CHAPTER 34

PRIVATE AGENCY/CHILD GROUP CARE

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CHAPTER 34
PRIVATE AGENCY/CHILD GROUP CARE

34.00 PROGRAM AUTHORITY

Federal: 45 CFR 23.110

State: Chapter 74.15 RCW; RCW 74.08.044; RCW 74.13.020; and RCW 74.13.031

34.10 POLICY

34.11 Purpose of Service

Group care is a time-limited intensive treatment resource for children who require placement services, whose emotional and behavioral difficulties are so severe that proper supervision and treatment cannot occur in other less intensive and less restrictive placement options, i.e., own home, relative's home, or foster family care.

34.12 Service Description

A. Definition: "Group care facility" means an agency which is maintained and operated for the care of a group of children on a twenty-four hour basis (RCW 74.15.020(3)(a)).

B. Licensed group care facilities with DSHS contracts provide supervision and treatment to children whose placements have been approved by Community Services Offices (CSO).

C. All group care placement requests requiring DSHS financial support are assessed for appropriateness and approved by CSOs prior to the actual placement.

D. All children in group care receive ongoing monitoring of the placements by CSO staff to ensure that the placement is meeting the needs of the child, and that he/she continues to be appropriate for group care.

E. All children in group care receive permanent planning services, which include services that contribute towards the child's movement into a permanent placement (return home, guardianship with relatives, adoption, or adoption with support, guardianship with foster parent or other unrelated individual, long-term foster care with written agreement in place).

F. Parents of children in a group care placement will receive services (when appropriate) to facilitate the reuniting of families in the most expedient time possible.

G. Post placement services are provided to children and families reunited after termination from group care in order to stabilize and prevent additional out-of-home care (see Section 34.34).

34.13 General Policies Related to this Service

A. The group care program will only serve those children who are not amenable to supervision and treatment in other less intensive placement options.

B. The department is responsible to assess the appropriateness of all group care placement requests.

C. Children appropriate for group care placement shall be placed in facilities offering services capable of meeting their unique needs. Every effort will be made to place children within facilities in the closest proximity to the home of their parents.

D. Placements will be considered as temporary arrangements and limited to a maximum of eighteen consecutive months except that voluntary placements are limited to three months.

1. For children currently in group care on a voluntary status whose placement has already exceeded three months and continuation of group care is deemed necessary, a petition for dependency or alternative residential placement must be filed at the time of the child's next quarterly review.

2. The CSO should develop and implement appropriate alternative placements for those children in group care whose placement has exceeded eighteen months. This process should be completed by no later than March 31, 1982.

3. Exceptions to this policy must be processed through the normal channels/procedures described in Chapter 01 using the DSHS 5-10(X), Policy Exception Request form. The exception material must outline a specific plan as well as the time frames for placing the child into an alternative placement resource. Such exceptions must be completed by March 31, 1982.

E. Group care services to children in placement will focus on preparing them to successfully function in their own home or in other less intensive service options.

F. All children in group care will receive permanent planning services.

G. The department will provide continuous monitoring of children in group care.

H. When conditions exist within the home that may necessitate future out-of-home placements (see Section 34.34), post-placement services will be provided to children returned to their own home or placed with their relatives.

I. Group care services provided to American Indian children will be provided in a manner which will maximize their opportunities to preserve their Indian heritage and identity and in accordance with WAC 388-70-093.

J. All incidences of alleged abuse or neglect in group care shall be referred to the CPS program for investigation.

34.14 Priorities Related to this Service

A. The following are the department's priority for group care services:

1. Children whose parents have had their parental rights terminated, whose behaviors are so severe that adoption has failed or adoption is not possible, and who require the degree of supervision and treatment that can only be obtained in a group care placement.

2. Children (especially those of latency age) who are court adjudicated dependent and who have been so severely abused or neglected that they display highly inappropriate behaviors that cannot be successfully dealt with in other less restrictive resources.

3. Children regardless of legal status who display severe emotional/behavioral difficulties and whose needs cannot be met in a less restrictive setting.

34.15 Eligibility

A. Service Eligibility.

1. Children eligible for this service are those 6 thru 17 years of age not amenable to supervision and treatment in other less intensive placement options, and whose placement request have been assessed utilizing DSHS 10-145(X), (Group Care Assessment and Individual Service Plan (ISP)) and approved by the regional director or designee. The age limit does not apply to medically fragile children who are eligible for placement at Saint Ann's Infant Home.

2. The procedures to determine whether children are eligible for group care are oulined in section 34.31.

3. Placement of children appropriate for group care is contingent upon their meeting the legal requirements described in section 34.32 G.

4. The parents inability or unwillingness to contribute to a child's support does not affect that child's need and eligibility for group care services.

5. Children 18 to 21 may continue in a group care placement in order to complete high school or its equivalent (see Chapter 03.15 E. for payment policy). All placements of this nature require prior CSO approval. Such payments shall not extend beyond age 21.

6. The length of stay in group care is limited to eighteen consecutive months.

7. Voluntary placements are limited to a maximum period of three months (WAC 388-70-013).

8. When conditions exist within the home that may necessitate future out-of-home placements, children adopted through the adoption support program who require group care placement shall be placed utilizing the procedures in Manual G, Chapter 38.

9. Children are eligible for post-placement group care services.

10. Group care is the Community Services most intense and costly continuing placement option. The number of beds available in this program are limited by the fiscal constraints of the department's budget. The placement of children into group care is contingent on the availability of vacant beds.

B. Financial Eligibility

Financial eligibility for children who have been assessed appropriate for group care is determined by utilizing the procedures outlined in section 34.32 H. Group care is provided based upon need and without regard to income.

C. Medical Eligibility

Children in group care are eligible for medical and dental services under the "Categorically Needy" program. See section 34.32 I.

D. Psychological or Psychiatric Service Eligibility

Eligibility for psychological or psychiatric services is determined by utilizing the procedures outlined in section 34.33 F.

34.16 Payment Rates

A. The department's reimbursement rate for group care is a two-level system which is based on the level of services provided. The CSO is responsible to utilize the DSHS 10-145(X) to assess and determine the level of care required by children requesting group care placement.

B. Level II facilities offer well structured programs with controlled activities, and fairly intensive social services. These facilities provide the following level of staff support to children.

STAFF SUPPORT	STAFF HOURS PER MONTH PER RESIDENT
Child Care	60.8 (day)
Child Care	24.3 (night)
Social Worker	11.6
Clinical Consultant	.5
Executive	1.4
Secretary	1.4

1. In general these facilities serve children with serious behavioral problems that are typically antisocial, aggressive, but are not indicative of severe emotional disturbance.

2. Level II facilities are reimbursed at a monthly rate of $1,046 or $34.37 per day.

C. Level III facilities offer programs with a high degree of daily supervision, intensive social and psychiatric services, and frequently specialized educational programs. These facilities provide the following level of staff support to children.

STAFF SUPPORT	STAFF HOURS PER MONTH PER RESIDENT
Child Care	81.1 (day)
Child Care	24.3 (night)
Social Worker	17.4
Clinical Consultant	.5
Executive	1.4
Secretary	1.4

1. In general these facilities serve children who are severely disturbed. Their behaviors are a function of severe emotional difficulties as opposed to acts which are related to peer group pressures or other external pressures.

2. Level III facilities are reimbursed at a monthly rate of $1,246 or $40.97 per day.

D. The department has established contracts with a small number of agencies to provide specialized group care services (e.g., Saint Ann's Medically Fragile, King County Therapeutic Family Home, and Muckleshoot's American Indian program). These agencies will be reimbursed at the rate specified in the agency's contract with the department (see SSPS Provider File).

E. Exceptional rates for hard-to-place children can be provided utilizing the procedures outlined in section 34.32 F.

F. Within 90 days of the initial placement, clothing and personal incidentals may be purchased if the child meets the conditions outlined in section 34.33 G.

G. The department can reimburse a group care provider or vendor for transportation expenses incurred on behalf of children. The conditions under which reimbursement will occur are outlined in section 34.33 H.

H. The department can pay for placements when children are temporarily absent from a group care facility. The conditions and procedures are outlined in section 34.33 D. 5.

34.20 PROGRAM STANDARDS

34.21 Program Expectations/Response Times

A. The CSO will respond to all group care placement requests within one working day (see 34.31 A.).

B. The CSO shall notify applicants of their final decision regarding the request for placement (see 34.31 C.).

1. No later than 30 working days from the date that a new CSO client has signed the DSHS 14-139(X).

2. No later than 30 working days from the date of the initial face-to-face interview when it involves clients who are presently being served by the CSO.

C. A quarterly face-to-face contact will occur between the CSO worker and children who are in the permanent custody of the department.

34.22 Appropriate Program/Service Outcomes

A. Child returns home with the provision of necessary services to the child and family.

B. Child placed in appropriate out-of-home setting and services provided to enable a return home or other permanent plan as soon as possible.

C. Guardianship established with relative, foster parent or other appropriate individual. (See Chapter 23.)

D. Placement with relatives.

E. Child placed for adoption.

F. Permanent foster family care agreement established (see Chapter 32.34).

34.30 SERVICE PROCEDURES

34.31 Group Care Intake and Placement Procedures

A. The CSO will respond to all group care placement requests within one working day (at a minimum this requires a telephone contact with the individual making the request).

B. A DSHS 14-139(X), Application for Social Service, must be completed to determine eligibility for social service.

C. A DSHS 9-04(X), Placement Authorization and Acknowledgement, form must be signed by applicants for group care placement.

D. The CSO will assess and determine the appropriateness of all group care placement requests.

1. The assessment process will include a face-to-face interview with the child and their parents when they are physically available.

2. The CSO worker will utilize the DSHS 10-145(X), Group Care Assessment and Individual Service Plan (ISP), to determine the appropriateness of all group care placement requests with the exception of those who require placement into Saint Ann's Medically Fragile Program. The service worker should utilize instructions in Manual G, Chapter 32.31, for placement request into Saint Ann's Program.

   a. The form has been designed to review the critical factors that should be considered in determining the appropriateness of a group care request.

   b. The DSHS 10-145(X) provides the structure necessary to analyze the needs of children, their internal strengths, interests, family support, and the specific services required to meet their needs.

   c. Instructions on the use of this document are presented in section 34.80.

3. Only children who meet the eligibility requirements described in section 34.15 will be approved for group care placement.

4. The regional director or his/her designee must approve all group care placement requests, with the exception of DJR community residential placement requests.

E. The CSO shall notify applicants of their final decision regarding the request for placement.

1. No later than 30 working days from the date that a new CSO client has signed the DSHS 14-139(X).

2. No later than 30 working days from the date of the initial face-to-face interview when it involves clients who are presently being served by the CSO.

F. Group care intake and preplacement services are authorized using SSPS code 3401.

G. Children determined inappropriate for group care placement.

1. Upon determining that a group care request is inappropriate, the CSO worker will notify the referrant of the department's final decision (see 34.32 D.).

2. The CSO worker will provide the applicant information on other appropriate department or community services available to the child and family.

3. To the extent possible, the CSO worker will assist interested families in obtaining the appropriate services.

34.32 Preplacement Procedures for Children Determined Appropriate for Group Care

A. Children and parents will be involved in the case planning process.

B. Based on the CSO service worker's assessment, facilities will be identified that offer services necessary to meet the child's and family's unique service needs.

1. A child will be referred to facilities in the closest proximity to the parent's home offering services capable of meeting the child's and family's unique needs.

2. For a child with special education needs, the CSO service worker will notify the group home of these needs.

C. The DSHS 10-145(X) will serve as the social service summary as well as the initial Individual Service Plan (ISP). A completed copy of this form should be filed in the document section of a child's service record and referenced on the DSHS 2-305(X).

1. The DSHS 10-145(X) along with a cover memo will be used as referral information to potential placement resources.

a. For voluntary placements, the CSO will obtain a signed DSHS 14-12(X), Authorization to Release Information, prior to referring the DSHS 10-145(X) to potential placement resources.

b. For court-ordered placements, the CSO will attempt to obtain a signed DSHS 14-12(X) prior to referring the DSHS 10-145(X) to potential placement resources.

D. The providers to whom referrals are made shall notify the CSO of their decision.

1. Whether or not the children will be accepted.

2. The conditions of the acceptance.

3. The date the children can be accepted into the program.

E. Once a facility has been identified that is capable of meeting the child's and family's unique needs and is willing to accept him/her into their program, the service worker will:

1. Record the name of the facility in the child's service record (DSHS 2-305(X)).

2. Document in the record that the placement is in the closest proximity to the child's home given the child's and family's unique needs.

F. Hard-to-Place (HTP) Process

Group care plans that utilize specialized support services can be developed for hard-to-place children through the hard-to-place process. Such plans are intended for the small group of children whose needs are beyond the management and treatment capability of existent, known, and available group care resources.

1. All group care hard-to-place service requests are approved by the State Office.

a. In an emergency the regional office may telephone a hard-to-place exception request into the State Office. The regional office is responsible to follow up any telephone request with a completed hard-to-place exception request package as per the instructions in this section.

b. The State Office will consider and make a decision on any emergency hard-to-place exception request within 24-hours.

2. The proposed hard-to-place service request is submitted by the regional office to the state office using DSHS 5-10(X), Policy Exception Request, with the following information included within it:

a. Identifying information

(1) Child's name
(2) Birth date
(3) Case number
(4) CSO
(5) Worker's name
(6) Date

b. Specific Nature of Request - Briefly describe the service proposal. If there is more than one component of the service plan, describe all elements of the plan. Example: A higher foster care rate with one or more specific support service.

c. Justification for Request - Why is this plan being proposed? How does it meet the needs of the child? Why is it the plan of choice?

d. Alternatives Explored - What other alternatives have been considered? If group care is the recommended plan, have less restrictive alternatives such as specialized foster care been considered?

e. Consequences if Request is Denied - Where will the child go and how will the child be served if the exception is not approved?

f. Date of Request - Note the dates for which the HTP plan is requested and whether it is a one-time request or continuing.

g. Additional Cost - Note the cost of the plan above the normal foster or group care rate for one month. Also note the total cost of the additional services for the period of the request, up to six months.

h. Supporting Documentation - Include as attachments any psychological/psychiatric or medical reports that would document the need for hard-to-place services.

