



Family Case Plan Writing Guide

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Prepared by
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Division of Safety and Permanence



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FAMILY CASE PLAN WRITING GUIDE

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INTRODUCTION

This writing guide was created to provide consistency, clarity, and efficiency when writing Family Case Plans for CPS, Child Welfare, and Juvenile in Need of Protection and Services (JIPS) in-home case types. The Family Case Plan is for parents/caregivers, children/youth, and their family members, and other individuals in providing supports and services to the family. Developed in partnership with the family, the plan serves as a roadmap to successful case closure. The plan is intended to be thoughtful, realistic, and personalized to the individual child, youth or family by being informed by and aligned with their wants, needs and goals.

MILESTONES

Initial Family Case Plans are completed and shared with the family within 60 days of an approved Initial Assessment or Ongoing Services assignment.

A subsequent Family Case Plan is completed 6 months from an approved Initial Assessment or Ongoing Services assignment and then every 6 months thereafter, or sooner, if warranted.

The child welfare professional is responsible for overseeing the implementation of the Family Case Plan and working with the family to facilitate change. Managing the Family Case Plan involves ensuring the plan targets goals associated with enhancing diminished caregiver protective capacities/protective factors and achieving case closure (i.e., enhanced diminished caregiver protective capacities or youth protective factors).

BEFORE WRITING THE FAMILY CASE PLAN

Family Teaming Process

Utilizing Family Teaming for the duration of the family's involvement with the child welfare system fully engages the parents, youth, natural supports, and service providers in the family case planning process to develop Family Case Plan goals, review progress, and make adjustments needed to offer appropriate support and services to the family. Family Teaming begins during the assessment and planning phase of the development of Family Case Plan and continues throughout the life of the case.

The Family Teaming process is collaborative, culturally responsive, and engagement driven. It brings together the family and their supports to actively create, review, and work toward goals of the Family Case Plan. This approach promotes shared decision-making, accountability, and builds natural supports that can be sustained beyond system involvement.

Update eWiSACWIS Information

Because the Family Case Plan draws from existing data on the family to pre-fill where possible, it is imperative that the child welfare professional updates the [Person Management page](#), [Safety Assessment - Safety Analysis and Plan](#) and [ICWA](#) tab. If a local agency chooses to utilize the CANS to assist with in-home planning, that CANS should be updated at the time that the Family Case Plan is being developed.

For guidance on how to update these documents, child welfare professionals should utilize user guides via the [Knowledge Web](#).

NOTE: The plan date in the upper right-hand corner should be a **future date**. This will allow for information from other documents to prefill into the plan even if those documents were created and approved after the plan was launched. The information that prefills into the plan is from

documents/information that has been approved prior to or the date of the current plan. If the date is changed, the case plan "refreshes" and the child welfare professional could lose plan content, even if content has been previously saved. A pop-up message will alert the child welfare professional if they want to change the date after the Family Case Plan has been created to avoid losing saved documentation.

WRITING THE FAMILY CASE PLAN

Helpful Family Case Plan Hints:

- Include the year when using dates within narratives.
- When referencing yourself or another child welfare professional using their title and last name. Examples: *SW Smith*.
- The Family Case Plan's intended audience is the family. Be mindful to use language that can be shared with a family of various literacy levels.
- Basic information at the top of the Family Case Plan will prefill.
- If there are no safety concerns (the child/youth is safe) on the Safety Assessment, Analysis and Plan, then the Family Case Plan page will not have a Safety tab.
- If a Family Case Plan already exists for a child/youth in the case record, use the copy function to create the Family Case Plan. Clicking on blue hyperlinks within the Family Case Plan document in eWiSACWIS will open another window to create or edit information outside of the Family Case Plan and return to the Family Case Plan when finished. Added/edited information will then pre-fill into the Family Case Plan.
- A light blue text box indicates that information must be entered into the Family Case Plan in order for the Family Case Plan to be approved.
- A light gray textbox indicates a child welfare professional cannot enter information directly into the Family Case Plan or information does not need to be entered into the textbox in order for the Family Case Plan to be approved.
- **Remember to click the SAVE button at the bottom of each page; save often to not lose any work.**

TAB: BASIC

COURT INFORMATION, IF APPLICABLE

Click the Add/Edit button to add the court information. On the court information selection page, select all applicable court numbers. If the appropriate court number is not displayed, click the Legal Record hyperlink to add the court information to the legal record. Once selected, click the 'Continue' button to return to the Family Case Plan. If the judge and branch information does not pre-fill, enter it manually in the space provided.

