



Series: Operating Procedures  
 COA: CM:1, 2.01, 2.02, 2.03, 3.01, 3.02, 3.02, 3.04, 3.05, 3.06, 3.07, 4.01, 4.02, 4.03, 4.04, 4.05, 4.06, 8.01, 8.02, 8.03, 8.05, RPM 7

Procedure Name: Family Support:

Procedure Number: OP BC 1047

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Effective Date: 11/09/2009

Applicable to: Brevard C.A.R.E.S. Staff

Subject: Brevard C.A.R.E.S. Family Support Operating Procedure

Purpose: The purpose of this procedure is to outline Brevard C.A.R.E.S. operating procedures for referring and transitioning families to Brevard C.A.R.E.S. Family Support Services. Family Support services are intended to prevent the occurrence of a future child abuse investigation and/or child maltreatment by:

- Strengthening protective factors that will increase the ability of families to nurture their children successfully.
- Enhancing the social and emotional well-being of each child and the family.
- Enabling families to use other resources and opportunities available in the community.
- Assisting families with creating or strengthening family resource networks to enhance and support childrearing.

Reference: Department of Children and Families CFOP 170-1 Chapter 4 Family Support Services

Procedure:

### **Access to Services, Screening and Intake Procedures**

Community Referrals - Brevard C.A.R.E.S. limits Family Support referrals from the community and/or from families who self refer. The Brevard C.A.R.E.S. Program Manager will review self-referral requests to re-open Family Support Services of former clients and requests to open Family Support Services due to a child in the home recently being released (or whom is pending release) from a Baker Act facility to determine if they are eligible for services. If accepted, the Brevard C.A.R.E.S. Program Manager will generate an electronic record in Mindshare and Florida Safe Families Network (FSFN)

Juvenile Justice Referrals – Brevard C.A.R.E.S. works directly with the Department of Juvenile Justice Detention Center to provide community-based service coordination and support to at-risk families. The Detention Center conducts shelter audits jointly on a weekly basis with the Brevard C.A.R.E.S. Child and Family Services Specialist when there are concerns that a youth may enter foster care as a result of a lockout or due to conditions related to criminal charges. Upon receipt of a referral from the Department of Juvenile Justice (and acceptance by the family) the Child and Family Services Specialist builds the referral in Mindshare and FSFN and sends it to the Program Manager/designee for assignment.

Child Welfare Referral – Brevard C.A.R.E.S. works directly with Department of Children and Families Child Protective Investigations to provide Family Support Services to at-risk families. The Child Protective Investigator (CPI) staffs the case with the Brevard C.A.R.E.S. Child and Family Services Specialist.

- The Child and Family Services Specialist posts a schedule of available staffing times. The Child Protective Investigator (CPI) is expected to have completed the Risk Assessment prior to the staffing. The completed Risk Assessment is needed to ensure the case receives the appropriate level of intervention when opened to Family Support
- During the staffing the Child and Family Services Specialist reviews the Brevard C.A.R.E.S. Consent Form, Face Sheet and Risk Assessment with the referring CPI, discusses the family history, current family dynamics, and identified needs. This staffing is documented in FSFN. At the conclusion of the staffing, the Child and Family Services Specialist and CPI attempt to contact the family. This serves as the first attempt to engage the family and is documented in FSFN within forty-eight hours
  - If the caregiver refuses services during this joint attempt with the CPI, the Child and Family Services Specialist documents the refusal and CPI's planned next steps in FSFN. The Child and Family Services Specialist schedules a close the loop staffing within 2 business days with the referring CPI and Supervisor for all families referred to Family Support determined to be safe but at high or very high risk who are unwilling to engage and participate,
  - If the caregiver accepts services during the joint contact with the CPI, the Child and Family Services Specialist builds the referral in Mindshare and FSFN within one business day and sends it to the Program Manager/designee for assignment.
  - If the attempt to reach the caregiver is unsuccessful, the Child and Family Services Specialist documents the failed attempt in FSFN. The Child and Family Services Specialist will attempt a total of 3 calls within the first two business days.
- If the caregiver accepts services during a follow up attempt, the Child and Family Services Specialist builds the referral in Mindshare and in FSFN within one business day and sends to the Program Manager/designee for assignment. The Child and Family Services Specialist will document the acceptance in FSFN, and notify the CPI of the acceptance and document notification in FSFN.

