emergency drug abuse services including, but not limited to, emergency in-patient medical
treatment/detoxification, out-patient treatment for a drug overdose and/or placement in a substance abuse residential treatment facility.

11. **Correction or removal of hazardous/unsafe living conditions**: Eliminating hazardous or unsafe living conditions which may involve contacting the local Health Department or local Fire Department for a home inspection and recommendations, client advocacy with landlords or public housing authorities and/or assistance in relocating the family.

12. **Placement - Foster Care**: Protective removal and foster care placement of child(ren) assessed to be in immediate danger of serious harm or who may be a threat to others in the home and/or community.

13. **Placement - Alternate Caregiver**: Protective or voluntary removal and placement of child(ren) with appropriate alternative caregivers. Alternate caregivers may include, but are not be limited to, non-custodial parents, relatives, friends, or neighbors. Alternate caregivers may petition for custody or guardianship of the child(ren).

14. **Use of family, neighbors or other individuals in the community as safety resources (Specify)**: Consider immediate or extended family members, neighbors, co-workers, affiliated religious group members and other community contacts that can play a role in assuring the health and safety of child(ren). These voluntary safety resources may provide temporary child care, temporary shelter, transportation, donations of food, clothing, household goods, in-home monitoring and/or other forms of assistance to the family.

15. **Alleged perpetrator has left the home voluntarily, current caretaker will appropriately protect the victim with CPS monitoring**: The alleged perpetrator has voluntarily left the home and the current caretaker(s) has agreed to protect the child(ren) from further harm and is cooperating with CPS supervision and monitoring.

16. **Alleged perpetrator has left the home in response to legal action**: The alleged perpetrator has left the home as the result of law enforcement intervention and/or a court order to vacate the home, stay away from the child(ren) and/or refrain from committing a family or criminal offense against the children.

17. **Other (Specify)**
Appendix H: Risk Assessment/RAP Appendices
Appendix H1: Risk Elements Definitions

Scales marked with an asterisk (*) are carried forward from the Family Functioning scales of the Strengths, Needs and Risks scales.

1 Total prior reports for adults and children in RAP family unit

Displays the number of prior indicated reports in which:

- an adult in the RAP family unit was a confirmed subject (regardless of report type); or
- a child in the RAP family unit was a confirmed victim of abuse or maltreatment in a familial report type.

This calculation includes prior indicated reports where an adult in the RAP family unit was a subject, regardless of whether or not the children who were abused/maltreated in the prior report are members of the current RAP family unit. This calculation also includes prior indicated reports where a child in the RAP family unit was abused or maltreated by an adult who is not part of the current RAP family unit. All persons in the RAP family unit are included in the calculation, not just the Primary and Secondary Caretakers of the child(ren) alleged to be maltreated.

This calculation does not include the following:

- Duplicate (DUP) stages
- Reports where all of the RAP family unit members had “No Role”

The response to this Risk Element displays as follows:

- No prior determined reports
- Prior unfounded reports only
- One to two prior indicated reports
- Three to four prior indicated reports
- Five or more prior indicated reports

2 Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parent(s) at any time prior to the current report

Indicates whether any child in the RAP family unit previously resided (or currently resides) with a foster parent or substitute caregiver, either informally or formally, for a significant period of time. The placement does not need to have been due to child protective concerns; it could have been an informal family arrangement for one of many reasons.
3 Child(ren) under one year old in RAP family unit
Indicates whether there are any children younger than one year of age residing in the home, in foster care with a permanency planning goal of returning home, or temporarily in another living situation (such as living with a relative or in a hospital) but expected to return home. If the DOB field on the Person Detail window is blank for any person whose Rel/Int field signifies that the person is a child. CONNECTIONS includes that person as a child younger than one year old in this calculation.

*4 Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing
Evidence of inadequate or hazardous housing may include, but is not limited to, the following:

- Serious overcrowding
- Seriously inadequate furnishings to meet the family’s needs
- Inadequate heat, plumbing, electricity or water
- Lack or inoperability of essential kitchen appliances or bathroom facilities
- Multiple serious health hazards, such as rodent or vermin infestation; garbage and junk piled up; perishable food found spoiled; evidence of human or animal waste; and walls, floors, doors and furnishings thick with dirt and debris
- Multiple serious safety hazards, such as leaking gas from a stove or heating unit; dangerous substances or objects stored in unlocked lower shelves or cabinets, under sink, or out in the open; peeling lead-based paint; hot water or steam leaks from a radiator; broken or missing windows; and no guards on open windows

In some cases, one or two isolated hazardous conditions will be corrected prior to the determination of the report, such as restoring heat or installing window bars. In these cases, the response to this Risk Element would be “No.” However, if the hazardous situation has been an ongoing concern, such as a filthy house with multiple hazards, and, based on past experience, the condition is likely to reoccur even if it has been cleaned up by the time of the determination, the response to this Risk Element would be “Yes.”

*5 Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet
This Risk Element is present if either of the following conditions exist:

- The family does not have enough financial resources to meet the basic needs of the family for shelter, food, clothing and health. Benefits such as public assistance, SSI, food stamps, public housing or housing vouchers, HEAP, etc., should be considered as financial resources that help meet the family’s basic needs.
- The financial resources should be sufficient to meet the family’s basic needs, but are not sufficient due to mismanagement or inappropriate use of funds.
*6 Caretaker(s) in primary household has reliable and useful social support from extended family, friends or neighbors
Indicates whether the caretaker(s) living in the primary household with the child(ren) has reliable and useful social support from informal sources, such as extended family, friends or neighbors. Reliable and useful social support is present when the adult caretaker(s) has a network of relatives, friends or neighbors to call upon for assistance in any area where the family may need help, such as child care, transportation, emergency financial or housing help, or emotional support. In addition, the informal social support network is nearby and readily available when needed.

*7 Caretaker is a perpetrator of, or victim, of domestic violence, or has serious conflicts with other adults
Domestic violence is defined as a pattern of coercive tactics that can include physical, psychological, social, economic or emotional abuse perpetrated by one adult against another adult. Examples of domestic violence include: grabbing, pushing, hitting, punching, kicking, choking, biting and restraining; attacking with weapons; threatening to harm the partner or the children; stalking and harassment; intimidation; forced sex; berating and belittling; denying access to family assets, etc. This includes:
- a caretaker who is a victim or perpetrator of domestic violence involving a partner, former partner or other adult;
- a caretaker who continues to maintain any type of relationship with an abusive/abused adult and domestic violence remains a threat (the presumption should be that domestic violence remains a threat);
- an order of protection is in effect against the abusive adult; or
- a caretaker who is involved in serious conflicts (volatile arguments or physical fighting) with other adults within or outside the RAP family unit.

*8 Caretaker(s) with alcohol abuse problem with the past two years, with risk of not meeting responsibilities
Alcohol abuse means regular or periodic use of alcohol, with the risk of not meeting responsibilities or having adverse effects on daily living (e.g., danger of job loss, financial problems, partner threatens to leave, child care suffers, criminal justice system involvement).
- If the caretaker is participating in a non-professional support group, such as Alcoholics Anonymous (AA), without any other evidence of continuing alcohol use within the last two years, do not consider this, by itself, as a current alcohol abuse problem.
- If the caretaker was in treatment more than two years ago, but there is evidence that the person has resumed using alcohol, consider this as a current alcohol abuse problem.
- Respond “Yes” to this Risk Element if the caretaker is currently participating in an alcohol treatment program.
- Respond “No” to this Risk Element if the caretaker had an alcohol problem in the past, but has completed treatment and has remained alcohol-free for at least two years.
*9 Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities
Drug abuse means regular or periodic abuse of one or more drugs, with the risk of not meeting responsibilities or having adverse effects on daily living (e.g., danger of job loss, financial problems, partner threatens to leave, child care suffers, criminal justice system involvement).

- If the caretaker is participating in a non-professional support group, such as Narcotics Anonymous (NA), without any other evidence of continuing drug abuse, do not consider this, by itself, as a current alcohol abuse problem.
- If the caretaker was in treatment more than two years ago, but there is evidence that the person has resumed using drugs, consider this as a current drug abuse problem.
- Select “Yes” for this Risk Element if the caretaker is currently participating in a drug abuse treatment program.
- Select “No” for this Risk Element if the caretaker had a drug abuse problem in the past, but has completed treatment and has remained substance-free for at least two years.

*10 Caretaker(s) has a serious mental health problem
The caretaker should be considered as having a mental health problem if he or she:

- exhibits symptoms, such as bizarre behavior or delusions, of an undiagnosed mental illness;
- has recent repeated referrals for mental health evaluation or treatment;
- has been prescribed medication for an ongoing or recurring serious mental health problem;
- is currently experiencing depression of an ongoing or recurring nature, or suicidal behavior;
- has a current diagnosed serious mental illness; or
- has attempted suicide in the past.

*11 Caretaker(s) has very limited cognitive skills
Very limited cognitive skills could include mental retardation, brain injury or some type of cognitive disability that limits the caretaker’s ability in major life activities, such as child care, capacity to form positive relationships with others, self-care, self-direction, receptive and expressive language, learning, capacity for independent living and economic self-sufficiency.
*12 Caretaker(s) has a debilitating physical illness or physical disability
Indicates whether or not the caretaker has a serious physical disability or debilitating illness that limits his/her ability to perform any major life activities, such as child care, capacity to form positive relationships with family members or others, self-care, self-direction, receptive and expressive language, learning, mobility, capacity for independent activities and economic self-sufficiency.

