



Department of

**Children's Services**

# Caseworker and Out-of-Home Caregiver

A Quality Contacts Webinar Series

# Who are Out-of-Home Caregivers?

- Foster Parents
- Kinship Parents and Safety placements including
  - Relatives
  - Neighbors
  - Friends of the family
  - Other individuals, such as child and family like school teachers, church members or anyone else with an emotional connection to the child.

**\*These can be both custodial and non-custodial caregivers.**

# The role of Out-of-home Caregivers

Out-of-home Caregivers play a unique and important role in achieving positive outcomes for children

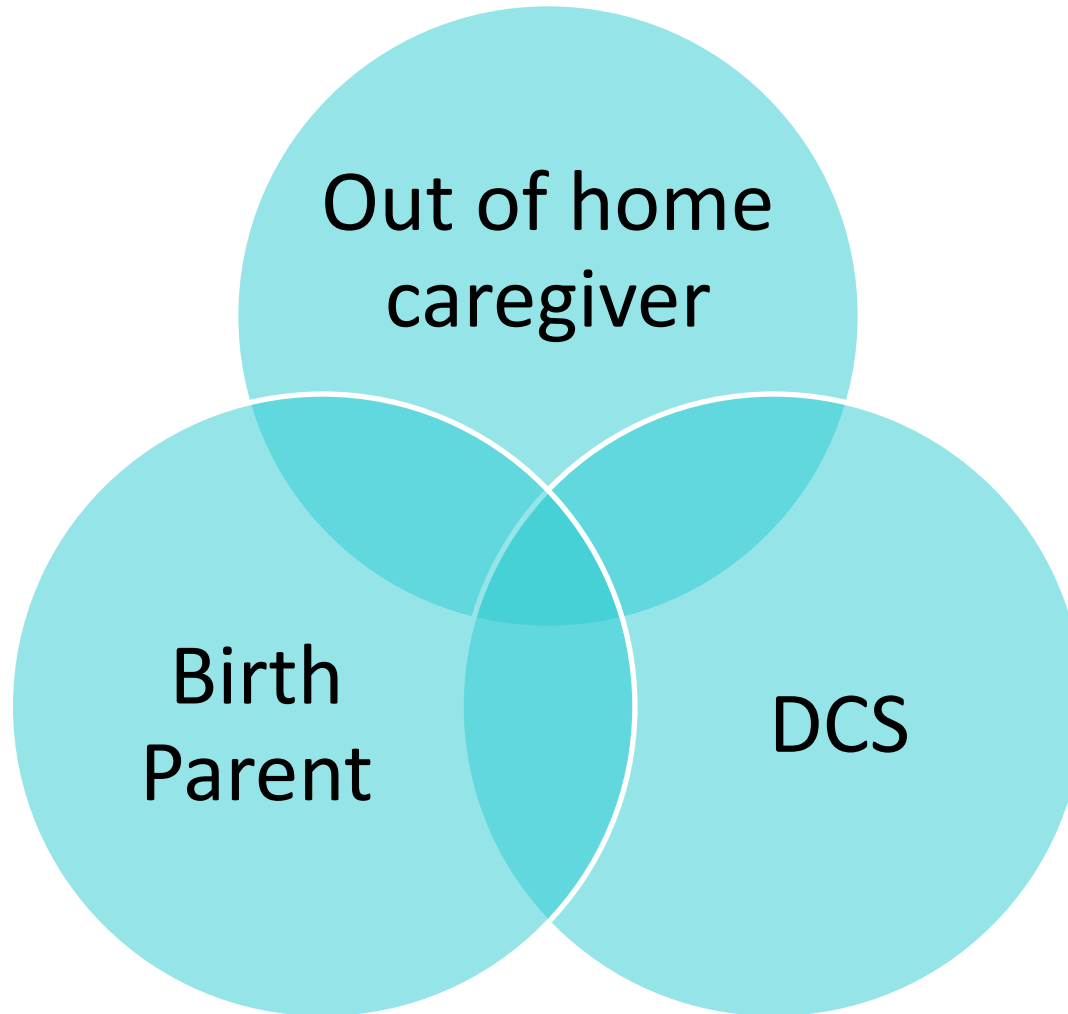
- They have day to day responsibility for meeting the child's physical and emotional needs in their home
- They deal directly with the impact of the trauma the child has experienced
- They create attachments with the child and they become part of their family which can create grief and loss when the child moves
- They may be balancing the needs of the child they are "fostering" with their other family commitments and birth children