3. Approved hard-to-place exception request will be handled as a new contract or a contract amendment by the state office with the group care provider.

4. Hard-to-place contracts will be limited to six months. If an extension is required, a new request must be submitted and approved for continued payment.

5. The service worker shall utilize SSPS code 3440 to authorize hard-to-place services.

G. Preplacement services: CSO responsibilities related to legal issues.

1. All children in group care are required to be on voluntary or court ordered placement.

a. Voluntary placements requiring DSHS financial support.

(1) For voluntary placements, the CSO is responsible to obtain a signed DSHS 9-04(X), Placement Authorization and Acknowledgement, prior to placement. The department shall always have supervisory responsibility for these children.

(2) A voluntary placement should be accepted only when the placement will not extend over three months.

(a) Agreement with the natural parents regarding the duration of care shall be confirmed in a letter to the family and recorded in the children's record.

(b) The parents shall be advised that a petition for dependency or ARP may be filed if it is necessary for the placement to be extended beyond the agreed upon period of time.

(3) Voluntary placements are limited to a maximum period of three months (WAC 388-70-013(8)).

(4) If it appears that voluntary placement will continue beyond three months, the service worker shall:

(a) Secure a dependency/shelter care order prior to the expiration of the three months; or

(b) File a petition for an alternative residential placement prior to the expiration of the three months.

2. Prior to the placement, the CSO service worker will interpret to the parent(s) and child(ren) their legal rights and responsibilities (see Chapter 23).

3. The CSO service worker will document involvement in any court-related activities by utilizing SSPS code 3451.

H. Preplacement service: CSO responsibilities related to financial services.

1. Prior to placement a DSHS 14-05(X), Application for Foster Care and Support Enforcement, must be completed to determine the appropriate source for maintenance payments, i.e., room, board etc.

2. Every attempt shall be made to determine the correct eligibility for group care payment as defined in Chapter 03.15.

3. The children's financial resources shall be explored including:

a. Supplemental Security Income (SSI).

b. Social Security Administration benefits (SSA).

c. Veterans Administration benefits (VA).

d. American Indian benefits.

e. Third-party medical insurance.

f. Any other available financial resource.

4. In order to ensure that the Trust Funds Unit of the Office of Accounting Services receives current information, copies of the following will be forwarded to Mail Stop OB-24:

a. Applications to the Federal Government for SSA, SSI or VA.

b. Applications for benefits from Washington State agencies, such as the Department of Labor and Industries.

c. All notifications of changes in status (including termination of DSHS as representative payee) forwarded to SSA, SSI, VA or other providers.

d. Changes not reportable to provider agencies, such as changes of status involving county, CSO, address, schooling, etc.

e. General correspondence concerning any of the above.

5. After a copy of the application, etc., has been forwarded to the Trust Fund Unit, that unit will be responsible for contacting the appropriate agency for any follow-up which may be necessary.

6. When DSHS is the representative payee, receipts from SSA, SSI, Veterans, Railroad and Labor and Industries will deposited with DSHS, Reimbursements, P.O. Box 98501, Olympia, WA 98504.

7. Receipts from all other sources will be deposited with the appropriate office of Support Enforcement unless otherwise specified.

8. Once the placement has been made the CSO service worker is responsible to address the financial issues described in section 34.33 D.

I. Preplacement services: CSO responsibilities related to medical services.

1. The CSO service worker will insure that children receive preplacement physical and dental examination.

a. The parents' third-party medical insurance shall be the first source of payment for preplacement physicals and dental examinations.

b. Where available, Early and Periodic Screening, Diagnostic and Treatment (EPSDT) will be utilized. A child must be Medicaid-categorical needy before EPSDT can be utilized and only one EPSDT screen per year can be authorized for children over one year of age. Also, reporting screening results to the CSO is not part of an EPSDT exam. The service worker needs to arrange reporting with the physician. (See Chapter 48, Health Support Services.)

c. Children not eligible to receive a preplacement physical and dental examination through the EPSDT program and having no third party liability insurance shall be served using the Form A-19, Invoice Voucher.

d. DSHS 13-18(X), Child's Health Record (see Chapter 32.80), should be sent/given to the medical provider for completion and subsequently filed in the service record. A copy of this completed form should be sent to the group care provider serving the child.

2. The service worker is responsible for ensuring that each child placed into group care has one of the following medical/dental coverages.

a. "Categorically Needy" medical program

(1) This is a federal/state funded program for children placed in child group care which provides medical and dental care.

(2) The DSHS 14-05(X), Application for Foster Care and Support Enforcement Services, is used to apply for medical coverage. A copy of this completed form will be sent to the Division of Medical Assistance, Office of Provider Services, Third Party Liability (TPL) Unit, MS LG-11, Olympia, WA 98504.

(3) The service worker shall issue a medical coupon using DSHS 14-154/159. Using the proper code, the service worker will complete Item 21 on the DSHS 154/159 authorization form to indicate whether the child has third-party medical/dental liability insurance.

(4) All children are eligible for medical coverage regardless of whether they have other third-party liability medical/dental insurance.

(5) The service worker will authorize "categorically needy" medical for a child by utilizing one of the following SSPS codes: 4810, 4811, 4812, 4813.

(6) If the child has partial medical/dental coverage through third-party liability insurance, the initial medical coupon issued by the CSO will bear the name of the third-party medical/dental insurer.

(7) The group care provider will instruct the medical provider that they must always first bill the third-party medical/dental insurance company. The child's medical/dental bills not covered by his/her third-party medical/dental insurance shall be paid through the "categorically needy" medical program.

b. Supplemental Security Income (SSI)

Children on SSI will be issued medical coupons through financial services. Medical coupons are automatically issued once the children are approved for SSI benefits through the Social Security Administration office.

If a child has applied for SSI and final eligibility has not been determined, the child will be provided medical coverage through the "categorically needy" program. The service worker will determine eligibility based on the criteria described in Section 34.15.

3. Once the placement has been made the CSO worker is responsible to address the medical issues described in Section 34.33 E.

J. Preplacement services: CSO responsibilities related to referrals from Division of Developmental Disabilities (DDD) and Division of Juvenile Rehabilitation (DJR).

1. DDD group care placement request

a. The DDD caseworker will complete the DSHS 10-145(X), Group Care Assessment and Individual Service Plan (ISP), for DDD children requesting group care placement.

b. The CSO will assess and determine the appropriateness on all DDD completed DSHS 10-145's.

c. DDD will be responsible to complete all of the necessary paperwork on children who have been approved for group care placement, i.e., DSHS 14-139(X), DSHS 14-05(X), and DSHS 9-04(X).

d. DDD is responsible to provide casework services to all DDD children placed into group care.

e. The CSO will authorize group care services utilizing SSPS code 3263.

2. DJR group care placement request

a. Community Residential Placements (CRP).

(1) These are placements for adjudicated youth who are completing their sentence in a community based group care facility (RCW 13.40.020(4)). Monitoring of DJR's utilization of these placements is the responsibility of the state office.

(2) The CSO will process all DJR CRP requests for which CSO funding is requested.

(3) The CSO will not be responsible to complete a DSHS 10-145(X) on these children.

(4) Upon receipt of the following documents, the CSO will authorize payment for these children:

(a) DSHS 14-139(X)

(b) DSHS 14-05(X)

(c) Written social summary.

(5) The CSO will document the provision of services for these children utilizing SSPS code 3263.

(6) State funds shall always be utilized to support CRP placements.

(7) Children in CRP placements who may be paroled while living in CRP placements must be reassessed for group care using the same process and criteria as all other group care request.

b. Parolees

(1) These are children 10 through 17 years of age supervised by Juvenile Parole who have completed a period of confinement in a DJR institution.

(2) The CSO will assess and determine the appropriateness of all DJR parolee group care placement requests. This will be done in the same manner as all other requests for group care placements as outlined in Section 34.31 and 34.32.

(3) The CSO will document the provision of services to these children utilizing SSPS code 3263.

34.33 Services to Children in Group Care Placement

A. The CSO is responsible to monitor the progress of all children in care to ensure that they are returned home or placed in a less restrictive resource in the most expedient time possible.

1. To the extent possible the CSO service worker will have face-to-face contacts with all children, parents, and their providers on a quarterly basis.

a. At a minimum there should be quarterly telephone contacts between the CSO service worker and children on voluntary or court-ordered placements (nonpermanent custody cases). Phone contact should also occur with the children's parents, and the providers caring for the children.

b. A quarterly face-to-face contact will occur between the CSO service worker and children who are in the permanent custody of the department.

c. Contacts shall be summarized and documented in the DSHS 2-305(X).

2. The CSO service worker is responsible to review and approve quarterly reports submitted by providers on the DSHS 10-146(X), Group Care Quarterly Report and Individual Service Plan (ISP).

a. The CSO service worker will be responsible to insure that the DSHS 10-146(X) provides complete and descriptive information on the children's status.

b. Through the monitoring of the DSHS 10-146(X), the CSO will ensure that children with special education needs are receiving the required educational services.

c. The CSO service worker with supervisory approval has the authority to return any DSHS 10-146(X) that does not meet the expectations of the department. A letter outlining the department's concerns shall be sent to the provider with a carbon copy going to the regional office.

d. When providers fail to submit DSHS 10-146(X) by the end of the month following the 3 month period, or by the termination of whatever shorter reporting period may have been agreed to, no payment shall be made until the report is received.

e. When providers consistently fail to submit timely quarterly reports and/or when they continually fail to submit quarterly reports that do not meet the expectations of the department, the regional office should notify the state office group care program manager who will handle the problem as a contract compliance issue.

f. Instructions to providers on the use of DSHS 10-146(X) are described in section 34.80.

3. Any negotiated change between the CSO and provider regarding the child's case plan (treatment goals and services offered to the child and family) shall be recorded on the child's DSHS 2-305(X), Service Episode Record.

The CSO shall ensure that these changes are reflected in the provider's quarterly report covering that period.

4. The department has the final authority in determining the appropriateness of all treatment goals and case plans for children in group care when the department is paying for the placement.

a. When the CSO and group care provider cannot reach an agreement on the most appropriate treatment goals and case plans for a child, the CSO will notify the regional office immediately.

b. Upon prior approval of the regional office, the CSO has the authority to terminate the child's current placement and to place him/her in an alternative group care facility.

5. The CSO will monitor the group care providers through their quarterly contacts and review of the DSHS 10-146(X) to ensure that they are encouraging and assisting parents and siblings of children in group care to make visitations in accordance with agreements specified in the ISP.

   a. The parents shall participate in any modification of the visitation agreement.

      (1) Either through discussions with the provider, or

      (2) Due process through the juvenile court when the child is legally dependent or on an ARP placement.

   b. Should contact with the parents be broken, the provider should conduct a search to discover their whereabouts.

   c. Efforts made by the CSO/provider to involve the children's parents with the placement should be carefully documented in their quarterly reports.

6. The private agency will verbally notify the CSO service worker and the child's parents within 24 hours when there is a change in the child's status. The provider will follow up any verbal notification with a written notification to the CSO within 72 hours. Notification is required when the following changes have occurred:

   a. Whereabouts.

   b. Requirements.

   c. Resources.

   d. Legal status.

   e. Significant medical difficulties.

7. The department may continue payment for a child's placement during any temporary absence. The conditions under which payment will be made are described in section 34.33 C. 5.

8. The children's parents should be informed of placement changes and the children's whereabouts prior to any moves, unless this information would endanger the children.

9. Social services provided to the children by the CSO during placement will be authorized on the DSHS 14-154(X), Social Services Authorization, or DSHS 14-159, Change of Authorization, utilizing SSPS code 3452.

B. Children in placement: CSO responsibilities related to permanent planning.

1. All children are entitled to a permanent home and the opportunity to form stable, permanent attachments with a family. Casework planning and activities should be directed toward this goal at all times and begin as early in the placement as possible. The CSO is responsible to develop the permanent plans for all children under their supervision. The provider is responsible for implementing the permanent plans developed by the CSO.

2. Permanent planning consists of focused casework efforts to develop and implement the best and most appropriate permanent plan for children.

a. The permanent plan shall be one of the following:

(1) Return home.

(2) Guardianship with relatives.

(3) Placement with relatives.

(4) Adoption or adoption with support.

(5) Guardianship with foster parent or other unrelated individuals.

(6) Long term foster family care with a written agreement in place for children 16-17 years of age (see Chapter 32.34).

b. Casework activities may include but are not limited to:

(1) Parent search to locate family members and resources.

(2) Psychiatric/psychological evaluation or consultation for children or families.

(3) Referral/coordination with other appropriate services including counseling or treatment.

(4) Casework to children to prepare them for independent living.

(5) Provisions of time limited, decision - making methods as outlined in the caseworker's handbook, "Permanent Planning for Children in Foster Care" (DHEW Publication #78-30(X).

c. An initial permanent planning goal must be identified in the DSHS 10-145(X), Group Care Assessment and Individual Service Plan (ISP). The permanent planning goal will be updated at each quarterly case review, and may change as the case progresses.

d. The CSO service worker will develop permanent plans according to priority options listed in Chapter 32.34(D.).

e. All children in group care will be registered for permanent planning after they have been in placement 6 months or longer. The CSO service worker will comply with the registration process described in Chapter 32.34 E. through I.