*13 Caretaker(s) has and applies realistic expectations of all the children
"Realistic expectations" is defined as having an understanding of age-appropriate behavior, setting consistent, realistic standards, as well as safe and reasonable limits with appropriate consequences. In addition, the caretaker provides the child(ren) with options, encourages and helps the child(ren) with tasks when needed, and adapts parenting practices to the needs of the child(ren) and circumstances. Select “Yes” for this Risk Element only if the caretaker has realistic expectations of all of the children.

*14 Caretaker(s) always or usually recognizes and attends to the needs of all the children
Indicates whether the caretaker has a history of recognizing and attending to the daily needs of all of the children. This strength would be present if the caretaker:

- has demonstrated competence in meeting the basic and unique needs of all of the children;
- is resourceful in making attempts to meet child(ren)’s needs despite adverse circumstances; and
- has demonstrated the ability to prioritize the children’s needs above the caretaker’s.

The word “always” is used because some caretakers always meet the needs of all of their children (i.e., a false report). The word “usually” is included because some caretakers may meet all of the needs of their children, but may have an isolated or temporary instance of not meeting a child’s needs.

15 Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker
This Risk Element refers to whether the caretaker shares the caseworker’s assessment of the seriousness of the child abuse/maltreatment situation.

- If the caretaker views the situation as less serious than the caseworker does, select “No” for this Risk Element.
- If both the caseworker and the caretaker view the situation as not serious (e.g., a patently false report) or both see the situation as serious, select “Yes.”
# Appendix H2:
## Non-CPS Risk Elements

<table>
<thead>
<tr>
<th>Risk Element</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Inadequate housing with serious health or safety hazards, or extreme overcrowding, or no housing.</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>INS INFO</td>
</tr>
<tr>
<td>2 Financial resources are severely limited or mismanage to the degree basic family needs are chronically unmet.</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>INS INFO</td>
</tr>
<tr>
<td>3 Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors.</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>INS INFO</td>
</tr>
<tr>
<td>4 Caretaker is a perpetrator of, or a victim of, domestic violence; or has serious conflicts with other adults.</td>
<td>PC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>5 Caretaker(s) with alcohol abuse problem within the past two years with risk of not meeting responsibilities.</td>
<td>PC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = Yes (or INS INFO)</td>
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<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
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<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
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<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
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<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
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<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>6 Caretaker(s) with drug abuse within the past two years with risk of not meeting responsibilities.</td>
<td>PC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
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<tr>
<td></td>
<td>PC = Yes (or INS INFO)</td>
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<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>7 Caretaker(s) has a serious mental health problem.</td>
<td>PC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = Yes (or INS INFO)</td>
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<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = No† (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>PC = No (or INS INFO)</td>
</tr>
<tr>
<td></td>
<td>SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>Risk Element</td>
<td>Response</td>
</tr>
<tr>
<td>--------------</td>
<td>----------</td>
</tr>
<tr>
<td>8 Caretaker(s) has very limited cognitive skills.</td>
<td>PC = Yes (or INS INFO) SC = No† (or INS INFO) PC = Yes (or INS INFO) SC = Yes (or INS INFO) PC = No (or INS INFO) SC = No† (or INS INFO) PC = No (or INS INFO) SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>9 Caretaker(s) has a debilitating physical illness or physical disability.</td>
<td>PC = Yes (or INS INFO) SC = No† (or INS INFO) PC = Yes (or INS INFO) SC = Yes (or INS INFO) PC = No (or INS INFO) SC = No† (or INS INFO) PC = No (or INS INFO) SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>10 Caretaker(s) has and applies realistic expectations of all the children.</td>
<td>PC = Yes (or INS INFO) SC = No† (or INS INFO) PC = Yes (or INS INFO) SC = Yes (or INS INFO) PC = No (or INS INFO) SC = No† (or INS INFO) PC = No (or INS INFO) SC = Yes (or INS INFO)</td>
</tr>
<tr>
<td>11 Caretaker(s) always or usually recognize and attend(s) to needs of all the children.</td>
<td>PC = Yes (or INS INFO) SC = No† (or INS INFO) PC = Yes (or INS INFO) SC = Yes (or INS INFO) PC = No (or INS INFO) SC = No† (or INS INFO) PC = No (or INS INFO) SC = Yes (or INS INFO)</td>
</tr>
</tbody>
</table>

† SC response is “No” or no SC is identified
Appendix H3: Scoring of Risk Elements

The response to each RAP Risk Element carries an associated point value. The total calculation of these point values provides the worker with the Preliminary Risk Score. If you change the response to any Risk Element, the Preliminary Risk Score recalculates automatically.

The value of the Preliminary Risk Rating is determined by the range into which the Preliminary Risk Score falls.

<table>
<thead>
<tr>
<th>Scoring of the Initial RAP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Element</strong></td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>1</td>
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<tr>
<td>2</td>
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<tr>
<td></td>
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<tr>
<td>3</td>
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<tr>
<td></td>
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<tr>
<td>4</td>
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<tr>
<td></td>
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<tr>
<td>5</td>
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<td>6</td>
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<td>7</td>
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<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Risk Element</td>
</tr>
<tr>
<td>--------------</td>
</tr>
<tr>
<td>PC = Yes</td>
</tr>
<tr>
<td>PC = Yes</td>
</tr>
<tr>
<td>PC = No</td>
</tr>
<tr>
<td>PC = No</td>
</tr>
</tbody>
</table>

8 Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities.

9 Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities.

10 Caretaker(s) has a serious mental health problem.

---

Risk Element 12:
Caretaker(s) has a debilitating physical illness or physical disability.

$$\begin{array}{cccc}
\text{PC} = \text{No} & \text{PC} = \text{Yes} & \text{PC} = \text{No} & \text{PC} = \text{Yes} \\
\text{SC} = \text{No}† & 0 & 1 & 1 & 1 \\
\text{PC} = \text{Yes} & 1 & 1 & 1 & 1 \\
\text{SC} = \text{No}† & 1 & 1 & 1 & 1 \\
\text{PC} = \text{No} & 1 & 1 & 1 & 1 \\
\text{SC} = \text{Yes} & 1 & 1 & 1 & 1 \\
\text{PC} = \text{Yes} & 1 & 1 & 1 & 1 \\
\text{SC} = \text{Yes} & 1 & 1 & 1 & 1 \\
\end{array}$$

†SC response is “No” or no SC is identified
<table>
<thead>
<tr>
<th>Risk Element</th>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
</table>
| 13 | Caretaker(s) has and applies realistic expectations of all the children. | PC = Yes  
SC = No† | 1 |
| | | PC = Yes  
SC = Yes | 0 |
| | | PC = No  
SC = No† | 1 |
| | | PC = No  
SC = Yes | 1 |
| 14 | Caretaker(s) always or usually recognizes and attends to the needs of all the children. | PC = Yes  
SC = No† | 0 |
| | | PC = Yes  
SC = Yes | 0 |
| | | PC = No  
SC = No† | 1 |
| | | PC = No  
SC = Yes | 1 |
| 15 | Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker. | PC = Yes  
SC = No† | 0 |
| | | PC = Yes  
SC = Yes | 0 |
| | | PC = No  
SC = No† | 2 |
| | | PC = No  
SC = Yes | 2 |
### Scoring of the Comprehensive and Reassessment RAP

<table>
<thead>
<tr>
<th>Risk Element</th>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicated CPS report since the last assessment and service plan.</td>
<td>A</td>
<td>-1</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>D</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>2</td>
</tr>
<tr>
<td>Child(ren) in RAP family unit is currently or was previously in the care or</td>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>custody of substitute caregivers or foster parents.</td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Children under one year old in RAP family unit.</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Caretaker(s) views the abuse/maltreatment situation as <em>seriously</em> as the</td>
<td>SC = Yes</td>
<td></td>
</tr>
<tr>
<td>caseworker.</td>
<td>PC = Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SC = No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PC = Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SC = No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PC = No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SC = Yes</td>
<td></td>
</tr>
<tr>
<td>For the Caretaker Progress With Plan section select one of the following that</td>
<td>PC = A</td>
<td>0</td>
</tr>
<tr>
<td>pertains to the primary and/or secondary caretaker:</td>
<td>SC = A</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SC = B</td>
<td>-1</td>
</tr>
<tr>
<td>a. Awaiting initiation of services, compliant with referrals</td>
<td>SC = C</td>
<td>1</td>
</tr>
<tr>
<td>b. Participating in services and actively pursuing case plan objectives, or</td>
<td>SC = B</td>
<td>2</td>
</tr>
<tr>
<td>has successfully completed all services recommended.</td>
<td>SC = C</td>
<td>3</td>
</tr>
<tr>
<td>c. Participating in services but not actively pursuing case plan objectives,</td>
<td>SC = C</td>
<td>2</td>
</tr>
<tr>
<td>or refused or dropped out of services.</td>
<td>SC = A</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>SC = B</td>
<td>1</td>
</tr>
</tbody>
</table>
Appendix H4: Risk Rating Definitions

After the worker has responded to all of the Risk Elements, the Preliminary Risk Rating is calculated, based on the Preliminary Risk Score.

