#### Child Welfare Emergency Services (CWES) HHS **Temporary Informal Shelter Care Plan and Documentation Report Instructions**

CWES Temporary Informal Shelter Care referrals shall be responded to within one (1) hour. Contact with the Child and Parent(s) or Guardian shall immediately follow to ensure the Child is safely maintained in the home. The Temporary Informal Shelter Care Documentation Report shall be completed and provided to the Department of Health and Human Services (HHS) or Juvenile Court Services (JCS) Referring Worker and kept in the Child's case record after the services end. For Law Enforcement (LE) referrals that do not have a Referring Worker place the completed (signed) Documentation Report in the Child's case record.

Each component with general guidance is below. The CWES contract sections related to Temporary Informal Shelter Care are included as a reference for completion.

# **Case Information – Complete all fields**

Child's Name.

IOWA

- Date of Birth.
- Parent/Guardian Name, phone number and email address.
- State ID if known.
- County and Number County of Financial Responsibility (e.g., Black Hawk 07).
- HHS Service Area Service Area of County of Financial Responsibility.
- HHS/JCS/LE Referring Worker Name, phone number and email address for LE record the official's name and/or department making the referral.
- Referral Date and Time.
- Response Date and Time date and time responded to the Referring Worker or LE
- Reason for Referral such as, but not limited to, Runaway, Parent/Child Conflict, Domestic Dispute, Taken into Custody by LE.
- **Discharge** Date
- Date Report Provided to Parent(s) or Guardian and Referring Worker.

#### Crisis Plan - Reference Contract Section 1.3.3.2.4

- The plan shall address needs identified by the CWES Intake Form, referral source, and the Child and Family.
- Identify services and supports to be put in place, frequency, and who is responsible.
- Include an individualized plan to help the Child and Family recognize, de-escalate, and manage situations in order to avoid placement into shelter.
- Describe the plan for follow-up contact with the Child and Family. This may include follow-up phone calls or visits to the Family home that are initiated within three (3) days of the services end date.

The completed and signed CWES Temporary Informal Shelter Care Plan & Documentation report shall be sent to the Referring Worker and provided to the Parent(s) or guardian within five (5) business days of the discharge date.

## Family Contacts and Other Community Connections - Complete all Fields.

Include the following information for both direct contacts with the Child and Family and with other community services that are used or suggested to assist with meeting the needs of the family.

- Date &Time.
- Location.
- Participants Names identify all who were present and describe the relationship of the participants to the Child.
- Summary of Contact shall include supporting documentation for service provision.

## Case Closure Summary - Reference Contract Section 1.3.3.2.4

Case Closure Summary shall be completed within five (5) days of the Services End Date. Summary shall include, but not be limited to, the following:

- Child status at the conclusion of Services e.g., the Child remained in home or in another setting that was
  appropriate to their needs (identify the setting).
- Child/Family Response to Crisis Plan A summary of the Child/Family Response to the Crisis Plan and resources provided to assist in meeting their needs.
- Recommendations for continued community supports.

## **Signatures**

 Signatures of the Caseworker and Caseworker Supervisor are required upon submission to the Referring Worker.

A Copy of the completed CWES Temporary Informal Shelter Care Plan and Documentation Report sent to the Referring Worker and Parent(s) or Guardian within five (5) Business Days of the Services End Date.