# Why is collaboration and engagement with caregivers important?

- Best practice
- Demonstrates Concerted/Reasonable Efforts
- Better helping relationships lead to better assessment, better plans, better services, better **outcomes**,
- Encourages improved collaboration between caregivers and birth families as part of the child's team
- Supports positive relationship between foster parent and child



# Sharing Parenting



# Partnership

A Successful partnership between case managers and caregivers depends on:

- Willingness to collaborate
- Effective communication
- Clear expectations and roles
- Trust
- Honesty



# Teaming

- Facilitating partnership between birth parents and foster parents
- Attending CFTMs and clarifying role
- Sharing information and details of appointments/court/meetings
- Involving caregivers in decision making and planning
- Visitation planning and supporting visits
- Preparing caregivers for the impact of visitation and planning strategies to support children after visits
- Utilizing resources to support placement stability
- Teaming between FSW and FPS to support the child, foster parent and placement stability



# Respecting the role of caregivers

- Keep them updated about the case plan
- Share as much information about the child as possible
- Include them in the decision making process
- Value their observations and assessments of the child's needs
- Respect their time when scheduling and planning appointments
- Include them in all meetings, court appointments etc.





# Foster Parent Bill of Rights



# Video: You get a call, do you want these kids?



# Supporting kinship foster parents

- Kinship foster parents are a valuable resource in providing stability and permanency for children in custody
- Kinship foster parents may have additional support needs due to their unique situation



STATE MANAGERS SERIES



February 2012

## Working With Kinship Caregivers

### What's Inside:

- Types of kinship care
- Benefits of kinship care
- Training for caseworkers
- How to support kinship caregivers
- Examples of programs for kinship caregivers

Kinship care is the full-time care and nurturing of a child by a relative or someone who has a significant emotional relationship with the child. If children must be separated from their parents, either voluntarily or by court order, kinship care should be the first placement option explored by the child welfare agency. The Federal Government endorsed this practice most recently in the Fostering Connections to Success and Increasing Adoptions Act of 2008.

This bulletin was written to help child welfare professionals promote kinship care by providing information, referral, and support services to kinship caregivers to ensure the safety, permanency, and well-being of children in their care.



Use your smartphone to access this bulletin online.



Child Welfare Information Gateway  
Children's Bureau/ACYF  
1250 Maryland Avenue, SW  
Eighth Floor  
Washington, DC 20024  
800.394.2344  
Email: [info@childwelfare.gov](mailto:info@childwelfare.gov)  
<http://www.childwelfare.gov>

# Congregate Care

- Quality contact with caregivers is important in ensuring comprehensive assessment of safety, permanency and well being
- How would assess safety, permanency and well being in your contacts with congregate care staff?
- What factors would you want to consider?

# Caseworker and Out-of-Home Caregiver

- Develop a “helping relationship” between the worker and the caregivers
- Ensure the caregivers have resources to meet the child’s needs
- Monitor service delivery and effectiveness
- Assess the safety and well-being of the child
- Support the caregivers in their care for the child
- Assess the permanency goal is progressing in a timely way
- Assist in arranging for services the caregiver needs to adequately and safely provide a home for children (including referral to counselling services, doctors or other support)
- Ensure communication and coordination of health services.

