



Department of
Children's Services

Family Permanency Plan Development Guide

A Resource For Case Managers

Tennessee Department of Children's Services | February 2021



Table of Contents

| | |
|---|----|
| Purpose | 3 |
| Important Notes | 3 |
| Strengths | 4 |
| Action Steps | 5 |
| Updates | 5 |
| Family Permanency Plans for Youth in a Youth Development Center (YDC) | 6 |
| Family Permanency Plan Development Guide for Non-Custodial Cases | 8 |
| Family Permanency Plan Development Guide for Custodial Cases | 17 |
| Family Permanency Plan Development Guide for Juvenile Justice | 29 |
| Permanency Plan Development Guide for Independent Living | 39 |
| Individual Program Plan (IPP) for Youth in a Youth Development Center (YDC) | 57 |

Purpose

This guide has been developed to assist case managers in the task of building need records and action step that will appear in a Family Permanency Plan. This guide will give examples of well written need records that staff can use an example when building their own permanency plans. These examples were developed by experienced front-line staff and supervisors that work for DCS. The examples are not designed to be copied and pasted into a family's plan. Instead staff should use these examples to build need records that meet the specific needs of the families they are working with. While this guide only shows examples of need records, it is important for staff to continue to identify and report on the families' strengths as well when creating a permanency plan.

Important Notes

- This guide is divided into several sections by program area for ease of use. Staff can use examples from any of the sections if they are applicable to their case. Staff can use some or all of the action steps provided in each example. This is just a guide and staff still have the flexibility to change or create their own need statements and action steps.
- It is critical when using examples that staff include specific facts from each case. This information can be added in the "Initial Description", "Update" or in the "Action Steps".
- Need records must be listed on the Family Permanency Plan by which need is most important. For example, if a child entered custody due to Caregiver Drug Abuse, the need record and action steps about drug abuse should be listed first. TFACTS gives each worker the ability to prioritize needs by importance.
- Action steps should be listed by the order the person should complete them. Action steps can be adjusted using Action Step Order. If a caregiver is asked to obtain an assessment, pass a drug screen, and complete recommended treatment, the worker should list the action steps by the order they need to be completed. You would not ask a caregiver to pass a drug screen first, when she needs to complete the assessment, and start treatment before she will be able to pass a drug screen.
- It is critical that all caregivers have their own need record that appears in a Family Permanency Plan if the child is in custody. Please ensure that all mothers, fathers and caregivers are addressed in a Family Permanency Plan.
- Need records should be developed for each person. If you have multiple individuals who have the same need, you can add all the individuals to the need and TFACTS will duplicate the need under each person separately. When the worker is ready to go back

and update need records to show progress; each person should have their own need record since their progress may be different.

Strengths

Strengths: A strengths statement should include conditions in the family's present or past that are able to be built on to strengthen the family. These strengths could be functional strengths or include protective factors. Examples include:

- Bond/attachment between the child and caregiver
- Parental resilience
- Informal supports and social connections
- Concrete supports for parents
- Knowledge of parenting and child and youth development
- Social and emotional competence of children or parent
- Shared parenting/caregiving/functional parenting relationship
- Extended family support
- Community Resources/community involvement
- Willingness to be involved/receive help
- Socioeconomic resources of the family
- Spiritual/religious connections

Here are some examples of how strengths can be written:

Informal Supports and Social Connections

David is playing football for the high school, which helps him to relieve stress and manage his behavior.

Parental Resilience

Ms. Smith loves her children as demonstrated by her willingness to actively participate in parenting classes to learn more effective discipline techniques.

Socioeconomic Resources for the Family

Mr. Smith is employed and is able to provide a home and the basic necessities for his family.

or

Mr. Smith has employment. Maintaining this job will allow Mr. Smith to secure an apartment for the family in the next 4 months.

Needs Statement: A description of the current issue, symptom or behavior that needs to be addressed. Describe the fact pattern that causes you to need to develop a plan to remedy the situation.

Action Steps

Each need should have an action step written to address these four categories:

1. **Behavioral:** An action step that describe(s) the desired behaviors that the caretaker or youth should demonstrate to show that the problem has been remedied.
2. **Assessment:** An action step to require the client have a professional assessment, such as a psychological or parenting assessment or an action step that uses a need, strength, or recommendation from a formal assessment (such as FAST, CANS, Life Skills, EPSD&T, psychological, etc.) to be addressed.
3. **Service:** An action step that indicates what specific services the child or parent should complete.
4. **DCS Responsibilities:** An action step that outlines task that DCS will complete to help the family be successful with the plan if they complete their steps (Reasonable Efforts)

NOTE: *All need records should include at least one of each type of action step listed above in order to have a complete, well-written need record.* Action steps should be listed in the order the person responsible should complete them.

Often, a single action step could work to satisfy more than one type of action step. For example, when recommendations from a psychological (Assessment), are for the parent to complete counseling (Service). Another example would be when a recommendation from an assessment (Assessment) requires that a parent follow a supervision plan and consistently demonstrate appropriate supervision (Behavioral).

Updates

How do “Updates” work?

The worker enters an “update” directly related to a need showing progress, or lack thereof, on each need and strength that has been entered. Most of your narratives in a CFTM should be documented in the appropriate need record as you discuss a caregiver or child’s progress. The printed Family Permanency Plan will always print the original need

(description) and the most recent update. If the worker updates an action step (instead of a need) the printed Family Permanency Plan will display only the most recent update of that need record.

Example of an Initial Need:

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| Initial Need Description Example: | Caregiver's substance use/abuse is interfering with their ability to safely caregiver their children as evidenced by _____ (example: Caregiver arrested for DUI with kids in car) |
| Update Example that shows progress: | Caregiver's substance use/abuse is being addressed (example: in intensive outpatient treatment and attendance at Narcotics Anonymous meetings. The caregiver has passed drug screens for the last 3 months. The caregiver's increased mental clarity from being off drugs is evident in the quality of parent child visits where the parent demonstrates the ability to meet the child's needs, provides meals, and actively plays with the child during visits.) |
| Update Example that shows no progress or decline | Caregiver's substance use/abuse continues to interfere with their ability to safely caregiver their child (example: since the children have been in custody the caregiver has continued to test positive for substances not prescribed to the caregiver. The caregiver has failed to engage in visitation when scheduled as well as phone calls with the children. The caregiver has been arrested since the children have been in custody for DUI on two more occasions. The Caregivers have not been compliant with services to address noted needs). |

Updates build off the existing need statements to address what has happened since the last plan. This strengthens the quality of family permanency plan updates and provides a record of patterns in client behavior throughout the life of the case.

Family Permanency Plans for Youth in a Youth Development Center (YDC)

This section is designed to assist with understanding how the IPP will be developed and embedded within the Family Permanency Plan. If a youth is placed in an YDC, the Individual Program Plan (IPP) & Family Permanency Plan both developed during the YDC – IPP/PP (Custody) CFTM. This CFTM must be held within first 14 calendar days following the youth's admission into the YDC. If the Family Permanency Plan was developed prior to the youth's admittance, it must be revised during the YDC – IPP/PP (Custody) CFTM to incorporate the IPP strength and need records. The IPP is a treatment planning tool used in the Youth Development Center (YDC) programs to address:

- The strengths and needs of youth and their families;
- The provision of services to build on strengths and address needs;
- The development of need statements and;
- A continuum of care if needed, aftercare planning, and permanency.

If a youth is placed in a YDC, then the IPP/Family Permanency Plan must have the following need categories.

1. **IPP Health Category:** Medical, dental, medication management and monitoring. To include any special medical condition or treatments required.
2. **IPP Education Category:** Intellectual functioning, academic achievement, pre-vocational or vocational needs, high school graduation or HiSet, school attendance, homework/study time, appropriate behavior in the school setting, and post-secondary education, if appropriate. If a youth has been identified as eligible for special education services, attention must be given to those services. Refer to DCS Policy [21.2, Educational/ Vocational Training Programs](#).
3. **IPP Social Skills/Recreation Category:** Social interactions, recreation, use of leisure time, communication, peer choices, gang-related behavior, personal hygiene, grooming, care of personal items, etiquette, and public behavior.
4. **IPP Personality/Behavior/Mental Health Category:** Substance abuse, relationships with family and authority figures, self-esteem, grief or loss issues, history of physical, psychological, or sexual abuse, other mental health issues, aggression, conflict-resolution skills and current/past delinquent behavior.
5. **Essential Documents:** Required on the plan for all YDC youth. All youth are to leave with a youth portfolio and state ID. DCS will attempt to collect other original documents that are applicable for the youth portfolio, to include but not limited to the following: social security card, birth certificate, educational records, dental records, updated & recent medical records, youth's resume, letters of recommendation, voters registration card, selective service number, emergency contacts, etc.

For more information on developing IPPs please see the IPP chapter in this manual.

Non-Custodial Cases



Family Permanency Plan Development Guide for Non-Custodial Cases

Tips for Family Permanency Plans for Non-Custodial Cases

It is critical that if a CPS worker develops a Family Permanency Plan, a CFTM is entered in TFACTS and the need and strength records are developed and entered. This allows an opportunity to build off the original need and strength records if the case is transferred to a custody or a long-term non-custodial worker.

An Immediate Protection Agreement is different than a Family Permanency Plan.

| Need | |
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| Need Category: Physical Condition of the Home | |
| Initial Description: | The child(ren) are at risk due to environmental factors which affect the child(ren)'s well-being as evidenced by _____ (example: roaches located in the refrigerator on/around food used for human consumption, animal/human fecal matter in all rooms of the home, and household garbage is located in piles in various parts of the home.) |
| Update Example: | Upon initial contact by CPS the child(ren) were at risk of environmental factors which affected their well-being. Since the time of the initial contact _____ (progress since initial description was written – example – the family has made progress in the home evidenced by home visits that observed the home to be free from clutter, animal/human fecal matter or items that would pose a safety risk to the family such as exposed wiring). |

| Action Steps |
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| 1. Caregiver(s) completed a mental health assessment which indicated a diagnosis of depression. |

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| 2. Caregiver(s) will follow the recommendations of the assessment which includes attending individual therapy and medication management. |
| 3. FSW will complete a referral for homemaker services and other community resources. |
| 4. Caregiver(s) will have an approved garbage disposal method and complete homemaker services which will promote safety, well-being, and permanency for the child(ren). |
| 5. Caregiver(s) will have an approved plan to dispose human/animal waste. |
| 6. FSW will communicate with service provider to track progress and adjust services as needed. |
| 7. Caregiver(s) will maintain housing which is safe and free of environmental hazards by making efforts to address and control insect infestations. |

| Need | |
|------------------------------------|--|
| Need Category: Sexual Abuse | |
| Initial Description: | The 17-year-old sibling has put (ACV) at risk by touching him inappropriately as evidenced by ____ (Example: The (ACV) has disclosed that the sibling has touched him on several different occasions while bathing.) |
| Update Example: | The child(ren) are attending therapy. There is a safety plan in the home with the children and the caregivers that have been followed as evidence by interviews made with the child and other family members in the home. Records have been obtained to show that the family is participating regularly in counseling for both the ACV and the AP. |

| Action Steps |
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| 1. DCS will make a referral for counseling for both siblings and ACV. |
| 2. Sibling has been referred to for a psychological assessment based on the score from the FAST. |
| 3. ACV will be referred for intake based on the nature of the disclosure during the Forensic Interview. |
| 4. The sibling will refrain from touching anyone in their restricted private areas. |
| 5. Caregiver(s) will ensure scheduled appointments will be met for the child and will demonstrate an understanding of the recommendations made by the therapist. |