Court File Number(s)	Branch	Judge
<i>Pre-fills from Legal Record</i>	<i>Pre-fills, otherwise enter manually</i>	<i>Pre-fills, otherwise enter manually</i>

PARENT INFORMATION

All information in this section should prefill from the legal record and the parent's person management page. If the display box is checked, the address will prefill from Person

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Management. If the address is confidential, the display box must be left unchecked. Click the 'Modify' hyperlink edit the parent information in person management.

Parent 1:	<i>Pre-fills</i>	Parent 2:	<i>Pre-fills</i>
Address:	<i>Pre-fills</i>	Address:	<i>Pre-fills</i>
Phone:	<i>Pre-fills</i>	Phone:	<i>Pre-fills</i>
Cell Phone:	<i>Pre-fills</i>	Cell Phone:	<i>Pre-fills</i>
		Parent 2 is:	<i>Pre-fills</i>

ICWA/WICWA

The ICWA/WICWA tab only displays if the ICWA screening indicates tribal affiliation, noted information within this section pre-fills from the ICWA screening on the [Person Management page](#).

Pre-fills Name of child or youth and tribe(s)

For YJ Cases: The ICWA tab will display if specific JIPS statutes (Wis. Stat. § 938.13(4), (6), (6m) and (7) are entered into the Case Information Page. The responsibility of engaging and including the Indian child / youth's tribe is incumbent upon the county child welfare agency, not the tribe. (static text)

Child welfare professionals should complete the narrative sections for the questions listed below. Narratives must be detailed and specific. NOTE: Efforts made should be ongoing for the duration of involvement.

Describe collaboration efforts with each Indian **Pre-fills** tribe in the planning process of the Family Case Plan.

Describe efforts to notify and consult with each Indian **Pre-fills** extended family as part of the development of the Family Case Plan

For each Indian **Pre-fills** tribe, describe efforts to connect the family with prevailing social and cultural standards or specific resources, programs, or services.

For each identified household of the Indian **Pre-fills** describe the services that will sustain the in-home plan and prevent removal and break up of an Indian family.

Resource Links:

- <https://www.bia.gov/bia/ois/dhs/icwa> This link is the Bureau of Indian Affairs (BIA) search window to search for a Tribe by name, region, state, or ICWA Designee contact information.
- <https://www.govinfo.gov/content/pkg/FR-2021-10-04/pdf/2021-21464.pdf> This link is the BIA's Federal Register for ICWA Designated Tribal Agents for Service of Notice. This is a PDF document that includes contact information for all federally recognized tribes.

- <https://dcf.wisconsin.gov/files/cwportal/wicwa/wifedrectribes.pdf> This link includes contact information for tribal child welfare departments in Wisconsin. If the child or youth is affiliated with a tribe located in Wisconsin, a child welfare professional can find their contact information here.
- https://media.wcwpds.wisc.edu/foundation/WICWA_Online_Resource/index.html For more information about Wisconsin Indian Child Welfare Act (WICWA) compliance, use this link.

SAFETY

SAFETY ANALYSIS

The Safety tab will only display in a CPS case with an active Safety Assessment, Analysis and Plan (SAAP). For a CPS case with a safe finding OR a CW/JIPS case, this tab will not display. Proceed to the [Planning and Services Section](#).

Click the hyperlinks to create a new SAAP or to import an existing approved SAAP. If a pending SAAP exists, the hyperlink to create a new SAAP will not display on the Family Case Plan. A child welfare professional can access the pending SAAP from the eWiSACWIS desktop. *Pre-fills from chosen approved SAAP.*

A plan is necessary to maintain the child's safety and mitigate the imminent risk of removal from the home and entry into out of home care. *Pre-fills Yes/No from SAAP*

SAFETY SERVICES

The identified Safety Threat, Diminished Protective Capacity; and the associated Safety Services/Action Type, Safety Service Provider and the specific explanation of the safety service/action and how it will control the threat identified and listed below.

Identified Safety Threat: *Pre-fills from SAAP*

Description: *Pre-fills from SAAP*

*The information and narrative below will only appear when there is an In-Home Safety Plan.

Safety Service / Action Type: *Pre-fills from SAAP*

Safety Service Provider: *Pre-fills from SAAP*

Type of Diminished Protective Capacity: Select from the drop-down menu the type of diminished protective capacity (Behavioral, Cognitive, or Emotional). This will automatically launch the Diminished Protective Capacity Values page.

The Values hyperlink can be used to return to the Diminished Protective Capacity Values page. On the Diminished Protective Capacity Values page, select all applicable values. Click 'Continue' to return to the Family Case Plan page.