If the caregiver refuses services during a follow up attempt, the Child and Family Services Specialist will document the refusal in FSFN and notify by email the CPI and CPI Child Protective Investigations Supervisor (CPIS) of the refusal and intent to close the referral as a refusal. This notification will be documented in FSFN and the Child and Family Services

Specialist will complete the "close the loop" staffing during the next weekly DCF/Brevard C.A.R.E.S. Staffing Meeting with the CPIS, CPI Program Administrator, and Brevard C.A.R.E.S. Program Manager to discuss next steps. If the Child and Family Services Specialist is unsuccessful at reaching the caregiver in 3 attempts, and all attempts are documented in FSFN the Child and Family Services Specialist will notify by email the CPI and CPI Child Protective Investigations Supervisor (CPIS) of the refusal and complete the "close the loop" staffing during the next weekly DCF/Brevard C.A.R.E.S. Staffing Meeting with the CPIS and CPI Program Administrator and Brevard C.A.R.E.S. Program Manager to discuss next steps.

### **Brevard C.A.R.E.S. Leveling System**

Upon receipt of the referral, the Brevard C.A.R.E.S. Program Manager, or designee, will assign the family to a Brevard C.A.R.E.S. Family Partner to Level II Safe but Moderate Risk and Level 1 Safe but Low Risk families. Level III Safe but High or Very High Risk families are assigned jointly to both a Family Partner and to a Care Coordinator.

The Brevard C.A.R.E.S. Program Manager, or designee, will determine the prioritization of the family depending on the circumstances of the referral. Within the Brevard C.A.R.E.S. Family Support Program there are three levels of intervention utilized to help gauge and determine the level of need and complexity of the families served in the program.

Level III (Safe High/Very High Risk) – High/Very High Risk referrals are assigned to the Brevard C.A.R.E.S. High Fidelity Wraparound Team. Families served at this level receive Family Support Services with care coordination throughout the life of the case targeted at building a families' protective factors at a macro level and addressing barriers to long term safety. These cases may include victims of Human Trafficking. Upon receipt of the referral, contact will be made within 2 business days and a Strength and Cultural Discovery is completed within 5 days of the referral. The Family Team Conference occurs no later than 5 business days from the completion of the Strength Discovery.

Level II (Safe Moderate Risk) and Level 1 (Safe Low Risk) –Families served at this level receive Family Support Services delivered through community referrals to aid families with resource needs with no required case coordination. These services may include but not be limited to: community linkages, by-passes, and use of Flex Funds. Upon receipt of the referral, contact will be made within 5 business days.

In cases where additional documentation is necessary to determine the appropriateness of the referral to the C.A.R.E.S. Program, the Care Coordinator or Family Partner will contact the family to request any necessary information and documentation, indicating that a Strength Discovery cannot be conducted until such documentation is reviewed by the Program Manager. Documentation of all conversations will be kept in FSFN and the client file.

If the referral does not meet the criteria for the Brevard C.A.R.E.S. Program, the case will be staffed with the Program Manager for review. If the Program Manager determines the case is not appropriate for C.A.R.E.S., the Program Manager, or designee will contact the referral source to inform them of the disposition. A follow up letter will be sent to the referral source with a copy placed in the case record. In cases where the referral does not meet program criteria, documented effort will be made to link the family to community resources. In cases where the family does not meet the program entry criteria and the family disagrees with the determination, they will be referred to the Brevard C.A.R.E.S. Executive Director for review.

### **Provider Outreach and Family Engagement for Safe but Very High/High Cases**

Brevard C.A.R.E.S. will conduct follow-up outreach and engagement efforts with the family.

The Program Manager or designee assigns all new referrals for Family Support Services within twenty-four (24) hours upon acceptance of the case.

Upon assignment of the case, the C.A.R.E.S. Program Manager completes a supervisor review of the case records within 48 hours to provide case direction to the Care Coordinator and Family Partner, as well as to immediately assess child safety, well-being and permanency. During this initial review, the Program Manager validates that the information contained within Florida Safe Families Network (FSFN) is complete and accurate. Ongoing supervisor reviews are conducted at a minimum of bi-monthly, with no more than 62 days between reviews. This subsequent review also ensures child safety, well-being, and permanency are being addressed and that the record (case file and FSFN) contains complete and accurate documentation. Each family's care plan is reviewed at least quarterly and includes an evaluation of the family's progress toward achieving service goals.