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| 6. Caregiver(s) will not allow sibling and the ACV to be alone at any time and will designate an approved caregiver in their absence. |
| 7. Caregiver(s), or approved designee, will not allow the sibling to bathe the ACV to eliminate any future concerns of inappropriate touching. |
| 8. Sibling will successfully complete sexual abuse counseling for perpetrators in order to make better decisions as evidenced by following all recommendations from counseling. |
| 9. DCS will track the progress of the family and make service adjustments as needed. |

| Need | |
|---------------------------------|--|
| Need Category: Education | |
| Initial Description: | The child(ren) are at risk due to educational needs not currently being met as evidenced by ____ (Example: Child(ren) having missed 43 unexcused absences the current school year, failing all classes, and teacher reports little class participation when the child(ren) is/are present at school. Teacher is concerned with the child(ren)'s need for special education testing but cannot complete testing due to truancy issues.) |
| Update Example: | The child(ren) educational needs are currently being met as evidenced by the children not having any unexcused absences from the school since the Child and Family Team Meeting. The DCS Education Specialist has assisted the team in making referrals for special education testing for the children which is currently in progress. |

| Action Steps |
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| 1. Caregiver will participate in school meetings and follow the recommendations made by the school assessments. |
| 2. Child(ren) will participate in special education testing to include but not limited to "IQ" testing, psychological assessment, and adaptive behavior testing. |
| 3. Child(ren) will participate in class to the best of their ability as required by the teacher/school faculty. |
| 4. Child(ren) will be transported to school by caregiver or bus on school days. |

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| 5. Child(ren) will work with a tutor/afterschool program to assist with academic performance. |
| 6. CM/FSW will attend schedule meetings and communicate with school personnel, tutor, caregiver, and child to track progress. |
| 7. Child(ren) will attend school with no unexcused absences and turn in all excuses to school designee within school guidelines. |
| 8. CM/FSW will monitor and adjust services as needed. |

| Need | |
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| Need Category: Substance Use/ Abuse | |
| Initial Description: | Caregiver(s) was operating a vehicle while under the influence with the children which placed them at risk as evidenced by _____ (Example: getting into an automobile accident and blood test resulting being positives results for illegal substances.) |
| Update Example: | Caregiver has exhibited a willingness to be cooperative with recommendations and treatment. The caregiver has engaged in assessments and services as recommended. The caregiver is currently in treatment. The caregiver has not had any further criminal charges but still needs to resolve the pending criminal charges from the above-mentioned incident. The caregiver has submitted to drug screens. The caregiver has passed most screens administered. |

| Action Steps |
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| 1. Caregiver(s) will schedule an alcohol and drug assessment following recommendations based on the results of the FAST 2.0. |
| 2. DCS will refer caregiver(s) to alcohol and drug assessments and will communicate with providers and adjust services as needed. |
| 3. Caregiver will sign release of information and TennCare verification form so DCS can obtain copies of records. |
| 4. Caregiver(s) will complete recommendations from alcohol and drug assessment which were _____. (Example: Inpatient Alcohol and Drug treatment) |
| 5. Caregiver(s) will resolve all current legal issues and will refrain from any future legal issues and will report progress to DCS monthly. |

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| 6. Caregiver(s) will submit to random drug screens/periodic drug screens to verify sobriety. |
| 7. DCS will ensure drug screens are administered and documented. |
| 8. Caregiver(s) will not associate with others who are actively under the influence or using or selling drugs. |
| 9. DCS will conduct random pill counts for prescribed medications to ensure they are being taken as prescribed. (if applicable) |
| 10. Caregiver(s) will refrain from being under the influence of illegal substances while caring for her child. |

| Need | |
|---------------------------------|--|
| Need Category: Parenting | |
| Initial Description: | The caregiver is putting the child's safety at risk by not supervising the child as evidenced by _____. (Example: allowing the child to live in the home with her paramour, which is a registered sex offender, and leave the paramour to supervise the child.) According to the FAST Assessment completed by CM, the family scored a high risk and a need for services. |

| Action Steps | |
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| 1. The caregiver(s) will schedule and complete a mental health assessment. | |
| 2. The caregiver(s) will also participate in parenting assessment and classes and/or other recommendations. | |
| 3. The family should participate in case management services and the caregiver(s) will participate in the recommendations from the mental health assessment | |
| 4. DCS will assist the caregiver(s) with finding transportation should they not be able to find transportation. | |
| 5. DCS will assist the caregiver(s) in finding alternate housing for them and the child, as well as childcare if needed. | |
| 6. If the caregiver(s) continues to allow the paramour in the home, she will first provide approved alternate separate housing for the child (e.g., letting the child stay with a relative). | |
| 7. Caregiver(s) will not leave her child unattended or allow her child to live in the home with the paramour. | |

| Need | |
|----------------------------------|---|
| Need Category: Discipline | |
| Initial Description: | Caregiver has been unable to effectively discipline the child as evidenced by _____.(Example: the child presented at their elementary school with red marks on their legs as witnessed by school and CPS staff. Child reported that they disobeyed their caregiver and was subsequently disciplined with a belt. caregiver reports that a belt was used on the child as this is the only discipline that they have found to be effective in managing the child's behavior. The caregiver further reports that this is how they were disciplined as a child and feels that the discipline is appropriate.) |

| Action Steps |
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| 1. DCS will refer the caregiver for a parenting assessment by (date determined by team). |
| 2. The caregiver will respond to all contact from the assessor within 24 hours of contact. The Caregiver will maintain all appointments set with the parenting assessor until the parenting assessment is completed. |
| 3. The caregiver will sign a release of information for DCS to communicate with the assigned provider completing the parenting assessment. |
| 4. Upon receipt of the completed parenting assessment DCS will schedule a Child and Family Team Meeting will be held to review the recommendations of the parenting assessment. |
| 5. Upon completion of the review DCS will make referrals for any identified services to assist the caregivers within (team can determine date) days of the CFTM. |
| 6. The caregiver will present a plan to the team of alternative nonphysical discipline techniques they plan to maintain going forward regarding the child's behavior. |
| 7. The caregiver will participate in all appointments with the service providers until successfully released by the service provider. |
| 8. DCS will maintain contact with service providers in order to monitor progress of the caregiver with the services. If barriers to progress are noted to DCS by providers DCS |

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| will call a Child and Family Team Meeting to discuss alteration of the current services in place. |
| 9. Caregiver will refrain from any further physical discipline (through the life of the Investigation/Assessment) with the child to ensure no further physical abuse injuries. |
| 10. Caregiver will demonstrate learned parenting skills and alternative discipline techniques during interactions with their children as observed by service providers working with the family. |

| Need | |
|-------------------------------------|--|
| Need Category: Mental Health | |
| Initial Description: | There is concern the child has untreated mental health issues as evidenced by _____. (Example: Child was overheard by a teacher talking about a video game. Child was heard to state that if the hostage situation occurred in the classroom that he would want a peer whom he had a disagreement with to “go first”. Teacher contacted principal and caregiver about her concerns. Child has demonstrated aggressive behaviors at home and at school which are concerning to caregiver and teachers.) |

| Action Steps | |
|--------------|---|
| 1. | DCS will provide a resource guide and will identify the phone numbers for local mental health agencies and will assist the family with scheduling the first appointment identifying concerns based on the results of the FAST2.0. |
| 2. | Child will participate in a mental health intake and will follow all recommendations. caregiver will sign a release of information for DCS and will ensure that child attends all mental health appointments. |
| 3. | DCS will make a referral for Child and Family Comprehensive Treatment for child and family. Mother and child will participate in this service to assist in child and mother managing child’s behavior at home and at school. |
| 4. | DCS will track progress of behavioral changes through obtaining records from providers, assisting with coordination of care between providers and by monitoring behavior at school by through disciplinary reports. |

5. Child will demonstrate appropriate behavior at school and at home by utilizing techniques learned in therapy and within home services to ensure that the child and everyone around him is safe and free from threat of harm.

| Need | |
|-------------------------------------|--|
| Need Category: Mental Health | |
| Initial Description: | Caregiver left child's father and family home with her two-year-old child and moved in with a man who has a long criminal history including being on the registered sex offender. Mother is placing daughter who is two at risk of harm by her decisions. Child was removed and placed in the custody of her father. Mother currently has therapeutic supervised visits at a community location. |

| Action Steps | |
|--------------|---|
| 1. | DCS will provide a resource guide, circle mental health provider's number and assist with scheduling the initial appointment and transportation if needed to the appointment. |
| 2. | A FAST 2.0 was completed and recommendations are that mother will have a mental health intake and will follow all recommendations including medication management if recommended. Caregiver will have a parenting assessment to identify areas of concern and a Child and Family Team Meeting will convene and appropriate referrals will be made for further services as deemed necessary. |
| 3. | Caregiver will fully participate in recommended therapy, case management and medication management to allow her to have an appropriate relationship and strong bond with child. |
| 4. | DCS will obtain records, communicate with caregiver and therapists to monitor progress, and make needed changes in services as needed. |
| 5. | Mother will demonstrate appropriate and safe parenting utilizing the skills she learns in therapeutic supervised visits when she has contact with her child. |
| 6. | Child will have no contact with mother's boyfriend who is on the sex offender registry and mother and caregivers will protect the child from him. |

Custodial Cases

Family Permanency Plan Development Guide for Custodial Cases

Tips for Family Permanency Plans for Custodial Cases

- All custodial plans automatically populated a need record regarding visitation if there is a permanency goal of Return to Parent/Caretaker. In this area, workers include expectations of caregivers during visitation and describe what DCS will be doing to facilitate visitation. The worker uses this need record to update progress of visitation as appropriate.
- All custodial plans should have at least one need record for all parents/ caregivers.
- When selecting permanency goals, the plan must have at least one need record that addresses each permanency goal. If you select three goals you must have need records that address planning for each of those three goals. For example, if the goal of reunification is selected, then the caregivers' need records will help address reunification. If the worker uses the goal of adoption, the worker must create at least one need record that address DCS's responsibility on moving the case towards adoption.
- Action steps must have a start date and expected completion date. Realistic completion dates should be selected rather than a standard end date for all action steps on the plan.
- Include action steps that outline what DCS will do to help achieve each action step. If a specific task cannot be identified, including "DCS will assist in completing tasks and overcoming barriers" in the action steps can help meet the requirement. In these need records, DCS should be listed as the person responsible.
- If a youth in custody is 14 years old or older, Independent Living or Transitional Living need records are required. Please review the Independent Living Chapter.

| Need | |
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| Need Category: Substance Use/Abuse | |
| Initial Description: | Caregiver's substance use/abuse is interfering with their ability to safely caregiver their children as evidenced by _____ (example: Caregiver arrested for DUI with kids in car) |
| Update Example: | Caregiver's substance use/abuse continues to interfere with their ability to safely care for their child. (example: Since the children have been in custody, the caregiver has continued to test positive for substances not prescribed to the caregiver. The caregiver has failed to engage in visitation when scheduled as well as phone calls with the children. The caregiver has been arrested since the children have been in custody for DUI on two more occasions. The caregivers have not been compliant with services to address noted needs). |

| Action Steps |
|--|
| 1. DCS will assist in obtaining assessment and treatment recommendations to help ensure caregiver's compliance. |
| 2. DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 3. Caregiver will obtain an A&D assessment and be open and honest with the assessor. |
| 4. Caregiver will sign release of information and TennCare verification form so DCS can obtain copies of records. |
| 5. Upon receiving recommendations from provider, DCS will ensure recommendations are integrated into the current Family Permanency Plan. |
| 6. Caregiver will provide proof of current, valid prescriptions and have medications available for pill counts. |
| 7. DCS will request/conduct random drug screens and pill counts. |
| 8. Caregiver will follow all treatment recommendations and will participate in aftercare services until successfully discharged by provider. |
| 9. Caregiver will abstain from alcohol abuse, using illicit drugs and/or non-prescribed medications. |
| 10. Caregiver will submit and pass random drug screens and pill counts. |