C. Children in placement: CSO responsibilities related to financial issues.

1. Payment to the group care facility will be authorized on a DSHS 14-154/159 (see Chapter 04, Social Service Payment System).

2. The CSO shall monitor the amount of the child's earning through the quarterly review of the DSHS 10-146(X).

a. A child should only be asked to pay for part of his/her care if it is therapeutic and in the best interest of the child.

b. Exempt earned income standards which apply to AFDC also apply in group care (WAC 388-28-535(3)).

c. Any portion of the children's earnings which are saved must be for a specific purpose, approved by the provider/department.

d. For youths fulfilling court ordered restitution, or restitution as part of a diversion agreement, earned income shall first be applied to the amount ordered.

3. Funding of group care placements through AFDC-FC terminates when children reach the age of 18.

a. For those children eligible for group care beyond age 18, payment shall be made using state funds.

b. The exempt resources of children in group care over the age of 18 whose placements are state funded are the same as a one person AFDC household.

An exemption of the first eighty-five dollars plus one-half of the remainder is allowed for gross monthly earned income.

4. Redetermination of eligibility for AFDC-FC supported placements must be completed every six months (see Chapter 03).

5. Temporary absence of children from group care.

   a. Contingent on prior approval of the CSO, the department will pay for children's placements during any planned temporary absence from a facility. Payment by the department will be limited to a maximum of 15 days.

      (1) Examples of planned absence from a facility include (but not limited to) required hospitalizations or camp experiences.

      (2) Payment for more than 15 days absence for children who are hospitalized may be made with RO approval.

      (3) Regular weekly visits by children to their home as part of an approved treatment plan does not need prior CSO approval. The facility is required to report these visits as part of their quarterly progress report.

   b. The group care facility is required to provide verbal notification within 24 hours to the the responsible CSO and parent when it has discovered that a child is absent without prior approval (runaway). This should be followed by written notification within 72 hours to the CSO. Payment for placement during a child's absence may be authorized by the department for up to 15 days, providing that the group home is holding a vacant bed for the child.

D. Children in placement: CSO responsibilities related to medical issues.

   1. The group care provider must notify the CSO and the child's parents of all major injuries and illnesses.

   2. The provider will attempt to obtain the necessary consent from a child's parents for any required medical treatment.

   3. The CSO will monitor group care providers through their quarterly contacts and review of DSHS 10-146(X) to ensure that all children receive yearly physical examinations. The examination will include:

      a. Medical history.

      b. Assessment of physical growth and mental development.

      c. Inspection of ears, nose, mouth, and teeth.

      d. Vision screening.

      e. Auditory screening.

      f. Screening for cardiac abnormalities.

g. Screening for anemia.

h. Screening for sickle cell traits for children at risk if not previously tested.

i. Urine screening.

j. Blood presssure (children 12 years or older).

k. Assessment updating immunization.

l. Tuberculosis screening, if indicated.

4. Immunizations are to be updated as stated in the instructions for the DSHS 13-18(X), Child's Health Record (see Chapter 32.80 for form and instructions).

E. Psychological or Psychiatric Services

1. Medically related psychiatric and psychological evaluations and treatment (that is, those requested by a physician) will require approval by medical consultants.

a. Payment is authorized as other medical care (i.e., medical coupons).

b. The physician is responsible for requesting approval from the medical consultant.

2. Evaluations or treatment of children/parents required solely by service staff for group care placement, adoptive placement or implementation of a permanent plan are not medically related and do not require approval by the medical consultant. Provision of these services is dependent on availability of contract funds, and constrained within established funding limits.

a. Provision of these services is through contracts developed by the Region/CSO with individual psychologists/psychiatrists.

b. The service worker shall submit a request for each individual in need of a psychiatric/psychological service through established CSO and regional procedures and include:

(1) The reason the evaluation is needed, i.e., to determine proper placement of the child, evaluate parent's functioning for returning the child, complete a permanent plan, etc.

(2) The alternatives that have been explored prior to the request, including services available through the categorically eligible medical program, if appropriate, i.e., medical coupons, mental health centers, family counseling, etc.

(3) The consequences that may result if the request is denied.

c. A copy of the approval for psychological/psychiatric services shall be filed in the service record.

d. After receipt of the approval, the service worker will authorize service on a DSHS 14-154(X) using SSPS code 3432. (Also see Chapter 04.) Payment will be generated per CSO forms and procedures, and processed on an A-19, Invoice Voucher.

e. In all requests to vendors for consultation, examinations, or other communications about the child, the following statement will be included, "All information about (child's name) is confidential and not to be released without the signed consent of the Department of Social and Health Services."

F. Children in placement: CSO responsibilities, related to purchase of clothing and personal incidentals.

1. Purchase of initial supply.

a. The CSO may purchase a supply of clothing or personal incidentals for children during the initial 90-day placement period when all of the following conditions exist.

(1) Child does not have adequate clothing/incidentals.

(2) Clothing was not purchased while the child was in receiving/foster home care.

(3) The parent cannot or will not provide for the child's clothing needs.

b. The initial clothing purchase will not exceed $100 except with regional office approval.

2. The service worker shall utilize SSPS Code 3425 to authorize the purchase of clothing at the time of initial placement.

3. Replacement Supply.

Clothing and personal incidentals will be provided by the group care provider for children in its facility on an as needed basis.

G. Children in placement: CSO responsibilities related to transportation and associated expenses.

1. Instate transportation.

a. Upon <u>prior approval</u> of the CSO, agencies or vendors shall be reimbursed for transportation expenses incurred on behalf of children.

b. Whenever agencies or vendors request reimbursement for transportation expenses to be incurred on behalf of a child, the CSO will approach the child's parents to determine whether they are willing and capable of covering all or part of the anticipated expenses.

c. Reimbursement for transportation can be approved by the CSO for the following situations:

(1) Children requiring placement out of county.

(2) Group care placement has failed, return of the children is necessary.

(3) Return of runaways to a group care facility.

(4) Children are required to appear at a court hearing.

(5) Children require medical services.

(6) Children require educational services.

d. Foster care funds shall be utilized to pay expenses approved at the CSO level.

e. The service worker shall use SSPS Code 3433 to authorize transportation expenses (also see Chapter 04).

f. The arrangement shall be recorded in the children's service record.

2. Out-of-state transportation.

a. Upon approval of the CSO, agencies or vendors shall be reimbursed for transportation expenses incurred on behalf of children.

b. Whenever agencies or vendors request reimbursement for transportation expenses to be incurred on behalf of a child, the CSO will approach the child's parents to determine whether they are willing and capable of covering all or part of the anticipated expenses.

c. Reimbursement for transportation can be approved by the CSO for the following situations:

(1) Children requiring placement out-of-state.

(2) Out-of-state group care placement has failed, return of children is necessary.

(3) Return of runaways back to the state of Washington.

(4) Children required to attend a court hearing out-of-state.

d. Upon prior approval of the CSO, DSHS escort services may be provided.

e. Details of the arrangement shall be recorded in the children's service record.

f. Foster care funds shall be utilized to pay expenses approved at the CSO level.

g. The service worker shall use SSPS Code 3434 to authorize transportation expenses (also see Chapter 04).

34.34 Post-Placement Services

A. Postplacement services shall be provided by the CSOs to children and families reunited after termination from group care in order to stabilize and prevent additional out-of-home placement.

B. Postplacement services can be provided for up to six months without supervisory approval.

C. Children and families requiring postplacement services beyond six months require supervisory approval.

D. The service worker shall utilize SSPS code 3453 to authorize post-placement services.

34.35 Placement of American Indian Children in Group Care

A. Cases shall be referred to the Indian Child Welfare Advisory Committee (ICWAC) when the parent(s) or court has given written permission. Private agencies will consult with the local ICWAC when developing service plans for American Indian children. The CSO shall notify and request consultation from Indian consultants when the local ICWAC is denied the review process by the parent(s), guardian or court of jurisdiction. (See WAC 388-70-610 and Manual G, Chapter 01.04, American Indian Policy Statement.) The Office of Indian Affairs will be available for consultation.

B. When the decision is made to place an American Indian child in group care, first consideration should be given to group facilities which will maintain the child's cultural identity. (See Manual G, 23.38 for voluntary/involuntary placement procedures for Indian children.)

For example, the Muckleshoot and Puyallup American Indian Tribes both offer group care programs that specifically focus on serving the American Indian child. Both these programs have contracts with the department.

C. For each unenrolled American Indian child who will be in care for more than thirty (30) days, including those for whom adoption is planned, see Chapter 32.33 for completion of DSHS 4-220(X), Family Ancestry Chart, and DSHS 15-128(X), Verification of American Indian Status, Foster Care and Adoptive Applicant.

34.36 Abuse Incidents in Group Care (see Chapter 26.33 C. and D.)

A. A complaint alleging abuse or neglect by group care facility staff must be brought to the attention of a Child Protective Services (CPS) worker and the regional licensing staff. CPS staff have primary responsibility for the investigation and ongoing services phases of the case related to CPS concerns.

B. The CSO service worker responsible for supervising child's placement shall immediately notify the child's parents whenever an allegation is made that the child has been abused or neglected.

C. The CSO service worker responsible for supervising the child's placement shall inform the child's parents of the CPS investigation outcome.

D. Additional placements in the group home shall be suspended pending the outcome of the CPS investigation.

E. The State Office group care program manager shall be verbally notified by the Regional Office within 24 hours when there is an allegation made that a child has been abused or neglected in group care. Within 72 hours, the Region shall submit written notification to the State Office group care program manager.

   The Regional Office in whose area the group care facility is located will be responsible to notify other regions of the suspension of placement.

F. Children shall be removed from a group care facility in which there has been a substantiated complaint until/unless the staff responsible has been discharged and procedures implemented to guard against future recurrence (WAC 388-73-030).

G. The Regional Office shall immediately notify the state office group care program manager in writing regarding the outcome of the CPS investigation. The Regional Office in whose area the group care facility is located will be responsible to notify other regions regarding the outcome of the CPS investigation.

34.60 INTERFACE WITH OTHER DSHS SERVICES

A. The service worker may wish to confer/coordinate with:

   1. Financial services to assist parent(s) guardian(s) when there is a need to determine if the family would have been eligible for AFDC in the month the child is/was placed in care.

2. Foster care services for placement of children from foster care to group placement when behavior as rated on DSHS 10-145(X), Group Care Assessment and Individual Service Plan (ISP), indicates justification and the child's needs were not met in foster home placement; or a child who has been in group care can benefit from placement into a foster care situation.

3. Family reconciliation services when a child in conflict with his/her family is in need of out-of-home placement.

4. Juvenile parole services when a child on parole is in need of group care placement.

5. Adoption services for placement of the legally free child.

B. Referrals will be made to Office of Support Enforcement by sending them a copy of the DSHS 14-05(X) and any court order for any child placed in group/foster care for whom funds are expended.

34.70 INTERFACE WITH NON-DSHS SERVICES

The CSO service worker may wish to encourage group care providers to utilize community resources in providing services to children and families.

34.80 REQUIRED FORMS AND INSTRUCTIONS

A. See Chapter 99, Forms, for instructions on these generic forms:

DSHS 2-305(X)	Service Episode Record (10/78)
DSHS 2-306(X)	Communication/Referral (Rev. 9/78)
DSHS 2-306A(X)	Communication/Referral page 2 (Rev. 9/78)
DSHS 4-220(X)	Family Ancestry Chart (10/70)
DSHS 5-10(X)	Policy Exception Request (Rev. 3/78)
DSHS 9-04(X)	Placement Authorization and Acknowledgement (Rev. 7/78)
DSHS 10-145(X)	Group Care Assessment and Individual Service Plan (ISP) (8/81)
DSHS 10-145A(X)	Supplemental Form to DSHS 10-145/10-146 (10/81)
DSHS 10-146(X)	Group Care Quarterly Report and Individual Service Plan (ISP) (8/81)
DSHS 14-12(X)	Authorization to Release Information (Rev. 3/78)
DSHS 14-139(X)	Social Services Application (Rev. 12/79)
DSHS 15-128(X)	Verification of American Indian Status, Foster Care and Adoptive Applicant (5/79)

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: Holders of DCFS Manual

Notice No.: T-2
Issued: July 1, 1984

FROM: Health and Rehabilitative Services
Gerald E. Thomas, Asst. Secretary

FOR INFORMATION CALL:
753-0247 or SCAN 234-0247

IF NOT DELIVERABLE, RETURN TO: MANUAL PRODUCTION UNIT, MS OB-16

SUBJECT: MAINTENANCE PAYMENT FUNDING SOURCE ELIGIBILITY FOR CHILDREN IN FOSTER CARE

DSHS 14-140(X), Source Funds Application and Face Sheet for Children in Foster Care

DSHS 14-226(X), Funding Source Eligibility Determination Related to Foster Care,

and

DSHS 15-192(X), Child Placement and Legal History

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-2 was entered.

The following procedures supersede sections 34.32 H. and 34.60 B. of Chapter 34.

A. BACKGROUND

Recent federal audits have found high error rates in Washington's use of AFDC-FC and FEA funds for children in foster care.

New procedures and forms have been developed and placed in DCFS Manual, Chapter 33, to attempt to correct this problem.

B. ACTION REQUIRED

Effective upon receipt, utilize procedures in DCFS Manual, Chapter 33, for determining maintenance funding source eligibility for ALL children placed into an out-of-home placement.

CHAPTER 34

CHILD GROUP CARE

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SEE CHAPTER 99 FOR G.C. FORMS & INSTRUCTIONS

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

DCFS Manual - Revision 05 (Issued 05/85)

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Telephone inquiries regarding information contained in this manual revision should be directed to the Division of Children and Family Services at (206) 753-4965 or SCAN 234-4965. Written inquiries should be directed to the Division of Children and Family Services, MS OB-41C.

