

MRS Conference Call Notes
September 2011

Counties Participating 9/12: Anson, Catawba, Chatham, Clay, Currituck, Gaston, Jackson, Johnston, Macon, McDowell, Mecklenburg, Nash, Randolph, Scotland, Stanley, Stokes, Surry, Wake, Watauga, Wilson, Yadkin.

Counties Participating 9/19: Alamance, Alexander, Anson, Beaufort, Caldwell, Chatham, Davidson, Gaston, Madison, Mitchell, Nash, Pasquotank, Person, Pitt, Wake, Washington.

Counties Participating 9/29: Bladen, Brunswick, Chatham, Davie, Edgecombe, Forsyth, Gates, Guilford, Halifax, Harnett, Hoke, Jackson, New Hanover, Perquimans, Pitt, Randolph, Mecklenburg, Sampson.

Agenda

- Letters from the Division
- Presentation and Discussion from the Simplification Work Group
- Presentation and Discussion from the Supervision Work Group
- Other Discussion

News from Raleigh

Letters:

- CWS 21-11: CPS Expansion Funds – funds allocated several years ago to try and help counties bring caseload ratios down in line with recommendations from Duke.
- CWS 22-11: Information reporting deadlines for the 5094. Attachment with that which includes the schedule for reporting and processing dates
- CWS 23-11: MEPA review that the federal government is gifting us with. They will be working with us looking at our MEPA compliance. Includes a link to a training video regarding MEPA. There is also an attachment which is the letter from the feds.
- Memo from 9/29/11 regarding the forms the Simplification group has altered or deleted so far on the website.

Simplification Work Group

Lisa Cauley from Wake Co Lisa.Cauley@wakegov.com 919-212-7437 and Jennie Kristiansen from Chatham jennie.kristiansen@chathamnc.org 919-642-6976 presented the DSS-5010 that the Simplification work group has been working on.

- Holly sent out a revised 5010 (see end of notes for a copy of this form).
- Talked about how it could be streamlined – including information from other forms into it and eliminating things that didn't need to be on here that were elsewhere.

I. Case Information

- Discussed talking out the “information attached” parts of #5 and #6 – still in there for now.
- Also discussed taking out question #8 as it is mentioned elsewhere.

II. Household and Family Composition –

- Debated putting this as the cover page as it may be more immediately relevant than what is currently on page 1.
- Also debated putting the absent parent information in this section rather than collaterals.
- Counties on this call like the idea of putting the absent parent info here and not with collaterals, it is NOT the same as a collateral.
- Also consider changing the name of this person from “absent” to “non-custodial” parent.
- Several counties like the idea of moving this to the front page.

- Would like to keep the SIS number in there as they use this to have clerical set up the record.
- III. Criminal Records
- No significant changes
- IV. Diligent Effort –
- Discussed moving #2 and #3 to the case decision section.
- V. Initial Family Content
- Kept content the same, moved to Section 5 as they felt it flowed better earlier in the record. (Was initially Section 7).
- VI. CPS Case Activities
- Talked about changing a-e into checkboxes.
 - Also thinking about a checkbox for indicating SEEMAPS and Structured Decision making was completed.
 - Likes the idea of checkboxes. Although if you are doing SEEMAPS it should show in your documentation. Don't over checkbox yourself!
- VII. Child and Family Medical Well-Being
- Talked about trying to streamline this section - felt like some of the MH and medical issues would be covered in SEEMAPS, but left them in there for now.
- VIII. Collateral Contacts
- Moved some info into wellbeing section for a better flow, so this section is a bit shorter.
 - Moved the non-custodial parent, talked about making #2 a checkbox with a place to add the WF's workers name. so this section is shorter now.
- IX. Ongoing Case Contacts
- Debated if the interpreter needed should be included in every contact.
 - Suggestion for "method of contact" - instead of leaving a blank have checkboxes for "Home Visit", "Office Visit", and "Phone Call", and "Other" since most will be one of these categories. Can write out other if that is checked.
- X. Juvenile Petition
- Item one already on 5104
- XI. Structured Decision Making Tools
- Would like to know if it would be beneficial to include at least the risk assessment in this tool. And trying to reduce the demographic information in the other tools.
 - One county says please keep it separate as they sometimes need to have the risk assessment in front of clients.
- XII. Case Decision
- Rolled the case decision into the 5010. Had some discussion where they took out the maltreatment findings.
 - Page 8 – workers want to know why they have to re-write the information from the Safety Assessment Outcome, Risk Assessment Outcome, and Identify the family strengths and protective factors, recommend that that come out, already have that information.
 - Also recommend they not have to copy the maltreatment codes from the 5104 (chart with children under Case Decision Summary) because the 5104 is already in the file.
 - However another county may look at workers paperwork on the computer and not have access to the 5104 or the safety and risk assessment so one county did not want to eliminate these fields.