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| 11. Caregiver(s) will not associate with others who are actively under the influence, using or selling drugs. |
| 12. Any relapses will be reported to treatment provider and DCS and a CFTM will be convened to address additional needs. |
| 13. Caregiver will not be visibly impaired and will not incur further substance abuse related charges. |

| Need | |
|-------------------------------------|--|
| Need Category: Mental Health | |
| Note: | If known mental health history – caregivers are receiving or have received previous mental health treatment of some type) |
| Initial Description: | Caregivers are not managing their emotional/mental health needs which interfere with their parenting as evidenced by _____ (known mental health history). |
| Update Example: | Caregiver has made improvement in managing their emotional/mental health needs that were impacting their parenting as evidenced by: the caregiver attending therapy and medication management regularly. The caregiver has demonstrated that they are taking their medications as prescribed through drug testing with levels and pill counts. The caregiver has shown stability with the children by maintaining visits and telephone calls with the children. The caregiver has been observed in visits to remain calm and control emotions in interactions with the children as well as with DCS staff and other providers. |

| Action Steps |
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| 1. Caregiver will sign release of information for DCS to obtain evaluation, treatment, and current compliance records. |
| 2. DCS will obtain assessment and treatment records to help ensure parents' compliance. |
| 3. Caregiver will comply with _____ (include specific treatment recommendations here) until successfully discharged by provider. |
| 4. DCS will request pill count or drug screen as appropriate. |

5. The benefit of treatment will be evidenced by _____ (whatever we want to see here) for no less than _____ (specific set time).

Other notes/tips for this need category:

- It is important to get regular updates from the therapist regarding progress.

| Need | |
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| Need Category: Mental Health | |
| Note | Unknown history –Caregivers have not received or disclosed any previous or current mental health treatment and there is a strong suspicion of Mental Health needs |
| Initial Description: | Caregivers are not managing their emotional/mental health needs which interferes with their parenting as evidenced by _____ (if unknown mental health history). |
| Update Example: | The caregiver missed the appointment for the mental health assessment that was scheduled for last month. The worker has assisted the caregiver with scheduling another intake at ABC Community Mental Health Center. |

| Action Steps |
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| 1. DCS will correspond with assessor prior to intake appointment to provide relevant information. |
| 2. Caregiver will sign a release of information and TennCare verification so DCS can obtain copies of records. |
| 3. Caregiver will obtain a mental health intake and will be open and honest with assessor. |
| 4. Case manager will assist in obtaining assessment and treatment records to help ensure caregivers' compliance. |
| 5. Upon receiving recommendations from provider, DCS will ensure recommendations are integrated into the current Family Permanency Plan. |
| 6. Caregiver will follow all treatment recommendations and will participate in treatment until released by provider. |
| 7. DCS will request pill counts as appropriate. |

| Need | |
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| Need Category: Residential Stability | |
| Initial Description: | Caregiver does not have safe, stable, and suitable housing sufficient to meet child's basic needs as evidenced by_____. |
| Update Example: | The caregiver has obtained housing and maintained the housing for three months. The home has been observed to be clean during home visits with no safety concerns noted. The mother does still struggle at times to pay the rent but has accessed community resources to assist her. |

| Action Steps |
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| 1. DCS will ensure caregivers have knowledge of resources to obtain housing. DCS will assist with filling out applications as needed and assist with any barriers in obtaining suitable housing. |
| 2. Caregiver will be able to provide verification of housing (example: lease). |
| 3. Mortgages/rent will be paid in full on time. |
| 4. Caregiver's home will have access to clean running water and utilities (whether electric, gas or solar). |
| 5. Caregiver's home will be kept at a safe temperature for the children, have appropriate and functioning child safety equipment and fire hazard prevention standards (smoke detectors, ways of heating and cooling the house, cabinet locks, wall outlet covers). |
| 6. Caregivers will meet minimal housekeeping standards (example: no hoarding, garbage disposed of appropriately, no animal feces on floor). |
| 7. Caregivers will not allow illegal activity in their home. All people residing in the home will be able to pass a background check to ensure children are appropriately cared for and supervised. Persons will sign releases so DCS can conduct the background check. |
| 8. Caregiver will obtain and maintain appropriate housing adequate in size and furnishings for family. |

Other notes/tips for this need category:

- It is important that workers help the caregivers obtain housing by taking them to complete applications, transporting them to potential housing site or other activities. Simply handing a caregiver a list of apartments does not meet the reasonable effort requirements for housing.

| Need | |
|--|--|
| Need Category: Sexual Abuse (example for non-offending caregiver) | |
| Initial Description: | Caregiver unable/unwilling to protect child from sex abuse as evidenced by_____. |

| Action Steps |
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| 1. DCS will assist in obtaining assessment and treatment recommendations to help ensure parents' compliance. |
| 2. Caregiver will sign a release of information and TennCare verification so DCS can obtain copies of records. |
| 3. DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 4. Caregiver will obtain a psychological assessment or evaluation and will follow all recommendations. |
| 5. Caregiver will demonstrate knowledge and understanding of the effects of the abuse on the victim, and all family members, including themselves. |
| 6. Caregiver will seek legal advocacy, if necessary, to protect themselves and the child from the risk of harm by the alleged abuser. |
| 7. Caregiver will comply with the terms of all court orders and safety plans and will not allow unsupervised contact with the alleged perpetrator. |
| 8. Caregiver will participate in child's counseling when deemed appropriate by a therapist. |
| 9. DCS will request a severe abuse review before allowing unsupervised visitation (Only if there is a severe abuse substantiation against this specific caregiver.) |

| Need | |
|--|--|
| Need Category: Sexual Abuse (example for offending caregiver) | |
| Initial Description: | Caregiver has sexually abused _____ as evidenced by _____. |

| Action Steps |
|---|
| 1. DCS will assist in obtaining assessment and treatment recommendations to help ensure parents' compliance. |
| 2. Caregiver will sign a release of information and TennCare verification so DCS can obtain copies of records. |
| 3. DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 4. Caregiver will obtain a psychological or psycho-sexual assessment and follow all recommendations. |
| 5. Caregiver will have no unauthorized contact with the child nor will they be left alone with any other children. |
| 6. Caregiver will verbalize a knowledge and understanding of the effects of their behavior on the child. |
| 7. Caregiver will follow all terms of probation, court orders, safety plans, etc. |
| 8. DCS will request a severe abuse review before allowing unsupervised visitation (only if there is a severe abuse substantiation against this specific caregiver.) |

Other notes/tips for this need category:

- Ensure DCS is requesting the correct assessment (psychological or psychosexual.)
- Consult with the regional psychologist if uncertain of which assessment is needed.

| Need | |
|--|---|
| Need Category: Physical Abuse (example for non-offending caregiver) | |
| Initial Description: | Caregiver unable/unwilling to protect child from abuse as evidenced by _____. |

| Action Steps | |
|---------------------|---|
| 1. | DCS will assist in obtaining assessment and treatment recommendations to help ensure parents' compliance. |
| 2. | Caregiver will sign a release of information and TennCare verification so DCS can obtain copies of records. |
| 3. | DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 4. | Caregiver will obtain a psychological assessment or evaluation and will follow all recommendations. |
| 5. | Caregiver will demonstrate knowledge and understanding of the effects of the abuse on the victim and all family members, including themselves. |
| 6. | Caregiver will participate in child's counseling when deemed appropriate by a therapist. |
| 7. | Caregiver will comply with the terms of all court orders and safety plans. |
| 8. | Caregiver will demonstrate the ability to use age appropriate discipline that does not include physical punishment. Caregiver will not allow paramour/spouse to use physical discipline with their child. |

Other notes/tips for this need category:

- May need a parenting or a psychological assessment with a parenting component if trying to determine the underlying cause of the physical abuse.
- Staff should consult with their regional psychologist, if needed.

| Need | |
|--|---|
| Need Category: Physical Abuse (example for offending caregiver) | |
| Initial Description: | Caregiver physically abused _____ as evidenced by_____. |

| Action Steps | |
|--------------|---|
| 1. | DCS will assist in obtaining assessment and treatment recommendations to help ensure parents' compliance. |
| 2. | Caregiver will sign a release of information and TennCare verification so DCS can obtain copies of records. |
| 3. | DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 4. | Caregiver will obtain a psychological assessment and follow all recommendations. |
| 5. | Caregiver will have no unauthorized contact with the child nor will they be left alone with any other children. |
| 6. | Caregiver will verbalize a knowledge and understanding of the effects of their behavior on the child. |
| 7. | Caregiver will follow all terms of probation, court orders, safety plans, etc. |
| 8. | Caregiver will demonstrate the ability to use age appropriate discipline without physical punishment. |

Other notes/tips for this need category:

- May need a parenting or a psychological assessment with a parenting component if trying to determine the underlying cause of the physical abuse.
- Staff can consult with their regional psychologist if needed.

| Need | |
|---|--|
| Need Category: Mental Health (example for child/youth) | |
| Initial Description: | Youth is not managing mental health needs as evidenced by _____. |

| Action Steps | |
|--------------|---|
| 1. | DCS will correspond with assessor prior to assessment appointment to provide relevant information. |
| 2. | All necessary releases of information will be signed and DCS will obtain assessment and treatment recommendations to help ensure parents' compliance. |
| 3. | Youth will complete a mental health intake and follow all recommendations. |
| 4. | DCS will ensure youth is present and available to participate in treatment. |
| 5. | Caregiver will participate in youth treatment as recommended by provider. |

6. If youth is under 16, provider will discuss any psychotropic medication recommendations with caregiver and child. Medication will be dispensed as prescribed.

| Need | |
|----------------------------------|--|
| Need Category: Visitation | |
| Initial Description: | Caregivers and child relationships will be maintained while children are in care. The caregiver /child bond will be encouraged through appropriate contact. |
| Update Example: | Mom has been attending visits with her children on a weekly basis. She has been arriving on time and providing age appropriate toys and snacks. She is supervising the children and has not required any redirection from staff. DCS will be moving to unsupervised visits beginning next month. |

| Action Steps |
|--|
| 1. DCS and caregivers will develop a visitation plan which includes a minimum of 2 visitations per month. Plan can be modified based on court orders, schedules, and child's needs. |
| 2. Caregivers will comply with the plan and notify DCS in a timely manner if they are unable to attend a visit. |
| 3. Caregiver will arrive on time. If caregiver is more than 15 minutes late, the visit will be canceled. |
| 4. Caregiver will interact with and engage children in appropriate activities during visits. Caregivers will plan activities for visits such as playing a game or making a craft. |
| 5. Caregiver will promote a positive environment during visit. |
| 6. DCS will ensure child is available for visit and arrange or provide supervision as needed. DCS will also provide feedback regarding the visit to the caregivers following each visit. |
| 7. (JJ only) Caregivers and youth will comply with all visitation guidelines per the residential facility handbook. |

Other notes/tips for this need category:

- All children in custody are required to have a visitation need record if they have a goal of Return to Parent/Caretaker.

