

Checklist for Out of Home Care Visits



This job aid will help you make face-to-face contacts with children and caregivers to gather information needed by CPS to ensure the safety of children in out-of-home care.

Tips

6 Principles of Partnership

The child and caregiver are valued members of the CPS team. One way to convey they are valued is to let the 6 Principles of Partnership guide your interactions with them. When practiced, these principles go a long way, and support your relationship with the child and caregiver.

1. Everyone desires respect.
2. Everyone needs to be heard.
3. Everyone has strengths.
4. Judgements can wait.
5. Partners share power.
6. Partnership is a process.

Before you go to the home visit

Checklist to Prepare for an Out-of-Home Care Visit

- Consult with the CPS professional
- Have pen and paper with you to take notes
- Have the appropriate contacts and phone numbers to call with immediate concerns
- Review the *Developmental Ages & Stages, Red Flags for Danger, Placement Danger Threats*, and if applicable the *Risk Management Plan Job Aids*

	Potential Information Sources	What to Know Before You Go
	<ul style="list-style-type: none"> • Conversation with CPS professional • Documents (verify if in eWisACWIS or elsewhere): <ul style="list-style-type: none"> • Face-to-face contact case notes (prior month or more) with the child, parents, and caregiver, • Status of placement and licensing process for relative caregivers, if not complete, • Current Caregiver Child and Adolescent Needs and Strengths tool, • Case Plan, • Most recent Protective Plan or Safety Plan • Risk Management Plan, if applicable 	<ul style="list-style-type: none"> • Do I understand all the people who live in the household (all adults and children)? • Do I understand what is currently being done in this case? • Have all the necessary forms been completed, or do I need to ask about or take along additional paperwork? • What are the strengths and needs of this caregiver? • What strategies, supports, and/or actions in the protective, safety and/or case plans are supporting the child's and caregiver's needs? • What is their progress? • What services are being provided? • Role and responsibility of the caregiver. How are they expected to help?

CPS is required to contact each child in out-of-home care and their caregiver on a routine basis. The main purpose for this contact is to ensure the safety of the child. As a designee you will make face-to-face contact with the child and caregiver in the out-of-home care setting to gather information for CPS to determine if the child remains safe.

During the visit



	Questions	Impacts of Trauma
<input type="checkbox"/> Observe the child	Ask yourself: <ul style="list-style-type: none"> • How does the child look physically? • What is the emotional state of the child? • Are there any red flags for danger in the child's appearance, words, or behaviors? 	Trauma impacts how child perceives and senses things. A child's behaviors are affected by the trauma and some of these trauma responses might distress a caregiver.
<input type="checkbox"/> Speak with the child, in private, if possible	<ul style="list-style-type: none"> • "What does a typical day look like for you?" • "How is school/daycare?" • "What do you like to play?" • "What activities are you involved in?" • "What do you like to do with your caregiver?" • "What is it like living here?" • "What happens when you get in trouble?" • "What worries you?" • "Who do you go to when you are scared or sad?" "What do they do to make you feel better?" • "How are visits/calls going with your parents?" "siblings?" "other relatives?" • "What's your best friend's name?" "What would you tell them you like about living here?" "What would you tell them you don't like?" • "How do you get along with the other children/youth who live here?" 	Child may be anxious, worried or withdrawn. Child may be aggressive or argumentative. Child may have a lack of focus and motivation, apathy, despair and shame.
<input type="checkbox"/> Speak to Household members?	<ul style="list-style-type: none"> • "How have things been going for you and your family?" • "How do you feel the child is adjusting to living with your family?" • "How is your family adjusting?" • "What else might be helpful to your family?" "Respite?" 	<i>Caregiver is not sure they can continue placement.</i> Consistency is important for children who have experienced trauma. Extra supports may be able to continue the placement.
<input type="checkbox"/> Speak to the caregiver	<ul style="list-style-type: none"> • "How have your interactions with the parent gone?" If the answer is not well, "What have you been doing to manage the situation?" • "What kind of support would be helpful?" • "How do you think this is affecting the child?" 	<i>Child's parent is causing issues with the placement.</i> Child may be overly sensitive to the moods of others, trying to figure out the adults, including protecting their parent.
	<ul style="list-style-type: none"> • "Have any circumstances in your family changed since the last time the CPS professional visited your home?" "Anyone new moved in?" 	<i>Caregiver is struggling financially.</i>