DCFS Manual - Revision 05 contains 18 sheets of paper.

REMOVE	INSERT
G-119, G-133, G-141, T-2	----------
Chapter 34, Issued 07/84 Entire Chapter	Chapter 34, Rev. 05, 05/85 Entire Chapter

On Revision Control Sheet, note date Revision 05 was entered.

CHAPTER 34 - CHILD GROUP CARE

A. Chapter 34 is being completely rewritten and revised. The chapter title has been shortened to "Child Group Care." The focus of the chapter is being changed to emphasize the need for DCFS to take a more active role in planning for and monitoring of youth in group care. DCFS is defined as responsible to ensure that the child, parents, and group care staff are involved in the planning and decision making process for youth in group care. The focus of group care placement is more specifically described as preparing the youth (and family) for the child's return to a community living situation in the shortest possible time through the use of time limited, goal directed planning.

B. Summary of Substantive Changes

A Centralized Coordinated Intake process is added to ensure children are placed in a facility that both meets the child's needs and is as close as possible to the child's home. Roles, responsibilities, and procedures are described for a center-based group care coordinator and facility specific case monitor.

34.10 POLICY

34.11 Purpose of Service

Change of focus to emphasize increased involvement between DCFS staff, child, parent, and group care staff to provide goal directed time limited services to prepare youth to return to a family living situation.

34.12 Service Description

Service focus changed to include increased emphasis on involvement of child and parent in assessment and placement process. DCFS staff have expanded responsibility to monitor and supervise placements and to be involved in mutual decision making with the child, family, and group care staff.

Two new roles are defined: Group Care Coordinators will have authority for facility selection and responsibility for identifying unmet group care needs. Case monitors will serve as an extension of the DCFS caseworker by monitoring the case of all children placed at a particular facility.

Both case specific and centerwide waiver approval authority is given.

34.13 General Policies

General placement considerations identified in Chapter 32 (Foster Care) are identified and emphasize the policy of maintaining youth in the least restrictive/most family-like atmosphere available and appropriate.

The increased responsibility of DCFS to supervise and monitor the placement and to involve the child and family in the placement and decision making process is identified. Policies relating to the group care coordinator and the case monitor are included.

34.14 Priorities

DCFS responsibility for assessment, placement, supervision, and maintaining placements of youth in group care is specified. The requirement for the DCFS worker to visit youth, parents, and group care staff quarterly is identified. The need to begin to develop resources for youth and families as early in the placement process as possible is specified. Development of Post-Placement Service Plans for youth ready to leave a group care facility is identified as a priority.

34.15 Eligibility

No significant changes.

34.16 Payment Rates

Specific payment data deleted. The SSPS provider file is referenced as the source to obtain payment rate information for regularly contracted agencies. Any payments that deviate from the contracted rate for an agency must be approved by the program manager.

34.20 PROGRAM STANDARDS

34.21 Program Expectations/Response Times

The requirement for quarterly face-to-face conferences by the case monitor or caseworker with the parent, the child, and group care staff is identified.

A monthly monitoring visit by the case monitor is outlined.

34.22 Appropriate Program/Service Outcome

The appropriate outcome of group care is to prepare youth to live in a less restrictive setting in the shortest time possible.

34.30 PROCEDURES

34.31 Intake and Assessment

The intake process has been changed to require more involvement with the youth and parent(s). The new assessment and referral forms are identified. Criteria for placing youth in care are discussed. A procedure is described for placement of a youth who could be maintained in foster care but for whom no foster home is available.

34.32 Procedure for Approval to Place and Selection of Group Care Facility

Approval for placement can only be given by the DCFS Administrator/designee.

Procedures for DCFS caseworkers and group care coordinator involvement in selection of a group care facility are described. The DSHS 10-166(X), Group Care Screening/Approval, form and the DSHS 10-166A(X), Group Care Social Summary, referral forms replace the DSHS 10-145(X) as the group care assessment/referral document. Group care placement considerations and activities including involvement of the child and parent in the assessment process and placement in an adequate facility that is closest to the child's home are described.

34.33 Preplacement Procedures

Describes a new requirement for a preplacement conference between the child, parent, group care staff, and DCFS caseworker to discuss the purpose and goals of placement and the responsibilitiies of each individual (including group home staff, parent, case monitor, and DCFS caseworker) for achieving the placement goals.

34.34 Placement Procedures

Activities related to actual placement of the youth are described. Caseworker's effort to arrange a preplacement physical must be documented. A procedure is described to allow the DCFS caseworker to delegate to the group homes the authority to consent to emergency medical care. The role of the group care coordinator is described. Services for children eligible for services from Developmental Disabilities and Division of Juvenile Rehabilitation (e.g., CRPs) are described.

34.35 Services to Children in Group Care Placement

The role of DCFS in providing supervision and monitoring is expanded to include at least quarterly contact between the case monitor or the DCFS caseworker and (1) the child, (2) the parent(s), and (3) the group care staff. In addition, a quarterly conference with the child, parent(s), group care staff, by the case monitor or DCFS caseworker is required to review the progress toward achieving the placement goals.

Contacts/conferences with the child and the facility will always be by the case monitor. Parental contacts/conferences will be done by either the case monitor or the case worker depending on where the family lives.

The quarterly conference will be summarized on the new form DSHS 10-167A(X). The current group care quarterly report form DSHS 10-146(X) is replaced with DSHS 10-167(X), Group Care Quarterly Report, form. The DCFS worker and supervisor are required to review placements of children not making progress in a particular program.

34.36 Group Care Hard to Place Plans

Changes in the HTP procedure include:

1. The new group care forms DSHS 10-166(X) and DSHS 10-166A(X) must accompany a memo describing the Hard to Place Plan and requested services.

2. Requests or extensions requiring contract amendments must be submitted four weeks prior to implementation of the requested service. The SSPS code of 3461 for Hard to Place Plans will only be utilized when authorized in writing by the state office.

34.37 Post Placement Services

Post Placement Service Plans are required for each youth leaving group care placement and will include a description of the services to be provided to the child and family and will identify the individual responsible for providing the service. Prior to a youth's placement with a noncustodial relative, a police check of the relative must be completed. Notification of the Adoption Support Program manager is required when a youth eligible for adoption support leaves a group care facility.

34.40 FUNDING CATEGORIES, PAYMENT RATES, AND REIMBURSEMENTS

Condenses information regarding funding and payment authorization and rate. Other manual sections referenced when possible. Requires DCFS caseworker to specify purpose of a bed hold by a group home for youth who have run away.

34.50 LEGAL AUTHORIZATION

No substantive change from pervious requirements.

34.60 ABUSE INCIDENTS IN GROUP CARE

A new procedure is described to ensure coordination of services (CPS investigation, licensing review, stop placement action, service to youth) while a child protective service complaint or a licensing violation is being investigated, including the need to develop, implement, and monitor corrective action.

34.80 COORDINATION AND ADMINISTRATIVE ACTIVITIES

Administrative responsibility to coordinate services for youth in group care will be accomplished at lowest level possible. The DCFS Administrator is responsible to monitor and manage the number of placements from their center. The DCFS Administrator will work with the program manager to identify and develop group care resources within their centers.

The case monitor is responsible to visit a facility on a monthly basis to assess the facility's overall functioning.

CHAPTER 34

GROUP CARE

34.00 PROGRAM AUTHORITY

Federal: 45 CFR 23.110

State: Chapter 74.15 RCW; RCW 74.08.044; RCW 74.13.020; and RCW 74.13.031

34.10 POLICY

34.11 Purpose of Service

The purpose of group care is to provide time-limited, goal-directed, residential placement for children who cannot be maintained in a less restrictive environment. Group care provides a residential setting and professional services to the child and family (natural, adoptive, foster) to prepare the child to return to a less-restrictive setting in a timely manner.

The preventive and placement services of the CPS, FRS, and foster care systems must be utilized whenever possible to meet the needs of children and families prior to placement of a child in group care.

34.12 Service Description

A. Services provided by DCFS staff:

1. Thorough assessment of child and family functioning and the need for group care services.

2. Close cooperation and mutual decision-making between DCFS caseworkers, case monitors, group care staff, child, and parents.

3. Placement of children in residential living situations.

4. Planning and coordination of service for the child (and the family) to minimize the length of the child's placement.

5. Monitoring and evaluating group care placements and family functioning to ensure services are appropriate and that the child and parents are prepared for the child's return to his parental home or a community home in a timely manner.

6. Post-placement planning and resource development for children in group care.

B. Contracted group care agencies provide the following services:

1. A group living situation for children;

2. Child care/supervision provided by professional child care staff;

3. Professional services to children and parents to prepare the child to return to a family living situation.

C. Centralized Coordinated Intake

1. Goals

A group care coordinator and the case monitor, along with the DCFS caseworker, will be responsible for meeting the following goals:

a. Ensure children will be placed in close proximity to their home communities and in facilities having both program and physical capability to adequately meet their needs.

b. Ensuring proper monitoring of children in group care.

2. Group Care Coordinator Roles and Responsibilities

The group care coordinator has a pivotal role in the implementation and management of the group care program at the field level. The group care coordinator is expected to develop expertise regarding the capability and performance level of group care providers within the region. Through management of placements the group care coordinator will also identify unmet service needs.

Specific resposibilities of the group care coordinator include:

a. Approving facility selection for all youth placed in care.

b. Aproving need to place a child out of region.

c. Liaison work with group care coordinators in other regions.

d. Monitoring group care facilities for contract compliance may be done in conjunction/consultation with state office program manager and/or regional licensor (see Section 34.80).

e. Providing technical assistance to group care providers in program development issues which may be done in conjunction/consultation with state office program manager (see Section 34.80).

f. Management of placement lid (see Section 34.80).

3. Case Monitor Roles and Responsibilities

a. The case monitor shall perform case monitoring function for all children within a facility program assigned to them. He/she may in some centers and/or for some children be the same individual as the caseworker.

b. Specifically, the responsibilities of the case monitor include: Attending quarterly conferences and completing quarterly conference reports and notifying assigned caseworkers on children's needs.

c. Visiting each facility assigned to them on a monthly basis. These monitoring visits may be made in conjunction with an ISP/ISP update conference.

The monitoring visit shall include:

i. A tour of the facility to obtain a general impression as to its cleanliness, orderliness, and freedom from hazardous conditions.

ii. Interviews with designated facility staff in order to obtain staff perception of program functioning.

iii. Individual time with each child in care so the child has an opportunity to develop a relationship and to communicate with the designed monitor. The assigned monitor will ensure each child has the monitor's card with name and phone number.

iv. Making notes in the facility program file regarding observation of their visit. Situations indicating a need for more indepth monitoring or consultation shall be referred to the group care coordinator (see Section 34.80).

4. DCFS Caseworker Roles and Responsibilities

The DCFS caseworker continues to be responsible for the overall case coordinator and planning including:

a. Assessing preplacement needs of child and family.

b. Evaluating the need for group care placement.

c. Identifying a preferred group home.

d. Permanency planning, and

e. Arranging any special services or equipment.

D. Waivers

Two types of waivers to policies and/or procedures related to group care case coordination, quarterly reports, and monitoring are recognized:

1. Case specific waivers may be granted by DCFS Administrators when circumstances warrant. Alternatives to meet the intent of the procedure must be specific in the ISP to ensure the ISP is followed and updated timely.

2. General (noncase specific) waivers must be approved by the DCFS Director.

34.13 General Policies Related to this Service

A. In delivering group care services, the following basic policies regarding children and families (outlined in detail in Chapter 32, Section 32.13) will be followed:

1. Preventive/reunification services based on thorough assessment of the child/family's situation.

2. Development of services based on the long-range plan for the child/family.

3. Preservation of family relationships including consideration of relative placement.

4. Recognition of the child's need for a permanent family at the earliest possible date.

5. Consideration of a child's previous history when developing an individual service plan.

6. Selection/development of a placement resource which will provide the serviced needed by the child.

7. Time-limited, goal-directed case plans that routinely involve the child/parent/guardian.

8. Services provided within the context of a parent/agency agreement (individual service plan).

B. The following policies are specific to group care services:

1. A child will be placed in a group care facility only when that child's needs cannot be met in a less restrictive setting.

2. All group care placement selections are made by the group care coordinator. This helps ensure the child is placed closest to his/her home in an appropriate facility and that appropriate statistical and program data will be gathered at an identified point in the system.

3. The child and family have the need and right to know the legal and social reasons the child is placed in group care; the plan for the child while in group placement, and the plan for the child to leave group care.

4. The child and family will be involved in the decision regarding placement.

5. The DCFS caseworker is responsible for overall supervision of the placement and developing the plan for the child to leave group care and ensuring services specified in RCW 13.30 and 13.34 are provided including:

   a. Ensuring that services are offered to the parents to enable them to satisfactorily provide a home for the child or to resolve the parent/child conflict;

   b. Ensuring that department's efforts are directed at reuniting the family whenever possible.

   c. Ensuring that aggressive efforts are made to encourage parent-child contact unless such contact would be dangerous to the child.

   d. Ensuring that a child is placed in the closest proximity to his/her parental home as reasonably possible.

6. The case monitor, when he/she is different from the DCFS caseworker, is responsible for monitoring the child's placement, serving as an extension of the DCFS caseworker.

7. Group care services require close cooperation and coordination between group care coordinators, case monitors, DCFS caseworkers, group care staff, families, and children.

8. Group care placement is considered a temporary arrangement and limited to eighteen months except that voluntary placements are limited to three months.

34.14 Priorities Related to this Service

A. Service Priorities for Children and Families Requesting Group Care Placement:

1. Completion of a thorough assessment of child and family to evaluate need for out of home care to include documenting services offered or provided to support the family and prevent the need for foster or group care placement.