Juvenile Justice Cases

Family Permanency Plan Development Guide for Juvenile Justice

Tips for Juvenile Justice Family Permanency Plans for Non-Custody Cases

Family Permanency Plans for Non-Custody Juvenile Justice Cases are required to have need records addressing the following categories.

- Safety
- Social Functioning
- Permanency
- Preparation for Adult Living
- Education

Note: If a worker has a Juvenile Justice Youth in custody and placed in a YDC, other IPP need records are required. Please review the IPP chapter of this guide for more information.

Note: If a Juvenile Justice Youth is in state custody and is 14 years or older, an independent living plan need records are required. Please refer to the Independent Living Chapter for more information.

| Need | |
|------------------------------|--|
| Need Category: Delinquencies | |
| Initial Description: | Youth was placed into DCS custody for _____ (Example: participating in robbery that resulted in the store clerk getting shot and killed. Youth was previously on probation for 2 years for attempted robbery.) |
| Update Example: | A mental health assessment was completed on _____. It was recommended that the youth have a medication management appointment and begin individual therapy. |

| Action Steps | |
|---------------------|--|
| 1. | According to Child Adolescent Needs and Strengths (CANS), the community risk score was high. Youth will need to complete a mental health assessment within 30 days (or day/month/year) to include a trauma component and recommendations will be discussed with Child & Family Team meeting. |
| 2. | Youth will actively participate in Anger Regression Training (ART) or (equivalent service) to address anger management and thinking errors. |
| 3. | As a requirement of treatment, youth will write letter of apology to victim's family by the way of the judge. |
| 4. | DCS will maintain monthly contact with youth, caregiver, and providers regarding specific progress and/or barriers. |
| 5. | Youth will be able to display empathy and remorse for his/her victims and not pose a risk of re-offending and placing the community at risk. |

| Need | |
|---------------------------------------|--|
| Need Category: Sexual Offender | |
| Initial Description: | Youth was placed into DCS custody after being adjudicated delinquent on the offense of _____ (Example: sexual battery, rape, etc.) |

| Action Steps | |
|---------------------|---|
| 1. | DCS will consult with regional psychologist. |
| 2. | Youth will undergo a psycho-sexual assessment within 45 days (or day/month/year). |
| 3. | Youth will comply with the no contact order with the alleged victim. |
| 4. | DCS and Service Provider along with the youth and family will develop and implement a safety plan. |
| 5. | Youth will participate with individual and group therapy to address and understand healthy boundaries and lifestyles. |
| 6. | Youth will not engage in any further inappropriate sexual behaviors. |

| Need | |
|---|--|
| Need Category: Substance Use/Abuse | |
| Initial Description: | Youth was placed on State Probation for being found of guilty of ____ (Example: simple possession of controlled substance for re-sale.) |
| Update Example: | The youth completed an A&D assessment and it recommended he complete Intensive Outpatient Treatment (IOP). Youth tested positive for THC last week and has refused to disclose how he got access to the THC while at the facility. |

| Action Steps |
|---|
| 1. DCS will complete a referral to a service provider to assess youth for level of dependence of alcohol and drugs. |
| 2. Youth will complete an Alcohol and Drug Assessment and comply with all recommendations. |
| 3. Youth will refrain from illegal substances or non- prescribed medications and demonstrate this by submitting to and passing random drug screens. |
| 4. While on approved home passes with caregiver, youth will be supervised at all times. Any non-compliance will be reported to DCS and Placement. |
| 5. Youth refrain from association with others who use and abuse illegal substances and non-prescribed medications. |

| Need | |
|---|--|
| Need Category: Delinquencies (probation) | |
| Initial Description: | Youth was placed on State probation for being found of guilty of _____. (Example: simple possession of controlled substance for re-sale.) Youth's state probation was violated (on date) for failed drug screens and he/she was placed into DCS's custody. |

| Action Steps |
|---|
| 1. According to Child Adolescent Needs and Strengths (CANS) youth scored a high risk on substance use and DCS will refer youth for an updated alcohol and drug assessment to determine treatment needs. |

| |
|---|
| 2. Youth will participate in individual and group therapy to address his continued substance use. |
| 3. Youth will refrain from illegal substances or non- prescribed medications and demonstrate this by submitting to and passing random drug screens. |
| 4. Youth refrain from association with others who use and abuse illegal substances and non- prescribed medications. |
| 5. While on approved home passes with caregiver, youth will be supervised at all times. Any non-compliance will be reported to DCS and Placement. |

Other notes/tips for this need category:

- Only use if the youth has a substance use history or offense and/or score moderate or high on the substance use section of the CANS.

| Need | |
|------------------------------|---|
| Need Category: Safety | |
| Initial Description: | Youth was placed in DCS custody on (date) for simple possession of controlled substance and referred and completed drug treatment. Youth has been recommended to return home. |
| Update Example: | Youth has shared his relapse prevention plan with his caregivers. He passed his drug screen administered on _____. According to the youth's mother he has been following all the rules of her home and aftercare since he has returned. |

| Action Steps |
|--|
| 1. Based upon the Child Adolescent Strengths and Needs (CANS), youth risk level indicates a low level of supervision but will be monitored on high level of supervision for the first 30 days. Thereafter, supervision may decrease based upon need. |
| 2. Youth and family will be compliant with his/her relapse prevention plan and demonstrate continued sobriety through negative drug screens. |
| 3. Youth and family will adhere to Rules of Aftercare and any non-compliance shall be reported to DCS FSW. |

4. DCS will visit youth within 48-hours of his/her return home to review the Rules of Aftercare and Aftercare Plan. DCS will provide random drug screens and appropriate supervision to assist youth from the risk of relapsing.

Other notes/tips for this need category:

- The need category, Safety, is required for all Non-Custodial Juvenile Justice Family Permanency Plans.

| Need | |
|---|---|
| Need Category: Restorative Justice | |
| Initial Description: | Youth is court ordered to complete ____ hours of Community Service; however due to being placed in custody, is still required to fulfill. |

| Action Steps |
|--|
| 1. DCS and Youth will identify an approved location to complete community service hours. |
| 2. DCS will provide Youth and family with a Community Service Worksheet to track and verify completed hours. |
| 3. Once completed Youth and family will provide DCS with the Community Service Worksheet. |

| Need | |
|--|---|
| Need Category: Social Functioning | |
| Initial Description: | Youth is associating with individuals who use or abuse illegal and/or non-prescribed medications or being in drug related environments. |
| Update Example: | Youth has reported he would like to try out for the basketball team. He will participate in tryouts next month. He has currently passed all drug screens. |

| Action Steps |
|--|
| 1. Youth will refrain from illegal substances or non- prescribed medications and demonstrate this by submitting and passing random drug screens. |

| |
|---|
| 2. Youth refrain from association with others who use and abuse illegal substances and non-prescribed medications. |
| 3. DCS, Youth, and family will explore positive recreational activities for the youth to participate in and decrease negative leisure time. |

Other notes/tips for this need category:

- The need category, Social Functioning, is required for all Non-custodial Juvenile Justice Family Permanency Plans.

| Need | |
|----------------------------------|---|
| Need Category: Permanency | |
| Initial Description: | Youth's previous behaviors, such as _____ led to his/her placement into DCS custody. Youth is now recommended to return home. |

| Action Steps |
|---|
| 1. DCS will meet with the youth and family within 48 hours of Trial Home Visit (THV) starting to review Rule of Aftercare and Family Permanency Plan (FPP). |
| 2. Caregiver will monitor the youth's whereabouts and peer selection. |
| 3. Caregiver will report any non-compliance immediately to DCS. |
| 4. Youth and family will comply with continuum, in-home services, or community services. |

Other notes/tips for this need category:

- The need category, Permanency, is required for all Non-Custodial Juvenile Justice Family Permanency Plans.

| Need | |
|--|---|
| Need Category: Preparation for Adult Living | |
| Initial Description: | Youth wants to complete his high school education but only has ____ # of credits. |

| Action Steps | |
|---------------------|---|
| 1. | DCS will complete the educational passport and assist family with enrollment. |
| 2. | Youth must attend school to include daily participation in all classroom activity, with no unexcused absences or excessive tardies. |
| 3. | If youth misses school, a valid doctor's or caregiver note must be turned in and counted as an excused absence. |
| 4. | Youth will consistently follow all school rules and refrain from any disciplinary write-ups. |
| 5. | DCS will maintain contact with school officials to obtain regular reports to include grades, attendance, and discipline. |
| 6. | Youth will maintain passing grades and if there is a need for additional assistance, youth will reach out to teacher(s) for possible before/after school help or a tutor. |

Other notes/tips for this need category:

- The need category, Preparation for Adult Living, is required for all Non-Custodial Juvenile Justice Family Permanency Plans for youth 16 years and older.
- The example above could also be used for custodial cases.
- Wording should be modified if youth is enrolled and attending college.
- This need category meets the IL Education requirements for JJ custody youth that are 16 and older if "Education" is selected as the category and "yes" was marked indicating this need record is part of the IL Plan.

| Need | |
|--|--|
| Need Category: Preparation for Adult Living | |
| Initial Description: | Youth has \$____ due in restitution costs and desires to work and gain on-the-job experiences. |
| Update Example: | Youth has started a job with McDonalds this month. He has agreed to make a restitution payment of \$100 after he receives his first paycheck. He will provide the receipt to his DCS worker. |

| Action Steps | |
|---------------------|--|
| 1. | DCS will discuss with youth what job interests he/she currently has and create a plan for youth to identify and apply for jobs related to those interests. |
| 2. | Youth will complete job applications (in-person or online) at a minimum of two a week until employment is retained. |
| 3. | Once youth has retained employment, youth will be on-time and complete all scheduled hours unless approved by supervisor. |
| 4. | Youth will make payments to his/her restitution and provide a copy of the receipt. |
| 5. | DCS will monitor youth's work schedule and attendance and support the youth in retaining his/her job. |

Other notes/tips for this need category:

- The need category, Preparation for Adult Living, is required for all Non-Custodial Juvenile Justice Family Permanency Plans for youth 16 years and older.
- This example applied to custodial cases as well.
- This need category will meet the requirement for IL Employment for JJ custody youth 16 years older if "Education" is selected as the category and "yes" is selected indicating the need record is part of the IL plan.

| Need | |
|---------------------------------|--|
| Need Category: Education | |
| Initial Description: | Youth has history of not attending school consistently prior to custody. Youth attended an in-house school while in custody and has been approved to return home and his/her previous school. |

| Action Steps | |
|---------------------|---|
| 1. | DCS will complete the education passport and assist family with enrollment. |
| 2. | Youth must attend school to include daily participation in all classroom activity, with no unexcused absences or excessive tardies. |
| 3. | If youth misses school, a valid doctor's or caregiver note must be turned in and counted as an excused absence. |
| 4. | DCS will maintain contact with school officials to obtain regular reports to include grades, attendance, and discipline. |

| |
|--|
| 5. Youth will maintain passing grades and if there is a need for additional assistance, youth will reach out to teacher(s) for possible before/after school help or a tutor. |
| 6. Youth will consistently follow all school rules and refrain from any disciplinary write-ups. |

Other notes/tips for this need category:

- The need category, Education, is required for all Non-Custodial Juvenile Justice Family Permanency Plans for youth 15 years and younger.
- This example could also be used for custodial cases.
- This need category meets the requirement for IL Education for JJ custodial youth 16 years older if “Education” is selected as the category and “yes” is marked indicating it is part of the IL plan.

