

**Department of Human Resources
Social Services Administration
311 W. Saratoga St.
Baltimore, MD 21201**

DATE: June 25, 2012

POLICY DIRECTIVE: SSA# 12-39

TO: Local Departments of Social Services Directors, Assistant
Directors for Services

FROM: Carnitra D. White, Executive Director
Social Services Administration

RE: Consolidated In-Home Services Policy

PROGRAMS
AFFECTED: In-Home Family Services

ORIGINATING OFFICE: In Home Services

ACTION REQUIRED OF: All In Home Family Services - administrators, supervisors,
and caseworkers

REQUIRED ACTION: Compliance with Consolidated In-Home Services policy

ACTION DUE: July 1, 2012

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In-Home Services
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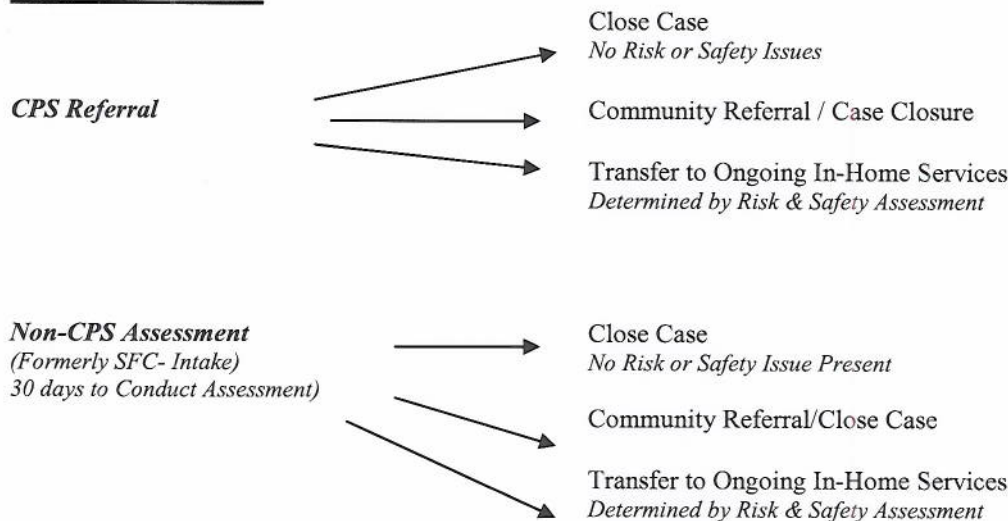
Purpose

This policy directive sets forth criteria on the implementation of Consolidated In-Home Services (CHIS) as defined in COMAR 07.02.01.09. This directive is to describe the process for utilizing the Consolidated In-Home Services (CIHS) structure. The consolidated ongoing services framework accepts referrals to ongoing In-Home Services initiated following a Child Protective Services (CPS) investigation, a Non-CPS assessment, or transition from Out-of-Home Placement. Case acceptance into CIHS is determined by results of a risk and safety assessment (SAFE-C and Maryland Family Risk Assessment).

Background

The Place Matters initiative was implemented to improve the services offered to Maryland’s children and families which includes family-centered practice, a focus on permanency practice, targeted child well-being practices, placement and community resource development, and resource home recruitment and retention. The Social Services Administration (SSA) offers a continuum of non-entitlement service programs designed to promote the safety and well-being of children and their families; enhance a parent’s ability to create a safe and stable home environment; and maintain permanency while preserving family unity. In-Home Services programs are critical to the Place Matters initiative as they are designed to enable a child to remain safely at home while receiving intervention services. Ensuring the safety, well-being and permanence of children is paramount to the practice throughout Maryland. A child is only removed from their home environment if it is determined that their safety and well-being are compromised. Prior to the consolidated framework, in-home services referrals were assigned to one of nine subprograms, each with its own specific requirements. SSA, with input from a representative workgroup of local department administrators and supervisors, decided to restructure on-going services to make certain that the level of risk and safety determines the level of intensity for service provision. The SAFE-C and The Maryland Family Risk Assessment will serve as the assessment tools.

Case Flow Process



Overview

The Consolidated In-Home Services (CIHS) continuum is initiated following a CPS investigation, a SFC-Intake assessment, or a transfer from another ongoing child welfare service, such as Out-of-Home Placement. The determination of referral to CIHS is based upon the safety and risk factors present in the family, using a three level priority approach. The first level are cases in which the safety assessments classify the child(ren) as *Conditionally Safe*. Those cases must be referred to CIHS for monitoring of the safety plan and resolution of the factors that led to the determination. Second level are cases in which the child(ren) are assessed as *Safe* but where the MFRA indicates either High or Moderate Risk and services are required to reduce those factors that place the child at risk. The third level consists of cases where the child(ren) have been assessed as *Safe* with low or no risk factors but services are recommended to improve the well-being of the family and child(ren). Local Department of Social Services (LDSS) must always make Level One cases a priority for assignment, followed by Level 2 before serving families in Level 3. Limited staff resources may result in the inability to accept cases reflecting lower risk or lack of safety issues for services.