2. Developing and monitoring the Individual Service Plan (ISP) for the child and family.

3. Selection of the group care facility that can best meet the child and family's needs that is in closest proximity to the parental home.

B. Service Priorities for Children and Families when a Child is in Group Care Include:

1. Assisting families and children resolve dysfunctional patterns to prepare the family for the child's return and/or developing an alternative placement plan for the child.

2. Monthly visits by the case monitor to the group home that will include contact with all DCFS children in care.

3. Quarterly conferences in which child, parent, or the permanent placement resource and the group care provider participate.

4. Providing financial and medical authorization for children in group care facilities in a timely manner.

5. Obtaining legal authority for all children placed in group care.

6. Developing placement and supportive resources for children who cannot return to their parental home as early in the placement process as possible.

7. Developing post placement service plans for children prior to their leaving group care placement.

34.15 Eligibility

A. Service Eligibility

Children eligible for this service are those six through seventeen years of age without regard to income whose needs cannot be met in a less restrictive settting.

B. Maintenance Payment Eligibility

Payment is made only when the division's service staff has determined there is a need for group care and the condition(s) of WAC 388-70-013 are met.

The funding sources for children receiving group care services are AFDC-FC, refugee program, or state funds (see Chapter 33, to determine which funding source is appropriate).

C. Medical Eligibility/Services

Each child placed in group care is eligible for the "categorically needy" medical program. This medical program funds dental and medical services not available to the child through any private insurance. Medical eligibility and services are determined/provided as described in Section 32.51, 32.52, and 32.62).

D. Legal Eligibility

Placement of children in group care is contingent on the department having legal authority to place the child in care.

E. Eligibility of Youth Over Age 18

Youth who reach their 18th birthday while in care may continue in a group care placement in order to complete high school or its equivalent (see Section 32.35 H). Payments shall not extend beyond age 21. A youth 18 years of age or older cannot enter group care through an initial placement.

F. Post Placement Service Eligibility

All children in group care placement are eligible for post-placement group care services (see Section 34.37).

34.16 Payment Rates

A. The division's reimbursement rate for group care is established through formal contracts. The payment rate for individual group care facilities is available through the SSPS provider file.

B. Deviations from contracted rates require approval of the state office program manager and completion of contract amendments for approved services.

C. Payment rates for hard-to-place children are child and vendor unique and are reported using SSPS Code 3461. For information regarding development of hard-to-place plans and rates (see Section 34.36).

34.20 PROGRAM STANDARDS

34.21 Program Expectations/Response Times

A. The DCFS caseworker will initiate a client contact on all group care placement requests within one working day.

B. Within 30 days of the request the DCFS caseworker shall notify individuals requesting group care of the agency's decision.

C. At a minimum, a quarterly conference will occur between the case monitor and the child, the child's parent(s), and the group care staff to implement the ISP and evaluate the placement. The child's DCFS caseworker may attend this conference depending on staffing levels and budgeting constraints. Case specific waivers may be made to this requirement. See section 34.12 D.

D. Prior to placement of a child in group care, the initial plan for permanency for the child and steps necessary to achieve the plan will be identified. Progress toward achieving the plan for permanency must be reviewed quarterly.

E. Case monitors will visit each assigned group home program at least once per month to monitor each child's status and overall facility status. See section 34.12 C. 3. c.

34.22 Appropriate Program/Service Outcomes

The appropriate outcome for group care is to prepare children to live in a less restrictive setting in the shortest possible time.

34.30 SERVICE PROCEDURES

34.31 Group Care Intake and Assessment Procedures

A. Group Care Intake Screening and Approval Process

1. The screening/assessment process will include a face-to-face interview with the child and child's parents if available.

2. Group care will be considered for children for whom:

   a. The need for out-of-home placement has been determined in accordance with DCFS Manual, Section 32.32.

   b. Services to support the child in his/her own home have been offered and/or provided to prevent placement.

c. A less restrictive placement (e.g., relative, foster, or specialized foster placement) is not available or appropriate.

d. The placement goal is not solely the prevention of truant or delinquent behavior.

e. The purpose (outcome) of placement and the services to be provided to the child and the child's family are clearly stated, are arrived at through discussion with the child and the child's parent(s), and are documented on the DCFS 10-166(X), Group Care Screening/Approval form and DSHS 10-166A(X), Group Care Social Summary/Referral form.

f. The need for and purpose of group care placement will be specified on the group care screening/approval form DCFS 10-166(X). Except for DJR, Community Residential Placements (CRP), the DSHS 10-166(X) will be reviewed and approved by the DCFS Administrator or designee prior to placement.

g. The decision to place a child in group care is based on the professional judgment of the caseworker in consultation with the caseworker's supervisor and reflects the following:

(1) The child cannot be maintained in a less restrictive setting.

(2) The purpose of the placement is clearly specified and documented on the group care screening form DSHS 10-166(X).

(3) A child who could be maintained in a foster home (or other placement less restrictive than group care), but for whom no resource is available, can be placed in group care when:

(a) The placement plan for the child focuses on maintaining the child in care rather than changing the child's behavior.

(b) The individual(s) responsible to develop a placement resource is designated and the efforts to develop an appropriate placement for the child are documented monthly.

(4) The services to be delivered to the child and family are clearly identified.

B. Children Determined Inappropriate for Group Care Placement

1. Upon determining a group care request is inappropriate, the DCFS caseworker will notify the applicant of the department's final decision.

2. The DCFS caseworker will provide the applicant information on other appropriate department or community services available to the child and family.

3. To the extent possible, the DCFS caseworker will assist interested families in obtaining the appropriate services.

C. Group Care Intake and Preplacement Services are Authorized Using SSPS Code 3401

34.32 Procedure for Selection of Group Care Facility

A. Request for Approval to Place

1. Complete the DSHS 10-166(X) Group Care Screening - Approval form indicating:

   a. The degree of urgency of placement.

   b. The desired placement date.

   c. Any placement recommendation (location, specific facility, etc.) meeting the needs of the child and the family.

2. Route one copy of the DSHS 10-166(X) to the DCFS Administrator/-designee for approval to place. Keep original in the case record.

3. If approval is given, route 4 copies of the DSHS 10-166(X) and 4 copies of the DSHS 10-166A(X) Group Care Social Summary/Referral form to the group care coordinator for facility selection.

4. If approval is not given, reason(s) will be indicated on the DSHS 10-166(X) and a copy will be returned to the requesting caseworker.

B. Facility Selection

1. The group care coordinator will determine if an in-region placement is available, sending copies of the screening form if appropriate and social summary to in-region facilities able to meet the child's needs.

2. If it appears no in-region placement is available, the group care coordinator will contact coordinators in other centers to explore availability of an out-of-region placement. At least two copies of the completed group care screening form, if appropriate, and group care social service referral form will be sent to out of region group care coordinators for placement consideration. These can then be used by the coordinator for referral to facilities within their region.

3. If it appears no contracted program is available within the state for the child, the group care coordinator will immediately contact (by telephone if necessary) the state office program manager in order to:

   a. Explore interventions at headquarters level with other DSHS programs and/or with the provider community to determine if a program can be developed for the child within state.

   b. Receive technical assistance and consultation on out-of-state providers' capability and performance level.

   c. Receive, if necessary, the approval to explore out-of-state placement.

4. Once the group care coordinator has made a referral to the group home, the group home may contact the caseworker <u>or</u> the coordinator to discuss child specific issues. If a group care provider agrees to accept a child for placement, details of placement date and date for completion of the ISP conference will be worked out by the caseworker and provider. However, the ISP conference must be completed within one week of actual placement.

5. The facility should notify the coordinator in their region of their decision to accept or not accept a child. If a facility elects not to accept a child, the coordinator will then notify the caseworker, or if appropriate, the coordinator for the referring region.

6. If the coordinator arranges for a facility to place a child on their waiting list, the coordinator should advise the facility if the plan changes for the child.

7. Caseworkers are responsible to notify coordinators of any changes in the child/families situation that would modify the nature of the original placement referral.

34.33 Preplacement Procedures and the Development of the ISP

A. Preplacement Conference

When a facility has been identified as willing to consider the child for their program, the DCFS caseworker will coordinate a preplacement conference/visit between the child, family, case monitor, if appropriate, and facility staff.

The ISP (DCFS 10-166B(X)) should either be completed at this conference or at the actual time of placement. However, it must be completed within one week of the actual placement. Important aspects of the conferences, in addition to the completion of the ISP include establishing:

1. The involvement and responsibility of the child, child's parents, DCFS caseworker, the case monitor, and facility staff;

2. The initial outcome (permanent planning) goal;

3. The appropriateness of placement and placement date.

4. The date for the quarterly conference with the child, family, and group care staff.

B. Completion of the Group Care ISP (DSHS 10-166B(X))

1. The ISP is completed to ensure the child, parent, group care staff, and caseworker have participated in the identification of placement goals, service needs, and identifies the individual responsibilities related to these goals. It is one of the most important documents related to the placement because it specifies what change needs to take place in order to allow placement in a less restrictive setting. The form must:

   a. Specify goals that are related to placing the child in a less restrictive placement,

   b. Show responsibilities for all involved parties,

   c. Show permanancy planning goal,

   d. Show anticipated length of group care,

   e. Show the date of the Quarterly Conference,

f. Be signed by all parties. The absence of a party or unwillingness of a party to sign must be explained. The anticipated effect on the case plan of the individual unable or unwilling to sign must be described.

2. The DCFS case worker has the lead responsibility for initial ISP completion. The case monitor should be present at the ISP conference in order to meet the child and family and to clarify their role and responsibilities in the group care monitoring process.

C. Placement Authorization and Court Activity

All children entering group care must either have an appropriate court order authorizing placement designating the department as the supervising agency, or there must be a signed parental consent (see DCFS Manual, Section 34.50).

D. For a child eligible for adoption support services, the DCFS caseworker will forward a copy of the DSHS 10-166A to the adoption support program manager.

34.34 Placement Procedures

A. The DCFS caseworker will provide or coordinate transportation for the child to the facility.

B. The DCFS caseworker will initiate payment to the facility within three days of placement.

C. The case monitor will be identified (if not done previously) and will make contact with the facility within three days of placement.

D. Placement Responsibility Related to Medical Issues

1. The DCFS caseworker will ensure the child has a preplacement physical within ten days of placement. If the group care facility arranges the physical, their agreement to do so will be noted in the child's record;

2. The service worker will ensure the child is issued medical coupons within three days of placement;

3. Medical coverage for children placed in group care shall be made in accordance with the guidelines provided in DCFS Manual, Section 32.62.

4. The DCFS caseworker will ensure the group care agency accepting a child for placement is provided medical (history) information regarding the child as outlined in the DCFS Manual, Section 32.51 (I).

5. Consent for emergency medical care may be provided by group care agencies for a child in their care when:

   a. The child is in the temporary custody of the division;

   OR

   b. The child's parents have signed a Voluntary Consent To Place (DSHS 9-05) form authorizing DCFS to provide consent to emergency medical for their child.

   AND

   c. The group home has written permission from DCFS authorizing them to consent to EMERGENCY medical treatment.

6. Consent for planned nonemergent medical treatment:

   a. The group care agency will contact the child's parents to discuss the proposed treatment and obtain written consent for treatment from the parents.

   b. When the group care staff cannot contact a child's parents regarding planned medical treatment, they will contact the case monitor.

7. The group care agency will notify the case monitor and the child's parents of all major injuries and illnesses.

8. Psychiatric/psychological services for children in group care placement may be submitted as group care hard-to-place plans (see DCFS Manual, Section 34.36).

D. Referral/Placement Procedures for Developmentally Disabled Children

1. The procedure of referral/coordination of placement planning of developmentally disabled children is described in DCFS Manual, Section 32.33(F)(2).

2. The placement of children eligible for services through the Division of Developmental Disabilities but placed in DCFS funded group care is supervised by the DCFS caseworker. However, DDD case managers remain responsible for meeting those service needs specific to the child's disability.

E. DJR Group Care Placement Request

Community Residential Placements (CRP)

1. CRP's are placements for adjudicated delinquent youth who are completing their sentence in a community-based group care facility (RCW 13.40.020(4)). Monitoring of DJR's utilization of these placements is the responsibility of the DCFS program manager.

2. The DCFS caseworker will process all DJR CRP requests for which DCFS funding is requested. CRP placements can only be made in group care. They can not be made in family foster care.

3. Upon receipt of the following documents from DJR, the DCFS caseworker will authorize payment for these children:

   a. DSHS 14-140, Source of Funds Application and Face Sheet for Child in Placement.

   b. Copy of legal document ordering child into a juvenile institution.

   c. A cover memo from the DJR worker verifying the date of placement.

   d. A copy of the social summary provided to the group care agency.

5. The DCFS caseworker will document the provision of services for these children utilizing SSPS Code 3263.

6. State funds shall be utilized to support CRP placements.

7. Children who reach parole status while in a CRP placement must be reassessed for group care using the same process and criteria as for all other group care requests.

34.35 Services to Children in Group Care Placement

A. Supervising and Monitoring the Placement

1. The case monitor, with assistance from the DCFS caseworker, will:

   a. Ensure the safety, security, and physical needs of the youth are being met.

   b. Ensure the group care placement is meeting the needs of the child and preparing him/her for return to a less restrictive setting in the least possible time.

c. Ensure the need for continued group care is regularly assessed.

d. Ensure activities necessary to develop post-placement resources and services are being completed.

2. Supervision and Monitoring Activities

a. A monthly contact will occur between the case monitor and all children in group care program. The purpose of these contacts is to ensure the child's basic needs (physical, safety, emotional) are being adequately met, and as appropriate, to:

(1) Assess the child's adjustment in placement and his/her need for continued placement.