After the Elevated Risk Elements are taken into account, the Final Risk Rating automatically calculates. If no Elevated Risk Elements are selected, the Final Risk Rating equals the Preliminary Risk Rating. If the worker responds “Yes” to any Elevated Risk Element, the Final Risk Rating automatically calculates as “Very High.”

CONNECTIONS generates one of four values for the Risk Ratings:

<table>
<thead>
<tr>
<th>Risk Rating</th>
<th>Total Risk Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
<td>Two or lower</td>
</tr>
<tr>
<td>Moderate Risk</td>
<td>Three to six</td>
</tr>
<tr>
<td>High Risk</td>
<td>Seven to Nine</td>
</tr>
<tr>
<td>Very High Risk</td>
<td>Ten or above</td>
</tr>
</tbody>
</table>

- Families with Moderate or Low risk may either have no service needs, or their needs may be appropriately served by other services in the community.

- The RAP does not replace worker judgment; there may be valid reasons why a services case should be opened for a family with lower or moderate risk.

- Services are deemed essential for cases with High or Very High risk in order to decrease the risk of subsequent abuse or maltreatment.

- If protective or preventive services are not provided to High or Very High risk cases, an explanation is required regarding why services are not being provided.
## Appendix H5:
**RAP Responses from Embedded Risk Scales**

RAP responses for Comprehensive and Reassessment FASP with Protective Program Choice are mapped from embedded risk scales in Strengths/Needs and Risk component of the FASP.

<table>
<thead>
<tr>
<th>Risk Factor Question</th>
<th>Response is</th>
<th>Embedded in Strength/Needs and Risk Scales</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total prior reports for adults and children in RAP family unit</td>
<td>System generated, worker can modify the value</td>
<td>N/A</td>
</tr>
<tr>
<td>2 Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the current report</td>
<td>Worker must enter response on the RAP window in FASP</td>
<td>N/A</td>
</tr>
<tr>
<td>3 Child(ren) under one year old in RAP family unit</td>
<td>System generated, worker can modify the value</td>
<td>N/A</td>
</tr>
<tr>
<td>4 Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing</td>
<td>Mapped risk from SNR scale:</td>
<td>4 Family Scale - Living Conditions</td>
</tr>
<tr>
<td>5 Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet</td>
<td>Mapped risk from SNR scale:</td>
<td>2 Family Scale - Financial Resource Management/Basic Needs</td>
</tr>
<tr>
<td>6 Caretaker(s) in primary household has reliable and useful social support, from extended family, friends or neighbors</td>
<td>Mapped risk from SNR scale:</td>
<td>1 Family Scale - Support System</td>
</tr>
<tr>
<td>7 Caretaker is a perpetrator of, or victim of, domestic violence, or has serious conflicts with other adults</td>
<td>Mapped risk from SNR scale:</td>
<td>14 Parent/Caretaker Scale - Relationships among caretakers &amp; Significant Adults</td>
</tr>
<tr>
<td>8 Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities</td>
<td>Mapped risk from SNR scale:</td>
<td>15 Parent/Caretaker Scale - Alcohol Use within the past two years</td>
</tr>
<tr>
<td>9 Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities</td>
<td>Mapped risk from SNR scale:</td>
<td>16 Parent/Caretaker Scale - Drug use within the past two years</td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td>Mapped risk from SNR scale:</td>
</tr>
<tr>
<td>---</td>
<td>------------------------------------------------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>10</td>
<td>Caretaker(s) has a serious mental health problem</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Caretaker(s) has very limited cognitive skills</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Caretaker(s) has a debilitating physical illness or physical disability</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Caretaker(s) has and applies realistic expectations of all the children</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Caretaker(s) always or usually recognizes and attends to the needs of all the children</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker</td>
<td>Worker must enter response on the RAP window in FASP</td>
</tr>
</tbody>
</table>
Appendix H6:
RAP Case Level Report

CONNECTIONS

***** WARNING *****

CHILD PROTECTIVE RECORD SUMMARY

RISK ASSESSMENT PROFILE

CASE LEVEL INFORMATION

Case ID: INV Stage ID: WMS #:
Case Name: INV Stage Name: FATALITY REPORT
Stage CD: INT Report Date: HIGH PRIORITY
Current/In-Process RAP Case Level Information: 00/00/0000
Risk Assessment Profile Questions Primary Caretaker:
Secondary Caretaker:

2. Child(ren) in RAP family unit was in the care or custody of substitute caregivers or foster parents, at any time prior to the report.
Response: Yes Response: No

4. Inadequate housing with serious health or safety hazards, extreme overcrowding, or no housing.
Response: Yes Response: Yes

5. Financial resources are severely limited or mismanaged to the degree basic family needs are chronically unmet.
Response: No Response: Yes

6. Caretaker(s) in primary household has reliable and useful social support, from extended family, friends, or neighbors.
Response: Yes Response: Yes
<table>
<thead>
<tr>
<th>Question</th>
<th>Primary Response</th>
<th>Secondary Response</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Caretaker is a perpetrator of, or victim of, domestic violence or has serious conflicts with other adults.</td>
<td>No</td>
<td>Yes</td>
<td>No Comment</td>
</tr>
<tr>
<td>8. Caretaker(s) with alcohol abuse problem within the past two years, with risk of not meeting responsibilities.</td>
<td>Yes</td>
<td>Yes</td>
<td>No Comment</td>
</tr>
<tr>
<td>9. Caretaker(s) with drug abuse problem within the past two years, with risk of not meeting responsibilities.</td>
<td>No</td>
<td>No</td>
<td>No Comment</td>
</tr>
<tr>
<td>10. Caretaker(s) has a serious mental health problem.</td>
<td>No</td>
<td>Yes</td>
<td>No Comment</td>
</tr>
<tr>
<td>11. Caretaker(s) has very limited cognitive skills.</td>
<td>Yes</td>
<td>No</td>
<td>No Comment</td>
</tr>
<tr>
<td>12. Caretaker(s) has a debilitating physical illness or physical disability.</td>
<td>Yes</td>
<td>No</td>
<td>No Comment</td>
</tr>
<tr>
<td>13. Caretaker(s) has and applies realistic expectations of all the children.</td>
<td>Yes</td>
<td>No</td>
<td>No Comment</td>
</tr>
<tr>
<td>14. Caretaker(s) always or usually recognizes and attends to needs of all the children.</td>
<td>No</td>
<td>Yes</td>
<td>No Comment</td>
</tr>
<tr>
<td>15. Caretaker(s) views the abuse/maltreatment situation as seriously as the caseworker.</td>
<td>No</td>
<td>Yes</td>
<td>No Comment</td>
</tr>
<tr>
<td>Elevated Risk Elements</td>
<td>Current/In-Process RAP</td>
<td>Case Level Information: 00/00/0000</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------------</td>
<td>------------------------</td>
<td>-----------------------------------</td>
<td></td>
</tr>
<tr>
<td>Death of a child as a result of abuse/maltreatment by caretaker(s)</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Caretaker(s) has a previous TPR</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Siblings removed from the home, prior to current report, due to abuse or neglect and remain with substitute caregivers or foster parents</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Repeated incidents of sexual abuse or severe physical abuse by caretaker(s)</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Sexual abuse of a child and perpetrator is likely to have access to child</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Physical injury to a child under one year old as a result of abuse or maltreatment by caretaker(s)</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Serious physical injury to a child requiring hospitalization/emergency care within the last 6 months, as a result of abuse or maltreatment by caretaker(s)</td>
<td>Response: No</td>
<td>Response: No</td>
<td></td>
</tr>
<tr>
<td>Newborn child has a positive toxicology for alcohol or drugs</td>
<td>Response: Yes</td>
<td>Response: No</td>
<td></td>
</tr>
</tbody>
</table>
Appendix I: Foster Care Issues Appendices
Appendix I1: Permanency Progress/Concurrent Planning Tabs

The FASP is a dynamic functionality of CONNECTIONS, providing the specific components necessary to support required documentation. In the Permanency Progress/Concurrent Planning sub-node in the FASP Tree, the tabs that are available are dependent on a number of factors.

