Improving Outcomes for Children and Families

Each monthly issue of Program Improvement Plan (PIP) Tips focuses on one aspect of the safety, permanency and well-being of children in Minnesota. This issue examines worker visits with children, included in Well-being Outcome 1.

Well-Being Outcome 1:
Families have enhanced capacity to provide for their children’s needs.

Related Performance Items:
- Item 17: Assessing needs and services
- Item 18: Involving families and children in case planning
- Item 19: Worker visits with child
- Item 20: Worker visits with parents

The Minnesota Child and Family Service Review assesses Worker visits with child based on the following criteria:
- Frequency of visits
- Quality of visits
- Sufficiency to meet children’s needs and ensure adequate monitoring of their safety and well-being.

In a recent foster parent focus group, one parent commented: “Social workers need to know how important their contact is with children. They (children) see them as the person who has control over what is going to happen next.”


Research based on federal Child and Family Service Reviews links worker visits with children to better performance on five out of seven outcomes and on 14 out of 23 performance items!

The Minnesota Child and Family Service Reviews rated worker visits with children a Strength in only 73 percent of the cases reviewed in 2003. In a ranked order of performance on all items, worker visits with children ranked 20 out of 23.

The Minnesota Department of Human Services and County Social Service Agencies: Working Together to Improve Outcomes for Children and Families
Putting good practice into practice
In one county a social worker prepares for each visit by outlining issues to discuss with the child. These may be as simple as how the child did on an exam—to tryouts for a school play. It may be about visits with a parent, a court hearing or how the child feels about continuing mental health therapy appointments. During the visit the social worker observes the child’s behavior and documents this in case notes. Any new or unresolved issues are noted and discussed during the next visit.

How often should visits occur?
Frequency of visits is based on many factors such as level of risk, presenting issues in the case or current circumstances in the child’s life. Structured Decision Making contact standards can help guide decisions and planning. Frequency of visits and type of contacts between the social worker and child should be included in the case plan.

In some cases, multiple staff and service providers are involved with children and their families. The case plan may delegate some face-to-face contacts, to other staff or to providers with a contractual relationship with the agency, to augment worker visits. However, these visits are not a substitute for worker visits with the child.

What does quality of visits mean?
Visiting is how social workers ensure children are safe and that their evolving needs are being met. Visits allow the social worker to continually assess children’s emotional, physical and social well-being. Visits should focus on pertinent issues and allow the children to be involved in decisions. Visits should occur at a time and place that is most favorable for the children. Visits should also allow for quality one-on-one time between the social worker and child.

What does Minnesota require?
Minnesota Rules offer guidelines for minimum contact standards between social workers and families receiving child protective services. Minnesota Rules, part 9560.0228, subpart 4 reads, “When a child remains in the home while protective services are being provided, the child protection worker shall meet with the family at least monthly....”

Best practice guidance provided in DHS Bulletin #03-68-04, Improving Outcomes for Children suggests that the social worker should have no less than monthly in-person visits with children in foster care, with more visits if emotional, physical and social needs warrant them. The frequency and type of contact should be included in the out-of-home placement plan.

To claim Child Welfare Targeted Case Management under Medicaid, there is a requirement for one face-to-face contact per month with the child or a relevant person if the child is in the same county as the worker.

Counties can improve and monitor performance on worker visits
- Define clear expectations and policies around the frequency of social worker visits with children.
- Define clear expectations and policies around the quality of social worker visits with children.
- Assess and make efforts to align caseloads to allow adequate time for staff to visit children.
- Clarify guidelines on responsibility for visits when multiple staff or service providers are involved with the child.
- Define clear expectations and policies around documenting visits with children.
- Institute naming protocols to clearly identify worker visits in the SSIS case chronology. For example, when creating a new activity, social workers could routinely enter “visit w/child” in the purpose line. When entering a new case note social workers could enter “visit w/child” in the comments line. This phrase shows up in the chronology grid and is viewable at a glance.
- Discuss the worker’s visits with children during supervisor consultations.
- Conduct regular case reviews that target frequency and quality of social worker visits with child.
- Use data systems and reports to monitor performance on worker visits with children.
Resources and technical assistance

- [DHS Bulletin #03-68-04, Improving Outcomes for Children, Issued April 2003](#)
- Structured Decision Making Contact Standards
- [Supervisor’s Web site](#)
- Case Review and Consultation Guide (Based on Minnesota Child and Family Service Reviews) available on [Supervisor’s Web site](#)
- SSIS Reports:
  - General Reports: Workgroups that need contact

Quality Assurance Regional Contacts

Larry Wojciak, Upper SE Region, [Larry.Wojciak@state.mn.us](mailto:Larry.Wojciak@state.mn.us) (507) 359-4666

Steve Johnson, Lower SE Region, [Steve.H.Johnson@state.mn.us](mailto:Steve.H.Johnson@state.mn.us) (651) 282-5306

John Hanna, NE Region, [John.Hanna@state.mn.us](mailto:John.Hanna@state.mn.us) (651) 296-3972

Lori Munsterman, SW Region, [Lori.Munsterman@state.mn.us](mailto:Lori.Munsterman@state.mn.us) (320) 634-0048

Christeen Borsheim, NW Region, [Christeen.Borsheim@state.mn.us](mailto:Christeen.Borsheim@state.mn.us) (320) 563-8890