(2) Provide the child with current information regarding placement plans for him/her.

(3) Obtain and assess the child's description of his/her own functioning within the facility program.

(4) Assess the child's awareness of the reason for his/her continued placement and expectations regarding future placement (e.g., does the child know if she/she will return to his/her parental home, or when he/she can expect to leave the group care facility).

(5) Assess the child's perception of contacts (or lack of contacts) between him/her and the parent(s) (e.g., does the child feel the visits have helped prepare for his/her return home or does the child have concerns about a loss of contact with parent).

(6) Identify strengths and problems with the placement from the child's perspective.

(7) Assess whether the child's service needs are being met in current placement or if alternative placement or services are needed.

b. Quarterly face-to-face contacts are required between the case monitor and a representative of the group care agency to address the following child-specific issues:

(1) The services provided by the agency to prepare the child to return to a less restrictive environment (as expressed in the ISP and the worker's interview with the child and parent(s)).

(2) The contact (or lack of contact) between the child and family and efforts made by the facility staff and/or case worker to resolve the child-parent living situation.

(3) Review the placement and plan for permanency for the child to assess the continuing appropriateness of those goals in regard to the child and family's needs.

For facility monitoring responsibility, see Section 34.80.

c. A monthly face-to-face contact is encouraged and a quarterly face-to-face contact is required between the DCFS caseworker and the parent(s) of children in group care. The worker will discuss the following issues with the parent(s).

(1) The parent's assessment of the child's progress in the group care program (to include frequency and quality of visits between the child and parents).

(2) The parent's assessment of services they receive from the group care staff (identify strengths and problems).

(3) Parents' continuing commitment to originally identified plan for permanency (e.g., do parents continue to feel the child can return home or will they consider alternative placements - guardianship, adoption, foster care, relative).

(4) Additional tasks or services necessary to resolve the child/family's situation (e.g., increase or decrease in a visitation schedule, etc.).

Both case secific and general (noncase specific) waivers may be made to the requirements in 1. and 2. above. See section 34.12 D.

B. Quarterly Reports, Conferences, and ISP Review

1. Prior to the quarterly conference, the DCFS caseworker will ensure the Group Care Quarterly Report, DSHS 10-167(X) is received from the group care agency, and that a copy is sent to the case monitor, if the case monitor is different from the caseworker.

2. The DCFS caseworker is responsible to review and approve quarterly reports submitted by providers on the DSHS 167(X), Group Care Quarterly Report.

a. The DCFS caseworker will be responsible to ensure the DSHS 10-167(X) provides complete and descriptive information on the children's status.

b. Through the monitoring of the DSHS 10-167(X), the DCFS caseworker will ensure children with special education needs are receiving the required educational services.

c. The DCFS caseworker with supervisory approval has the authority to return any DSHS 10-167(X) not meeting the expectations of the division. If returned, the DSHS 10-167(X) will be attached to a letter outlining the caseworker's concerns and sent to the group care agency with a carbon copy to the DCFS Administrator.

d. Group homes are responsible for submitting copies of the DSHS 10-167(X) 5 working days prior to the quarterly conference. When providers regularly fail to submit DSHS 10-167(X) in a timely manner, no payment shall be made until the reports are received.

e. When providers consistently fail to submit timely quarterly reports and/or when they continually submit quarterly reports not meeting the expectations of the division, the DCFS Administrator should notify the state office group care program manager for technical assistance/consultation on the problem as a contract compliance issue.

3. A copy of the DSHS 10-167(X) is always to be maintained in the child's case record. The case monitor shall also maintain a copy of the DSHS 10-167(X) in the facility monitoring file.

4. The DCFS caseworker and the case monitor will monitor the group care providers through the quarterly contacts and review of the DSHS 10-167(X). They will ensure the group care staff are encouraging and assisting parents and siblings to make visitations in accordance with agreements specified in the Individual Service Plan (ISP).

   a. The parents shall participate in any modification of the visitation agreement:

      (1) Either through the scheduled quarterly conferences, or

      (2) Through due process of juvenile court when the child is legally dependent or in an ARP status and the parents refuse or cannot be involved in the quarterly conference.

b. Efforts made by the DCFS caseworker or case monitor to involve the children's parents with the placement should be carefully documented in the child's record.

c. Should contact with the parents be broken, the DCFS caseworker must ensure that efforts are made to locate the parents by DCFS or by the group care process. The efforts to locate the parents will be documented in the child's record.

d. The children's parents should be informed of changes in the medical condition or the whereabouts of the child (including planned moves), unless this information would endanger the child. Efforts to notify the child's parents of changes in the child's medical condition or whereabouts must be documented in the child's record.

5. a. A quarterly conference will be held by the case monitor with the child, parent(s), and group care staff to address:

(1) Progress or problems in achieving goals outlined in previous individual service plan (ISP).

(2) Review the need for continuing group care placement/services and the plan for permanency for the child.

(3) When continued group care placement is needed, update the ISP using form DSHS 10-167A(X).

b. Waivers on a case specific or centerwide basis may be made. See section 34.12 D.

6 ISP Update

The case monitor has lead responsibility for updating the ISP. Also, the case monitor for out-of-region placements will generally carry ongoing responsibility for representing DCFS at the quarterly conferences and will be responsible for completion of the quarterly conference summary.

7. The case monitor should attend all quarterly conferences for children placed in facilities the monitor is responsible. If the facility is in close proximity to the caseworker's official work station, the caseworker should also attend if workload and travel budget permits. In unusual circumstances as defined by the group care coordiator(s), the caseworker may be <u>required</u> to attend quarterly conferences.

Prior to the ISP conference, the case monitor will consult with the caseworker to discuss the quarterly report and the plan for updating the action plan. It is desirable that, if the caseworker is not attending the quarterly conference, arrangements be made for the caseworker to be available for telephone consultation during the conference.

8. Upon completion of the quarterly ISP conference, the case monitor shall send a copy of the quarterly conference report to the case worker for placement in the child's official case file. A copy will be retained for placement in the facility's program file.

9. Communication and Resolution of Problems

   a. In general, the primary point of contact for group care providers, relative to the needs of a child in care, will be the case monitor.

   b. Case monitors will notify the caseworker if the child's needs require actions by the caseworker. Examples would include such things as clothing, medical coupons, parental contact, discharge planning, etc.

   c. If the case monitors/caseworkers are unable to satisfactorily resolve areas of discrepancy or decisions around responsibility, the group care coordinator(s) shall be the arbitrator. Matters not resolved by the group care coordinator will be referred to the DCFS Administrator.

   d. When the department is funding the placement, the department has the final authority to determine the appropriateness of all treatment goals and case plans for children in group care.

   e. When agreement cannot be reached and with prior approval of the DCFS Administrotor, the DCFS caseworker has the authority to terminate the child's current placement and to request placement of him/her in an alternative group care facility or foster care placement.

10. When the identified outcome goal for a child is "return home" and the parent does not work toward that goal, the DCFS caseworker in consultation with his/her supervisor will develop an alternative goal for the child that reflects the needs of the child for continued out-of-home placement including short and long-term goals.

11. The plan for any child in group care placement who is identified by the case monitor or DCFS caseworker or through quarterly conference reports as not making progress in a facility will be reviewed by the DCFS caseworker and his/her supervisor. The review should include consultation with the group care coordinator for consideration of alternative services and/or placements for the child.

12. The decision to maintain the child in placement or return him/her home (foster home) is not based solely on the child's developmental, emotional, or social needs or the level of services required to maintain the child in the group care program. The decision to return a child home is based on the potential to maintain the child in his/her (or foster or adoptive) home.

13. Social services provided to children in group care placement will be authorized on the DSHS 14-154(X), Social Services Authorization, or DSHS 14-159, Change of Authorization, utilizing SSPS Code 3452.

C. Record Maintenance

1. Caseworkers will continue to be responsible for the child's DCFS service file.

2. Case monitors will maintain a working file for facilities for whom they perform case monitoring services. This file will be called the Facility Monitoring file. A running narrative of dates of site visits, observations, and actions taken will be part of the facility program file.

   Copies of the group care screening form, social summary, ISP, progress reports, and ISP conference reports shall also be placed in the Facility Monitoring file and be retained for one year following the child's discharge from the facility. These files will be used as one source of data for contract compliance/performance based monitoring.

D. Group Care Permanent Planning Service Description

1. All children are entitled to a permanent home and the opportunity to form stable, permanent attachments with a family. Casework planning and activities should be directed toward this goal at all times and begin as early in the placement as possible. The DCFS caseworker will develop the initial plans for all children prior to the child's placement. Planning for permanency is a process of focused casework efforts to resolve severe family conflicts.

2. Permanent plan outcome goals:

   a. Return home

   b. Placement with relatives

   c. Adoption or adoption with support

   d. Guardianship with relatives

   e. Guardianship with foster parent or other unrelated individuals

   f. Long-term foster family care with a written agreement in place for children 16-17 years of age (see DCFS Manual, Section 32.35).

3. DCFS Caseworker Responsibility Related to Permanent Planning

   a. The DCFS caseworker in cooperation with the parent(s) and child will define a tentative permanent planning outcome goal when completing the DSHS 10-166A prior to placement of a child in group care.

   b. The DCFS caseworker will assess in conjunction with the case monitor, group care provider, family, and child, the appropriateness of the permanency plan on a quarterly basis.

   c. All children, including those in group care who have been in out-of-home placement for six months or longer, will be registered for permanent planning. The DCFS caseworker will comply with the registration process described in Chapter 32.35 G (6).

34.36 Group Care Hard-To-Place Plans

A. Purpose and Eligibility of Services

1. Service plans for HTP children are intended for the small group of children whose needs are beyond the management and treatment capabilities of available group care resources.

2. The HTP procedure is to be used sparingly and only in those instances where the treatment needs of the child require specialized care. Proposed service plans submitted to the DCFS program manager are to clearly specify the purpose of service, the type of service, and cost of the service, and the relationship of the service to the desired outcome.

3. Plans for children placed in any out-of-state facility must be submitted for approval to the state office group care program manager prior to placement of the child.

4. Use of hard-to-place funds to maintain a child in a specified program (e.g., to provide a staff who will provide intensive supervision or control of a child) is not appropriate unless:

   a. The service worker can describe how the disruption of the current placement would be more damaging to a child than attempting an alternative placement; or

   b. The caseworker has documented that alternative resources for the child have been considered and are unavailable.

B. Hard-To-Place Request/Approval Procedure

HTP plans are initiated by the DCFS caseworker in consultation with the group care coordinator and case monitor. The plans will include:

1. A memo specifying the services requested, the purpose of the services, the plan to monitor the services, and an explanation of why the child requires the specified services to establish or maintain his/her placement.

2. Hard-to-place plans should be submitted to the caseworker four weeks prior to the initiation of services to allow for the implementation of contracts for the required services.

3. If the HTP request is for a child not placed in group care previously, the service worker will attach the DSHS 10-166A and DSHS 10-166B with the referral memo.

4. If the HTP request is for a child previously placed in group care, the service worker will submit the original ISP, social summary, and a recent group care quarterly report.

5. The HTP Request will be submitted by the DCFS caseworker to the DCFS Administrator or his/her designee for review and approval. The group care coordinator will review all HTP requests before DCFS Administrator/designee review. The purpose of this review is to ensure that the group home has the capability to implement the plan.

   Upon recommended approval by the DCFS Administrator, the hard-to-place case plan will be submitted to the division headquarters staff.

In an emergency, the DCFS Administrator or designee may telephone a hard-to-place request to the program manager. The DCFS Administrator or designee is responsible to follow up with a completed, written request. The State Office will consider and make a decision on any emergency hard-to-place request within twenty-four hours.

6. Hard-to-place case service plans will be reviewed by state office within two working days. The referring DCFS Administrator or designee will be contacted to discuss the plans, solicit additional information as needed, and to be provided reasons for approval/disapproval of the proposed plan.

7. An authorizing memo from the DCFS headquarters staff to the DCFS Administrator or designee will confirm the approval dates, outline supplemental information needed for the individual service contract, review dates, establish the rate of payment, and authorize use of SSPS Code 3461.

C. Contracts for Hard-To-Place Service Plans

All service plans for hard-to-place children involving group care placements require individual contracts or contract amendments that are negotiated by DCFS headquarters staff.

1. Individual contracts will be limited to a six-month period of service.

2. Individual contracts may be extended for additional periods of up to six months, based on recommendations from the DCFS Administrator or his/her designee to DCFS headquarters, including:

   a. A memo requesting extension of a hard-to-place contract should be submitted to DCFS headquarters. The memo should specify the additional services to be provided, the purpose of the services, and the expected duration of the service. A DSHS 10-167(X), Group Care Quarterly Report, should be attached. The request should be submitted four weeks prior to the expiration of the contract in order to allow time for the DCFS headquarters staff to execute a contract amendment covering the new period of service and to avoid the use of after-the-fact ratifications.

   b. Recommendations on changes to the contract statement of work for the new service periods, (e.g., shift in service emphasis, reduction of service, revised service plan, or revised funding requirements) should be specified.

3. All paper work necessary for executing individual contracts/ amendments for hard-to-place children will be processed by DCFS headquarters staff.

D. SSPS Coding for Hard-To-Place Plans

The total cost of hard-to-place plans in group care should be coded to SSPS Code 3461, Hard-to-Place Group Care. The code is to be used to include the cost of both the established rate of the current contract and the special rate, and should only be used when authorized in writing by the group care program manager.

E. Notification of Change in Hard-To-Place Plan

The DCFS Area Office will notify DCFS headquarters of any status change or termination from hard-to-place group care plan within two weeks of that change.