- One supervisor said that, leaving that in there would make it easier on the supervisors but harder on the line workers, and the whole point of the simplification group was to make it easier and more efficient for workers.

General Comments:

- Note that this version of the form is a draft and may not be 100% correctly formatted.
- One county wanted the Case Decision kept separate so that subsequent workers could just look at the case decision and not wade through the narrative.
- Goal to bring this to Childrens Services in November.

Other Simplification projects

- Committee Direction - looking at the forms and tools used more by workers. Next project is to look at combining these three forms: Out of home family services agreement, PPAT Review, CFT documentation.
- Then looking at the use of the 5106.
- Asked where folks would like them to go and what to look at.
- Keep in mind that often once the group starts something seems like it could be simplified, and it turns out that it can't for a number of reasons, federal requirements, etc.

Supervision Work Group

Bridget Happney, a Permanency Planning Supervisor from Mecklenburg, bridget.happney@mecklenburgcountync.gov presented on the Supervision Work Group.

- The Child Welfare Supervision Advisory Committee started after the 2007 Federal Review as Supervision was a critical part of our Program Improvement Plan.
- Wanted to see what we could do to improve supervision across the state as supervision has been empirically linked to organization, worker and client outcomes, particularly staff recruitment and retention.
- Initially the Committee developed 5 supervisory best practices ideas (Note: These are best practice ideas, they are NOT policy!) The quotes are taken from a 2009 NC Social Worker Survey. We had a 39% response rate from line staff, and the data was analyzed by NCDSS and UNC-CH. The full Supervision Study was released March 2011.

Supervisory practices recommended for statewide implementation:

- The supervisor holds weekly scheduled supervision with staff, with at least two scheduled individual conferences per month.
 - *“My supervisor is very detailed during staffing. She helps identify strengths and needs of the families I work with and makes suggestions that would benefit the families. She puts her phone on ‘Do Not Disturb’ while we staff and is very dedicated to staffing time. She asks at the end of our staffing if I have any questions or concerns about anything related to my job.”*
- The supervisor protects scheduled time by being truly available.
 - *“Good supervision is when your supervisor is available any time for her staff and their questions. A good supervisor schedules meetings and ensures that they start on time; they ensure that cases are closed in a timely manner. A good supervisor is at work and provides feedback to her staff instead of ‘talking down to them.’ A good supervisor is there when her staff needs them and does not expect other members of the team to help make decisions. A good supervisor understands that if they're not available the staff should be able to meet with another supervisor, without fear of getting in trouble for it.”*
- The supervisor and worker use structured, purposeful format for supervision.
 - *“Good supervision is when someone in the position to supervise has the same standards for all employees. A good supervisor does not micromanage their employees or undermine their employees during meetings.”*
- The supervisor coaches and mentors staff to use supervision time more purposefully.
 - *“Staff with me with all of my cases. Make sure that I am following the mandates and help with all important decisions. Make sure I have continuing education.”*

- The supervisor uses a consistent case review tool on at least 2 case records from each staff member each quarter. When reviewing a case record, it is helpful to review prior to case closure to identify any strengths or challenges.
 - *"I would like to see a formal tool used to provide supervision. Written feedback and performance reviews at least twice a year so that I know what my strengths are and areas I may need to address. Tools/training to address issues, provide career advancement and/or professional growth."*
- Next the group worked on Systemic Issues. These are not policy, but what the group is working towards. They have made the following recommendations:

Systemic Recommendations endorsed by the Child Welfare Supervision Advisory Committee

- Maintain and increase use of professional development resources for supervisors.
 - *"I think a good supervisor meets with workers individually to discuss the cases and any issues, promotes development of the staff, is available for questions or concerns and is fair between the workers. Also I think a good supervisor should be trained as much as the workers to build and maintain their knowledge and skills. Good supervisors are clear in their direction and with instruction. They are able to handle conflict."*
- Expand career advancement opportunities for line workers by creating "lead worker" opportunities for highly skilled/experienced workers who want to increase their responsibilities (and have workload and/or salary adjusted accordingly) but who do not have the interest/skills to perform administrative/management functions of a supervisor. For example, in counties with blended teams, Supervisors could administer the teams, and lead workers with expertise in the different job function areas could provide case consultation.
 - *"Some supervisors need to be weeded out--they may interview well but are not good coaches/supervisors at all. Get supervisors out in the field more often so that they do not lose touch with what a front line social worker has to deal with on a daily basis. There are some of us who choose to stay on the front line because of liking the job and wanting to work out in the field--but agency could use the veteran social workers to help with certain issues/employee retention."*
- Develop a career ladder pathway to supervision for staff people that aspire to supervision.
 - *"There is a problem with hiring friends to be supervisors, don't want to hire staff without supervision experience, but yet there is no way to gain social work supervisory experience."*
- Add a section to Preservice designed to help new child welfare staff become good consumers of supervision by developing realistic expectations about supervision (what to expect from supervision and how to use time with supervisors effectively).
 - *"Limited knowledge about this program. It seems that regardless of how good the program might be that social work supervisors are so busy with individual workers, families, documentation reviews, CFSR, crisis management and internal meetings and trainings (providing and attending) that there just is not more room to put anything else on their plates."*
- Examine the impact of blended teams on supervision practice and identify policy and/or staff development changes that may be needed.
 - *"BLENDED TEAMS do not provide support to one another. The way that our county has done them has isolated teams and areas. They have done districts by pin #s so that you are in certain areas. Each program manager has certain areas. The program managers are not supportive of helping one another when they are swamped with cases which means you have some sections where the workers are getting 12 to 15 to 18 reports a month and other areas in which the workers are getting 8. Supervisors are not willing to help one another either. When all assessments were under one program manager and treatment under another then there was SUPPORT for overload. This is one reason for the turnover in the county in which I work."*
- Strengthen transfer of learning. Supervisors need to be aware of what is taught in workers' trainings and help the workers implement what they are taught. Supervisors already help implement "action plans" from Preservice, develop similar implementation plans for other staff development trainings.
 - *"That all the supervisors be trained in each area to gain a full understanding."*
- Recognize the impact of secondary traumatic stress on child welfare workers and supervisors. Review the supports provided to workers in other "first responder" systems (law enforcement,

medicine, etc.) and adapt or develop similar methods of addressing secondary traumatic stress in child welfare workers and supervisors.

- *"I would like to see supervisors trained in recognizing 'burn-out.' The agencies lose many good workers because of excessive stress. Supervisor training should also include program managers and directors. I believe these individuals must remember all workers have a limit and provide sufficient time or resources to assist workers before these limits are reached."*

General Comments:

- Did not matter the number of years of experience that a social worker had, they still wanted time to meet with their supervisor.
- The Child Welfare Supervision Advisory Committee developed a supervisor toolkit site, that counties can access: http://www.ncdhhs.gov/dss/best_practices_pilot/ They have posted things that people have shared, but need to make clear that it is not a managed site!!
- Supervisors – ask yourself when is the last time you were in the field doing a case? Either on your own or with a worker – workers want to see you staying in touch with what is going on but doing some assessments.
 - Also when supervisors are attending some of the 200 level courses. Not only know what is out there, but know what your staff is being trained in.
 - Holly hears this over and over in training room.
- In tough economic times, find ways to maximize opportunities:
 - We know we can't do things like MRS institutes anymore, so take advantage of what we have available.
 - DSS training, some of which has been revamped: Intro to Supervision, Staying Power (has been updated to include parallel process), Coaching in the Kitchen.
 - Holly sends out webinars and other opportunities that she becomes aware of.
 - Also, be out looking at things possibly available to you through Universities and other areas due to status as a line staff supervisor.
- Current Needs of the Group
 - Looking for future topics to address – what are the most pressing issues on supervisors.
 - Asking to expand group - need new members!
 - The benefits of participating in this group are incredible - Peer to peer networking, acting as a consultant group to the state when they need to run new policy by a county staff group, really getting to participate.
 - Currently have 16 regular counties. Alternate meetings by phone and in person, usually meet centrally in the state, and move it around. Have "pie-in-the-sky" ideas and want to get them to "pie-on-the-plate" especially in light of the current budget situation.
 - It is a large time commitment but it is well worth it. Your director does need to complete a letter.