The table below explains which tabs display under which conditions:

<table>
<thead>
<tr>
<th>Permanency Progress Category</th>
<th>Child’s PPG</th>
<th>FASP Type</th>
<th>Tabs that Display</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSS/CWS Stages:</td>
<td></td>
<td>INIT</td>
<td></td>
</tr>
<tr>
<td>Discharge to Home, Relative or Other Caretaker</td>
<td>• Return to Parent (Parent)</td>
<td>• Progress Toward Permanency</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Return to Parent (Non-Parent Caregiver)</td>
<td>• TPR Petition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Referral to Legal/Guardianship/Custody (Relative)</td>
<td>• Parent Location</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Referral to Legal/Guardianship/Custody (Non-Relative)</td>
<td>• Alternative Permanency Resources</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Placement with a Fit and Willing Relative (Non-Guardianship/Custody)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>COMP</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Progress Toward Permanency</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• TPR Petition</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Parents</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>REAS</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Progress Toward Permanency</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• TPR Petition</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Parents</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Adoption Discussion</td>
<td></td>
</tr>
</tbody>
</table>

In this table, FASP Types are abbreviated as follows:
- INIT – Initial
- COMP – Comprehensive
- REAS – Reassessment

Table continued on next page
<table>
<thead>
<tr>
<th>Permanency Progress Category</th>
<th>Child’s PPG</th>
<th>FASP Type</th>
<th>Tabs that Display</th>
</tr>
</thead>
</table>
| Discharge to Independent Living | Place in another Planned Living Arrangement (Discharge to Independent Living) | INIT | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources |
|                              | Place in another Planned Living Arrangement (Discharge to Independent Living/Unaccompanied Refugee) | COMP | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources  
• Concurrent Planning Discussion w/Foster Parents |
|                              | | REAS | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources  
• Concurrent Planning Discussion w/Foster Parents  
• Resource Connection (if child is 14 or older) |
| Discharge to Adult Residential | Place in another Planned Living Arrangement (Discharge to Adult Residential Care) | INIT | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources |
|                              | | COMP | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources  
• Concurrent Planning Discussion w/Foster Parents |
|                              | | REAS | • TPR Petition  
• Parent Location  
• Alternative Permanency Resources  
• Concurrent Planning Discussion w/Foster Parents  
• Resource Connection (if child is 14 or older)  
• Readiness for Adult Residential Care |

*Table continued on next page*
## Permanency Progress Category

<table>
<thead>
<tr>
<th>Discharge to Adoption</th>
<th>Child’s PPG</th>
<th>FASP Type</th>
<th>Tabs that Display</th>
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</thead>
<tbody>
<tr>
<td>Placement for Adoption</td>
<td>INIT</td>
<td>TPR Petition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>COMP</td>
<td>TPR Petition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>REAS</td>
<td>TPR Petition</td>
<td>Alternative Permanency Resources, Adoption Readiness, Legal Status, Resource Connection (if child is 14 or older)</td>
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### FSS/CCR Stages:

<table>
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<th>Discharge to Home, Relative or Other Caretaker</th>
<th>Child’s PPG</th>
<th>FASP Type</th>
<th>Tabs that Display</th>
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</thead>
<tbody>
<tr>
<td>Return to Parent (Parent)</td>
<td>INIT</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Return to Parent (Non-Parent Caregiver)</td>
<td>COMP</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Referral to Legal/Guardianship/Custody (Relative)</td>
<td>REAS</td>
<td>Progress Toward Permanency, Alternative Permanency Resources, Consent to Adoption</td>
<td></td>
</tr>
<tr>
<td>Referral to Legal/Guardianship/Custody (Non-Relative)</td>
<td></td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Placement with a Fit and Willing Relative (Non-Guardianship/Custody)</td>
<td></td>
<td>None</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Discharge to Independent Living</th>
<th>Child’s PPG</th>
<th>FASP Type</th>
<th>Tabs that Display</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place in another Planned Living Arrangement (Discharge to Independent Living)</td>
<td>INIT</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Place in another Planned Living Arrangement (Discharge to Independent Living/Unaccompanied Refugee)</td>
<td>COMP</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Place in another Planned Living Arrangement (Discharge to Independent Living/Unaccompanied Refugee)</td>
<td>REAS</td>
<td>Alternative Permanency Resources, Consent to Adoption, Resource Connection (if child is 14 or older)</td>
<td></td>
</tr>
<tr>
<td>Permanency Progress Category</td>
<td>Child’s PPG</td>
<td>FASP Type</td>
<td>Tabs that Display</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------------</td>
<td>-----------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Discharge to Adult Residential</td>
<td>Place in another Planned Living Arrangement (Discharge to Adult Residential Care)</td>
<td>INIT</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COMP</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>REAS</td>
<td>Alternative Permanency Resources, Consent to Adoption, Resource Connection (if child is 14 or older), Readiness for Adult Residential Care</td>
</tr>
<tr>
<td>Discharge to Adoption</td>
<td>Placement for Adoption</td>
<td>INIT</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COMP</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>REAS</td>
<td>Adoption Readiness, Placement Status, Barriers to Finalization of Adoption, Resource Connection (if child is 14 or older)</td>
</tr>
</tbody>
</table>
Appendix I2: Life Skills Assessment Competencies

Below are some examples of various competencies that should be assessed when determining an adolescent’s preparedness for the transition into adulthood. These competencies are grouped into broader categories that identify areas of consideration and should be used as guidelines in determining the level of achievement in each area for each tracked child (age 14 and older). The competencies listed below are intended to guide the worker’s assessment of life skills. The examples should not be considered as an all-inclusive list of possible circumstances, conditions or behaviors related to each category or area of consideration. Other circumstances, conditions or behaviors may be associated with each area of consideration that may indicate the adolescent is more or less competent in that category.

Category: Forming and Sustaining Positive Relationships

- Knows a supportive adult(s) who can assist in her/his transition from foster care to self-sufficiency
- Is able to develop appropriate relationships with caring adults and peers
- Knows and understands the differences between various types of relationships (e.g., family, friends, business, professional and dating)
- Is able to recognize the value of maintaining more than one type of relationship in her/his life and the different roles people play in those relationships
- Knows and understands rules, boundaries, self-disclosure, privacy and codes of behavior that relate to different relationships
- Knows how to develop and maintain healthy relationships, including over time and distance, and ways to manage unhealthy relationships
- Knows how to talk to others about decisions that affect relationships, such as dating, sexual activity, marriage and parenting
- Knows how to develop and use a personal support system and is able to develop one for her/himself
- Is able to assess the strengths and needs of her/his own personal support system

Category: Problem Solving/Decision Making/Goal Planning

- Is able to make appropriate life decisions, has practiced and successfully applied this skill on a regular basis
- Is able to select the appropriate resources to use in emergency situations
- Is able to match community resources to a variety of emergency situations
- Knows and understands the importance of taking medication as prescribed, and the possible effects of taking medication improperly (e.g., when pregnant, in combination with alcohol or other drugs)
- Is able to analyze situations where support may be needed from a formal or an informal referral source (e.g., work-related problem, family crisis) and can identify the appropriate support person or community resource
Category: Preventive Health and Wellness
- Knows how to access health and wellness resources in the community using various methods (e.g., the telephone book, directories, the Internet)
- Knows when and how to seek appropriate medical attention
- Knows how to pay for health-related services based on her/his medical insurance/coverage plan
- Is able to make, track and keep medical/dental and related healthcare appointments
- Knows when and where to get information about pregnancy, birth control, AIDS/HIV, STDs and prevention, as well as agencies that provide free and anonymous testing
- Has identified several community resources which provide counseling, services and pre-natal care if a pregnancy occurs
- Knows how to obtain a health care provider who accepts her/his medical insurance/coverage plan as well as understands related concepts/terminology (e.g., Medicaid, HMO, clinic, emergency room)
- Is able to identify and make healthy lifestyle choices
- Is able to resist peer pressure to engage in smoking, alcohol, and substance use
- Is able to incorporate stress reduction, positive emotional/mental health strategies, nutrition, exercise and healthy lifestyle experiences into her/his daily living skills choices
- Has an awareness of the importance of healthy leisure activities
- Knows and understands the importance of healthy leisure activities and practices at least two of these activities on a regular basis

Category: Education and Supports
- Knows and understands the steps to achievement and advancement in the educational system
- Knows how to access resources to improve educational outcomes
- Understands the relationship of education to employment goals
- Is able to match knowledge, strengths, and abilities to educational opportunities
- Is able to explain the qualifications necessary to achieve education and goals
- Creates an education plan, which includes time frames, goals and resources

Category: Vocational/Career Planning
- Knows and understands the difference between a job and a career
- Is able to make an informed career decision
- Is able to develop a career plan
- Is able to access resources to achieve educational outcomes
- Knows and understands the steps to achievement and advancement in the educational system
- Understands the importance of education and its relationship to employment
- Is able to develop an educational plan to achieve vocational/career outcome
Category: Employment Skills

- Knows and understands the connection between her/his interests, abilities, limitations and career/vocational/college options
- Is able to identify and explore vocational/career areas of interest
- Knows and understands job-seeking skills, including how to identify and secure needed documentation for employment, develop a résumé, search for employment (part-time or full-time), match strengths and abilities with job ads/requirements, complete a job application, and interview for a job
- Knows and understands employment retention skills, including how to apply interpersonal communications (i.e., speaking, listening, reading and writing) and social skills appropriately at the work site
- Knows and understands relationship of specific life skills to employment and the workplace, including money management, time management and transportation
- Knows and understands the relationship between personal and social skills development and employment success and advancement

Category: Budgeting and Financial Management

- Knows and understands how to track and maintain an allowance, develop and maintain a realistic spending plan, including a routine for paying monthly expenses
- Knows and understands how to make purchases using cash, check, debit or credit card
- Knows and understands the importance of developing and maintaining a sound credit history and credit rating, when and how to borrow money, and its implications (including the use of credit cards)
- Knows and understands where to find help if s/he experiences financial difficulty
- Knows and understands how to shop economically for everyday items (e.g., personal care products, food, school supplies), the benefits of comparison shopping, how to comparison shop, how to shop on a budget, and how advertising impacts spending decisions
- Knows the pros and cons of purchasing from “rent-to-own” stores and basic consumer rights
- Knows and understands ways to save money and is able to develop a savings plan
- Is able to achieve a short-term savings goal
- Can achieve a long-term savings goal to help in the transition to self-sufficiency
- Knows and understands how to read a pay stub, how to file taxes, complete the appropriate tax form and her/his responsibility for paying taxes
- Knows and understands the services provided by financial institutions (e.g., cashing checks, withdrawing money, opening/maintaining savings and checking accounts, money orders and electronic banking)
- Knows and understands how one’s values influence money decisions, including the difference between personal needs and wants
- Knows and understands the ways in which money can be used to help her/himself and others, including the ability to recognize the relationship between work, savings, investments, money earned, volunteering and contributions to charities
Category: Housing