SAFETY DECISION

Select the value below that currently apply to indicates the appropriateness of the current safety plan.

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- In-home Safety Plan remains sufficient, feasible, and sustainable
- In-home Safety Plan revised
- Placement in out-of-home care is indicated
- Safe case closure

COLLABORATIVE EFFORTS WITH THE FAMILY

Describe how the parent/caregiver's extended network was identified, considered and included as part of the planning: *Pre-fills from SAAP*

Describe what parent/caregiver protective capacities or strengths exist, including those identified by the family and their extended network: *If completed, pre-fills from SAAP*

PLANNING AND SERVICES

It is expected that the following section is filled out with the child/youth. Actionable CANS items, if completed, will prefill into services and should be addressed.

Trauma-Informed Writing

For any person, child welfare involvement is traumatizing. It is critical to build relationships and establish trust with families through prioritizing family voice, choice, and collaboration.

When writing about a family's situation, it is important to collaborate with the family to create an accurate narrative of what has occurred. While previous assessments can and should be reviewed, the writer should always discuss those assessments with the family to confirm what is accurate and reflective of their current reality.

Writers also must remain mindful of their own perspectives and potential biases, as well as those present in other assessments or held by others when drawing conclusions. This ensures the narrative remains fair, balanced, and true to the family's lived experience.

It is recommended to write from a trauma-informed perspective. State the facts while avoiding words and/or phrases that may be triggering for the family. Remember, this is an outside perspective of *their* life; their voice must be included throughout the plan. Be transparent about all information that will be captured within the plan. The family should not be surprised by what they read or review in the Family Case Plan.

CHILD/YOUTH:

Describe in the child's/parents own words the child's identified strengths.

For JIPS cases: Consider how to enhance youth's protective factors based on youth's identified strength(s).

Complete all the fields based on the child/youth's responses. Depending on age appropriateness for each child/youth, this narrative should be completed with the child, youth or the child's/youth's parent or caregiver. Describe identified strengths per child or youth identified on the Family Case Plan. Consider seeking information from the child/youth regarding their passions, skills and hopes for the future.

Describe in the youth's own words their identified step(s) to achieve goal(s), concern(s) and barrier(s) related to their goal(s).

Clearly acknowledge the efforts made by the youth to progress towards goals/conditions. Even if goals are not met, often there is progress made. Documenting that progress supports engagement by giving voice to the child/youth. Use this space to document any efforts, small or large, toward meeting the goal(s)/condition(s).

CHILD/YOUTH CONDITIONS AND SERVICES

Conditions/goals should be written to describe behavior change and in a SMART format (Specific, Measurable, Achievable, Realistic, and Timely).

CHILD/YOUTH CONDITIONS & SERVICES

Click the "insert" hyperlink to enter child services and conditions.

Condition:

The court-ordered or proposed conditions of supervision should be reflected here. The conditions should read exactly as it is written in the most recent dispositional order.

Service Category:

Select the appropriate service category for the service being entered.

For CPS cases: This service should be directly related to the indicated condition and the impending danger threat the condition addresses.

For CW/JIPS cases: This service should be directly related to the indicated condition (behavior change).

Specifically Explain Service and Describe Progress:

For CPS cases: Explain what the service is and how it will address the condition (behavior change) and impending danger threat.

For CW/JIPS cases: Explain what the service is and how it will address the condition (behavior change).

Responsible Person/Provider:

Select the appropriate radio button for the provider providing the service, then click the "Select" hyperlink to search for the provider or person responsible for providing the selected service. If the provider is a placement provider, use the "Provider" option. Select "Medical/Mental Health Provider" if the provider is a medical or mental health professional (doctors, counselors, etc.). If the responsible person is the parent themselves or any other participant in the case (attorneys, relatives, etc.), select "Case Part./Collateral". It is important to create a provider if the provider is not already in the eWiSACWIS system.

Frequency/Duration:

Enter the frequency/duration of the service (example: two days per month) and the date the service begins or is referred. Be sure to note if the child or youth is on a waiting list or in a hold status. If there is a targeted end date for the service or the end date is known, indicate that in the respective box.

Status of Service:

Indicate the status of the service by selecting the appropriate status in the Status of Service drop down.

Repeat this process for each proposed and/or court-ordered condition for each child or youth in the home.

PARENTS/CAREGIVERS

It is expected that the following section is filled out in partnership with the parents/caregivers. Child welfare professionals have two radio buttons to choose from: All Parents/Caregivers or Individual.