CIHS workers will carry a mixture of cases requiring various levels of service intensity as assigned by their supervisor. It is the expectation that the family will continue with the same worker throughout the service delivery cycle to ensure a seamless service provision. For local departments that utilize parent aide services, it is considered supplemental service since the parent aide provides different service than the caseworker. Cases in Level 1 and 2 should be given priority for the provision of parent aide services.

The amount of face-to-face contact with a specific family will be based upon the individual needs of that family and the safety and risk assessment results. It is expected that more direct hours will be required for a Level 1 family than a Level 2 or 3 family. Although the general worker caseload ratio for CIHS is 1:12, it is recommended that a worker's caseload require no more than 18 hours a week of direct face-to-face client contact. While the actual number of service hours per week may vary at times, the caseload should not consistently measure in excess of this recommended face-to-face service provision. This number is to serve as an overall guideline for caseload effectiveness and management. Supervisors will need to be aware, as cases are assigned to workers, of the safety and risk needs of the workers' individual caseload, the intensity of service that is required given the safety and risk classification, and assign accordingly.

CIHS is limited to a 6-month period unless extended by court order or administrative review. Services shall be discontinued and the case closed at any time when the requested assistance has been obtained or service objectives have been achieved and identified risk and/or safety issues have been addressed. If a family is assigned to a Non-CPS assessment and the requested assistance has been completed, the case can be closed unless it is determined that the family needs a fuller assessment and safety and risk assessments reflect safety and/or risk issues which trigger a referral to ongoing in-home services. The case can also be closed when the family declines services, and there is insufficient risk and safety issues present to warrant further court involvement.

At any time the assigned worker can petition the court for shelter of any child in the household when the circumstances and safety and risk assessments indicate that it is necessary. It is required that any new allegation of abuse or neglect be reported to CPS Screening.

SFC- Intake/Non-CPS Assessment

A referral for a non-CPS Assessment may be initiated from another Department of Human Resources program, self-referral, school, or community agency. This assessment period is used to either provide services for a family that can be addressed within 30 days or to evaluate a family's need for ongoing services. The case will be closed when the service requested has been provided either by the agency or by referral to a community service, the service objectives have been achieved, or the family declines services and no safety or risk factors are present to warrant court action. A referral to ongoing Consolidated In-Home (CIHS) can also be made at any time should safety and/or risk assessments classify the family as in need of CIHS. This process may reduce the number of families needing ongoing services. By completing an assessment at the front door, it is believed that better service provision can be provided, as well as more will be known about the family, giving the ongoing worker, if needed, information to initiate services.

A. Eligibility

A family is eligible for a Non-CPS 30-Day Assessment In-Home Services:

- i. Without regard to income; and
- ii. Must have a child under age 18 in the household

B. Referral

Referrals to the program may come from self-referral, an outside agency or school, or another Department of Human Resources program.

C. The Local Department shall take the following actions:

- i. Initiate contact with family within 7 days of case acceptance.
- ii. Open the case in MD CHESSIE as
 - a. In-Home Services/Family Preservation – Program Assignment
 - b. Services to Families with Children (SFC) Intake – Sub Program Assignment
- iii. The assigned worker must complete a safety assessment for every child in the household within 7 working days of case acceptance.
- iv. Complete a risk assessment within 30 days of case acceptance.
- v. The assigned worker shall complete the In-Home Services Progress Review form that describes the family situation and recommendation for services (i.e. substance abuse treatment, TCA, mental health, etc.)
- vi. Determine if additional services are warranted after the 30-day assessment period and whether case should be transferred to CIHS.
- vii. The assigned worker is encouraged to meet with the family and any other agencies currently serving the family to discuss services currently receiving, family situation and services needed.
- viii. A family served through a one-time office visit does not require an assessment (i.e. Emergency Assistance to Families with Children, housing assistance, food, travel voucher etc.) and shall not be opened as a child welfare service case.

- ix. At any time during the 30-day assessment period it is determined that risk and safety issues are present and require a safety plan or immediate services, the case will be immediately transferred to Consolidated In-Home Services.
- x. Services shall be discontinued and the case closed at any time when:
 - a. The requested assistance is obtained
 - b. Service objectives have been achieved.
 - c. The family declines service and there is insufficient safety and risk issues to warrant court involvement.
- xi. All case information will be maintained in MD CHESSIE.

Consolidated In-Home Services

Following a CPS investigation, the case will be closed when there is no risk or safety issue present, referred to a community resource, and closed or transferred to ongoing services due to the presence of risk and safety issues. A referral for ongoing services can also originate from a Services to Family with Children Intake (SFC-I) or from Out-of-Home Services when the Court issues an Order of Protective Supervision (OPS) or Order of Controlling Conduct (OCC).