- Knows and understands the kinds of housing available in her/his community, including types of housing and search techniques for selected housing options
- Knows how to inspect an apartment for safety
- Is able to apply for housing (e.g., complete application, identify references)
- Knows and understands a lease agreement, including the rights and responsibilities of both the landlord and tenant under the lease
- Is able to develop a plan to move into her/his own living arrangement, including calculating start-up costs; identifying necessary items; developing a realistic monthly budget for maintaining the living arrangement and assuring safety (e.g., locks, smoke detectors)
- Knows how to maintain her/his living arrangement, including following the terms of the lease agreement, meeting financial arrangements in a timely manner and behaving like a respectful neighbor

Category: Home Management

- Knows and understands the concept of nutrition
- Is able to evaluate, plan, budget, shop and safely prepare simple nutritious meals
- Is able to clean all areas of a household and safely store items, including kitchen ingredients, appliances, personal care items and leftover food
- Can develop and maintain a household cleaning routine to avoid pests, eviction and illness
- Is able to maintain personal hygiene, including clothing care, use of laundry facilities, and self-management
- Knows and understands the importance of home safety and how to access community resources in case of emergency
- Knows how to make simple home repairs

Category: Accessing Community Resources

- Knows how to access and select the appropriate community resources in case of an emergency
- Knowledge of community recreational activities that are free or a minimal cost
- Knows how to plan recreational activities
- Knows and understands what community resources are available to help with housing issues, financial issues, educational issues, recreation/leisure activities, legal issues and civic responsibilities
- Is able to use public transportation where applicable and can travel independently
- Is able to use the newspaper, yellow pages, library and Internet to locate resources
- Knows how to obtain copies of personal documents
- Knows when and how to seek medical attention for medical, dental, mental health, optical, pregnancy, substance abuse, and other related needs
- Is able to access cultural and spiritual resources in the community based on identity and beliefs
Appendix J:  
Case Planner Summary

One of the tools that the Case Planner has at his/her disposal is the Case Planner Summary functionality. This is available on several windows within each FASP. This functionality allows the Case Planner to integrate all of the entries made by assigned workers into a single, coherent narrative that summarizes the various activities and events that have occurred with all family members.

The Case Planner Summary functionality appears in six places within each FASP:

- **Case Update** tab on the Family Update node
- **Family View/Child View** tab on the Assessment Analysis node
- **Behavioral Concerns and Contributing Factors** tab on the Assessment Analysis node
- **Strengths** tab on the Assessment Analysis node
- **Needed Improvements/Changes** tab on the Assessment Analysis tab
- **Family Involvement** button on the Service Plan node

For detailed information about the Case Planner Summary functionality, refer to the appropriate topic area.
Appendix K: OCFS Security Guidelines
OCFS Security Guidelines
Safe Computing Practices

1. **Be responsible**—Download only authorized, work-related executables or documents from the Internet that are from trusted sources and that your LAN/Security Administrator has approved. Never use commercial e-mail accounts (such as AOL, Hotmail or Yahoo), Instant Messaging, chat rooms or other third-party services on a state computer without written authorization.

2. **Be professional**—Never use state e-mail services for prohibited activities, including (but not limited to): sharing jokes or any other non-work-related materials; transmitting illegal, offensive or threatening items; and soliciting for unauthorized causes or activities. In addition to being prohibited, these unnecessary electronic transmissions crowd network bandwidth and occupy server capacity needed for legitimate business purposes.

3. **Be alert** and **immediately** report any suspected virus infection or other system compromise to your LAN/Security Administrator and to the OCFS Information Security Officer (Jo Shrader). Proper reporting speeds reaction, recovery and damage control. Be sure you know who your LAN/Security Administrator is before you need to contact him/her.

4. **Be consistent** in complying with the same safety procedures when using remote access or transporting files between PCs via a floppy disk or CD. If you move disks between your home and work PCs, make sure you have up-to-date anti-virus software on your home PC and regularly scan disks and CDs. Viruses can easily be brought into the state network through a laptop, home PC or storage media.

5. **Be suspicious** of e-mail you weren’t expecting, even if it’s from someone you know. Computer viruses often send e-mails to all contacts in an unsuspecting sender’s address book. Before you open the e-mail, call the source to verify that s/he intentionally sent the e-mail.

6. **NEVER run/download/forward unsolicited files** (e.g., executables, documents, spreadsheets). Any programs that run or execute on your PC must be virus-checked and approved by your LAN/Security Administrator first. Never open any file with a double file extension (e.g., iamavirus.txt.vbs).

7. **NEVER forward virus warnings to anyone**
Contact your LAN/Security Administrator to determine how to proceed. (If your LAN/Security Administrator is not available, contact the Help Desk.) Forwarding these items increases risk and creates additional network traffic.

8. **NEVER attempt to test system weaknesses or vulnerabilities** unless you are specifically authorized to do so.

9. **ALWAYS leave your PC powered on** (being sure to log off, as appropriate)
This will ensure that your PC will receive security patches. Click on Start > Shut Down > Log Off to log off your computer without powering off.

**Anti-virus software helps protect against computer viruses, but does NOT replace conscious, consistent adherence to established safety procedures.**

If you think your computer may have been exposed to a virus, DON’T PANIC! Contact your LAN/Security Administrator IMMEDIATELY.
Protecting Your Password

- **Make it difficult**
  Select a password that is easy for you to remember, but difficult for others to guess. Don’t be stingy—make your password as long as possible (at least 8 characters and up to a maximum of 13 characters), in order to help reduce the likelihood of allowing someone to guess it. You cannot use all or part of your logon ID in your password, nor can you reuse any of your last 13 passwords.

- **Mix it up**
  Your OCFS password must contain at least one uppercase letter, one lowercase letter and one number. CONNECTIONS users must never use symbols in their passwords.

- **Keep it to yourself**
  Don’t share your password with others. Never display your password; if you need to write it down, don’t keep the information at your desk or anywhere it can be easily seen by others.

- **Embrace change**
  You must change your password periodically—at least once every 90 days. If you think your password has been compromised, change it immediately. (Don’t forget to report the situation to your LAN/Security Administrator as soon as possible!)

- **Be yourself**
  Use only your logon ID and password; never use a current or former co-worker’s ID or password.

- **Let your fingers do the walking**
  Never store passwords in macros or automatic log-on features. Enter your password manually every time.

Your unique User ID and password not only provide you with “keys” to access the OCFS network (including CONNECTIONS, as applicable), they also serve as a form of identification—linking you to your actions in the system.

YOU are responsible for actions taken with your User ID and password! Always follow established password protocols to help prevent unauthorized use of your User ID and password.

If you think your password has been compromised, change it immediately AND report the situation to your LAN/Security Administrator.

Security is everyone’s responsibility!

These guidelines are advisable for all of your passwords.
Protecting Confidential Information

- **Maintain confidentiality 24/7**
  Protecting confidential information encompasses all spoken, handwritten, printed and electronically transmitted notes and communications. When you make case visits, be sure to keep client-identifiable casework documentation with you at all times and never allow unauthorized individuals to view the information. Remember that all case and system information must be used only for legitimate business purposes. If you must keep hard copies of confidential information at your desk, always lock your desk whenever you are away from it. If hard copies need to be discarded, always run them through a cross-cut shredder.

- **Don't kick this habit**
  It’s easy to become complacent or to think, “I’ll only be away from my computer for a few minutes.” If you are logged on to the system, always lock your computer (or log off the network) by holding down the Ctrl+Alt+Del keys at the same time. Do this every time you leave your desk; this helps prevent unauthorized individuals from using your User ID and password to access the network. **80% of security breaches are unauthorized people using an authorized user’s computer, NOT hacking in from outside.**

- **Exercise care with voicemail and e-mail**
  When conducting casework or other legitimate business contacts by phone, it’s inevitable that you may sometimes need to leave a voicemail message or send an e-mail to a contact. Never include confidential information in voicemail you leave or e-mail you send.

- **Don’t convey confidential information where others can intercept it**
  Caseworkers have an obligation to preserve the confidentiality rights of the children and families with whom they work. Other staff may also have legitimate access to this information. If you must discuss confidential information on the phone, avoid areas where your conversation can be overheard. Remember that cellular phone lines are not sufficiently secure to be appropriate when discussing confidential information. Never save confidential information to the hard drive of any desktop computer. Check the permission levels on your Microsoft Outlook folders; make sure you understand what each level of access means and assign permissions on a need-to-know basis only.

- **The walls have ears**
  Be mindful of protecting confidential information in areas where you can be easily overheard, such as in cubicle areas.

- **Use follow-through when faxing**
  If you need to transmit any confidential information via fax, call first before sending the fax, in order to alert the intended recipient that you are sending a fax. Be sure to call the recipient afterward, too, to verify that the fax was received and that it was not left on the fax machine. Avoid faxing confidential information whenever possible.

