

Ohio Department of Job and Family Services
COMPREHENSIVE ASSESSMENT PLANNING MODEL – I.S.
CASE PLAN

FAMILY NAME		AGENCY CASE NUMBER
CASEWORKER	AGENCY	AGENCY PHONE NUMBER

Identifying Information

List each child in the family from oldest to youngest.

Child Name	Agency's Legal Status	Child's Legal Status	Type and Date of Placement	Child's Permanency Goal	Court Case # Court ID #

Child Name	Age	Date of Birth	Adult Name and Relationship to Child	Check if Child is Protected under ICWA	Tribal Affiliation (if applicable)

Check if sufficient information is not available to complete any element of the JFS 01410 within 30 days

Section 1. Strengths

List and describe the identified strengths for this family.

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

Section 2. Concerns/Expected Changes/Services

What is the concern?

What behavior will need to change to reduce risk and address safety issues of the child(ren)?

Services Identified:

Name(s)	Service Category/Type	Effective Date	Status	Provider Name	Service Begin Date

Family Activities:

Service Category/Type	Activity family member needs to complete to make this change?	Family Member responsible for the activity.	Expected Completion Date of Activity

Caseworker/Service Team Activities:

Service Category/Type	How will the caseworker and/or service team help the family make this change?	Identify Person Responsible for the activity.	Expected Completion Date

How will the family's progress be measured?

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

When will the family's progress be reviewed ?

Section 3. Visitation Plan

(SACWIS WILL PRE-FILL THIS SECTION WITH THE VISITATION PLAN DEVELOPED BY TEAM 2)

Section 4. Circumstances regarding removing the child from their home.

Check the appropriate box as applicable.

A. Court Ordered Removal

The PCSA was not involved prior to removal, in an investigation/assessment, or the provision of supportive services, and therefore had no option to offer in-home services. Which children?

B. Parent/Guardian/Custodians Identity/Whereabouts are unknown.

Therefore, parent /guardian/custodian cannot be located or offered services.

Which Children?

Explain what efforts have been made to locate the parent/guardian/custodian.

C. The PCSA received custody through a court order.

Explain why the safety threat(s) and/or risk to the child(ren) made it necessary for the removal. Which Child(ren)?

State the reasonable efforts made to prevent the removal and/or make it possible for the child(ren) to return home safely. Which child(ren)?

State the reasons the court made a decision that the agency does not have to make reasonable efforts to prevent removal of the child(ren) from the child(ren)'s home, and return the child(ren) to the child(ren)'s home. Indicate which applies to each child.

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

Section 5: Appropriateness of Placement

1. If the child is not placed in a relative home explain why each less restrictive setting was not selected. If permanent custody has been granted, an adoptive home is considered least restrictive.

Certified/Approved Relative	
Approved Non-relative	
Certified/Approved Foster and/or Adoptive Home	
Independent Living Arrangement	
Certified Group Home	
Licensed Maternity Home	
Certified Emergency Shelter Care	
Certified Children's Residential Center	
Licensed Medical/Educational Facility	
Other: Specify	

2. For the placement selected, discuss how you determined this was a safe and appropriate environment for the child.

Explain

3. Explain how the placement is in CLOSE PROXIMITY to the parent, guardian, custodian. What transportation problems might create obstacles to visitation? How will the agency resolve these obstacles?

Explain

4. When selecting a substitute care placement setting, describe how the agency considered PROXIMITY TO THE SCHOOL in which the child was enrolled prior to placement.

Explain

5. Explain how the placement will meet the BEST INTERESTS AND SPECIAL NEEDS OF THE CHILD AND ACHIEVE CASE PLAN GOALS.

(i) Best Interests:
(ii) Special Needs:
(iii) Achieve Case Plan Goals:

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

6. Is this an out-of-state placement? Yes No

If the "Yes" box was checked, indicate who will conduct the annual out-of-state placement visit, and the date the visit will be conducted.

Name	Date

7. List the services being provided to the substitute caregiver(s).

Services:

Date the Individual Child Care Agreement has been given to the substitute caregivers:

8. For children 16 years of age or older in custody, independent living service provisions are required to be part of the service plan. Identify programs and life skill services which will assist the child to prepare for transitions from substitute care to independent living.

--

Section 6: Documentation of Exceptions to Filing a Motion for Permanent Custody:

For a child who has been in the temporary custody of an agency for 12 or more of the past 22 consecutive months and a determination is made by the agency that parental rights shall not be terminated, the agency must document the reasons for arriving at this determination. Complete part a. or part b.

a. Document the compelling reason for determining that termination of parental rights would not be in the best interests of the child.

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

b. Document the reason for determining that termination of parental rights shall not be pursued because the agency has not provided the child's parent, guardian, custodian or the child with services outlined in the case plan which were deemed necessary for the safe return of the child to the child's home.

Section 7: Documentation of Efforts for Permanency:

For a child who is in the custody of the agency and whose goal is adoption or a planned permanent living arrangement, the agency must document the steps it has taken to locate a permanent living arrangement.

a. Document steps taken to find an adoptive home, relative, legal guardian or other permanent placement for the child.

--

b. Describe the child-specific recruitment activities taken by the agency and the outcomes.

--

c. Check the recruitment efforts described in section 5(b).

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Locating Extended Family | <input type="checkbox"/> Locating Interested Non-relative | <input type="checkbox"/> OAPL |
| <input type="checkbox"/> Own Agency Website | <input type="checkbox"/> <i>AdoptOHIO</i> Website | <input type="checkbox"/> Radio |
| <input type="checkbox"/> AdoptUSKids Website | <input type="checkbox"/> Television | <input type="checkbox"/> Flyers |
| <input type="checkbox"/> Adoption Fair/Party | <input type="checkbox"/> Adoption Resource Exchange | <input type="checkbox"/> Other_____ |
| | <input type="checkbox"/> Regional | |
| | <input type="checkbox"/> National | |

CASE NAME	CASE NUMBER	AGENCY NAME
-----------	-------------	-------------

**SIGNATURES OF PARENT/GUARDIAN/CUSTODIAN, OTHER PARTIES
SIGNATURES OF PARENT/GUARDIAN/CUSTODIAN, OTHER PARTIES
AND AGENCY REPRESENTATIVES**

NAME	RELATIONSHIP	SIGNATURE	DATE	DATE COPY OF PLAN PROVIDED

Describe how the Parent/Guardian/Custodian and child (if appropriate) were given the opportunity to participate in the development of the case plan.

If any required person did not participate or disagreed with the case plan, state who and check the appropriate box for the reason why:

Name	Unable to Locate/ Unavailable	Disagreed with Plan	Other

If any party did not sign the case plan or disagreed with the case plan, explain below.

Note: For court-involved case, understand that once the case plan has been journalized by the court, all parties, including the parent, guardian or custodian of the child, are bound by the terms of the case plan. A party that fails to comply with the terms of the journalized case plan may be held in contempt of court.