For Very High/High Risk referrals, FSFN reflects an initiation date of the date on which the case was accepted. The Program Manager assigns the new family to a team of a Family Partner and a Care Coordinator. The Family Partner within each team conducts the Strengths Discovery. After the Brevard C.A.R.E.S. Family Partner assigned to the family schedules the Strengths and Cultural Discovery, they will enter the appointment date into FSFN. The Family Partner will then prepare the file as indicated by the 'Brevard C.A.R.E.S. program Strengths Discovery File Setup'. The Brevard C.A.R.E.S. Family Partner will then complete the Strengths and Cultural Discovery which includes a face to face introduction with the family, and the gathering of information (including what is outlined on the Strengths and Cultural Discovery form.) This meeting will also include a discussion of the program and services available, including Family Team Conferencing.

All Very High/High Risk families served through Brevard C.A.R.E.S. participate in a comprehensive, individualized, strength based assessment called a Strength and Cultural Discovery. The information gathered is comprehensive and is directly related to identifying concerns contained in the original reasons for the referral in addition to what the family identifies are needs. All assessments are conducted in person in the family's home whenever possible. Any specialized assessments that are indicated during this process are arranged for in a prompt and timely manner.

The Brevard C.A.R.E.S. Family Partner conducts the Strength and Cultural Discovery on all Very High/High Risk families referred to the program in a non- threatening manner, respecting the family while adhering to all confidentiality standards. During this process, sensitivity is

shown to the family that is being engaged in a flexible and responsive manner. The Strength and Cultural Discovery lays the foundation for family engagement and inclusion. The Strength Discovery is a tool to be used to learn about the family's history, needs, traditions, culture, resources and norms with sensitivity to cultural norms as resources and supports are identified to strengthen and preserve the family unit. The Strengths Discovery sets the tone for Family Team Conferencing by identifying informal supports and natural resources available to the family.

The Brevard C.A.R.E.S. Family Partner completes the Strengths and Cultural Discovery Release of Information form (which includes a list of individuals the family would like invited to the Family Team Conference) and the acknowledgement and receipt of the Brevard C.A.R.E.S. Handbook. The Brevard C.A.R.E.S. Family Partner or the Brevard C.A.R.E.S. Youth Liaison will conduct separate Strengths Discoveries with all children in the family ages 12 and up. The Family Partner is recognized as a personnel qualified by training, skill and experience to conduct assessment on at risk children and families. Family Partners are required to be former consumers in the area of child welfare, juvenile justice, special education or children or adults with developmental disabilities.

After completion of the Strengths and Cultural Discovery, the Family Partner will update the client file and enter case activity into FSFN. Brevard C.A.R.E.S. is responsible for inputting any and all information concerning a case into FSFN, within forty-eight hours.

The goal of this informal meeting in which the Strength and Cultural Discovery is completed is to identify needs, the family vision statement, and family team members.

All Family Support Referrals for Safe but Very High/High Risk referrals go through the Care Coordinator and the Family Team Conference (FTC) process to determine appropriate services for the family based on their unique needs. The Care Coordinator facilitates the FTC and ensures that decisions regarding services are reached in consensus with the Family Care Team. Informal and natural supports will be utilized whenever possible in lieu of and or in addition to formal providers. The Care Coordinator makes the authorization decision and provides instructions to the providers regarding the timelines for subsequent utilization reviews and submits an authorization form to the provider. All referrals for services are to be completed and submitted by the assigned Care Coordinator within three (3) business days of a Family Team Conference.

After the Family Partner conducts the Family's Strength and Cultural Discovery and has identified the family's natural resources and supports and determines the family desires to proceed with the Family Team Conference wraparound meeting, the Care Coordinator will work collaboratively with the family to arrange a date and time that best meets their needs. The Care Coordinator or Family Partner or the designee agreed upon by the family will contact all parties identified as potential team members. This may include any providers who may be working with or acquainted with the child and/or family, and any natural supports the family identified to arrange a FTC.

Prior to the first Family Team Conference (FTC), Team Members will be oriented to the wraparound process and principles of case practice. The role of the family team will be defined

and literature on the process and program will be made available in advance for those members who are not familiar with Brevard C.A.R.E.S.

At the start of the FTC, the Coordinator will then present the team with the Brevard C.A.R.E.S. Release of Information for team members to sign.

At the onset of each FTC, the family vision statement will be reviewed with the team members followed by the family strengths and the strengths of individual family members if appropriate. The Coordinator will establish basic ground rules for the team and more comprehensive ground rules in complex cases. Members will agree in writing to abide by ground rules established by the team. During the FTC the family, (along with the identified Family Team), will work to build upon the family strengths to address the identified needs of the family.