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**Security is everyone’s responsibility.**
Always follow established security protocols to help protect confidential information.
Appendix L:
FASP Submission Edits
### Appendix L1: Family Update Component

**FSS/CWS**

<table>
<thead>
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<th>Initial FASP</th>
<th>Required fields</th>
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<tbody>
<tr>
<td>Presenting Needs/Concerns tab</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Family Background tab</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td><strong>Case Update tab (Program Choice is “Protective”)</strong></td>
<td>• Case Planner Summary for Key Family Events</td>
</tr>
</tbody>
</table>
| **Case Update tab (Program Choice is not “Protective” and Concerns/Issues were identified at Intake)** | • Specific Actions narrative  
  • At least one Emergency Service(s) checked  
  • Yes or No radio button indicating if identified issues were resolved  
  • If No, Unresolved Issues narrative is required |
| **Case Update tab (Program Choice is not “Protective” and Concerns/Issues were not identified at Intake)** | • Case Planner Summary for Key Family Events |
| Legal Activity tab | • Answer Question 1 |

<table>
<thead>
<tr>
<th>Comprehensive and Reassessment FASPs</th>
<th>Required fields</th>
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<tbody>
<tr>
<td>Family Background tab</td>
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</tr>
<tr>
<td>Case Update tab</td>
<td>• Case Planner Summary for Key Family Events</td>
</tr>
<tr>
<td>Legal Activity tab</td>
<td>• Answer Question 1</td>
</tr>
</tbody>
</table>

**FSS/CCR**

<table>
<thead>
<tr>
<th>Reassessment FASP</th>
<th>Required fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Background tab</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Case Update tab</td>
<td>• Case Planner Summary for Key Child Events</td>
</tr>
<tr>
<td>Legal Activity tab</td>
<td>• Answer Question 1</td>
</tr>
</tbody>
</table>
Appendix L2: Assessment Analysis Component

**FSS/CWS**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs</th>
<th>Required fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family View tab</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Behaviors and Contributing Factors tab</td>
<td>• Case Planner Summary</td>
</tr>
<tr>
<td>Strengths tab</td>
<td>• Case Planner Summary</td>
</tr>
<tr>
<td>Needed Improvements/Changes tab</td>
<td>• Case Planner List</td>
</tr>
</tbody>
</table>

**FSS/CCR**

<table>
<thead>
<tr>
<th>Reassessment FASP</th>
<th>Required fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child View tab</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Strengths tab</td>
<td>• Case Planner Summary</td>
</tr>
<tr>
<td>Needed Improvements/Changes tab</td>
<td>• Case Planner List</td>
</tr>
</tbody>
</table>
## Appendix L3:
Strengths, Needs and Risks Component

**FSS/CWS**

<table>
<thead>
<tr>
<th>Initial FASP</th>
<th>Required fields</th>
</tr>
</thead>
</table>
| **Parent/Caretaker Scales** | • Complete all eight (8) scales for Primary and Secondary Caretaker (if Secondary Caretaker exists)  
-OR-  
• “No Caretaker Exists” check box was selected |
| **Child Scales** | • Ratings recorded for each Tracked Child on all seven (7) scales |

<table>
<thead>
<tr>
<th>Comprehensive and Reassessment FASPs</th>
<th>Required fields</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parent/Caretaker Scales</strong></td>
<td>• Complete all 19 scales for Primary and Secondary Caretaker (if Secondary Caretaker exists)</td>
</tr>
<tr>
<td><strong>Child Scales</strong></td>
<td>• Ratings recorded for each Tracked Child on all 13 scales</td>
</tr>
</tbody>
</table>
| **Family Scales** | • Complete all five (5) scales for primary household  
-OR-  
• “No Caretaker Exists” check box was selected |
### Appendix L4: Risk and Safety Components

**FSS/CWS**

<table>
<thead>
<tr>
<th>Initial FASP</th>
<th>Program Choice</th>
<th>Required fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Assessment</td>
<td>Protective</td>
<td>• <strong>Ready for FASP Submission</strong> check box is checked</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-OR-</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• “No Caretaker Exists” check box was selected</td>
</tr>
<tr>
<td></td>
<td>Not Protective</td>
<td>• Questions 1 – 3 answered</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Questions 4 – 11 answered for both Primary and Secondary Caretakers (if Secondary Caretaker exists)</td>
</tr>
<tr>
<td>Safety Assessment</td>
<td>Protective</td>
<td>• <strong>Ready for FASP Submission</strong> check box is checked</td>
</tr>
<tr>
<td></td>
<td>Not Protective</td>
<td>• Narrative recorded for Key Protecting Factors</td>
</tr>
</tbody>
</table>
# Appendix L5: Foster Care Issues

## Appropriateness of Placement

### FSS/CWS

<table>
<thead>
<tr>
<th>FASPs</th>
<th>Child Entered/Re-entered Foster Care - Required Fields</th>
<th>Child Moved from One Foster Care Setting to Another - Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial, Comprehensive and Reassessment</td>
<td>• Narrative recorded</td>
<td>• Narrative recorded</td>
</tr>
<tr>
<td>Activities Prior to Placement tab</td>
<td>• Answer Question 1</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td>Location of Child tab</td>
<td>• If “Yes,” the corresponding narrative is required</td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td>Continuity of Environment tab</td>
<td>• Answer Questions 1 – 5</td>
<td>• Answer all questions</td>
</tr>
<tr>
<td>Continuity of Culture for American Indian Children tab</td>
<td>• Question 1</td>
<td>• Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes” to Question 1, Questions 2 and 3 are required</td>
<td>• If “Yes” to Question 1, Questions 2 and 3 are required</td>
</tr>
<tr>
<td></td>
<td>• If “No” to Question 2 or 3, the corresponding narrative is required</td>
<td>• If “No” to Question 2 or 3, the corresponding narrative is required</td>
</tr>
</tbody>
</table>

### FSS/CCR

<table>
<thead>
<tr>
<th>Reassessment FASP</th>
<th>Child Entered/Re-entered Foster Care Required Fields</th>
<th>Child Moved from One Foster Care Setting to Another Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities Prior to Placement tab</td>
<td>• Narrative recorded</td>
<td>• Narrative recorded</td>
</tr>
<tr>
<td>Location of Child tab</td>
<td>• Answer Question 1</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td>Continuity of Culture for American Indian Children tab</td>
<td>• Answer Question 1</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes,” the corresponding narrative is required</td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td></td>
<td>• If “Yes” to Question 1, Questions 2 and 3 are required</td>
<td>• If “Yes” to Question 1, Questions 2 and 3 are required</td>
</tr>
<tr>
<td></td>
<td>• If “No” to Question 2 or 3, the corresponding narrative is required</td>
<td>• If “No” to Question 2 or 3, the corresponding narrative is required</td>
</tr>
</tbody>
</table>
### Adjustment and Functioning

**FSS/CWS**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs</th>
<th>Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjustment in Foster Care tab</td>
<td>• Narrative recorded</td>
</tr>
</tbody>
</table>
| Safety in Foster Care tab                   | • Narrative recorded  
  • Answer Question 1  
  • If “Yes,” the corresponding narrative is required |

**FSS/CCR**

<table>
<thead>
<tr>
<th>Reassessment FASP</th>
<th>Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjustment in Foster Care tab</td>
<td>• Narrative recorded</td>
</tr>
</tbody>
</table>
| Safety in Foster Care tab | • Narrative recorded  
  • Answer Question 1  
  • If “Yes,” the corresponding narrative is required |

### Permanency Progress/Concurrent Planning

**FSS/CWS**

<table>
<thead>
<tr>
<th>PPG of Child</th>
<th>FASP Type</th>
<th>Tabs to Complete</th>
</tr>
</thead>
</table>
| Initial      | • Progress Toward Permanency  
  • TPR Petition  
  • Parent Location  
  • Alternative Permanency Resources |
| Comprehensive | • Progress Toward Permanency  
  • TPR Petition  
  • Parent Location  
  • Alternative Permanency Resources  
  • Concurrent Planning Discussion w/Parents  
  • Concurrent Planning Discussion w/Foster Parents |
| Discharge to Home |          |                  |
| Reassessment  | • Progress Toward Permanency  
  • TPR Petition  
  • Parent Location  
  • Alternative Permanency Resources  
  • Concurrent Planning Discussion w/Parents  
  • Concurrent Planning Discussion w/Foster Parents  
  • Adoption Discussion |
<table>
<thead>
<tr>
<th>PPG of Child</th>
<th>FASP Type</th>
<th>Tabs to Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Independent Living</strong></td>
<td>Initial</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td>Comprehensive</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
</tr>
<tr>
<td></td>
<td>Reassessment</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (child is 14 older)</td>
</tr>
<tr>
<td><strong>Adult Residential</strong></td>
<td>Initial</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td>Comprehensive</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
</tr>
<tr>
<td></td>
<td>Reassessment</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent Location</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Concurrent Planning Discussion w/Foster Parents</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (if child is 14 or older)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Readiness for Adult Residential Care</td>
</tr>
<tr>
<td><strong>Adoption</strong></td>
<td>Initial</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td>Comprehensive</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td>Reassessment</td>
<td>• TPR Petition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Adoption Readiness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Legal Status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Placement Status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Barriers to Finalization of Adoption</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (if child is 14 or older)</td>
</tr>
</tbody>
</table>
## Tabs to be Completed Based on Stage Type, FASP Type and PPG