Independent Living

Permanency Plan Development Guide for Independent Living

How do I create a need records that support Independent Living or Transition?

There are categories that must be used in plans that address independent living. Depending on the youth's age, there are required IL indicators that must be addressed in each plan. You must complete a strength or need record for every required indicator in that youth's age group and select "yes" when asked if the strength or need is part of the Independent Living/ Transition Plan.

Required Indicators for Youth 14 and Older

| IL Indicator | TFACTS Categories | Notes | Can it be addressed in a strength or Need Record? |
|-------------------|--|---|---|
| IL Credit Check** | Credit Check | This is generated automatically by TFACTS.** | Need |
| IL Life Skills* | Independent Living Skills, Preparation for Adult living, Home Maintenance, and/or Parenting. | | Strength or Need |
| IL Social Skills* | Support System, Relationship, Immigration | Required to have an action step regarding IL Mentoring/Support* | Need |

Required Indicators for Youth 16 and Older (in addition to the indicators listed above)

| IL Indicator | TFACTS Categories | Notes | Can be used as a Strength/Need or Either |
|-------------------------|--|---|--|
| IL Essential Documents* | Essential documents | This category is also required for all youth (no matter the age) placed in a YDC | Strength or Need |
| IL Education* | Education, Vocational | This need record will appear second on a youth's IL or Transition plan. | Need |
| IL Health* | Health Insurance, Physical Health, Mental Health | Required to have action step to address Health Insurance* and required to have action step regarding Health Care proxy/advance directives* for youth 17 years and older | Need |
| IL Transportation | Transportation | | Strength or Need |
| IL Employment* | Employment, Job Functioning | | Strength or Need |
| IL Finances | Financial Resources | | Strength or Need |

Required Indicators for Youth 17 and Older (in addition to the above indicators)

| IL Indicator | TFACTS Categories | Notes | Can be used as a Strength/Need or Either |
|--------------|-----------------------|--|--|
| IL Housing* | Residential Stability | This need record will appear first on a youth's IL or Transition plan. | Need |

Add the following, as applicable, when a youth in DCS custody or receiving EFCS is Pregnant/Expecting and/or Parenting:

| IL Indicator | TFACTS Categories | Notes | Can it be addressed in a strength or Need Record? |
|-----------------|--------------------|---|---|
| N/A | Pregnant/Expecting | Enter need once the pregnancy has been confirmed by a health care provider. | Need |
| IL Life Skills* | Parenting | Enter need once the youth becomes a parent. | Need |

*Required by Federal Law

** Optional for Extension of Foster Care plans.

After you select one of these categories the worker needs to ensure that they answer "Yes" to the question Independent Living/Transition Plan.

| Need | |
|---|---|
| Need Category: Independent Living Skills, Preparation for Adult Living, Home Maintenance, and/or Caregiving: (IL Life Skills). (required to be a Strength or a Need for youth 14+) | |
| Initial Description: | The youth hasn't had the opportunity to develop the skills needed to maintain his/her daily living space. |
| Update Example: | The youth has assisted the foster caregiver with making dinner at least once every week. The foster caregiver has agreed to help the youth make a grocery list based on meals they will be preparing next week. |

| Action Steps |
|---|
| 1. According to the Life Skills Assessment, this youth needs assistance in the area of how to manage finances. |
| 2. DCS will provide the youth and caregiver with information on the Life Skills Assessment website- Resources to Inspire Guide. |
| 3. The youth will participate in a daily independent living group to obtain the necessary skills for adulthood. |
| 4. The youth will demonstrate how to prepare a meal. |

Tips to consider:

- Focus on a summary of what is still needed for the young adult at this point
- Review self-reporting by the young adult and/or other supportive adults/most recent Life Skills Assessment (if applicable) for any underlying issues.
- What does the young adult feel is needed to be successful?

| Need | |
|---|--|
| Need Category: Education, Vocational (IL Education). (This need will always display second behind IL Housing for youth/young adults if addressed on the plan summary and is a required need for youth 16+) | |
| Initial Description: | The youth's current education status is lacking credits and there is also a history of truancy. |
| Update Example: | DCS has obtained the youth's education records. Her credits were discussed at the last CFTM and she will need to make up 2 classes over the summer so she can graduate on time. She has been |

| | |
|--|---|
| | attending school every day and her records indicate she is currently passing all her classes. |
|--|---|

| Action Steps | |
|--------------|---|
| 1. | DCS will obtain all education records and meet with the education specialist to ensure the youth is receiving the necessary services and to determine a plan to help the youth recover credit and graduate on time. |
| 2. | The team will review the youth's IEP and participate in the meeting for the youth. |
| 3. | DCS will ensure that the youth is withdrawn from the prior school of attendance and enrolled in the new school. |
| 4. | The youth will have appropriate school attendance and complete assignments. |

| Need | |
|--|--|
| Need Category: Education, Vocational (IL Education). This need will always display second behind IL Housing for youth/young adults if addressed on the plan summary. (Need is required for youth 16+) | |
| Initial Description: | The youth needs to complete all remaining credits and graduate from high school. |

| Action Steps | |
|--------------|--|
| 1. | The team will assist the youth with post-secondary education exploration, ACT, and Financial Aid Form (FAFSA), and completing the DCS scholarship application, and applying for Independent Living Wraparound Funds. |
| 2. | The team will assess the youth's ACT scores to help determine the best education route for the youth. |
| 3. | The youth will meet all requirements and youth will graduate from high school. |

Other notes/tips for this need category:

For young adult in high school

- Verify educational status-is the young adult maintaining eligibility for services?
- How many credits does the student have?
- Expected graduation date?
- Grade in School
- Special Ed/IEP—area of disability
- Is the young adult working toward their GED or interested in pursuing this?

- Can you include clubs or extracurricular activities?
- What activities has young adult been involved with to help them consider their options?
- Has ILPS joined the young adult's team and explained educational/training and assistance options to young adult?
- What college/technical program campuses have the agency/FSW/foster caregiver/other staff taken young adult to visit?
- Is young adult receiving Extension of Foster Care Services to complete HS or a GED by age 21? If yes, do we
- Obtained a letter from the school stating young adult is on track to graduate by age 21?
- Is young adult receiving Extension of Foster Care Services to pursue post-secondary education?
- Are there any scholarships the young adult might be eligible for?

For young adults in or pursuing post-secondary education (as applicable)

- What are the young adult's Post-Secondary Plans—have they changed since the last Transition Plan was developed?
- What is the young adult's major area of study?
- Does the young adult need tutoring or any other support services?
- Verify educational status—is the young adult maintaining eligibility for services?
- Is the young adult progressing appropriately according to the educational program's guidelines for completion?
- What are the deadlines for completing post-secondary applications, financial aid, etc.? Who will assist the young adult in completing these?
- SAT/ACT score or date to be taken by?
- FAFSA will be filed by?
- College/Technical school application filed?
- Explain to the young adult that some services, such as dorm deposits, can only be requested once prior to ETVs administration
- Post-Secondary funding application and supportive documentation filed with ILPS

| Need | |
|--|--|
| Need Category: Financial Resources (IL Finances) (required as Strength or Need for youth 16+) | |
| Initial Description: | According to the Life Skills Assessment, the youth needs an opportunity to develop further skills in the area of finances. The youth has no experience with managing finances or credit. |

| | |
|------------------------|---|
| Update Example: | The local Resource Center provides financial literacy training via the Opportunity Passport program. The youth stated she will open a checking account once she has obtained a job. |
|------------------------|---|

| Action Steps |
|--|
| 1. The Family Service Worker will review the results of the assessment with the youth. |
| 2. The Family Service worker will submit a referral to the Resource Center for enrollment of the youth in Opportunity Passport training. |
| 3. The youth will open and maintain a checking/savings account. |
| 4. The youth will develop a projected budget. |

Tips to consider for writing Action Steps:

- Is there a Resource Center available that can provide Opportunity Passport training and enrollment?
- Has agency/FSW/foster caregiver assisted young adult in preparing a monthly budget based on their proposed?
- Housing plans and other financial responsibilities?
- Does the young adult have a checking &/or a savings account?
- Has young adult saved any money?
- Will the young adult be able to access any trust funds, settlements, etc.?
- Young adult's current income and needed income from employment
- Will young adult continue to be eligible for voluntary extension of foster care services (will turn 21 years of age, for example):
 - Does plan address steps to be taken to access public assistance such as the Supplemental Nutrition Assistance
 - Program (SNAP), Families First, etc.?
 - Does the young adult know and understand the importance of developing and maintaining a sound credit history and credit rating?
 - Social Security Benefits:
 - Is the young person a current recipient of Supplemental Security Income (SSI), or another form of Social Security benefit?
 - If the youth is receiving a Social Security benefit, such as a death benefit or something else per a parent and is still in high school, have the applicable forms been completed and returned to continue the benefit?
 - Is an application for SSI pending?
 - Has an application for SSI been denied?
 - If a young person's SSI has been denied, has an appeal been filed?

| Need | |
|---|--|
| Need Category: Credit Check (IL Credit Check). (need required for youth 14+) | |
| Initial Description: | Credit Check conducted as a first step toward financial health. Credit was not found. Please make sure you talk to the youth about healthy credit and identity theft. |
| Update Example: | The DCS worker reviewed the results of the credit check completed on MM/DD/YYYY with the youth. No credit has been obtained in this youth's name. DCS discussed the benefits of maintaining good credit as an adult, how bad credit can have a negative financial impact and identity theft. |

| Action Steps |
|--|
| 1. DCS will obtain a credit check, review the results and review information about credit with the youth. This includes the benefits of maintaining good credit as an adult, how bad credit can have a negative financial impact and identity theft. |

Tips to consider for writing action steps:

- Has the credit check returned no credit history, or was credit found? This will determine the actions that need to occur, such as requesting IL Central Office pursue clearing credit with the credit reporting agencies. The FSW will need to contact individual creditors.
- Has the date of discussion been cited, and entered into TFACTS?
- Has the youth received the credit related documents for her records? She will need them to prove what occurred after leaving custody.
- Were the methods and materials available on the DCS Independent Living website used to manage the process and provide instruction to the youth?

| Need | |
|--|---|
| Need Category: Employment, Job Functioning (IL Employment) (Required as strength or need for youth 16+) | |
| Initial Description: | The young adult hasn't had opportunities to develop knowledge about employment and does not have work experience. |

| Action Steps |
|--|
| 1. DCS will use the Life Skills Assessment and other career inventory assessments to determine strengths, needs and interests of the youth. |
| 2. The youth will have the opportunity to develop employment skills and the youth will have the necessary skills to maintain a job. |
| 3. DCS will assist the youth with completing applications for employment and help the youth identify local employment opportunities. |
| 4. The youth will participate in practice sessions with the Family Service Worker and the foster caregiver to practice interviewing skills and resume writing. |
| 5. The youth will identify local employment opportunities they would like to pursue. |
| 6. When the youth obtains employment, they will maintain a respectful and positive attitude. |
| 7. The youth will also maintain appropriate grades in order to continue employment. |

Tips to consider when writing action steps:

- Does young adult have Photo ID and Social Security card?
- Does young adult have a resume?
- Does young adult have a job? If not, what steps are being taken to get a job?
- What does the young adult want to do for a job? Has young adult taken career/interest inventory to identify what jobs they are interested in?
- If in school, what type of summer employment does the young adult plan to have?
- Has young adult accessed local Workforce Innovation and Opportunity Act (WIOA) career services? Vocational Rehabilitation?
- Is the young adult aware of opportunities available through Job Corps or the military?
- If young adult is unable to work, is DCS assisting with an SSI application?

| Need | |
|---|---|
| Need Category: Health Insurance, Vocational, Physical Health, Mental Health (IL Health) (Need required for youth 16+ and must have action steps to Health Insurance and a Health Care Proxy/Advance Directive for youth 17+) | |
| Initial Description: | The youth needs to develop the skills to maintain physical and mental health. |

| Action Steps |
|---|
| 1. According to the Life Skills Assessment, the youth will receive information from DCS on how to apply for health insurance. |
| 2. DCS will address the needs for the youth based on the results from the Life Skills Assessment, mental health assessments and health screenings. |
| 3. The youth will be knowledgeable about all medications he/she is taking and their side effects. The youth will also maintain all medication management and therapy appointments and follow all recommendations. |
| 4. The youth will receive information about the establishment of Advance Care Plans (Health Care Proxy). |
| 5. The youth will provide DCS with a current address in order to receive the health insurance information. |
| 6. DCS will obtain a current address in order to assist the youth with maintaining health insurance. |
| 7. DCS will provide the youth with his/her medical records |
| 8. The youth will practice scheduling medical appointments, dental and therapy appointments. |
| 9. The youth will schedule his/her own appointments and receive information on how to access emergency medical services. |

Tips to consider when writing action steps:

- Does young adult have insurance? If not, does plan address steps to maintain or apply for TennCare or private health insurance?
- Last EPSDT: Last Dental:
- Does young adult take medication that will require ongoing med management appointments?

- Has young adult received education in pregnancy prevention and maintaining good reproductive health?
- Is young adult involved in counseling?
- Has young adult had A&D issues? Has young adult completed A&D program? Does young adult continue treatment?
- Has agency/FSW assisted young adult to arrange for all appointments to continue in the area where the young adult plans to live?
- Does young adult have all essential documents i.e. birth certificate, social security card, and medical records?
- Have eligible young adults with chronic health conditions been referred to DOH Children's Special Services?
- Has adult mental health worker been requested? Is this person engaged & a part of the team?
- Has DIDDS referral been completed? Has DIDDS counselor been engaged & a part of the team?
- Has a Vocational Rehabilitation referral been processed? Is counselor engaged & a part of the team?
- Has young adult identified a health care proxy and completed Health Care Proxy form?
- SSI status?

| Need | |
|---|---|
| Need Category: Residential Stability (IL Housing) This is an example for youth under 17. (This need always displays first on the plan summary for youth/young adults. This Need is required for youth 17+) | |
| Initial Description: | The youth needs to develop knowledge of how to obtain and maintain housing. |

| Action Steps |
|---|
| 1. The youth will successfully learn about the cost of housing as identified through the results of the Life Skills Assessment. |
| 2. The youth will identify several safe, stable housing options and will work on building the knowledge of how to review leases and maintain utilities. |
| 3. Youth will calculate, budget and save for housing start-up costs. Youth will review the tenant leasing laws and will be knowledgeable about the housing application. |

4. DCS will assist youth with accessing community resources as needed, and they will also provide a community help list.

| Need | |
|--|--|
| Need Category: Residential Stability (IL Housing) Example for youth over 17 (This need always displays first on the plan summary for youth/young adults. This Need is required for youth 17+) | |
| Initial Description: | The youth requires a safe and stable home environment while attending school |

| Action Steps |
|--|
| 1. The youth will successfully learn about the cost of housing as identified through the results of the Life Skills Assessment. |
| 2. The youth will reside in the foster home. Youth will follow the rules in the foster home/IL placement. |
| 3. If the foster home is no longer an option, the youth will help identify family or friends as an option. |
| 4. If there are no family members available, the youth will search for subsidized housing or campus housing. |
| 5. The youth will be referred to Life Set services. The youth will maintain appointments with their services. |
| 6. DCS can refer to EFC housing, community resources, and request IL Wraparound funds to assist with housing and utility deposits [note: if the youth is not a recipient of the Education and Training Voucher]. |

Tips to consider when writing action steps:

- Does young adult have a backup housing plan?
- How will young adult handle start-up costs for housing if moving? What about furniture, linens, other housing essentials?
- Review and understand leases, rental applications, legal rights of landlords and tenants
- For young adult live in a college dormitory, where will they live when dorms are closed?

| Need | |
|--|---|
| Need Category: Transportation (IL Transportation) (Need or strength required for youth 16+) | |
| Initial Description: | Based on the results of the Life Skills Assessment, the youth needs opportunities to learn about transportation options. The youth needs transportation so he/she can attend school, work and medical appointments. |

| Action Steps |
|--|
| 1. The youth will receive information about how to utilize public transportation. |
| 2. The youth will study the driver's manual and participate in driver's education classes. |
| 3. DCS will pay for the driver's education classes with IL Wraparound funds. |

Tips to consider when writing action steps:

- What is the young adult's plan for maintaining stable transportation?
- Will young adult live near public transportation?
- Does young adult know how to use public transportation if available?
- Has young adult had driver's education or some driver's education program?
- Does young adult have a driver's license? Insurance?
- Does young adult have a vehicle?
- Does young adult understand the basics of buying/ maintaining a vehicle?
- Has young adult saved any money toward buying a vehicle?

| Need | |
|--|--|
| Need Category: Essential Documents (Need or strength required for youth 16+ and for all youth placed in a YDC). | |
| Initial Description: | Youth needs to have all the essential documents. |

| Action Steps |
|--|
| 1. DCS will upload all essential documents to the documents section of the person record section in TFACTS. |
| 2. DCS will apply for missing documents and we will provide the youth with any essential documents before exiting custody. |

| |
|--|
| 3. The youth will identify a safe place to maintain all essential documents with the assistance of DCS. |
| 4. The youth will have all the essential documents given to them prior to their eighteenth birthday and will keep them in their identified safe place. |

Essential Documents include:

- State Issued Photo Identification
- Driver's License (if applicable)
- Social Security Card
- Resume (when work experience can be described)
- Medical records (to include immunization record)
- TennCare Card
- Birth Certificate
- Religious Documents and Information (if applicable)
- Documentation of Immigration, or Naturalization (if applicable)
- Death Certificate (if caregivers are deceased)
- Life Book
- List of adult relatives and other supportive adults
- Previous placement information
- Education records
- Health Care Proxy Form (Advance Health Care Plan)
- Proof of foster care placement (ex: court order that placed them into foster care)
- Voter's Registration Card, if applicable
- Selective Service Card, if applicable

| Need | |
|--|---|
| Need Category: Support System, Relationship, Immigration (IL Social Skills) (Need required for youth 14+) | |
| Initial Description: | Youth needs assistance identifying appropriate peer and supportive adult relationships. |

| Action Steps |
|---|
| 1. The youth will identify a support system for adulthood and DCS will invite them to the child and family team meetings. |
| 2. The team will help identify a mentor* for the youth and complete all the necessary background checks. *This is a federal requirement |

3. DCS, the provider agency and the foster caregivers will help the youth identify and maintain positive peer relationships.

Tips to consider when writing action steps:

- Who does the young adult consider their family and important adult connections?
- How are these adults involved in the Child and Family Team?
- How has agency/FSW/foster caregiver been able to help this young adult develop positive adult supports beyond the agency?
- Does the young adult know: Foster caregivers or other providers will afford young adults in EFCS every opportunity for social development, recreation and to have normal life experiences? That the young adult may attend overnight or planned activities if the activity is determined by the licensed foster home or other providers to be safe and appropriate? That it is reasonable for the foster caregiver and other providers to have knowledge of where and with whom the youth is staying, when the young adult is on an outing or overnight activity?
- Does the young adult know: Foster caregivers or other providers will assist the young adult in making developmentally appropriate choices in choosing normal activities which include, but are not limited to, extracurricular, enrichment, and social activities, that may include dating, outdoor activities, “hanging out” with friends, prom, sports, clubs, vocational activities, religious/cultural events, field trips, driver’s education, etc.? And, that DCS and/or providers may be able to help pay for some of these activities?
- Where does the young adult spend holidays?
- The Immigration category must be addressed when the youth is undocumented (the Person Record in TFACTS designates the youth as follows: US Citizen status is “No or Unknown,” and/or Legal Alien Status is “No or Unknown”) or the youth’s status to remain legally in the U.S. is otherwise in doubt or in jeopardy.

| Need | |
|--|---|
| Need Category: Pregnant/Expecting (used for female youth that are pregnant following confirmation from a health care provider and for male youth once the expectancy of a child is disclosed) | |
| Initial Description: | Youth is expecting a child due on (insert estimated delivery date). |

| Action Steps |
|---|
| 1. Youth will receive prenatal care and discuss delivery options. |

| |
|---|
| 2. DCS will refer the youth for professional counseling and assistance by a family planning agency or health care provider. |
| 3. The team will ensure access to birthing classes and information on post-partum care. |
| 4. The team will ensure the young father will be available and involved in prenatal care. |
| 5. The placement will ensure healthy meal planning options. |

Tips to consider when writing action steps:

- Youth will need assistance with developing a birth plan.
- Youth may prefer religious counseling from representatives of the denomination of their choice.
- Youth should have the option to tour the maternity ward.

| Need | |
|---|---|
| Need Category: Parenting (IL Life Skills). (used anytime a youth is the parent of a child) | |
| Initial Description: | Youth is parenting (insert child name and age). |

| Action Steps |
|---|
| 1. Youth will receive assistance with scheduling well-being appointments for their child. |
| 2. Youth will attend well-being appointment for their child. |
| 3. Youth will maintain child's personal records (birth certificate, social security card, immunization record). |
| 4. Youth will submit to paternity testing and establish parentage (as applicable). |
| 5. The team will assist the youth with developing appropriate childcare plans. |
| 6. Youth should have access to STI testing and prevention services. |

Tips to consider when writing action steps:

- Youth should receive assistance with accessing community resources for nutritional health such as WIC, HUGS, TEIS, and Nurses for Newborns.

- Youth should explore and select the medical providers most appropriate for their child.
- Youth fathers should be included in the planning for the child.

Individual Program Plan (IPP) for Youth Placed in an YDC



Family Permanency Plan Development Guide for IPPs

IPP/Family Permanency Plan Development CFTM

The Classification Team Leader notifies the identified participants of the date, time and location of the meeting. If the established date and time is not good for the family or FSW then the time and/or date of the meeting will be changed so that the family and FSW may participate; however, this CFTM must be held within the timeframes established in DCS Policy [18.23 DOE, Composition and Responsibilities of Classifications Teams at Youth Development Centers](#). If the caregiver(s) cannot attend in person, arrangements will be made for them to participate via telephone. Family members are integral members of the team and DCS will make accommodations to the greatest extent possible. The FSW is required to be present at the meeting due to the development/revision of the permanency plan. The FSW enters the IPP/Permanency Plan CFTM into TFACTS if it is the initial plan. If the youth enters the YDC after the Family Permanency Plan is created, the YDC worker will enter the new strength and need records into TFACTS.

All plans are required to include need records with action steps for each type of the following categories listed below. There can be multiple need records for each type if needed. Remember! The action steps for each need record should be listed in the order the person responsible should complete them. The IPP/Permanency Plan is reviewed monthly to discuss progress on the plan. It is also updated during each Quarterly IPP CFTM. The Progress Review and Quarterly IPP CFTM should be held together with the FSW and RCM worker when possible. Needs and Strength records are to be updated in TFACTS to reflect the progress, accomplishments and need changes of the youth.