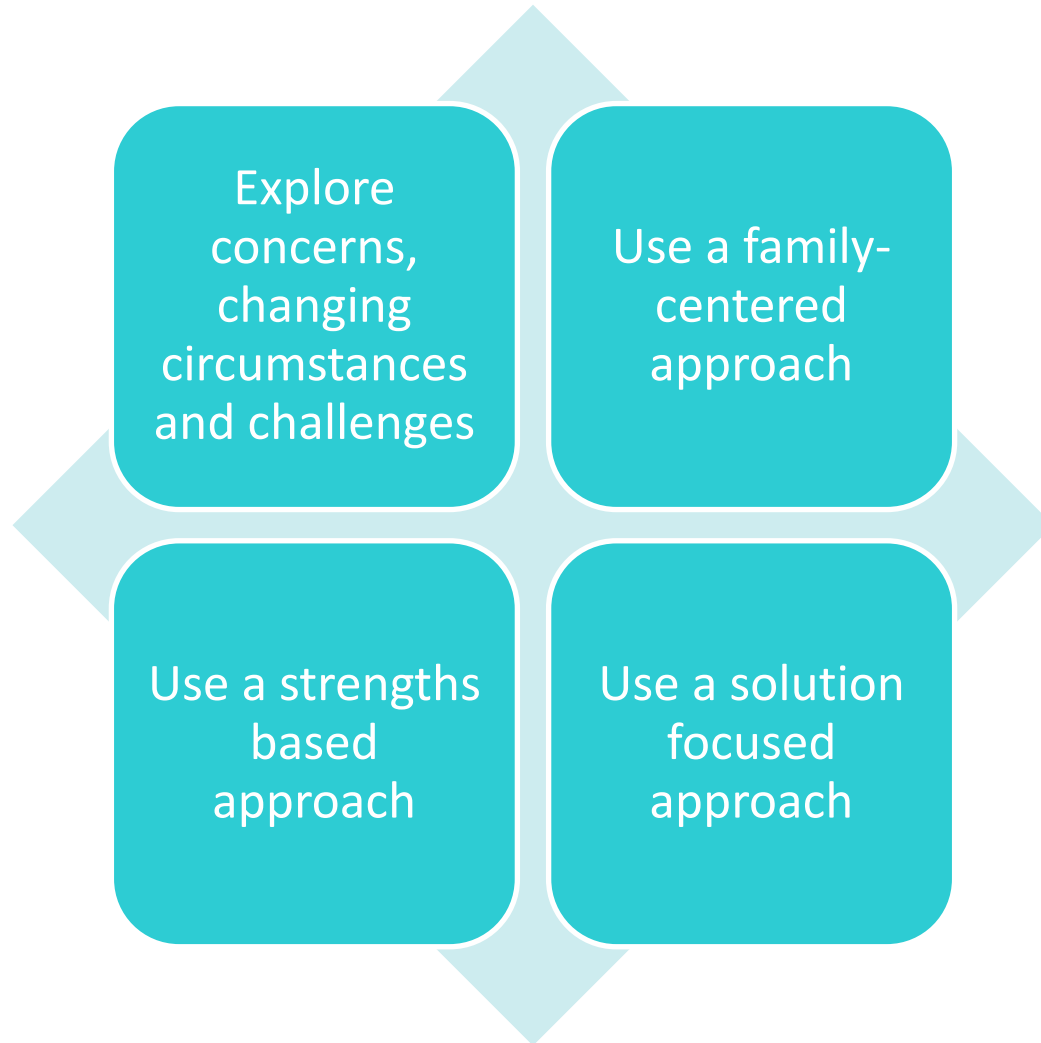


# FPS and Foster Parent

- Ensure timely reassessment and that foster parent needs are being met
- Share relevant and legally permissible information concerning the child
- Monitor service delivery and effectiveness
- Assess the safety and well-being of the child
- Assess the achievement of permanency plan goals
- Assist in arranging for services the foster parent needs to adequately and safely provide a home for foster children (including referral to counselling services, doctors or other support)



# Engaging caregivers in Assessment and Planning



# Video: Foster Parent Visit

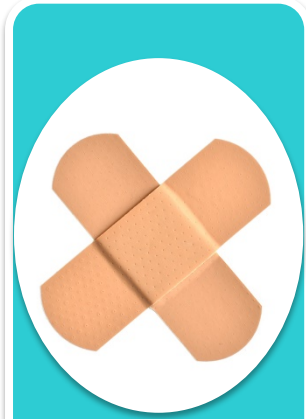


## Quality Matters

Improving Caseworker Contacts  
With Children, Youth, and Families



# Purpose of the Visit



Safety



Risk



Permanency



Well being



Needs of  
child



Needs of  
caregiver



**Assessment**

# Assessment

- Gathering the caregiver's assessment of how the child is doing (trauma informed perspective)
- Assessing the home and quality of care child is receiving
- Can help assess risk and possible future harm
- Consider CANS and FAST



