



State of South Carolina

Department of Social Services

Policies and Procedures: Child Welfare Services

Subject:	Case Closure and Ending Family Preservation Services
Authority:	S.C. Code Section 63-7-1650
Standards:	Guiding Principles and Standards (GPS) Practice Model
Application:	Child Welfare Services Staff
Purpose:	
To outline policies and procedures for case closure and ending Family Preservation Services (FPS).	
Policy Statement:	
Case managers track and evaluate progress in achieving Family Permanency Planning (FPP) goals monthly by comparing the current status of protective capacity and levels of risk to the identified risk and protective factors to the status at the onset of the Family Preservation case. Case managers must amend the FPP to adapt to the needs of the family as the case progresses. When the parent or guardian eliminates threats to child safety and through behavioral changes, demonstrates, the ability to reasonably protect the child from risk or danger, case managers shall take steps to close the case and end FPS.	
Policy Administration:	
The Child Welfare Services Safety Division is the policy owner and will review the policy on an annual basis.	
Procedures:	
A. Evaluation of Change: Engagement, Tracking, and Adapting Family Permanency Plans	During each contact and engagement with the parent or guardian, the case manager: 1. Documents identified needs; 2. Interviews the child(ren) or youth separately and alone during each visit; 3. Actively engages all children during each interaction and throughout the life of the case to include out of home placement with kinship care, DJJ, or any placement facility; 4. Engages parents and caregivers in conversation around changed behaviors by helping to identify parent or caregiver protective capacities; 5. Observes the family dynamics and home environment including areas of strength for the family;

	6. Updates strengths on the Family Advocacy and Support Tool (FAST) as needed, refer to the Family Advocacy and Support Tool (FAST) Policy for timeframes and further details; 7. Engages service providers in an ongoing information gathering process to determine the family's progress on service goals; 8. Collaborates with the family to review and make decisions about the next steps for the family, which includes making any necessary changes to the FPP, service recommendations, or returning the children home, when applicable. Refer to the 1642 Child and Family Team Meeting (CFTM) Policy for more information; and 9. Consider and discuss whether the kin or fictive kin caregiver should become licensed to provide kinship foster care if a child is living outside the parental home with kin or fictive kin.
B. Considerations to Successful Case Closures	There are different paths to case closures during FPS and case managers and team leaders shall make efforts to collaborate with families towards successful case closure with families. 1. FPS case managers and team leaders consider an FPS case to be successfully closed when the family demonstrates that the behaviors that led to the child being unsafe have been eliminated, behaviors that place the child at risk of harm have been mitigated, and the agency has articulated the reasons that support the belief that the child is in a safe home. 2. This is demonstrated through detailed documentation and efforts of authentically engaging the family during each contact and service planning through updating the FPP. 3. To successfully close an FPS case, the case manager shall: a. Engage with the service provider, obtain detailed documentation on progress being made toward family service goals, and document in dictation and upload documentation in CAPSS (e.g., progress summary notes, etc.); or b. Update CAPSS dictation with detailed documentation of concerted efforts on authentically engaging service providers on the progress of the family service goals. 4. Document concerted efforts to engage the family to show the efforts of the agency. 5. The following issues of closure specific to a case where a child is living with kin or fictive kin should be considered: a. A case should not be closed solely based on the alternative living arrangement, rather on the efforts by the parents to change the circumstances that led to the abuse or neglect and the alternative living arrangement.

	b. If the parents cannot make the changes necessary to ensure the child's safety, family court involvement is required to determine the child's permanent living arrangements. c. An FPS case may not close with a child living with a kin or fictive kin caregiver outside the parental home, unless such placement is court ordered or in a case that does not have court involvement, when the parental home is safe, risks of harm have been mitigated in the parental home, and the parent and kin or fictive kin caregiver are in agreement that such placement is in the child's best interests. 6. When there is any legal action or court involvement associated with the DSS case, communication between the FPS team and their DSS Attorney is essential. The FPS team will produce Court Information Sheets (CIS) and FPP when requested by the DSS Attorney, and the following shall occur: a. The FPS team must submit a CIS within ten business days in preparation for the upcoming hearing; and b. The FPS team leader links the CIS into CAPSS and documents the decision in case dictation.
C. Case Closure Criteria	The case manager and team leader may hold a case closure CFTM to close the case, discontinue monthly visits, and close the service line in CAPSS, or move toward closure when: 1. The parents or family have made progress to the extent that no safety threats exist in the home, the child is at low risk, and the parent or kinship caregiver can meet the child's basic needs for permanency, stability, and well-being; or 2. The family has made minimal progress, there is not sufficient evidence to take the matter to court, and there is low risk to the child; or 3. The agency has lost contact with the clients and followed our concerted efforts policy, for more information see 1649 Concerted Efforts Policy; or 4. The clients have died; or 5. Judicial Order directs the case to be closed; or 6. Upon the occurrence of a case closure date within a court order or case closure criteria within a court order; or 7. If the family moves out of the state, DSS refers to another CWS program and may then close the case. Note: The team leader must document the case closure consultation on DSS Form 3062: Team Leader Case Consultation.