October Meetings 12, 18, 31

Topic will be DV and we will start a new feature of the calls where Tracey Duncan from the CFSR team is on the calls and relates the topic to the CFSR.

Case Name _____ Case Number _____

Child Protective Services Assessment for County of: _____

I. CASE INFORMATION

1. Initiation worker:

2. Date referral initiated ([Chapter VIII: Protective Services SECTION 1408](#)):

3. New report on this open assessment (circle one): YES NO N/A Explain:

4. Date response method switched: _____ Rationale: _____
Supervisor signature: _____
5. Previous CPS record reviewed (circle one):
YES NO INFORMATION ATTACHED N/A
6. Finding of Substantiation or Services Needed in the past year (circle one):
YES NO INFORMATION ATTACHED N/A
7. Briefly explain #6: _____
8. Letters to the reporter(s) mailed: _____

Case Name _____ Case Number _____

II. HOUSEHOLD & FAMILY COMPOSITION

a. Child full name / nickname	b. SIS # (11 digits)	c. Child's date of birth	d. Child's Race / Ethnicity	e. Child's sex	f. American Indian Heritage	g. Child's school / grade	h. Child's primary language	i. Child's status (Codes will be developed & Absent will be defined.)
1.								
2.								
3.								
4.								
5.								
6.								
j. Adult full name / nickname	k. Relationship to child(ren)	l. Adults' date of birth	m. Adult's Race / Ethnicity	n. Adult's sex	o. American Indian Heritage	p. Adult's employer information	q. Adult's primary language	r. Adult's status (Codes will be developed & Absent will be defined.)
7.								
8.								
9.								
10.								
11.								
12.								

13. Household physical address: _____

14. Household mailing address (if different than physical address): _____

15. Contact numbers: _____

16. Other information: _____

Case Name _____ Case Number _____

III. CIVIL / CRIMINAL RECORDS

(List / attach relevant information or N/A if none found)

1. [NCGS 50B](#) Order currently in place as per Administrative Office of the Courts (AOC) Civil Case Processing System (VCAP) check: _____
2. Criminal history check as per ACIS or CHRI reviewed: _____
3. 911 Response log reviewed: _____

IV. DILIGENT EFFORTS TO INITIATE CASE as per [Chapter VIII: Protective Services SECTION 1408](#) List daily attempts from 8am to 5pm and from 5pm to 8am including weekends and holidays.

a. Date	b. Time	c. Type of contact	d. Person contacted / relationship	e. Results of attempt to initiate
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			
	am pm			

1. If not initiated within the specified timeframe, document rationale:

2. If assessment is not completed within the specified timeframe, document rationale:

3. Family notified of the delay in making case decision (circle one): YES NO N/A
Document the discussion:

4. Supervisor signature: _____

V. INITIAL FAMILY CONTACT (for use to schedule an appointment prior to the initiation—FA)

1. Date: _____
2. Name / Relationship: _____
3. Method of contact: _____
4. Place: _____

Case Name _____ Case Number _____

5. Interpreter needed / used (circle one): YES (EXPLAINED BELOW) NO

6. What was discussed?

VI. CPS CASE ACTIVITIES / INITIATION

1. Type of report: (Please list all allegations.)

2. Parent / Caregiver contacted to schedule an appointment prior to initiation (family assessment):

3. Report indicates that child has injuries, marks, or bruises or is a potential victim of sexual abuse:

- a. Assessor completed body inventory: _____
- b. Child has marks, bruises, welts, old scars, etc.: _____
- c. Photographs taken: _____
- d. Referral for CME or CFE or medical treatment needed: _____
- e. LE / DA notified if appropriate: _____

4. Child is nonverbal (explain observations of child and his/her interaction with family):

5. Initiation narrative (refer to the "Understanding S.E.E.M.A.P.S." companion sheet in the instructions): Be sure to discuss with the family the nature of ALL of the allegations at this initial contact.