The Care Plan is the individualized method of documentation for each family. The Care Plan outlines what specific service providers in the Brevard C.A.R.E.S. network (as well as any informal and natural supports identified) that support the achievement of the family's desired outcomes. At this time, the benefits, alternatives, risks and consequences of planned services are reviewed and discussed with the family. In cases where the team determines that flexible supports are needed to assist the family in meeting their goals, the Care Coordinator will authorize the Flexible Support services. The team will identify the frequency and duration of the supports needed and the level and type of flexible support needed to meet the unique needs of the family. These specifics will be outlined in the Care Plan and functions as the service plan. The Care Plan identifies all services and supports to be provided, and by whom, and contains the individual or guardian's signature. Any unmet needs are discussed and the possibilities for maintaining and strengthening family relationships are addressed.

The Team will then schedule the next FTC at which time the team will discuss the family's progress and effectiveness of the current plan to determine if any services need to be modified, added, re-authorized or terminated. The FTC process will continue in this manner until the team agrees that the family is ready for graduation. At the end of each FTC, the team will schedule the next the FTC date with the understanding that any team member can request a team meeting at any time during the process. The Care Coordinator will then provide copies of the Care Plan and the signature page to each team member.

The Care Coordinator is responsible for facilitating the Family Team Conferences and for the Care Coordination and service linkages for the family. The Care Coordinator may also arrange for families to receive additional case management support as identified in the service plan from within the network of service providers. The Care Coordinator maintains a list of current resources available to the family and information on how to access those resources.

The Care Coordinator continually assesses risk on a continual basis; coordinates services; and conducts home visits, based on the risk of the child(ren) at least once every 30 days.

The C.A.R.E.S. Program Manager conducts monthly supervisory reviews on any case that does not receive a face-to-face visit during the calendar month. There are various reasons for being unable to complete a visit and all circumstances warrant supervisory oversight. For example, if the family moves without notice, the supervisor must ensure reasonable efforts are being completed to locate the family. These cases will be immediately identified at the conclusion of



each calendar month and the supervisor review will be completed and input into FSFN by the 5th of the following month.

**Closure**

The case is evaluated for closure at the four month day mark and documentation of such is indicated in the supervisor review. The Care Coordinator then completes a Closure Summary after staffing with the Program Manager to determine if case closure is appropriate.

Once the Family Care Team has reached consensus that the family is ready for closure, a graduation celebration will be held at which time the Care Coordinator will explain to the family that they will be receiving a closing letter to retain for their records. All families exiting will have an aftercare and transition plan. Upon return to the office, the Care Coordinator will complete the Discharge Summary. They will also send a closing letter reflecting 'No further need of program services – successful graduation' to the family. Copies of each will be placed in the case record. The Care Coordinator will transfer the case to a closed folder according to the Brevard C.A.R.E.S. protocol and will provide the file to the Brevard C.A.R.E.S. Program Manager for closure in the CARES database.

The family has a right to request closure of its case at any time. While participation with Family Support Services is voluntary, should a family, determined to be at high or very high risk, become unwilling to engage and participate or if the family has been identified as not making progress in efforts to reduce risk, the Care Coordinator will notify by email the CPI and CPI Child Protective Investigations Supervisor (CPIS) and document in FSFN the family's lack of engagement and request for a joint visit to occur prior to the next weekly DCF/Brevard C.A.R.E.S. Staffing Meeting. The Care Coordinator will notify the Brevard C.A.R.E.S. Program Manager to notify the case be set for a "close the loop" staffing during the DCF/Brevard C.A.R.E.S. Staffing Meeting with the CPIS and CPI Program Administrator and Brevard C.A.R.E.S. Program Manager to discuss closure if the family did not re-engage during the joint visit.

Under the rare and exceptional circumstance that an individual or family is asked to leave the program; Brevard C.A.R.E.S. makes every effort to link the individual or family with appropriate services. When a family third party benefits or payments end, Brevard C.A.R.E.S. will provide services until appropriate arrangements are made and, if terminated or withdrawal of service is probable due to non- payment, Brevard C.A.R.E.S. works with the person or family to identify other service options. In the event this occurs, the Care Coordinator schedules a close the loop staffing within 2 business days with the referring CPI and Supervisor. The Brevard C.A.R.E.S. Program Manager will also participate. The staffing will be documented in FSFN.