If a youth is placed in a YDC, then the IPP/Family Permanency Plan must have the following need categories.

1. **IPP Health Category:** Medical, dental, medication management and monitoring. To include any special medical condition or treatments required.
2. **IPP Education Category:** Intellectual functioning, academic achievement, pre-vocational or vocational needs, high school graduation or HiSet, school attendance, homework/study time, appropriate behavior in the school setting, and post-secondary education, if appropriate. If a youth has been identified as eligible for special education services, attention must be given to those services. Refer to DCS Policy [21.2, Educational/Vocational Training Programs](#).
3. **IPP Social Skills/Recreation Category:** Social interactions, recreation, use of leisure time, communication, peer choices, gang-related behavior, personal hygiene, grooming, care of personal items, etiquette, and public behavior.
4. **IPP Personality/Behavior/Mental Health Category:** Substance abuse, relationships with family and authority figures, self-esteem, grief or loss issues,

history of physical, psychological, or sexual abuse, other mental health issues, aggression, conflict-resolution skills and current/past delinquent behavior.

5. **Essential Documents:** This category is required on the plan for all YDC youth. All youth are to leave with a youth portfolio and state ID. DCS will attempt to collect other original documents that are applicable for the youth portfolio, to include but not limited to the following: social security card, birth certificate, educational records, dental records, updated & recent medical records, youth's resume, letters of recommendation, voters registration card, selective service number, emergency contacts, etc.
6. **Independent Living:** The Independent Living or Transition Plan is created within the IPP/Family Permanency Plan. Categories required to address independent living or transition for the youth must be selected and marked "yes" when asked if the strength or need is part of the Independent Living/ Transition Plan. Requirements are specific to the youth's age or their situation. A table with the outlined required categories can be found under the Independent Living section of this guide.
7. **Reunification:** While there is not a need category titled reunification, the team should identify categories and action steps that appropriately relate to reunifying the youth with their family. Action steps identifying caregiver requirements and visitation should be addressed within the need categories chosen. Examples of appropriate categories include (but are not limited to) family conflict, family functioning, neglect, mental health, parenting, safety and physical condition of the home. Categories should be specific to each case considering the needs and strengths of that family.

NOTE: Youth have the right to disagree with the recommendations made by the Child and Family Team and are advised of their grievance rights by the RCM. Formal grievance procedures for youth in an YDC are outlined in DCS [Policy 24.5 DOE, Youth Grievance Procedures](#).

| Need | |
|--|---|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth has poor self-esteem as evidenced by _____. |

| Action Steps | |
|--------------|---|
| 1. | According to the psychological evaluation the youth has low self-esteem that will be addressed through these responsibilities. |
| 2. | During counseling sessions, youth will explore and discuss what has happened in his life that has contributed to his low self-esteem. |
| 3. | The case manager will assess triggers that will lead to negative thoughts and help youth identify those |
| 4. | The case manager will provide youth with methods to guide/redirect his negative thoughts and behaviors. |
| 5. | The case manager will help identify when youth displays positive thoughts and behaviors. |
| 6. | Youth will begin to identify and practice replacing negative thoughts about himself with positive ones. He will practice this throughout the week whenever he begins to think negative thoughts. This discussion and practice will continue until youth has mastered the ability to replace negative thoughts with positive ones. |

| Need | |
|--|---|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth has a history of offenses that includes ____/ Youth committed a crime against a person. |
| Update Example: | The youth has started TFCBT with his counselor. He is actively participating in his sessions. Youth recently wrote a letter to his previous victims describing how his actions affected them and apologizing for his actions. |

| Action Steps | |
|--------------|--|
| 1. | Trauma focused assessment will be utilized so the youth will understand how his own trauma impacts his ability to empathize with others. |

| |
|--|
| 2. Case manager will provide a non-judgmental environment where the youth feels safe to discuss his offenses and their impact on others. |
| 3. Youth will discuss socially acceptable ways to earn money and obtain material things and he will discuss his perceived barriers to these acceptable ways. |
| 4. Youth will effectively discuss how this crime and others has/will affect him and his future. |
| 5. Youth will demonstrate his understanding of the effect of his actions on the victim, his family, the community, and his future. |
| 6. Youth will demonstrate his understanding of how his offenses have harmed others, his family, community, and how it will impact his future. |

| Need | |
|--|--|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth responds quickly with anger and aggression to situations as evidenced by _____ |

| Responsibilities |
|--|
| 1. Youth will complete the HIT assessment to identify wrong-thinking patterns. |
| 2. Youth will learn about “wrong thinking” patterns and be able to identify when he uses those. As incidents occur, he will be able to discuss with his counselor the trigger for the incident, the wrong thinking pattern, and the reducers or strategies he could have used to avoid the incident. |
| 3. Youth will learn to identify his triggers and be able to effectively discuss them during group and individual counseling sessions. |
| 4. Youth will learn effective anger reducers and be able to effectively discuss those during group and individual sessions and begin to identify the ones that work for him. |
| 5. Youth will complete all homework given for ART including the keeping of Hassell logs or any special assignments given. |
| 6. Caseworker review the Hassell or debrief incidents. |
| 7. Youth will demonstrate ways to resolve conflict without being violent towards others. |
| 8. When youth is faced with difficult and/or tempting situations, youth will make appropriate choices. |

| Need | |
|--|--|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth lies and is dishonest by evidenced by _____. |
| Update Example: | The youth continues to deny all episodes of being dishonest. He recently was caught on camera stealing from a peer. He continued to deny his actions despite being confronted with the video evidence. |

| Action Steps |
|--|
| 1. Case manager will review the history and engage the caregivers for information on where and when honesty has been an issue. |
| 2. Case manager and youth will explore why he is untruthful and dishonest, how he perceives this benefits him, and reasons he thinks this behavior is alright. |
| 3. Youth and Case manager will identify when false statements are used to manipulate and avoid situations. |
| 4. Case manager and youth will discuss and identify strategies to avoid making false statements. |
| 5. Youth will be honest and truthful in his daily interactions and when asked about situations by staff and/or his counselor for ____ weeks. |

| Need | |
|--|---|
| Need Category: IPP Social Skills/Recreation | |
| Initial Description: | Youth allows his peers to negatively influence him as evidenced by _____. |

| Action Steps |
|---|
| 1. Staff will utilize the CANS social functioning indicator to determine if peer pressure is an identified need. |
| 2. The case manager will discuss the child's history with the FSW and family members to access when negative peer influence has affected his behaviors. |

| |
|--|
| 3. Youth will effectively explore and discuss techniques he can utilize to resist peer pressure and make decisions based on logic/reason vs. pressure. At the completion of each counseling session, the student will identify at least one technique/method of resisting peer pressure that he will use the next time he feels pressured. |
| 4. Youth will discuss and explore the benefits of learning from past mistakes. He will discuss the decision-making process used in specific incidents/events discussed and then apply more appropriate decision-making strategies for those incidents/events |
| 5. Youth will identify the characteristics of a positive peer and identify people he knows in his neighborhood who are positive and why he thinks they are positive. |
| 6. Youth will identify the places in his neighborhood/community where he can find positive peers and he will establish contact with at least one of those places prior to release. (Example: Community Center, Church, Boys club etc.) |
| 7. Youth will identify the characteristics of a positive peer and identify people he knows in his neighborhood who are positive and why he thinks they are positive. |
| 8. Youth will identify way he can meet and spend time with positive peers. |
| 9. Youth will realistically discuss and explore the negative peer pressure he may encounter when he returns home. He will identify at least 3 realistic strategies he will use to avoid negative peer influence when he returns home. |
| 10. Youth will learn and adequately demonstrate techniques he can use to avoid or resist negative peer pressure. |
| 11. While at the YDC youth will associate with peers who encourage positive behavior and avoid those who have a negative influence on him and others. |
| 12. Youth will apply new decision-making skills learned when he encounters situations throughout his day to demonstrate that he understands them and can utilize them for effective decision-making. |

| Need | |
|--|--|
| Need Category: IPP Social Skills/Recreation | |
| Initial Description: | Youth has gotten into trouble in the past because he is engaging in negative activities during recreational and leisure time as evidenced by ____. |

| Action Steps |
|---|
| 1. DCS will utilize the CANS indicator of recreation, talents/interests, and social functioning, to determine if this is a need. <u>OR</u> the youth scored ____ on the CANS in areas of recreation, talents/interest, and social functioning. |
| 2. Youth will identify why it is important to be involved in positive constructive/organized activities during free time, and will identify one or more realistic, constructive, organized activities in which he can participate when he returns home. |
| 3. Youth will make contact with the person(s) or agency (ies) where he plans to participate in this activity or these activities prior to release (ex. Community center, school, church, boys club, etc.) |
| 4. He identifies and develops positive activities that allow his to occupy his time constructively and have regular contact with positive friends and/or adults. |
| 5. Youth will actively and positively participate in daily recreation activities and events offered. |
| 6. When attending recreational activities/periods student will follow instructions when first given, will follow them promptly and without negative feedback, actions over a ____ week period. |
| 7. When attending daily recreational periods and activities, _____ will not engage in arguments, disrespectful behavior or altercations with peers over a twelve-week period. |

| Need | |
|--|---|
| Need Category: IPP Social Skills/Recreation | |
| Initial Description: | Youth is disrespectful to his caregivers/other authority figures as evidenced by _____. |

| Action Steps | |
|--|--|
| 1. Staff will review the CANS indicators around interpersonal/adult, as well as disciplinary records to determine if this is an area of need. | |
| 2. Case manager will teach the youth the benefits of “authority” and rules in different environments such as the in the military, law enforcement in society, supervisors in the workplace, and the Supreme Court for the country. | |
| 3. The family therapy session will discuss setting boundaries in the home, and the caregiver’s role, and how to respond if the youth does not follow them. | |
| 4. Youth will comply with directives without negative reaction and speak to authority figures in a suitable manner for ___ weeks. | |

| Need | |
|--|---|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth blames others for his behaviors and/or life circumstances as evidenced by _____ |

| Action Steps | |
|---|--|
| 1. Youth will effectively discuss why and how he blames others for his behavior and how this is affecting his life. | |
| 2. Youth will effectively discuss how blaming others for his behavior and the consequences of that behavior shift the control of his life from himself to other people. | |
| 3. Youth will discuss the pros and cons of blaming others for his actions and will then discuss the pros and cons of accepting responsibility for one’s actions. | |
| 4. Youth will discuss how accepting responsibility for his actions give him power and control over his life. | |
| 5. Youth will discuss how he can become responsible for his actions by controlling his responses to other people’s actions. | |

| |
|---|
| 6. Youth will study the life of at least 2 well known people who changed their lives at least partially by learning to accept responsibility for their actions and the consequences of their actions instead of blaming others. |
| 7. Youth will demonstrate understanding improvement/competence by accepting responsibility when confronted about his negative behavior (note: can add for a certain length of time like daily for x number of days, or can say 2 out of 4 times for 1 week and then change the frequency and times as he progresses – ex. each time confronted...for 2 weeks) |

| Need | |
|--|---|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth has used ____ (ex: alcohol, prescription pills, marijuana etc.) |