<table>
<thead>
<tr>
<th>PPG of Child</th>
<th>FASP Type</th>
<th>Tabs to Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discharge to Home</td>
<td>Reassessment</td>
<td>• Progress Toward Permanency</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Consent to Adoption</td>
</tr>
<tr>
<td>Independent Living</td>
<td>Reassessment</td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Consent to Adoption</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (if child is 14 or older)</td>
</tr>
<tr>
<td>Adult Residential</td>
<td>Reassessment</td>
<td>• Alternative Permanency Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Consent to Adoption</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (if child is 14 or older)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Readiness for Adult Residential Care</td>
</tr>
<tr>
<td>Adoption</td>
<td>Reassessment</td>
<td>• Adoption Readiness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Placement Status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Barriers to Finalization of Adoption</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resource Connection (if child is 14 or older)</td>
</tr>
</tbody>
</table>

### Tab Required Fields

<table>
<thead>
<tr>
<th>Tab</th>
<th>Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress Toward Permanency</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>TPR Petition</td>
<td>• Answer Questions 1 – 4</td>
</tr>
<tr>
<td></td>
<td>• If “No” to Question 4, the corresponding narrative is required</td>
</tr>
<tr>
<td>Parent Location</td>
<td>• Answer Questions 1 and 2</td>
</tr>
<tr>
<td></td>
<td>• If “No” to either question, the corresponding narrative is required</td>
</tr>
<tr>
<td>Alternative Permanency Resource</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td></td>
<td>• If “No,” the corresponding narrative is required</td>
</tr>
<tr>
<td>Concurrent Plan Discussion w/Parents</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td></td>
<td>• If “No,” the corresponding narrative is required</td>
</tr>
<tr>
<td>Concurrent Plan Discussion w/Foster Parent</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td>Adoption Discussion</td>
<td>• Answer Question 1</td>
</tr>
<tr>
<td></td>
<td>• If “Yes,” the corresponding narrative is required</td>
</tr>
<tr>
<td>Tab</td>
<td>Required Fields</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Adoption Readiness                      | • Answer Questions 1 and 2
• If “No” to either question, the corresponding narrative is required |
| Legal Status                            | • Answer Question 1
• If “Yes,” the corresponding narrative is required |
| Placement Status                        | • Answer Question 1
• If “No,” the corresponding narrative is required |
| Barriers to Finalization of Adoption    | • Answer Question 1
• If “Yes,” the corresponding narrative is required |
| Consent to Adoption                     | • Answer Question 1
• If “Yes,” the corresponding narrative is required |
| Resource Connection                     | • Answer Question 1
• If “Yes,” the corresponding narrative is required
• If “No,” the corresponding narrative is required |
| Readiness for Adult Residential Care    | • Answer Question 1
• If “Yes,” the corresponding narrative is required |
### Life Skills Assessment
**FSS/CWS AND FSS/CCR**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR is Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• All ten categories must have a level of achievement selected for each tracked child in foster care age 14 and older</td>
</tr>
</tbody>
</table>

### Family/Child Visiting Plan
**FSS/CWS AND FSS/CCR**

<table>
<thead>
<tr>
<th>Initial FASP</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| Visiting Plan tab | • Answer Questions 1 and 2  
• If “Yes” to either question, the corresponding narrative is required  
• Plan Description  
• Primary Location  
• Frequency  
• Duration  
• Visiting Plan Status  
• Record a narrative describing what will take place during visits |
| No Visiting Plan tab | • Record a narrative |

<table>
<thead>
<tr>
<th>Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| Visiting Plan Review tab | • Select at least one row in the Frequency grid  
• Select a rating from the menu in the drop-down field  
• Answer the Yes/No question  
• If “No,” the corresponding narrative is required |
| Visiting Plan tab | • Answer Questions 1 and 2  
• If “Yes” to either question, the corresponding narrative is required  
• Plan Description  
• Primary Location  
• Frequency  
• Duration  
• Visiting Plan Status  
• Record a narrative describing what will take place during visits |
| No Visiting Plan tab | • Record a narrative |
**Discharges**

**Discharge to Home Relative (FSS/CWS and FSS/CCR)**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| **Situations/Behaviors/Concerns tab** | • Discharge date (Question 1)  
• Discharge setting (Question 2)  
• Discharge type (Question 3)  
• Both narratives required  
• Issues/Concerns question (Question 4)  
• If “Yes” for Question 4, the corresponding narrative is required |
| **Decision Support tab** | • Answer Questions 1 - 3  
• If “No” to any question, the corresponding narrative is required |
| **Needs/Resources tab** | • Answer Questions 1 and 2  
• If “No” to either question, the corresponding narrative is required  
• Answer Question 3  
• If “Yes,” the corresponding narrative is required  
• Answer Questions 4 and 5  
• Record a narrative identifying resources |

**Discharge to Independent Living (FSS/CWS and FSS/CCR)**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| **Discharge Type/Dates tab** | • Discharge Type (Question 1)  
• Discharge Date (Question 2)  
• Answer Question 3  
• If “Yes” for Question 3, record the date the notice was given  
• If “No” for Question 3, the corresponding narrative is required |
| **Needs/Resources tab** | • Answer Questions 1 – 3  
• If “No” for any question, the corresponding narrative is required  
• Answer Question 4  
• Record a narrative identifying adult resources |
| **Safety/Services tab** | • Answer Question 1  
• If “Yes,” the corresponding narrative is required  
• Record a narrative identifying arrangements with service providers  
• Answer Question 2  
• If “No,” the corresponding narrative is required |
### Discharge to Adult Residential Care (FSS/CWS and FSS/CCR)

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
|  | • Discharge Date (Question 1)  
• Discharge Type (Question 2)  
• Record a narrative with facility name and address information  
• Record a narrative explaining why residential care is needed  
• Answer Question 3  
• If “Yes,” the corresponding narrative is required |

### Discharge to Adoption (FSS/CCR)

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
|  | • Record a narrative explaining the decision for finalizing adoption  
• Answer Question 1  
• If “No,” the corresponding narrative is required  
• If “Yes,” the corresponding narrative is required |
Appendix L6:  
Service Plan

**FSS/CWS and FSS/CCR**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
|  | • At least one Outcome and Activity block with status of New, Retained or Modified  
• Based on Local District Protocol, the Services Needed window may need to be completed |
### Appendix L7:
Plan Amendment

**FSS/CWS and FSS/CCR**

<table>
<thead>
<tr>
<th>Status Change</th>
<th>Required Fields</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services Started</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Preventive Services Ended</td>
<td>• Record a narrative</td>
</tr>
<tr>
<td>Visitation Plan Changed</td>
<td>• Visitation Plan Effective Date</td>
</tr>
<tr>
<td>Case Closed to CPS</td>
<td>• If the RAP rating is “High” or “Very High,” a narrative is required</td>
</tr>
<tr>
<td>Other Status Change</td>
<td>• Record a narrative</td>
</tr>
</tbody>
</table>
| Child Entering/Reentering Foster Care| • Record a narrative on the Activities Prior to Placement tab on the Child Entering or Reentering Foster Care window  
  • Answer the question “Is any child placed a substantial distance from his/her parent(s)?” on the Location of Child tab  
  • For FSS/CCR stages, answer the question “Is any child placed a substantial distance from his/her siblings or out of state?” on the Location of Child tab  
  • Answer the placement questions regarding Family Contact, Sibling Contact, Continuity with Child’s Community and Parent’s Religious Preference on the Continuity of Environment tab, as well as the question “Are all siblings placed in the same home?”  
  • Answer the question “Is the child in placement an American Indian child?” on the Continuity of Culture for American Indian Children tab  
  □ If “Yes” is selected, answer the two questions regarding placement requirements and order of preference for placement  
  □ If “No” is selected for either or both of those questions, record a narrative |
| Child Moved from One Foster Care Setting to Another | • Record a narrative on the Activities Prior to Placement tab on the Child Moved from One Foster Care Setting to Another window  
  • Answer the question “Is any child placed a substantial distance from his/her parent(s)?” on the Location of Child tab  
  • For FSS/CCR stages, answer the question “Is any child placed a substantial distance from his/her siblings or out of state?” on the Location of Child tab  
  • Answer the placement questions regarding Family Contact, Sibling Contact, Continuity with Child’s Community and Parent’s Religious Preference on the Continuity of Environment tab, as well as the question “Are all siblings placed in the same home?”  
  • The question “Is the child in placement an American
| Indian child? on the **Continuity of Culture for American Indian Children** tab must be answered. If “Yes” is selected, the two questions regarding placement requirements and order of preference for placement on this tab must also be answered. Selecting “No” to either or both of those questions displays a narrative field where workers must record an explanation. |
Appendix L8: Programmatic Eligibility

**FSS/CWS and FSS/CCR**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASPs (FSS/CCR Reassessment only)</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| **Preventive tab** | • Check appropriate checkbox  
  • Select the Eligibility Standard for the appropriate type of Preventive services |
| **Placement tab** (FSS/CWS only) | • Select an Eligibility Standard for each child |
## Appendix M:
Non-LDSS Custody – Relative/Resource Placement

**FSS/CWS**

<table>
<thead>
<tr>
<th>Initial, Comprehensive and Reassessment FASP</th>
<th>Required Fields</th>
</tr>
</thead>
</table>
| Appropriateness of Alternative Setting tab | • Record Caretaker information (name, address, relationship)  
• Record a narrative |
| Placement Functioning tab | • Record a narrative in both fields |
| Permanency Progress tab | • Record a narrative response to Question 1  
• Answer Question 2  
• If “No,” a corresponding narrative is required  
• Answer Question 3  
• If “Yes” and no visiting plan is recorded, a corresponding narrative is required  
• If “No,” a corresponding narrative is required  
• Answer Question 4  
• A corresponding narrative is required |
| Record Return Home tab | • Answer Question 1  
• If “Yes,” a corresponding narrative is required  
• Answer Question 2  
• If “No,” a corresponding narrative is required  
• Record a narrative |
| Life Skills Assessment window  
(Optional for this Program Choice) | • Once a rating is entered for a child (age 14 and older), all ratings must be completed |
Appendix N:
Records Retention Rules for Child Welfare
(CPS & Case Management)

The sealing and expungement of data listed here for each combination of stages complies with Elisa’s law and the proposed rules and regulations for the state of New York as of October 14, 1996.