6. CPS / MRS / Judicial Review (RIL) process fully explained to family & MRS brochure provided:

7. Possible case decision findings explained to family: _____

8. Parent / Caregiver / Safety Resource received a copy of the initial safety assessment:

9. Functioning smoke detectors in home verified: _____

10. Fire safety plan discussed with family: _____

11. Firearms safely stored (as per [GS 14-315.1](#)): _____

VII. CHILD AND FAMILY MEDICAL / WELL-BEING

This information is for the following family member(s):

-
1. Primary medical provider: _____
Contact information: _____
 2. Dentist name: _____
Contact information: _____
 3. Therapist / psychiatrist name: _____
Contact information: _____
 4. Specialist name: _____
Contact information: _____
 5. Place of birth (city, state, hospital): _____
 6. Medication name & use (include dosing, dispensing, & refill information):
 7. Explain status of child(ren)'s immunizations: _____
 8. Explain family's status as related to health insurance: _____
 9. Explain any medical issues for family members:

 10. Explain any mental health and/or substance abuse issues for family members:

 11. Explain any educational issues / challenges facing family members:

 12. Explain the need for any child in the family under the age of 3 to be referred to CDSA in cases in which the social worker has determined the need for a referral or in cases in which item S6 on the Family Strengths and Needs Assessment is scored a "1" or a "3" (Need) OR describe any ongoing services already in place:

 13. Safe sleeping arrangements for infants discussed with family (for more information see [Safe Sleeping Arrangements](#)): _____
 14. As a result of the information above, this worker took / needs to take the following action: _____

VIII. COLLATERAL CONTACTS

1. Parent / Caregiver given an opportunity to provide collateral contacts (Please list the collaterals):

Case Name _____ Case Number _____

2. Work First case (if "YES," Work First should be a collateral contact): _____
3. Licensing authority notified for CPS assessment involving out-of-home placements (as per [Family Services Manual Volume I, Chapter V](#)) (circle one): NCDCDNCDSS
NCDHSR OTHER
4. Other social service / child welfare agencies contacted for information on household members that have resided outside of North Carolina: _____

IX. ONGOING CASE CONTACTS

1. Date: _____
2. Names & relationships: _____
3. Method of contact: _____
4. Place: _____
5. Interpreter needed / used (circle one): YES (explained below) NO
6. Discussion of possible CFT (circle one): YES (explained below) NO
7. Narrative:

X. JUVENILE PETITION

1. Was a juvenile petition filed in relation to this case? (circle one)
YES (explain below) NO

2. Was non-secure custody assumed in relation to this case? (circle one)
YES (explain below) NO

3. Placement of the child(ren):

XI. STRUCTURED DECISION-MAKING TOOLS

[DSS-5231](#)

The North Carolina Safety Assessment is completed with the family and a copy is provided to the family at the time of the completion.

[DSS-5229](#)

The North Carolina Family Assessment of Strengths and Needs is discussed with and/or completed with the parent / caregiver.

[DSS-5230](#)

The North Carolina SDM[®] Family Risk Assessment of Child Abuse / Neglect shall be completed and documented prior the case decision and whenever a new CPS report occurs in an ongoing case. The Risk Assessment should be discussed with and/or completed with the parent/caregiver.

