



Series: 100: Case Management

Policy Name: **Concurrent Planning**

Policy Number: 115

Regulations: FS 39; FAC 65C.30.

Origination Date: 11/01/2013

Revision Date: 07/01/2018

Policy: It is the policy of Communities Connected for Kids to employ multiple, simultaneous permanency goals (concurrent planning) in order to assure more rapid permanency for children and youth. Concurrent planning may be appropriate upon a child's entry into care or may be employed at any time throughout the life of a case. Fundamental to Communities Connected for Kids' concurrent planning practice is the philosophy that no concurrent goal is secondary to another and that each goal is equally valid and must be addressed as such.

Procedure:

Concurrent Case Planning – General Information

1. The project supports and adopts concurrent case planning, a process of working towards family reunification while, at the same time, developing an alternative permanent plan for the child.
2. Standard elements of sound concurrent case planning are a family assessment, differential diagnosis (indicating low potential for successful reunification, immediate diligent search, education for the parents (about Plan A and Plan B) and full disclosure, a legally sufficient case plan, intensive early case work, use of foster/adoptive homes with there is low potential for reunification, scrupulous documentation, and implementation of Plan B when necessary.

When to Employ Concurrent Planning

1. It is appropriate to use concurrent planning when there is not a clear, singular goal that would reflect best practice in a given case. In best practice, goals should always ensure a child's speedy move to appropriate permanency.
2. Based upon the nature of the child's abuse or neglect and the unlikelihood of reunification, concurrent planning is appropriate.
3. The following child and family factors indicate a low probability of successful reunification and should be indicators that the case manager might consider concurrent planning:
 - a) TPR occurred with another child in the family after services were delivered with no change in the family;
 - b) The parent has killed or seriously harmed another child through abuse or neglect and no significant change has occurred in the interim;
 - c) The parent has committed felony assault that results in harm to this child or another child;
 - d) The parent has repeatedly and with premeditation harmed this child;
 - e) The parent has been diagnosed with severe mental illness and has not responded to previously delivered mental health services and is non-compliant with medication that could enable the parent to protect and nurture the child.



- f) The parent's only support system and means of support is found in illegal drugs, prostitution, or repeated criminal acts.
- g) There have been two or more CPS interventions for separate incidents, indicating a pattern of chronic abuse or severe neglect and the lack of responsiveness of parents on each occasion indicates the frequency of problems;
- h) Other children have been placed in foster care or with relatives for periods of time over six months in duration and the original causal factors are unchanged;
- i) Parents are addicted to an illegal drug or alcohol, resistant to treatment, and there is a pattern of abuse or neglect associated with that drug usage;
- j) The child has been abandoned or once placed in care, the parents do not visit the child or participate in case planning;
- k) Patterns of domestic violence between the parent and spouse or significant other of one year or longer, resistance of the parent to leave the situation when services and alternatives are offered, with the strong indication that the domestic violence will continue to pose risks to the child;
- l) Parents have long-term criminal history and current incarceration and prolonged sentence places the child at risk of long-term or permanent foster care;
- m) Child experienced physical or sexual abuse in infancy;
- n) Parent is under the age of 16 with no parenting support system and placement of the child with the parent has failed due to parent's behavior;
- o) Preventive measures have failed to keep the child safely with the parent and the child has experienced abuse or neglect during service provision;
- p) Parents have asked to relinquish their child following intervention;
- q) The child has suffered more than one type of abuse, with a high risk of long-term placement and non-compliance of parents to support permanency planning or reunification.



Documentation

1. Concurrent goals will be decided in partnership with case manager, supervisor, Children's Legal Services and upon by the case manager and supervisor during consultations and indicated in the case plan (service) and in the judicial case plan.
2. Interactions with the children and families (birth, foster, and pre-adoptive) as well as interactions with collateral resources will reflect efforts towards achieving each of the concurrent goals. These interactions will be reflected in case recordings and in all case reviews.

Approved: Carol Deloach
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