# Safety

- Walk through of the whole home
- Gather information about any changes in circumstances
- Assess relationship between foster child and foster parent's birth children
- Safety planning for any known risk factors and assessment of protective factors



# Permanency

- Assess progress towards permanency goals
- Assess placement stability
- Use solution focused questions and strategies to address concerns that may impact placement stability
- Demonstrate a trauma-informed perspective
- Gather information about any contact/visitation with birth family



# Well Being

- Gather information about recent health issues and appointments
- Review any medications and health status
- Assess mental health and emotional well being
- Assess impact of trauma for child and foster parent
- Review strategies for responding to the emotional and behavioral needs of the child
- Gather information about school
- Consider normalcy and resiliency



# Life Books

How can quality contacts with caregivers contribute to a child's life book?



# Policy

Which policies give guidance on contact and engagement with the caregivers?

- Policy 16.38
- Visitation Protocol



# Don't forget to Document!!!





# Feedback from a worker who is starting to get it!

- “I’ll be honest, I hated the thought of having to do that one more thing. “
- “...this summary takes the places of many other notes that I would otherwise have to enter separately.”
- “I would normally have 15 notes in, now I only have 4 – one of those being the monthly “
- “it saves time in the end because you don’t have to mess with all of the needed, top of the page stuff to enter a TFACTS note 11 separate times”
- “I’ve stayed more caught up on my notes. I start the running monthly at the beginning of the case, and add all of the collaterals, professional, phone contacts in that note as they happen or shortly after. I don’t have to keep up with as many notes this way, I don’t have to scramble at the end of 30 days or at the end of a case to enter all the notes at once in order to get it closed.”
- “I close my cases quicker and easier because most of that little note stuff is already in
- “..gives a more accurate picture of what I’ve done with that case.
- “Now I can enter everything and still save time.”
- “Once these summaries have a chance to populate and spread about, I’ll be able to more easily, quickly, and accurately read the histories of cases.”
- “If others utilize it like I do, more contacts (and therefore better inferences) can be entered/made about the family.”
- “Details that would have been left out in the interest of time will be there and I may not have to do as much digging in court records, criminal records, etc.”
- **“Other members of my team that I have talked to about the summary started off hating the idea, but have also come around to loving it as well. At this point I think most of my team hopes it will become more than just a pilot.”**

# Some reminder tips to improve documentation:

- Overall Monthly Documentation - more **description and detail** of conversations needed in the narrative. Try not to take the word summary too literally.
- Narratives include a lot of buzzwords. More behavioral specific descriptors needed
- Need to “see the worker” in the documentation – description of the worker’s efforts, how they supported the family, what instructions and direction they provided, how did the worker engage them in sharing their concerns, needs, progress and hopes and ensure their voice was represented

# Some reminder tips to improve documentation:

- Evidence of comprehensive conversation with all team members each month to review the plan and progress (or lack thereof)
- When parents are not engaged, documentation needs to reflect diligent search during that month
- When insufficient informal supports are present, documentation needs to reflect efforts to connect with other key stakeholders in the case through diligent search and services.
- A clear picture of the worker's assessment of safety, permanency and wellbeing to is needed with an explanation of the barriers the worker sees and what the family needs to do toward accomplishing the goal.

A woman with long brown hair, wearing a blue and white striped sleeveless shirt, stands in front of a whiteboard. She is smiling and pointing her right index finger towards the camera. Her left hand holds a blue marker, positioned near the whiteboard. The whiteboard contains handwritten text in blue ink. The background is a plain, light-colored wall.

*Goal: Improve quality  
of caregiver contacts*

*Plan/Action Steps:*

- 1. Share observations  
and assessment with  
caregivers and  
include them in  
decision making*
- 2. Consider specific  
needs and challenges  
for kinship carers*

**Update your Small Test of Change**

# Evaluation

## Course Title:

Quality Contacts: Out-of-Home Caregivers

<https://www.tn.gov/dcs/program-areas/training/tpd/atl/dcstrainingevaluation.html>

The logo for Tennessee, featuring the letters "TN" in white, serif font on a red square background. A small "TM" trademark symbol is located at the bottom right of the red square.

TN

Thank you