The grayed rows indicate records retention rules that are currently supported by CONNECTIONS CPS Intake and Investigation (Production).

<table>
<thead>
<tr>
<th>Stage(s)/Case Types</th>
<th>Sealing</th>
<th>Stage Status</th>
<th>Expungement</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPS Oral Report Date post 2-12-96;</td>
<td>When determination of</td>
<td>Closed</td>
<td>10 years from the date of the</td>
<td>Report notifying clients of sealing delayed 14 days</td>
</tr>
<tr>
<td>determination-Unfounded</td>
<td>unfounded is entered into</td>
<td></td>
<td>Unfounded Oral report</td>
<td></td>
</tr>
<tr>
<td></td>
<td>system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPS Oral Report Date prior 2-12-96;</td>
<td>None</td>
<td>Closed</td>
<td>14 days after unfounded entered into system</td>
<td></td>
</tr>
<tr>
<td>determination-Unfounded</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPS Unfounded/Clear and Convincing</td>
<td>None</td>
<td>Closed</td>
<td>Immediate</td>
<td></td>
</tr>
<tr>
<td>CPS Indicated</td>
<td>None</td>
<td>Closed</td>
<td>10 years after 18th birthday of the youngest</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>child named in the report</td>
<td></td>
</tr>
<tr>
<td>Family Services Stage – Types Court</td>
<td>None</td>
<td>Closed</td>
<td>30 years after the Case Closure</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Ordered Investigation FSS/COI</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Services Stage – Out of Town</td>
<td>None</td>
<td>Closed</td>
<td>30 years after the Case Closure</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Inquiry FSS/OTI</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Services Stage – ICPC FSS/ICPC</td>
<td>None</td>
<td>Closed</td>
<td>30 years after the Case Closure</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Family Service Stage – FSS/CWS with CPS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>involvement 1</td>
<td></td>
<td></td>
<td>18th birthday of youngest child in stage</td>
<td>associated FSI</td>
</tr>
</tbody>
</table>

(CPS & Case Management)
<table>
<thead>
<tr>
<th>Stage(s)/Case Types</th>
<th>Sealing</th>
<th>Stage Status</th>
<th>Expungement</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage - FSI/FSS Advocates preventive only (ADVPO)</td>
<td>None</td>
<td>Closed</td>
<td>6 years after 18th birthday of youngest child in stage</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Family Service Stage – FSS/CWS with preventive only ¹</td>
<td>None</td>
<td>Closed</td>
<td>6 years after 18th birthday of youngest child in stage</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Family Services Stage – FSS CWS with Foster Care ¹</td>
<td>None</td>
<td>Closed</td>
<td>30 years after the last child in stage’s discharge from Foster Care</td>
<td>Remove both FSS and associated FSI</td>
</tr>
<tr>
<td>Child Case – Record Foster Care FSS/CCR</td>
<td>None</td>
<td>Closed</td>
<td>30 years after the last child in stage’s discharge from Foster Care</td>
<td></td>
</tr>
<tr>
<td>Child Case Record Adoption FSS/CCR ²</td>
<td>Upon finalization of adoption</td>
<td>N/A</td>
<td>None</td>
<td>Child Case Record/stage is not archived. The associated Family Services Stage and Family Services Intake, from which the child was removed, should also be sealed with the Child Case Record.</td>
</tr>
<tr>
<td>Family Services Intake/ progressed to FAM stage</td>
<td>None</td>
<td></td>
<td>See requirement for type of case. FSI disposition would be the same as the FSS</td>
<td></td>
</tr>
<tr>
<td>Family Services Intake/ no App</td>
<td>None</td>
<td></td>
<td>6 months from Intake to closed date</td>
<td></td>
</tr>
<tr>
<td>Family Services Intake/ no App. given but not returned</td>
<td>None</td>
<td></td>
<td>6 months from Intake to closed date</td>
<td></td>
</tr>
<tr>
<td>Family Services Intake/ no App. returned, then denied</td>
<td>None</td>
<td></td>
<td>6 months from Intake to closed date</td>
<td></td>
</tr>
<tr>
<td>Information &amp; Referral Family Services</td>
<td>None</td>
<td></td>
<td>90 days from I&amp;R date</td>
<td>Aggregate data will be kept for Management reporting.</td>
</tr>
<tr>
<td>Stage(s)/Case Types</td>
<td>Sealing</td>
<td>Stage Status</td>
<td>Expungement</td>
<td>Notes</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>---------</td>
<td>--------------</td>
<td>------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Information &amp; Referral CPS</td>
<td>None</td>
<td>None</td>
<td>90 days from I&amp;R date</td>
<td>Aggregate data will be kept for Management reporting.</td>
</tr>
<tr>
<td>Special Request not progressed (LER)</td>
<td>None</td>
<td>None</td>
<td>90 days from I&amp;R date</td>
<td>Aggregate data will be kept for Management reporting.</td>
</tr>
<tr>
<td>Intakes which are not accepted by SCR</td>
<td>None</td>
<td>None</td>
<td>90 days from I&amp;R date</td>
<td></td>
</tr>
<tr>
<td>Intakes which are withdrawn</td>
<td>None</td>
<td>None</td>
<td>1 day after Intake withdrawal date</td>
<td></td>
</tr>
</tbody>
</table>

1 Retention Marker Family Services Stages Type Child Welfare (FSS/CWS)

The marker to determine if a FSS/CWS stage is Prevention, CPS or Foster Care is the Program Choices selected for children in the stage. At stage closure a review of all assigned program choices for all children will be executed. A hierarchy of classification will be applied based on the longest possible mandated retention rule. For example, one child in the stage has Program Choice of Placement (at any time for any period of time) the stage will be classified as Placement and retained by the appropriate rule. Please note if FSS/CWS created a Child Case Record (FSS/CCR) it will be retained by the same rules as the CCR.

2 Retention Marker Child Case Record (FSS/CCR)

There will be a marker that indicates that a child’s adoption is finalized. At stage closure a review to determine if this condition exists will be executed. If it does exist, the case will be classified as Adoption and never subject to expungement.

2 Assumption

No Family Services Stage will include information regarding an adoption finalization. A child Case Record will be created prior to the adoption finalization. As noted above, if a finalized adoption is recorded in a Child Case Record, the Family Services Stage and Family Services intake Stages associated with that CCR will follow the adoption rules.
# Appendix O: Local District Options

The following table contains a list of counties that have incorporated additional modifications.

<table>
<thead>
<tr>
<th>Higher Level of Edit and Data Values for Progress Notes</th>
<th>Local Version of Progress Instructions</th>
<th>Local District adding services to I &amp; R</th>
<th>Revised Local Protocol in CPRS</th>
<th>Require completion of Requested Services in FSI</th>
<th>Require Services Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cattaraugus</td>
<td>ACS revised PN Instructions for CPRS INV stage</td>
<td>Albany</td>
<td>ACS revised CPRT for INV stage</td>
<td>Franklin</td>
<td>Chemung</td>
</tr>
<tr>
<td>Chautauqua</td>
<td>Chautauqua</td>
<td>Broome</td>
<td></td>
<td>Montgomery</td>
<td>Franklin</td>
</tr>
<tr>
<td>Franklin</td>
<td>Chautauqua</td>
<td>Essex</td>
<td></td>
<td>NYC/ACS</td>
<td>Livingston</td>
</tr>
<tr>
<td>NYC/ACS</td>
<td>Chautauqua</td>
<td>Livingston</td>
<td></td>
<td>Rockland</td>
<td>Montgomery</td>
</tr>
<tr>
<td>Saratoga</td>
<td>Erie</td>
<td>Monroe</td>
<td></td>
<td>St. Lawrence</td>
<td>NYC/ACS required in LD design</td>
</tr>
<tr>
<td>Schoharie</td>
<td></td>
<td>NYC/ACS</td>
<td></td>
<td>Suffolk</td>
<td>Rockland</td>
</tr>
<tr>
<td>Tioga</td>
<td></td>
<td>Oneida</td>
<td></td>
<td>Wyoming</td>
<td>St. Lawrence</td>
</tr>
<tr>
<td>Ulster</td>
<td></td>
<td>Orange</td>
<td></td>
<td></td>
<td>Suffolk</td>
</tr>
<tr>
<td>Westchester</td>
<td></td>
<td>Oswego</td>
<td></td>
<td></td>
<td>Wyoming</td>
</tr>
</tbody>
</table>