D. Case Closure Central Registry	Unless a court order requires the case to remain open, the case manager and team leader may close the case, discontinue monthly visits, and close the service line in CAPSS, or move toward closure when safety concerns are eliminated, risks of harm have been mitigated, and the only remaining issue is the placement of the abuse or neglect perpetrator's name on the Central Registry. Note: Please refer to Work Aid 401.1 Case Closure During Family Preservation Services.
E. Case Closure While Awaiting a Court Order	The case manager and team leader may close the case, discontinue monthly visits, and close the service line in CAPSS, or move toward closure when the following occurs: 1. The child has not been removed from the home or has been returned to home, AND 2. The only remaining issue is the receipt of a final written order from a hearing wherein the judge indicated DSS case closure was appropriate or approved. Note: Please refer to Work Aid 401.1 Case Closure During Family Preservation Services.
F. Automatic Case Closure Ordered through Court	The case manager and team leader may close the case, discontinue monthly visits, and close the service line in CAPSS: 1. When the court orders an end to court jurisdiction on a specified date or upon the occurrence of specified events; or 2. Automatically, at eighteen months after the case begins, unless an extension of services is ordered by the court. Note: Please refer to Work Aid 401.1 Case Closure During Family Preservation Services.
G. Case Closure Procedures	1. Within five calendar days of the determination that the family preservation service line is to close, the FPS team shall: a. Upload Documents and attachments into linked files in CAPSS with the hard copies in the physical case file. This includes copies of the notice of FPS case closure, if applicable. b. Update case dictation in CAPSS. The case dictation outlining the reasons for case closure must be outlined in the case before closure. c. Complete final assessments in CAPSS. d. Notify any required professionals as needed. e. Return the physical case file to the team leader. • County leadership shall properly store the case file per county procedures in accordance with the Agency's retention policy.

	2. The team leader must close the FPS line in CAPSS, bringing the case to a close.
H. DSS Attorney Actions	When there is court involvement, the attorney representing DSS, through coordination with their local County Offices with diligently work to complete the following when applicable and possible: 1. Bring the case to court for review for closure if the case is under the jurisdiction of the court and if prior court orders do not authorize closure without further review; 2. If at all possible, obtain a bench order authorizing case closure pending a more formal order if the final order will close the case, in order to allow Child Welfare to close the service line in CAPSS and discontinue monthly visits pending the final signed and filed court order; 3. Diligently prepare and circulate draft orders, timely submit proposed orders and timely seek the final signed and filed order for final case resolution; 4. Schedule a review hearing at least once every twelve months and as court ordered to determine if continued services are needed; 5. Include case closure dates or criteria in every family preservation case order where it is possible; and 6. Managing Attorneys and County Directors must meet at least monthly to determine priority of legal cases, determine efforts, discuss case, discuss closures, and needed court orders.

Forms	DSS Form 3062: Team Leader Case Consultation DSS Form 2632: Child Welfare Search Effort Guide
Related Management Reports:	SC-240-R01 - Family Preservation Services SC-170-R01 - Family Preservation Open 9 months or More

Glossary:
Behavior Changes: observable actions, such as increase understanding of age-appropriate behaviors and use of appropriate behavior management strategies, of an individual or family's ability to modify circumstance that promotes the safety of a child/youth to enhance protective capacity. Child and Family Team (CFT): a group of family members, fictive kin, friends, professionals, and other invested stakeholders who join to strengthen a family and provide protection and a Family Permanency Plan for the child or youth to achieve safety, permanency, and well-

being. The family chooses the members of the team. The Team also includes the child or youth when developmentally appropriate.

Concerted Efforts: comprehensive activities to gather contact information for known and unknown parents, maternal and paternal relatives, fictive kin, and any other significant adult connections who may provide support to both the child, youth, young adult, and family.

Concerted efforts to locate and engage families: the steps that must be taken and documented to locate and engage with the child, or youth and family as outlined in the [3.2: Concerted Efforts to Locate Families Work Aid](#).

Contact: an intentional face-to-face interaction between a case manager and a child, youth, or young adults in the care, custody, guardianship of SCDSS. The case manager monitor progress and services, promotes the timely achievement of case goals, and addresses safety, permanency, and well-being needs.

CFTM Facilitator: a DSS employee who is trained, skilled, and certified in coordinating meetings among the family, Case Manager, and other stakeholders.

Engagement: developing a successful working relationship through honesty, respect empathy and active listening.

Family Advocacy and Support Tool (FAST): an assessment tool to help identify safety concerns, underlying risks, needs and strength of families. The FAST is the initial intervention assessment tool designed to be utilized with families who are involved in a Child Welfare Services Investigation and families who are identified as needing Family Preservation Services. The FAST assesses the family unit to determine child safety, identify risks, needs and assist case managers in identifying protective factors.

Family Permanency Plan (previously known as Treatment Plan/Placement Plan/Case Plan): the sole collaborative plan that describes the reasons for agency involvement, the actions and services required to change behaviors, and the strategies to reduce safety concerns and risks that promote the safety, permanency, and well-being of the child or youth and family.

Guardian or Caregiver: any relative or any other person living, visiting or working in the child's home or an employee or volunteer at an educational, recreational, medical, religious, therapeutic or other such setting where children are present, or any person in any caretaking role with children, such as a babysitter.

Indicated Determination: there is a preponderance of evidence to believe, based on a report received according to S.C. Code Section 63-7-350, that abuse or neglect is more likely than not to have occurred.

Non-custodial parent: the parent who does not have custody of the child or youth. This includes a parent who is not the primary custodian of the child or youth if there is a joint or shared parental relationship.

Protective Capacities: individual and family strengths, resources, or characteristics that directly affect the safety of the child by mitigating threats of serious harm or demonstrating that the child is being adequately protected by caregivers.

Reunification: the agency decision to return a child to their home of origin supported by evidence of behavior change and substantial lack of safety concerns.

Safety Services: actions, activities, tasks, or imposed situation that may be formal or informal; provided by professionals and non-professionals for the purpose of managing or controlling impending safety threats. Safety services must be capable of having an immediate effect; must be immediately available; must always be accessible; and must be sufficient to control impending danger.