The All Parents/Caregivers selection will allow child welfare professionals to complete the strengths/goals as a holistic unit. Consider using All Parents/Caregivers when the parents/caregivers remain living together and co-parenting the child/youth as a unit requiring similar goals or behavior changes. When the Safety tab is active, the behavior changes are connected to how the parent will increase protective capacities together.

The Individual selection allows child welfare professionals to document strengths/goals for each individual parent/caregiver. Consider using the Individual selection when parents/caregivers live and function independently from one another. Parents or caregivers may have separate behavior changes needed. When the Safety tab is active, the behavior changes are connected to how the parent will increase protective capacities.

Describe in the parent's/caregiver's own words their identified strengths. This should be captured in conversations with parents/caregivers and verified once it is documented in eWiSACWIS to ensure it reflects what the parents/caregivers are intending to say.

Describe in parent's/caregiver's own words their identified step(s) to achieve goal(s), concern(s) and barrier(s) related to their goal(s). This should be captured in conversations with parents/caregivers and verified once it is documented in eWiSACWIS to ensure it reflects what the parents/caregivers are intending to say.

Clearly acknowledge the efforts (i.e., steps taken) made by the parent/caregiver to make progress towards goals/conditions. This should be captured in conversations with parents/caregivers and verified once it is documented in eWiSACWIS to ensure it reflects what the parents/caregivers are intending to say.

For CPS cases with an active SAAP:

For each identified diminished protective capacity, identify the behavior change needed to achieve safe case closure. The diminished protective capacities are associated with the safety threats identified on the most recent and approved Safety Assessment Analysis and Plan; a Safety Plan implements controls to manage the identified diminished protective capacities.

On the Safety tab in the Family Case Plan, these same identified diminished protective capacities are then incorporated and documented. The Family Case Plan uses change services to enhance those the identified protective capacities to move towards safe case closure.

Describe what behavior change needs to be made for this diminished protective capacity specific to what is going on in the family. If more than one diminished protective capacity has been identified, describe what behavior(s) needs to change for each one.

CONDITIONS & SERVICES

Insert the appropriate parent/caregiver with each condition that is entered by clicking the “insert” hyperlink and select the appropriate individual from the displayed list. Select the appropriate radio button to indicate if the condition is proposed or court ordered.

Condition:

The court-ordered or proposed conditions of supervision should be reflected here. The conditions should read exactly as it is written in the most recent dispositional order.

Goal (behaviorally centered language): Goals should be written in a [SMART](#) format.

Service Category:

Select the appropriate service category for the service being entered.

For CPS cases with an active SAAP:

This service should be directly related to the indicated condition or behavior change and the impending danger threat the condition addresses.

For JIPS or CW cases with a safe finding:

This service should be directly related to the indicated condition or behavior change.

Specifically Explain Service:

Explain what the service is and how it will address the condition or behavior change and impending danger threat.

Responsible Person/Provider (Service Provider):

Select the appropriate radio button for the service provider, then click the “Select” hyperlink to search for the service provider. A child welfare professional may need to create a service provider if the provider is not already in the eWiSACWIS system. The responsible person/provider should capture who is concretely providing the service. For example, this could be a therapist or parent educator.

Frequency/Duration:

Enter the frequency/duration of the service (example: two days per month) and the date the service begins or is referred. Be sure to note if the parent or caregiver is on a waiting list or in a hold status. If there is a targeted end date for the service or the end date is known, indicate that in the respective box.

Status of Service:

Indicate the status of the service by selecting the appropriate status in the Status of Service drop down.

Repeat this process for each proposed and/or court-ordered condition for both parents.

COLLABORATION/PARTNERSHIP

It is expected this section is filled out in partnership with the family.

Full Name	Relationship	Phone	Email
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Describe in the family’s own words how their natural supports will help with the plan’s goals and services:

This table is used to document identified natural supports by the child, youth, parent or caregiver. One row is required for the approval of the Family Case Plan. The full name and relationship of the natural support to the family is required. Contact information for natural supports (i.e., phone and email) are optional. Add as many rows as necessary to include all identified natural supports. If the family initially cannot identify a natural support, “N/A” may be included. However, this section should be revisited and updated minimally each time a Family Case Plan is updated; natural supports may be identified by the family at any time through the Family Teaming process.

WELL-BEING

NAVIGATE

Click each hyperlink to jump to its’ respective section below.

Child	Health Summary	Medication	Health Care Providers	Immunizations	Education	Family Interaction Plan	IL Services
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CHILD’S HEALTH SUMMARY

Click the ‘Modify’ hyperlink to open Person Management and edit the child’s or youth’s health information.

- Child has chronic physical, mental or emotional needs.
- Child has had a hospitalization, surgery, emergency medical need, or significant illness in the last six months?