A. Eligibility/Transfer

- i. Consolidated In-Home Services (CIHS) is based on the safety and risk factors present in the family. All cases in which the safety assessment (SAFE-C) classifies the family as Conditionally Safe and a Safety Plan is in place must be transferred as a priority Level One case.
- ii. A Level Two case is eligible for transfer when the safety and risk assessment (Safe-C and Maryland Family Risk Assessment (MFRA)) classifies the family as Safe/Moderate to High Risk.
- iii. Level Three and lower priority for transfer is a family whose Safe-C and MFRA classifies them as Safe/Low Risk.
- iv. Services are provided without regard to income and the household must include a child under age 18.

B. Referrals

- i. Families are eligible for Consolidated In-Home Services when Safety and Risk assessments indicate a need for transfer. The presence of a recent indicated or unsubstantiated CPS finding does not determine eligibility for ongoing services.

C. Local Department Shall take the Following Action

- i. Contact must be initiated within 7 days of assignment. However, safety and risk concerns for each individual case may require a quicker response time and should be responded to accordingly.
- ii. Service provision (face-to-face contact) is determined by level of safety and risk. Worker and supervisor should ensure that appropriate face-to-face contact is maintained to address all safety and risk concerns.

- iii. For all CIHS cases (all tiers)
 - a. Open case in MD CHESSIE as:
In-Home Service/Family Preservation – Program Assignment
Consolidated – Sub-Program Assignment
 - b. Complete a service plan and re-assess risk and safety within 45 days of assignment
 - c. Conduct a re-assessment every 90 days from case opening
 - d. Administrative review of the case should occur at 6 months by the Assistant Director or designee if case will remain open.
 - e. Maintain all case information in MD CHESSIE
- iv. Services shall be discontinued and the case closed at any time when:
 - a. When the requested assistance has been obtained
 - b. Service objectives have been achieved and identified risk and/or safety issues have been addressed
 - c. When safety and/or risk assessment indicate that no safety or risk issues are present or
 - d. The family declines service and there is insufficient safety and risk issues to warrant court involvement.

Interagency Family Preservation Services

This policy in no way affects Interagency Family Preservation Services (IFPS) which will continue to function as currently practiced. IFPS services are offered to prevent an out-of-home placement of a child at imminent risk of removal. A referral to IFPS includes Local Department of Socials (LDSS), schools, Health Department programs, Department of Juvenile Services and other professionals as well as self-referral. Services are provided in both an Intensive phase (up to 6 weeks) and a Step-Down phase (up to an additional 8 weeks). Services are recommended to be provided in a team approach including a worker and a family support worker. IFPS staff must be available 24 hours a day, 7 days a week for family support. Cases are closed when safety and risk are no longer an issue.

A. Eligibility

- i. Child must be at imminent risk of an out-of-home placement
- ii. Child identified as “at risk” has to be residing in the home at the time of referral or with a plan to return home within 48 hours.
- iii. At least 4 risk factors need to have been identified.
- iv. Family must accept services

B. Referral

Referrals to the program can be made from Local Department of Socials (LDSS), schools, Health Department programs, Department of Juvenile Services and other professionals as well as self-referral. Documentation supporting the need for IFPS must be included in the referral.

- C. The Local Department shall take the following actions:**
- i. Either the local department or the contracted vender shall initiate contact with the family within 24 hours of case acceptance.
 - ii. Open the case in MD CHESSIE as
 - a. In-Home Services/Family Preservation- Program Assignment
 - b. Interagency Family Preservation – Sub Program Assignment
 - iii. The assigned worker must complete a safety assessment for every child in the household within 7 working days of case acceptance.
 - iv. A Team Meeting should be scheduled within 14 calendar days of case acceptance.
 - v. Service provision must be a minimum of 5 hours a week per case during the intensive phase and is inclusive of all contact and activity significant to the case.
 - vi. Services shall be discontinued and the case closed at any time when:
 - a. When safety and risk assessment indicate that no safety or risk issues are present.
 - b. When the family refuses services (Assessment of case status is needed to determine if a referral to CPS is required.)

MD CHESSIE

Program Assignment

The case when received is assigned in MD CHESSIE:

The Program Assignment is In-Home Services/Family Preservation

The sub Program Assignment will be SFC-Intake for 30 day assessment cases and Consolidated In-Home Services or Interagency Family Preservation.

Assessments

Worker is to complete a **Safe-C** and **Maryland Risk Assessment** and document in MD CHESSIE in accordance with existing policy guidelines.

Case Contact

With Consolidated In-Home Services, it is essential that workers enter both accurate contact hours and select participants seen at the time of each face-to-face contact. Both of these areas will be used to validate the level of services the family is receiving.

All other CHESSIE requirements are to be completed as usual.