| Action Steps |
|--|
| 1. Psychologist and youth will complete the SASSY to determine the level of need for A&D treatment OR SASSY was completed with the youth and the results indicate ____. |
| 2. Youth will complete the recommended level A&D program by attending group and individual sessions. |
| 3. With the therapist, youth will discuss why he likes and uses alcohol/drugs, how they make him feel, and the good and bad effects of use. |
| 4. During family therapy, the caregivers will learn the dynamics surrounding addiction/recovery including how they can support their youth's sobriety. |
| 5. The youth and therapist will develop a relapse prevention plan, before transitioning out of the YDC, the plan will minimally include peers who are not actively using drugs, triggers that could potentially lead to relapse, identifying sponsors/support groups, social activities that do not include drug or alcohol abuse. |
| 6. Youth will pass all random drug screens. |
| 7. Youth will abstain from illegal substances, non-prescribed prescription medications, and/or alcohol, and maintain sobriety. |

| Need | |
|----------------------------------|---|
| Need Category: IPP Health | |
| Initial Description: | Youth needs to take prescribed medication for ____. |

| Action Steps | |
|--------------|---|
| 1. | Youth is seen by a physician/psychiatrist to address the initial need/refills of prescribed medication. |
| 2. | The nurse will educate the benefits/side effects of the medicine, and the role of the medication in addressing specific physical/mental health needs. |
| 3. | The nurse will educate the youth on the possible side effects of abruptly stopping the medication. |
| 4. | Youth will keep appointments with the psychiatrist/physician, be cooperative, and be honest in his reports. |
| 5. | Youth will report any problems with the medication to the nurse ASAP and work with healthcare staff to find the right dosage and/or medication. |
| 6. | Youth will not hoard, share, or sell medication to others. |
| 7. | Youth will take medication as prescribed daily. |

| Need | |
|----------------------------------|--|
| Need Category: IPP Health | |
| Initial Description: | Youth has been identified to have _____ (specific health issue). |

| Action Steps | |
|--------------|--|
| 1. | Youth will be accessed by appropriate physician/mental health professional to determine diagnosis and treatment needs. |
| 2. | Nursing will educate the youth on the condition and treatment. |
| 3. | Attend all scheduled appointments with the doctor. |
| 4. | Youth will comply with treatment recommendations and take medications as prescribed. |

| |
|---|
| 5. Youth will have a good understanding of their (specific health issue) so they can assure appropriate treatment. |
| 6. If recommended, youth will follow any special diet or instructions. |
| 7. Youth will report problems, questions, or concerns to the nurse as soon as possible. |
| 8. Explore and resolve thoughts and feelings that arise while being on the medication. |
| 9. Youth will demonstrate understanding on how to care for and manage the condition so that optimal health is maintained. |

| Action Steps Specific for Sleep Problems |
|---|
| 1. DCS will provide education on good sleep practices and techniques. |
| 2. Limit consumption of food and drinks before with bed with no caffeine within ____ hours of bedtime. |
| 3. Youth will practice good sleeping techniques such as no overly stimulating TV or activities just prior to bedtime. |
| 4. Staff will maintain a sleep monitoring log to track the youth's progress. |
| 5. Practice relaxation techniques to help with falling asleep (deep breathing, meditation, reading, listening to soothing music). |

| Action Steps for Enuresis |
|--|
| 1. Youth will avoid drinking within ____ hours of bedtime. |
| 2. Youth will go to the bathroom each night before going to bed. |
| 3. Youth will get up during the night when he awakens on his own, or if awakened by staff to go to the bathroom. |
| 4. Youth will properly and promptly handle/clean/wet and soiled sheets and assist with clean-up. |
| 5. Staff will provide clean bedding and clothes as needed. |

| Need | |
|-------------------------------------|--|
| Need Category: IPP Education | |
| Initial Description: | Youth is currently performing at ____ grade level (which is below ____ grade level.) |

| Action Steps | |
|--------------|--|
| 1. | Education staff will access by reviewing education records and administering any needed education testing. |
| 2. | The youth will successfully complete credit recovery classes for past subjects where _____ (class name) previously failed. |
| 3. | Teachers will provide education on how to study effectively and effective test taking techniques. |
| 4. | Youth will ask for assistance when they do not understand work. |
| 5. | Youth will complete assignments by their due dates. |
| 6. | Student will take advantage of tutoring if they are performing below a C average. |
| 7. | Youth will maintain at least a C average in subjects so that he earns the required credits toward his diploma. |

| Need | |
|-------------------------------------|---|
| Need Category: IPP Education | |
| Initial Description: | It is not realistic for the youth to obtain a regular diploma based on age and number of credits. Youth currently has _____credits. |

| Action Steps | |
|--------------|---|
| 1. | Youth will take the HiSET pretest to access whether they qualify for the HiSET. |
| 2. | Youth will attend HiSET class and complete daily assignments as instructed by teacher. Youth will take pretesting to determine when they are ready to take the HiSET. |
| 3. | Youth will take the HiSET test and pass. |

| Need | |
|-------------------------------------|---|
| Need Category: IPP Education | |
| Initial Description: | Youth has earned a high school diploma or passed a HiSET test. Youth needs skills to participate in post-secondary education. |

| Action Steps | |
|--------------|---|
| 1. | DCS will review extension of foster care benefits and eligibility requirements and all financial benefits offered by DCS/Chaffee. |

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| 2. Youth will complete career assessment and career counseling to determine the appropriate academic track. |
| 3. Youth will research college/university/vocational school that offers chosen course of study. |
| 4. Study for and take the ACT and/or SAT (or similar test). |
| 5. Complete FAFSA with assistance of DCS staff. |
| 6. Youth will complete applications to specific college/university/vocational school. |
| 7. Youth will successfully enroll and participate in a post-secondary education program. |
| 8. Youth will register and complete online college courses if eligible. |

| Need | |
|-------------------------------------|---|
| Need Category: IL Employment | |
| Initial Description: | Youth needs to obtain the skills needed to enter the workforce. |

| Action Steps | |
|--------------|---|
| 1. | The YDC will provide information about job opportunities and requirements. |
| 2. | Treatment team will assess youth's eligibility and readiness to participate and apply for a facility job. |
| 3. | Youth will complete application and interview process required by the facility jobs. |
| 4. | Supervisor will provide training to the youth on his job responsibilities. |
| 5. | Youth will report to work promptly each day and begin working without being told. |
| 6. | The supervisor will prepare a job plan and review it with the youth. |
| 7. | Youth will behave appropriately on the job and work out any problems in an appropriate way with his supervisor. |
| 8. | Youth will get along with co-workers and will not allow them to negatively influence his job performance or behavior. |
| 9. | Youth will strive to complete tasks with a respectful attitude. |
| 10. | Supervisor will provide feedback during periodic job evaluations. |
| 11. | Youth will resolve work conflict by communicating respectfully with a supervisor and/or work coordinator. |
| 12. | Youth will accept direction and redirection from their supervisor. The supervisor will outline expected behaviors from the youth. |

13. Youth will complete work in a satisfactory manner with minimal supervision.

| Need | |
|---|--|
| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth has a history of cutting himself when he is upset. (Example: Youth often injures his hands by punching walls when angry. Youth has attempted suicide a few times at home.) |

| Action Steps | |
|--------------|---|
| 1. | According to the CANS, ____ scored a 2 in the area of suicide risk and self-mutilation. |
| 2. | The therapist will develop a crisis plan with _____ and share it with his treatment team for implementation. |
| 3. | The case manager will help _____ explore triggers that produce thoughts to harm self or others. |
| 4. | Youth will learn how to adequately demonstrate positive coping techniques to manage his negative emotions. _____ will avoid causing any harm to his body in all situations. |

| Need | |
|------------------------------------|---|
| Need Category: Return to Caregiver | |
| Initial Description: | Youth has a history of not following the rules of his caregivers' home. Youth is often disrespectful to his caregivers evidenced by _____. (Example: Youth threatens his mother, doesn't come home at night, refuses to obey household rules and yells/curses at his father.) |

| Action Steps | |
|--------------|---|
| 1. | According to the CANS, the youth scored a 3 in Family-Nuclear. _____ will actively engage during family therapy sessions with therapist and caregivers. |
| 2. | Case Manager will explore with _____ persons that might be a possible adult role model/mentor for him or places he might be able to find/develop this type of relationship. |

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| 3. The therapist will help caregivers establish boundaries/ household rules with consequences and teach them effective Caregiving skills. |
| 4. The FSW will assist caregivers with developing a positive family support group (church, friends, family, etc.). |
| 5. _____ will maintain weekly contact with his caregivers through telephone calls, visitation and/or letter writing. |
| 6. _____ and caregivers will learn and demonstrate effective communication skills with one another. |
| 7. _____ will improve his relationship with his father and/or establish a relationship with one or more positive male role models who will be active in his life. |

| Need | |
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| Need Category: IPP Personality/Behavior/Mental Health | |
| Initial Description: | Youth needs sex offender treatment as evidence by his committing charge (Example: rape of a child). |

| Action Steps | |
|---|--|
| 1. Based on information and recommendations contained in the (ex. psychosexual, J-SOAP, and ERASOR) assessment, ___ will complete the sex offender treatment program. | |
| 2. The therapist will educate ___ about a sexual assault cycle, re-offense chain, triggers, and safety planning. | |
| 3. The therapist will work with the family to educate them on the youth's sexual assault cycle, re-offense chain, triggers, and will guide them in establishing a good safety plan. | |
| 4. ___ will actively participate in and complete all required individual and group sessions required by his program. | |
| 5. ___ will arrive at his sessions on time, prepared, and will display appropriate behavior during them, and be an active participant. | |
| 6. ___ will make complete disclosure about his offense. | |
| 7. ___ will effectively discuss his past abuse and explore how this has impacted his current situation. | |

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| 8. ___ will successfully complete the assigned modules in the Footprints: Steps to a Healthy Life curriculum. |
| 9. ___ will show insight into his offending behavior by accurately verbalizing to his therapist his sexual assault cycle, re-offending chain, triggers, and his high-risk behaviors. |
| 10. ___ will display behavior that indicates internalization of his treatment as evidenced by avoiding situations that trigger his offending, handling difficult peer situations appropriately, and decreasing his high-risk behavior. |

| Need | |
|---|--|
| Need Category: Essential Documents | |
| Initial Description: | Youth needs to have all essential documents. |

| Action Steps | |
|--|--|
| 1. Youth and family will build a Personal Portfolio of important documents and information to achieve successful reintegration with the help of DCS. | |
| 2. DCS will attempt to obtain youth's state ID within 90 days of admission. | |
| 3. DCS will apply for missing documents and we will provide the youth with any essential documents before exiting custody. | |
| 4. DCS will identify a safe place to maintain the Youth Personal Portfolio for the youth until he exits the facility. | |

Essential Documents include:

- State Issued Photo Identification
- Driver's License (if applicable)
- Social Security Card
- Resume (when work experience can be described)
- Medical records (to include immunization record)
- TennCare Card
- Birth Certificate
- Religious Documents and Information (if applicable)
- Documentation of Immigration, or Naturalization (if applicable)
- Death Certificate (if caregivers are deceased)
- Life Book
- Voter's Registration Card, if applicable
- Selective Service Number, if applicable

- Certificates of Completion
- Letters of Recommendation
- List of Emergency Contacts, including Team Leader and Team Coordinator
- List of adult relatives and other supportive adults
- Previous placement information
- Education records
- Health Care Proxy Form (Advance Health Care Plan)
- Proof of foster care placement (ex: court order that placed them into foster care)