Efforts should be made to complete the "close the loop" staffing with the referring Child Protective Investigator and Investigator Supervisor however, if they are no longer employed in the same capacity or unable to participate despite reasonable notice, an individual who is knowledgeable regarding the family's prior investigations can suffice. A discussion should

include ongoing risk, services provided; unresolved service needs and benefit to the family as well as attempts to re-engage the family.

### **New Reports**

For new reports received on existing cases that are already open for ongoing Family Support services, the assigned Care Coordinator will share responsibilities with the CPI in a collaborative effort. The Care Coordinator will testify at the Shelter Hearing if indicated. The Care Coordinator is required to both inquire and document insurance coverage for all members requesting or receiving services through the system of care. Notation on FSFN will include the name and policy number of all private insurance coverage available to the family. In the event that the family is uninsured, the Care Coordinator will document efforts to have the family apply for Medicaid coverage. These efforts will be documented on FSFN.

### **Authorization Thresholds**

Brevard C.A.R.E.S. Care Coordinators cannot authorize any amount that exceeds one twelfth of the total annual budget allocation for the year on a monthly basis. Any request that exceeds this threshold must be approved by Program Manager. Authorizations are completed via the Brevard C.A.R.E.S. Service Request Form and are logged into the Brevard C.A.R.E.S. database.

### **Documentation**

After completion of the Family Team Conference, the Coordinator completes all necessary authorizations and will update FSFN and the case record as indicated by the Brevard C.A.R.E.S. file protocol. Authorizations and other issues related to services funding procedures are addressed in the Utilization Management procedures (OP BC 1003). The intended outcomes related to the Family Team Conference process are that families are no longer isolated from their community, have increased protective factors of social connections, concrete supports in times of need, parental resiliency, knowledge of parenting and child development and child' social and emotional competence. It is through this process that natural/informal support systems have been established along with an ability to access any needed services in the future.

The following information will be documented in FSFN Family Support Module for all safe high/very high risk:

- Family Support Type will be Prevention.
- Date case is opened and date case is closed.
- An assessment date and any updated assessment dates will be documented in FSFN case notes.
- A brief summary of the reason for the family referral and the recommendations from the assessment will be described in the "Status Begin Comments" narrative field. The summary will include services to be provided and expected outcomes
- A summary of the reason for case closure including a family's refusal to begin or continue receiving services offered, the outcome of a "close the loop" staffing for those cases where the family has become unwilling to engage or participate or if the family has been identified as not making progress in efforts to reduce risk.
- If a case remains open after 12 months, rationale for continuing Family Support Services.



- The risk assessment that is indicated on the Family Support Services page will reflect the actuarial risk assessment score that was completed by the Child Protective Investigator.
- Human trafficking cases will have the risk level of very high risk in non-caregiver and community cases, for in home cases the risk level will be the same as the actuarial risk assessment.
- The actuarial risk assessment must be uploaded into the Family Support Service Module.

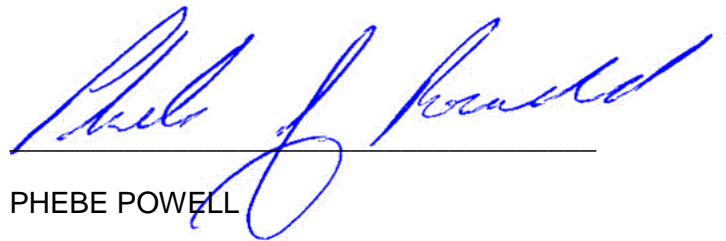
Family Support Services for safe, low to moderate risk do not require case coordination however, if case coordination occurs these activities must be captured in FSFN Family Support Module.

**Conflict Resolution:**

In the event that there is disagreement amongst the parties about the Brevard C.A.R.E.S. case track, a staffing shall be held with all interested parties.

Issues of disagreement will be handled at the lowest level possible and shall be handed initially between the DCF Protective Investigator and assigned Family Partner or Care Coordinator. If the issues are not resolved, the case will be staffed with the Brevard C.A.R.E.S., Program Manager and Department of Children and Families Protective Investigations Supervisor. If the issues continue to be unresolved, the case will be staffed by the DCF Program Operations Administrator and the Brevard C.A.R.E.S. Executive Director within 2 business days. The Brevard Family Partnership Chief Executive Officer and DCF Regional Managing Director shall make the final decision.

BY DIRECTION OF THE EXECUTIVE DIRECTOR



PHEBE POWELL

Executive Director  
Brevard C.A.R.E.S., Inc

Signature Date: 05/30/2017