XII. CASE DECISION SUMMARY

Investigative Assessment

Family Assessment

Unsubstantiated (U): _____
Substantiated (S): _____

Services Needed (SN): _____
Services Recommended (SR): _____

Case Name _____ Case Number _____

Services Not Recommended (SNR): _____
 Services Provided, No Longer Needed (SP): _____

Date of Case Decision: _____

Children

NAME	AGE	CASE DECISION FOR EACH CHILD
1.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP
2.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP
3.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP
4.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP
5.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP
6.		S (enter maltreatment code(s) here from 5104) U SN SR SNR SP

Parents / Caregivers

Parent / Guardian / Custodian / Caretaker / Agency / Foster Home / Group Care / Institution / Child Care Setting	Relationship to Child	Perpetrator
1.		Yes: _____ No: _____ N/A: _____
2.		Yes: _____ No: _____ N/A: _____
3.		Yes: _____ No: _____ N/A: _____
4.		Yes: _____ No: _____ N/A: _____
5.		Yes: _____ No: _____ N/A: _____
6.		Yes: _____ No: _____ N/A: _____

Disposition of Case

Case closed (date): _____ Transferred to: _____ County (date) _____

Case transferred to CPS In-home Services (date): _____

Case transferred to CPS Out-of-home Services (date): _____

Case transferred to Voluntary Services (date): _____

Other (???????): _____

Staffing

Case Name _____ Case Number _____

Names of others present for staffing:

Name of CPR contact (if applicable): _____

Social worker signature: _____ Date: _____

Supervisor's signature: _____ Date: _____

Safety Assessment Outcome (safe, conditionally safe, or unsafe): _____

Risk Assessment Outcome (low, moderate, or high): _____

Identify the family strengths and / or protective factors in place:

Initial Family Services Agreement (Not used for Child Care, Group Care, or Institutional Assessments, may be used for licensed family foster home and kinship care providers that are receiving continued CPS services as caretakers to children in their home)

Identify the behavioral needs and activities to be addressed through CPS In-home or Out-of-home Services until the In-home or Out-of-home Family Services Agreement is developed.

Identify behaviors that need to change:

Identify activities that will begin to address behaviors:

Recommendations for the Division of Child Development (DCD), Division of Social Services (DSS), or Division of Health Services Regulation (DHSR) Utilize the Notification of CPS Case Decision ([DSS-5282](#)) to notify the appropriate licensing agency of the case decision information. Identify the recommendations for child care licensing issues to DCD. For children placed in DSS or DHSR licensed foster homes / facilities, identify the recommendations discussed with the involved counties and their Children's Program Representative(s) prior to case decision.

Case Decision Summary

Document the factual information regarding the findings as they relate to the allegations of abuse, neglect, and/or dependency, including behaviorally specific information regarding the frequency and severity of maltreatment, safety issues, and future risk of harm. If maltreatment reportedly occurred to a child(ren) by

Case Name _____ Case Number _____

an out-of-home placement provider, answer as if the children would be remaining in the care of that provider (see policy note). Give rationale for both "yes" and "no" answers to the following questions.

1. Has the maltreatment occurred with frequency and/or is the maltreatment severe?
Yes ___ No ___
Explain _____
2. Are there current safety issues that indicate the child(ren) is likely to be in immediate danger of serious harm?
Yes ___ No ___
Explain _____
3. Are there significant assessed risk factors that are likely to result in serious harm to the child(ren) in the foreseeable future?
Yes ___ No ___
Explain _____
4. Is the child in need of CPS In-home Services or Out-of-home Services (answer "yes" if the caretaker's protective capacity is **insufficient** to provide adequate protection and "no" if the family's protective capacity is **sufficient** to provide adequate protection)?
Yes ___ No ___
Explain _____

Rationale for Case Decision & Disposition:

XIII. CASE DECISION LETTERS

1. Date case decision letter sent to reporter(s): _____
2. Date case decision letter delivered to all identified parent(s) / caregiver(s) / perpetrator(s): (The RIL case decision letter is to be a thorough and detailed summarizing statement of the reason for the case decision): Please note that the social worker shall make face-to-face contact with the alleged responsible individual within 5 business days of the case decision to explain the reason for the decision and to provide written notice. If this is not possible, then no later than 15 calendar days from the case decision date, the notice shall be sent by registered or certified mail, restricted delivery, return receipt requested and address to the alleged responsible individual so that only he/she may receive the notice.

The perpetrator is a candidate for placement on the RIL (circle one).
YES NO N/A

XIV. 5104

1. Date 5104 completed: _____
2. Date 5104 submitted: _____