CHILDREN'S NETWORK OF SOUTHWEST FLORIDA

Policy and Procedures

Department Name Quality Management		
SUBJECT: Case Chronological Documentation		POLICY NUMBER: QM-023
APPROVAL:	EFFECTIVE DATE: 2/26/2021	REPLACES (policy # and date): QM-023 dated 07/22/2014

I. **PURPOSE:** This policy and procedure establishes basic requirements for chronological documentation of case records.

II. **REVIEW HISTORY:** Revision to CFOP 175-42, QM-023 dated 3/20/2006, QM-023 dated 9/20/2011, and QM-023 dated 7/22/2014.

III. **CONTACT:** Quality Management Department.

IV. **PERSONS AFFECTED**: Children's Network of Southwest Florida staff, Case Management Organizations and other contracted providers with access to Florida Safe Families Network (FSFN)

V. **POLICY:** It is the policy of Children's Network of Southwest Florida that all Case Managers and contracted providers with FSFN access follow the outlined procedure when documenting information in FSFN.

VI. **RATIONALE:** The rationale of this policy is to ensure that all case information is entered into FSFN and the case file in a timely and accurate manner.

VII. **CROSS REFERENCES:** FSFN User Guide (http://fsfn.dcf.state.fl.us) and 65C-30.007(9)

VIII. **PROCEDURES:**

a. Case notes are a vitally important record of the progress of any given case and are used to transfer information about a case. Each case file must contain a chronological record of case activities. The chronological record must be maintained in FSFN (the official record of the case).

b. All contacts and attempted contacts with a child, the child's parent or caretaker, and all collateral contacts pertinent to a case must be clearly and concisely documented in FSFN. This includes contacts related to case plan and safety plan monitoring.

Documentation of such contact needs to be entered into FSFN within at least two business days of the contact or attempted contact.

c. There should be a brief chronological notation documenting who was in attendance, the outcomes and recommendations of court hearings, multi-disciplinary team meetings, and staffings, with reference to orders or minutes of meetings without reproducing them in the narrative.

d. The documentation of contacts made should provide evidence of the following:

   1) Progress made towards positive behavior change and enhanced protective capacities in regards to case plan services within the required timeframes;

   2) Effectiveness of current services and identification of additional service needed;

   3) Observations of the child's development, physical condition and interaction with the parent or caregiver and household members;

   4) Assessment of progress in tasks and services aimed at ensuring the child's well-being, including educational, emotional, developmental, physical and mental health needs;

   5) When the child is scheduled for a Well Child Check according to the periodicity schedule and whether steps are being taken to ensure the child is receiving this service;

   6) For children in out-of-home care, age thirteen and older, comments from the child and caregiver concerning life skills addressed, learning goals and competency;

   7) Frequency of visitation or contact between the child and separated siblings, parents, grandparents and any other established connection the child had prior to entering out of home care, any reason visitation or contact is not occurring, and efforts to facilitate visits;

   8) Efforts towards obtaining written expressed informed parental consent or court order for the child's prescribed psychotropic medication;

e. If a face-to-face visit with a child or parent or legal guardian is not completed within a minimum of every 30 days, the Case Manager shall document in FSFN alternate contacts completed or attempted. The Case Manager's immediate Supervisor shall review the circumstances surrounding the attempted visit and expectations as to further efforts to complete the visit.

f. Chronological entries need to include the date, start and end time and type of completed or attempted contacts as well as who was in attendance. The entries are to be based on observable behaviors, statements or other information collected. Conversations documented will be quoted when possible and otherwise reproduced with as little paraphrasing as possible. Professional conclusions, opinions or analyses must be labeled as such and attributed to the person making them.

g. The Case Manager Supervisor must review the case chronological recording at least quarterly and provide guidance to the Case Manager in rectifying any deficiencies in documentation. This information will be entered in the child's FSFN record as a supervisory review. Under no circumstance will the Supervisor's performance evaluation of the Case Manager be included in the case record.