34.37 Post-Placement Services

A. Post-Placement Services Description

1. A group care post-placement service plan will be developed by the case monitor in conjunction with the DCFS caseworker for all children leaving group care. Since the caseworker will be responsible to carry out the plan, it is important that he/she is involved. The plan shall be developed prior to the child's discharge and will include input from the case monitor child, parent(s), and group care staff. The worker/agency responsible for providing the service will be identified.

2. Group care post-placement services may include, but are not limited to, the following activities:

   a. Continued counseling/support of the child and/or family by the group care provider.

   b. Visitation between the child and/or parents and the group care facility to allow for a gradual termination of relationships the child developed while in group care.

   c. Coordination and referral of the child and/or family to community support agencies.

   d. Monitoring of the family situation during the period of readjustment and continued monitoring if there is a serious conflict or risk of abuse or neglect.

e. Services to the family to assist them in developing their own support system (e.g., appropriate educational placement, finding respite care, developing recreation resources, counseling).

3. Notifying adoption support program manager of post placement needs/planning for children eligible for adoption support services.

4. Children leaving group care will be placed with noncustodial relatives only when the police/records check described in DCFS Manual, Section 6.37(B) is completed.

34.40 FUNDING CATEGORIES, PAYMENT RATES, AND REIMBURSEMENTS

A. Maintenance Funding Categories

1. The funding source for maintenance payments will be determined by completing DSHS 10-140(X) (see DCFS Manual, Chapter 33).

2. The funding sources for children in group care are the Refugee Program, AFDC-FC, or state funds. Every attempt shall be made to determine the correct eligibility for group care payment as defined in DCFS Manual, Section 33.15A, and explore all potential financial resources as defined in DCFS Manual, Section 32.61.

B. Payment Rates

1. Payment for Clothing Needs

a. The DCFS caseworker may authorize purchase of clothing within $100.00 limit for a child entering group care if the placement is within ninety days of the child entering the foster/receiving care system and the child has not utilized the $100 limit during the ninety-day period.

b. The DCFS caseworker shall utilize SSPS Code 3425 to authorize the purchase of clothing at the time of initial placement.

c. The DCFS administrator/designee can approve amounts above $100 during the initial 90-day period, and also can approve clothing requests of any amount throughout the group care placement. Such additional amounts are requested by the DCFS caseworker on DSHS 5-195(X), Additional Payment Request. Such requests, which exceed regular program standards should be carefully considered in relation to other possible resources.

d. Clothing and personal incidentals will be provided by the group care provider for children in its facility on an as needed basis.

2. Payment for Transportation Expenses

a. Upon prior approval of the DCFS caseworker, agencies or vendors may be reimbursed for transportation expenses incurred on behalf of children.

b. Whenever agencies or vendors request reimbursement for transportation expenses to be incurred on behalf of a child, the DCFS caseworker will approach the child's parents to determine whether they are willing and capable of covering all or part of the anticipated expenses.

Reimbursement for transportation will be approved for the following situations:

(1) The child requires placement out of county or out of state.

(2) Group care placement has failed, return of the child is necessary.

(3) Return of runaways to a group care facility.

(4) The child is required to appear at a court hearing.

(5) The child requires medical services.

(6) Child requires educational services.

(7) Upon prior approval of the DCFS Administrator or designee, escort services may be provided for transportation.

c. Foster care funds shall be utilized to pay transportation expenses.

d. The service worker shall use SSPS Code 3433 to authorize instate transportation expenses. SSPS code 3434 will be used to authorize out-of-state transportation.

e. The transportation arrangement shall be recorded in the child's service record.

f. Group care agencies will not be reimbursed for staff time necessary to provide transportation.

3. Payment for Children Receiving Adoption Support Services

When a child currently on the Adoption Support Program is placed in group care, the procedure will be the same as for any other child except:

a. The caseworker will provide the Adoption Support Program manager with copies of the group care screening/approval form and the initial ISP (DSHS 10-166 and DSHS 10-166B).

b. The caseworker will not make a referral to the Office of Support Enforcement.

4. Monitoring a Child's Income

The DCFS caseworker shall monitor the amount of the child's earnings through the quarterly review of the DSHS 10-166A(X).

a. All earned income of a child who is a part-time or a full-time student and not full-time employed is exempt per WAC 388-28-535(3).

b. Income of a child who is not a part-time or full-time student and employed 32 or more hours per week must be reported. The procedure to report a child's income is described in DCFS Manual, Section 33.

5. Payment for Children Temporarily Absent from Group Care

a. Planned Absences

Contingent on prior approval of the DCFS caseworker, the division will pay for a child's placement during a planned temporary absence from a facility. Payment by the division will be limited to a maximum of 15 days.

(1) Examples of planned absence from a facility include but are not limited to required hospitalizations and camp experiences, and visits home or to a foster home.

(2) Payment for more than 15 days' absence for children who are hospitalized or are in detention may be made with approval from the DCFS Administrator.

(3) Payment can be made for a child on a preplacement visit home only when the group care facility is actively involved with the child and/or family and is holding a bed in expectation the child could return to their program.

b. Runaways

The group care agency is required to provide verbal notification within 24 hours to the responsible center or area office and parent when it is discovered a child has run away. This should be followed by written notification within 72 hours.

Payment for placement during the time a child is a runaway may be authorized by the division for up to 15 days, providing the group home is holding a vacant bed for the child at the request of the case monitor who specified the length of bed hold and the purpose for holding bed.

6. Payment for Children Over the Age of 18

Young adults 18 to 21 years of age may continue in a group care placement if the child is attending, but has not finished high school or an alternate program leading to a high school or GED diploma (see Section 32.35 H).

a. The young adult is required to complete and sign the DSHS 15-173 "Foster Care Placement Consent: Continuation Beyond Age 18" form.

b. Payments may be continued until the date the high school program or equivalent is completed or the young adult has spent 18 consecutive months in group care, whichever comes first.

c. Such payments shall not extend beyond age 21.

d. Administrative reviews are encouraged for youth past the age of 18 as a means to ensure services are appropriate to the youth's needs.

Young adults who qualify for other maintenance programs, such as SSI, or are eligible for other placement programs, such as CCFs, adult family home care, etc., should be terminated from DCFS-funded group care and transferred to the adult service category on the month following the month of their 18th birthday.

34.50 LEGAL AUTHORIZATION

A. Placement Authorization and Court-Related Activity

1. All children entering group care must either have an appropriate court order authorizing placement and designating the department as the supervising agency, or there must be a signed parental

consent. An appropriate court order for the purpose of group care is limited to a determination of dependency, or a court approved Alternative Residential Placement.

2. For voluntary placements, the DCFS caseworker is responsible to obtain a signed DSHS 9-04(X), Placement Authorization and Acknowledgement, prior to placement. The division shall always have supervisory responsibility for these children.

3. A voluntary placement should normally be accepted only when the planned length of placement will not extend more than three months.

   a. Agreement with the natural parents regarding the duration of care shall be confirmed in a letter to the family and recorded in the child's record.

   b. The parents shall be advised that a petition for dependency or ARP may be filed if it is necessary for the placement to be extended beyond the agreed period of time.

   c. Voluntary placements are limited to a maximum period of three months (WAC 388-70-013(8)) unless an exception to policy has been granted (see DCFS Manual, Section 32.41).

   d. If an exception is appropriate, the DCFS Administrator or designee must ensure an Administrative Review in lieu of a court review is conducted in accordance with DCFS Manual, Section 32.42.

   e. If it appears voluntary placement will continue beyond three months and an exception is not appropriate, the DCFS caseworker shall, prior to the expiration of the three months:

      (1) Secure a dependency/shelter care order; or

      (2) File a petition for an alternative residential placement.

4. Prior to the placement, the DCFS caseworker will interpret to the parent(s) and child(ren) their legal rights and responsibilities (see DCFS Manual, Section 23 and Chapter 32, Section 32.31 C).

5. The DCFS caseworker will document involvement in any court-related activities by utilizing SSPS Code 3451.

34.60 ABUSE INCIDENTS IN GROUP CARE (see Chapter 26.33 C and D)

A. A complaint alleging abuse or neglect by group care agency staff must be brought to the attention of a Child Protective Services (CPS) worker and the DCFS Administrator within 24 hours of discovery of the incident.

B. Children should be removed from a group care facility in which the CPS investigation substantiates abuse or neglect has occurred until/unless the staff responsible for the abuse or neglect has been discharged and/or appropriate procedures implemented to guard against future recurrence (WAC 388-73-030). Prior to the completion of a CPS investigation, the DCFS Administrator may order the removal of youth from an agency in which CPS indicates the danger of the youth suffering further abuse or neglect is significant.

C. When notified of a CPS complaint concerning a group care facility in their region, the DCFS Administrator will designate an individual to take the lead responsibility to:

1. Clarify and coordinate the efforts of CPS and licensing staff in investigating complaints and involvement with the group care agency concerning the CPS and/or licensing issues.

2. Coordinate the efforts of licensing and CPS staff to make an initial determination regarding safety of children currently living in the group care agency.

3. Initiate an order to stop placement of children in a group care agency when:

   a. There is reasonable cause to believe that placement of an additional child(ren) in the facility would place that child at risk to suffer abuse or neglect.

   b. There is reasonable cause to believe that placing an additional child(ren) in a facility would place the youth already in the program in danger of suffering abuse or neglect.

4. Notify the group care agency director, group care coordinator, case monitor, other DCFS Administrators, and the CPS, licensing, and group care program managers of the decision to stop placement of children into group care facilities.

   Initial notification of the decision to stop placement into a facility should be made as soon as the decision is made. Written notice to the DCFS headquarters and DCFS Administrators of the decision to impose a stop placement action should be initiated within 72 hours of the decision.

5. Take immediate action to ensure children residing at the facility are not at risk of suffering abuse or neglect by:

   a. Working with the group care facility to enable children to remain at the facility by removing the staff or condition which led to the allegation for abuse or neglect, or

   b. Relocating the children to a safe environment.

6. Ensure appropriate placement plans are developed for children removed from group care facilities as a result of CPS or licensing investigation:

   a. Ensure efforts are made to prepare children who must be moved as a result of a CPS investigation.

   b. Notify other centers of children from their areas in need of relocation.

   c. Ensure temporary placement are found for children in need of emergency relocations.

   d. Provide the group care program manager with a summary of placements developed for the children removed from group care facilities when a complaint resulted in relocation of a child or children.

7. Prepare a written corrective action plan to address problems identified during an investigation. Corrective action plans will reflect the input and coordinated work of CPS, licensing, and group care staff and will:

   a. Identify the problem, the plan to correct the identified problem, and the plan to monitor the situation to ensure the corrective action plan is implemented.

   b. Provide recommendations to the Center Director regarding action when an agency fails to implement a corrective action plan.

8. Determine the appropriateness of lifting a stop placement order and notify other DCFS Administrators and the DCFS headquarters staff of decisions to remove stop placement action. A telephone notice should be given as soon after the decision as is reasonably possible. Written notice to all parties should be made within 72 hours.

D. The DCFS caseworker assigned to the child's shall immediately notify the child's parents when an allegation is made that the child has been abused or neglected.

34.70 PLACEMENT OF AMERICAN INDIAN CHILDREN IN GROUP CARE

A. Referral of American Indian Children

Cases shall be referred to the Indian Child Welfare Advisory Committee (ICWAC) when the parent(s) or court has given written permission. Private agencies will consult with the local ICWAC when developing service plans for American Indian children. The DCFS caseworker shall notify and request consultation from Indian consultants when the local ICWAC is denied the review process by the parent(s), guardian, or court of jurisdiction. (See WAC 388-70-610 and American Indian Policy Statement.) The Office of Indian Affairs will be available for consultation.

B. Consideration of Cultural Identity

1. When the decision is made to place an American Indian child in group care, first consideration should be given to group facilities which will maintain the child's cultural identity. (See Section 32.33 F 3 for voluntary/involuntary placement procedures for Indian children.)

2. For each unenrolled American Indian child who will be in care for more than thirty (30) days, including those for whom adoption is planned, see Chapter 32.33 F 3 for completion of DSHS 4-220(X), Family Ancestry Chart, and DSHS 15-128(X), Verification of American Indian Status, and Foster Care and Adoptive Application.

34.80 COORDINATION AND ADMINISTRATIVE ACTIVITIES

A. Interface with DCFS and DSHS Agencies

1. Coordination of services and resources available within the DCFS and DSHS systems will be utilized to meet the needs of families and children to support the family.

2. Coordination of services and resources in the DCFS and DSHS system will be accomplished at the lowest level reasonably possible.

B. Administrative Responsibilities

1. The DCFS Administrator will ensure the following functions are completed in their centers.

   a. Ensure efforts to monitor and manage placements are coordinated and if the number of placements will exceed the assigned placement level for the center, notify the program manager.

b. Ensure the number of youth in group care from the Center is reported to the DCFS group care program manager monthly.

c. Work in conjunction with the DCFS program manager to develop foster and group care services and resources to meet the needs of the Center's youth population.

2. Case monitors are responsible for monitoring the overall performance of their assigned group care programs. Monitoring activities shall include:

a. Monthly tours of the facility to:

i. Obtain a general impression of its cleanliness, orderliness, and freedom from hazardous conditions, and

ii. Interviews with designated facility staff in order to obtain staff perception of program functioning,

b. Making notes of the conditions of the facility and programs, and

c. Referring situations that indicate a need for more indepth monitoring or consultation to the group care coordinator.