MEDICATION

Is the child prescribed medication? *Answer Pre-fills from Person Management page.*

Click the ‘Modify’ hyperlink to enter/edit the child’s or youth’s medication information below. The medication information entered in Person Management will *pre-fill* here.

Name of Medication	Dosage/Frequency	Psychotropic	Reason Medication is Prescribed	Length Prescribed	Physician / Address
<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>
<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>	<i>Pre-fills</i>

CURRENT HEALTH CARE PROVIDERS

This information *pre-fills* from the Person Management page. Click the ‘Modify’ hyperlink to enter/edit the child’s or youth’s health care provider information below.

Physician:	<i>Pre-fills</i>
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Address: *Pre-fills*
Telephone: *Pre-fills*
Date of last exam: *Pre-fills*
Dentist: *Pre-fills*
Address: *Pre-fills*
Telephone: *Pre-fills*
Date of last exam: *Pre-fills*
Mental Health Provider: *Pre-fills*
Address: *Pre-fills*
Telephone: *Pre-fills*
Date of last exam: *Pre-fills*

IMMUNIZATIONS

The information in this section *pre-fills* from the Person Management page. Click the 'Modify' hyperlink to enter/edit the child's/youth's immunization information. Use the hyperlink for the WIR registry to determine if up to date. Update with current date when confirmed up to date.

Child's immunizations are up to date *Pre-fills*
If "No" describe why immunizations are not up to date.

Use this narrative to explain why the child's/youth's immunizations are not up to date.

Parents prefer that the child not be vaccinated. *Pre-fills*
Comments:

Use this narrative to explain the parents' vaccination preferences for the child/youth.

A request for the child's immunization was made to on *Pre-fills*

Immunization	Date(s) Administered
Pneumococcal conjugate vaccine (PCV)	<i>Pre-fills</i>
Influenza	<i>Pre-fills</i>

Educational Summary

Click the 'Modify' hyperlink to enter/edit the child's/youth's educational information below. The educational summary information entered in Person Management will *pre-fill* here.

Yes No N/A Is the most recent grade report attached?
Child is in early intervention program.

Child is in day treatment.

Narrative pre-fills

Provide name and address of current school or special education providers. *Pre-fills*

Describe current academic performance. Include grade level, special achievements and current educational difficulties. Indicate the date and source of information.

Narrative pre-fills

Current or most recent grade level: *Pre-fills*

Is this the grade level where the child should be (do not include a child who voluntarily begins kindergarten at age 6)? *Pre-fills*

SIGNATURE LINE

After supervisory approval, the child welfare professional must obtain parent/caregiver or Indian custodian signature, in a timely manner, and a copy of the Family Case Plan must be provided to the parent/caregiver, to the youth once they have reached the age of 12, and to, tribal child welfare professionals, as applicable. If unable to obtain signatures, efforts made to obtain the signatures should be documented. Signatures do not indicate agreement, but rather that the person had the opportunity to review the Family Case Plan.

OPTIONS MENU

The Options dropdown menu is located at the bottom left-hand corner of every tab of the Family Case Plan.

APPROVAL

Once the Family Case Plan is ready to submit for approval, select 'Approvals' under 'Actions' to launch the Approvals page. Select 'Approve' to send to the assigned supervisor. Click 'Close' and then click 'Save' on the Family Case Plan to send to the supervisor.

PRINTING FEATURES

When printing the Family Case Plan, there are opportunities to deselect individuals whose information is not relevant to who is receiving the Family Case Plan. This can include parents who may not need, or could be harmful, to receive the other parents' information. A child welfare professional can also deselect the well-being information. This may be helpful if the parent does not need or want extra documentation of the child's/youth's well-being information.

HISTORY OF PLANNING AND SERVICES

From the Options dropdown menu, select 'History of Planning and Services' under 'Text' to view and print the services history template. From the Options dropdown menu, select 'Family Case Plan' under 'Text' to view and print the Family Case Plan template. Via the staging page, select the individual along with relevant content to print and share with the individual/family.

Characters in this section are limited. Click the 'expando'  next to each name to see the full

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history. This form should be signed by the assigned child welfare professional, parents, youth (if applicable) and supervisor with copies being provided to the family.



The Department of Children and Families is an equal opportunity employer and service provider. If you have a disability and need to access services, receive information in an alternate format, or need information translated to another language, please call the Division of Safety and Permanence at 608-266-8787. Individuals who are deaf, hard of hearing, deaf-blind or speech disabled can use the free Wisconsin Relay Service (WRS) – 711 to contact the department.