	<ul style="list-style-type: none"> • “Do you need help with something specific?” “Food?” “Childcare?” “Clothing?” “Furniture?” “Transportation?” 	<p>Many relative caregivers did not have time to plan for the placement and may need additional assistance.</p>
<ul style="list-style-type: none"> • “How has visitation been going?” “Frequency?” “Place?” • “How do you think the child is doing regarding the visitation?” • “What would you like to see different?” 	<p><i>Caregiver may have visitation concerns.</i> Child may have difficulty identifying, expressing and managing emotions including those around visitation.</p>	
<ul style="list-style-type: none"> • “How has the child been adjusting to your home?” • “Do they participate in family activities?” “Extracurricular activities?” • “Does the child have any behaviors that concern you?” • “Might this be typical child development?” • “Do you think this child might have some unique condition?” • “How does the child do in school?” “If there is an Individual Education Plan (IEP), how do you feel it is going?” “Is there anything you think needs to be changed?” • “What activities does the child participate in?” 	<p><i>Caregiver complains the child is not acting their age.</i> Chronological age may not match the child’s developmental age. Stress in the environment can impair development.</p>	
<ul style="list-style-type: none"> • “What do you do to take care of yourself?” You might suggest 3 R’s (see below). 	<p><i>Caregiver has tension in the role of emotional regulator and disciplinarian.</i> Relationships with caregivers help the child learn to trust others and rely on adults. Healthy supportive relationships are helpful.</p>	
<ul style="list-style-type: none"> • “What are some of the things you find most challenging about the child’s behavior?” • “Do you think this behavior could be a trauma response on the child’s part?” • “What is a creative way you have dealt with the frustrating behavior?” 	<p><i>Caregiver interprets the child’s response and behaviors as a personal affront.</i> Child with trauma is more likely to react very intensely and quickly to adults.</p>	
<ul style="list-style-type: none"> • “Who do you have to support you?” • “When you get frustrated or tense with the child, what do you do?” 	<p><i>Caregiver is distressed by the child’s behaviors.</i> Child may struggle with self-regulation and act aggressively out of fear or may withdraw.</p>	

<input type="checkbox"/> Communicate details of the plan	Communicate the role and responsibilities of the caregiver, and the information from Out-of-Home Care Part A, if previously missing. Confirm the caregiver is still willing to perform all responsibilities.
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Your role as the designee is to relay these observations, not fix the situation. It is important to pay attention to how these struggles may affect the child. **IF THERE ARE SAFETY CONCERNS, NOTIFY THE CPS PROFESSIONAL IMMEDIATELY!** If there are no safety concerns, proceed.

Managing Stress



It is important to regulate our emotions, both as a caregiver and a professional, so we can be regulating in emotionally charged situations. The 3 R's is an effective tool to help caregivers manage the child's distress and support a healthy relationship between the child and caregiver.

3 R's	Example
Regulate	When a child becomes distressed, the caregiver can use their breath, tone of voice, and movement to convey security to the child.
Relate	Once the child is regulated, the caregiver can relate to the child and assure them they are not a bad person, even if they did or said something wrong. The caregiver is emotionally responsive and empathetic to the child.
Reason	Now that the child is feeling both physically and emotionally regulated, the caregiver can reason with the child and discuss what needs to happen next.

As a designee, one way to support the child is to offer support to the caregiver. When the caregiver is supported, they have more energy to give.

Documentation



<input type="checkbox"/> Date, time, and duration of the visit <input type="checkbox"/> Participants involved <input type="checkbox"/> Location of the visit	<input type="checkbox"/> Purpose <input type="checkbox"/> Confirm you spoke to the child in private <input type="checkbox"/> Information gathered <input type="checkbox"/> Tasks completed
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