34.99 REQUIRED FORMS AND INSTRUCTIONS

See Chapter 99, General Forms, for instructions on these forms:

DSHS 2-305(X)	Service Episode Record (10/78)
DSHS 2-306(X)	Communication/Referral (Rev. 9/78)
DSHS 2-306A(X)	Communication/Referral page 2 (Rev. 9/78)
DSHS 4-220(X)	Family Ancestry Chart (10/70)
DSHS 5-10(X)	Policy Exception Request (Rev. 3/78)
DSHS 9-04(X)	Placement Authorization and Acknowledgement (Rev. 7/78)
DSHS 10-166(X)	Group Care Screening/Approval Form
DSHS 10-166A(X)	Group Care Social Summary/Referral Form
DSHS 10-166B(X)	Initial Service Plan
DSHS 10-167(X)	Group Care Quarterly Report Form
DSHS 10-167A(A)	Quarterly Conference Summary, ISP Update, and Placement Evaluation
DSHS 14-12(X)	Authorization to Release Information (Rev. 3/78)
DSHS 14-140(X)	Source of Funds Application and Face Sheet for Child in Placement
DSHS 14-154(X)	Social Services Authorization (Rev. 9/80)
DSHS 14-159	Change of Service Authorization (Rev. 1/81)
DSHS 15-128(X)	Verification of American Indian Status, Foster Care and Adoptive Applicant (5/79)

5. OTHER UNIQUE SERVICES (Goal # ____)
(At actual cost)

From ___/___/___ to ___/___/___

Total Cost $_____

Describe/identify service: _____

Hours per month _____ |OR| Times per month _____

Dollars per hour $ _____ Dollars per time $_____

C. BUDGET SUMMARY

1. Standard group care program monthly rate for client. $ _____

2. Exceptional cost group care cost per month. $ _____

3. Exceptional Cost plan to extend from ___/___/___ to ___/___/___.
(Not to begin prior to date of Admin. approval)

4. Total cost of exceptional-cost plan for ____ months (6 months max) $ _____
(Do not include standard rate)

If facility is in different center from center of origin:

_____ agreed to placement and exceptional cost plan on ___/___/___
(Name of Group Care Coordinator in receiving center)

E. DCFS MANAGEMENT REVIEW

I have reviewed and approved the above Exceptional Cost Group Care Budget.

_____ ___/___/___ (Date)
DCFS Caseworker and/or Case Monitor Signature

_____ ___/___/___ (Date)
DCFS Area Manager Signature

_____ ___/___/___ (Date)
DCFS Supervisor

_____ ___/___/___ (Date)
DCFS Administrator Signature

_____ ___/___/___ (Date)
DCFS Group Care Coordinator Signature

| Emergency DCFS Admin. |
| phone call approval ___/___/___ |
| received by _____ |
| _____ name |

F. GROUP CARE FACILITY AGREEMENT

We agree to the above budget and to deliver the services as identified.

_____ ___/___/___ (Date)
Group Care Representative Signature

5. TRANSPORTATION (See Goal #)
(At .205 per mile)

Cost per month $

From ___/___/___ to ___/___/___

Total Cost $_____

|__| For group care staff to provide outreach services during after care.

|__| For family to attend treatment at facility during discharge or after care.

|__| Other _____

_____

6. BACK-UP CARE AS AN AFTER CARE SERVICE ONLY
(See Goal #_____)

Cost per month $_____

From ___/___/___ to ___/___/___

Hours per day = _____
Days per month = _____

Total Cost $_____

Dollars per hour = $_____
|OR| Dollars per day = $_____

|__| Facility-Based (not to exceed contracted daily group care rate).

|__| Home-Based (not to exceed $7.21 per hour, provided by group care staff).

7. AFTER-CARE PLACEMENT DEVELOPMENT
(Not to exceed $1,000 per home when recruitment included. Lesser amount when not included.)

Not to exceed $_____ total

|__| Thorough search of DCFS and other after care placment resources has taken place.

Describe efforts _____

_____

If legally free, registered for WARE _____ yes _____ no. If no, explain _____

_____

List specific development activities to be carried out:

_____

_____

_____

KAREN RAHM
Secretary

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Olympia, Washington 98504

April 23, 1985

TO: Division of Children and Family Services Staff

FROM: Shirley Goins, Director SG
Division of Children and Family Services

SUBJECT: IMPLEMENTATION OF NEW GROUP CARE FORMS EFFECTIVE MAY 1, 1985

You will be pleased to hear that the new Group Care forms will be ready for implementation effective May 1, 1985. Many of you received training on these forms earlier this year, but implementation was delayed to incorporate procedures for centralized group care intake and monitoring.

Chapter 99 of the Division of Children and Family Services (DCFS) manual (Forms) has been revised to include the following forms together with their instructions:

1. DSHS 10-166(X)-Group Care Screening-Approval

2. DSHS 10-166A(X)-Group Care Social Summary/Referral

3. DSHS 10-166B(X)-Initial Service Plan

4. DSHS 10-167(X)-Group Care Quarterly Report

5. DSHS 10-167A(X)-Quarterly Conference Summary, ISP Update, and Placement Evaluation

The DCFS placing caseworker has responsibility for preparation of No. 1, No. 2, and No. 3 above. The DCFS placing caseworker or the DCFS case monitor, when different from the placing worker, has responsibility for preparation of No. 5 above. The Group Care facility has responsibility for preparation of No. 4, and a supply of the Group Care quarterly report forms has been sent to each facility for their use.

Effective May 1, 1985 DCFS staff should discontinue use of DSHS 10-145(X)-Group Care Assessment and Individual Service Plan (ISP). This form has been deleted from Chapter 99 of the DCFS manual.

Transition Period:

The new Group Care quarterly report is designed to reference, goal by goal, to a pre-existing initial or updated ISP using the new forms. Since children currently in care will have an ISP developed on the "old" DSHS 10-145(X), Group Care facilities cannot use the new quarterly report form in these cases very effectively. Therefore, they have been instructed to continue using "old" Group Care report form (DSHS 10-146(X)) for children lacking an ISP on one of the new forms. Caseworkers should assure that quarterly reports and other necessary background material are forwarded to case monitors during this transition.

When the quarterly conference takes place, the updated ISP will be completed on these children, and from then on, the Group Care facility will be able to use the new quarterly report form. By August 1, 1985, all children in group care should have been "phased in" to the new forms in this manner. Please monitor to assure that following this transition period, group care facilities discontinue use of the "old" DSHS 10-146(X). This form has been deleted from Chapter 99 of the DCFS manual.

DCFS Manual Chapter 34:

The existing chapter, dated July 1984, is being totally revised. The updated chapter is targeted for distribution on or before July 1, 1985. Please be advised that the current chapter references to the "old" Group Care forms and these references should be disregarded. Centralized intake and monitoring will be addressed in the updated chapter as well. We regret this inconvenience and will distribute the revised chapter at the earliest possible date.

SG:KC:wp

cc: Gerald E. Thomas

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-24
ISSUED: June 14, 1985

FROM: DIVISION OF CHILDREN/FAMILY SERVICES
Shirley Goins, Director

SECTIONS REVISED:
34.36

EFFECTIVE: 7/1/85
FOR INFORMATION CALL:
Katie Cameron
Non-SCAN 753-4655 or
SCAN 234-4655 or
Arne Droge
Non-SCAN 753-7160 or
SCAN 234-7160

IF NOT DELIVERABLE, RETURN TO: MANUAL PRODUCTION UNIT MS OB-16

SUBJECTS: (1) TRANSFER OF AUTHORITY TO DCFS ADMINISTRATORS FOR GROUP CARE PAYMENTS EXCEEDING PROGRAM STANDARDS (INCLUDING PAYMENTS TO FACILITIES WITHOUT REGULAR CONTRACTS)

(2) EARLY/ENHANCED DISCHARGE AND AFTER CARE SERVICES PROGRAM

Insert this notice in front of Chapter 34, DCFS Manual, and note on the Tan Notice Control Sheet the date Notice No. T-24 was entered.

A. BACKGROUND

1. Prior to May 1, 1985, all requests for group care payments exceeding program standards required headquarters approval. Requests were submitted on a memo or on a DSHS 5-10(X), Policy Exception Request. Chapter 32 Tan Notice T-21 modified this by allowing DCFS Administrator/designee approval of group care clothing requests exceeding program standards.

   Most group care payments exceeding program standards have involved "hard-to-place plans" in which the standard group care rate is increased to cover additional services required to maintain a client with severe emotional/behavioral problems or physical/intellectual impairments. A second type of group care payment exceeding program standards is comprised of one type/limited duration payments such as additional clothing or transportation not covered under the group care facility's basic

contract. A third type of payment exceeding program standards has involved placements at facilities without regular contracts, such as Secret Harbor or out-of-state group care, and these plans have been authorized under the SSPS Code 3461 "Hard-To-Place - Group Care".

In order to continue moving decision-making authority closer to staff more knowledgable of individual client circumstances, this notice extends DCFS administrator approval authority to all remaining group care payments exceeding program standards.

Three types of payments exceeding program standard have been identified:

a. Payments previously titled "Hard-to-Place" that help maintain a child in group care with very special needs: This type of payment will now be called "exceptional cost group care."

   Requests for these payments tend to be for additional staff to provide extra supervision, or additional counseling services beyond those normally provided by the group care facility. An Exceptional Cost Group Care Budget format has been developed to submit requests for these payments.

b. Short-term, limited payments such as clothing and transportation will now be called "additional payments": These requests are to be submitted on a DSHS 5-195(X), Additional Payment Request.

c. Payments above Level 3 Group Care rates to facilities without regular contracts are also now approvable by DCFS Administrators/designees: This includes payments to Secret Harbor group home and all out-of-state group care facilities. However, consultation with a state office program manager is required prior to considering placement in facilities without regular contracts. This type of payment will now be called "Payments to Facilities Without Regular Contracts."

   Each center will receive an allocation of funds to cover the three kinds of payment requests. Allocations will cover amounts exceeding regular payment standards. For facilities without regular contracts, allocations will cover amounts above the Level 3 Group Care standard. Center staff is responsible for processing the payment requests, tracking expenditures, and monitoring authorization levels.

All requests continuing to be contrary to WAC, such as the extensions to the eighteen-month length of stay limitation, will remain "exceptions to policy" and must be submitted to state office through the usual channels for approval.

2. The Early/Enhanced Discharge and After Care Services (EEDACS) program was passed during the 1985 legislative session and was effective May 1, 1985. Per Shirley Goin's memo, dated May 6, 1985, these funds are directed toward preparing, placing, and supporting a group care child in a less restrictive setting in the shortest possible time.

   This Tan Notice:

   a. Defines the EEDACS program policies and procedures,

   b. Delegates EEDACS approval authority to DCFS administrators/designees effective July 1, 1985, and

   c. Introduces three types of EEDACS payments:

      (1) EEDACS - In Care: Payments made to the group care facility while the child is still in group care directed toward early discharge.

      (2) EEDACS - After Care: Payments made to the group care facility following placement of child in the after-care setting to support and maintain the after-care placement.

      (3) EEDACS - Placement Development: Payments made to the group care facility to recruit, train, and prepare a prospective placement resource.

   Each center will receive an allocation of EEDACS funds. As with payments exceeding program standards, center staff are responsible for processing EEDACS requests, tracking expenditures, and monitoring authorization levels.

   NOTE: For a summary chart of group care payments approvable by the DCFS Administrator, see Section G.

B. DEFINITION OF TERMS

1. Exceptional Cost Group Care

   These funds are intended to enable children with highly individualized needs to be maintained in a group care setting. Children with severe physical and/or intellectual impairments and those with acute emotional/behavioral problems may occasionally need funds beyond the standard group care rate in order to succeed in

group care. These funds can reimburse group care providers for unusual, highly demanding activities/supervision that they provide, and also can reimburse for the purchase of special services or supplies.

2. Additional Payments

These funds provide for the purchase of an item or items needed by a child residing in family foster/receiving home/group care. Additional payment requests differ from Exceptional Cost Group Care in that the requests tend to be for short-term, single service needs. These payments provide for such items as transportation and clothing, which exceed existing program standards. Purchases can be directed toward maintaining/enhancing a placement or toward achieving a permanent plan in the shortest possible time.

3. EEDACS

Each key word in the EEDACS title defines an important element of this program.

Early: The services are provided in order to discharge a child in group care sooner than would otherwise be possible. The services should not be provided if discharge is more than six months away.

Enhanced: The services should not only discharge a child sooner, but do so in an effective way that maximizes the chances of success during after care.

Discharge: The focus of the services is on departure from group care, not successful maintenance in the facility. If a child needs extra services to reside successfully in group care, consider an Exceptional Cost Group Care plan.

After Care: The services should emphasize outreach services to support an after care plan. After care should involve on-site visits by group care staff at the after care placement setting. Services should be directed toward developing/coordinating community resources which can support and stabilize placement as group care services and funding are phased out.

4. Exceptions to Policy

Exceptions to policy are requested when actions contrary to a specific Washington Administrative Code (WAC) are desired. Approval authority for exceptions to policy remains at headquarters.

C. POLICIES FOR PAYMENTS EXCEEDING PROGRAM STANDARDS

1. Approvals

Effective July 1, 1985, approval authority is delegated to DCFS administrators/designees for all exceptional cost group care plans, all additional payment requests, and payments to facilities without regular contracts.

Consultation with the headquarters group care program manager is still required prior to contacting facilities without regular contracts. This will allow for review of alternate placements, and resources available through other DSHS programs, and to give advance notice for contract initiation.

The group care facility is accountable for delivering the services identified in the plan, and expending the funds in accordance with the specific budget.

The group care facility will only be eligible to receive exceptional dollars for a period of time covered by an approved written plan specific to a particular child. The group care facility shall not bill for services provided under other contracts between the agency and the department or the agency or department's subcontractors.

2. Exceptional Cost Group Care Services and Rates

Note: All rates are portal to portal when services are provided in the child's home/community.

a. Additional Child Care Staff - at actual cost but not to exceed $7.21 per hour

Purchase of additional child care staff hours for a designated client beyond the minimum contract requirement to ensure the safety and welfare of the client or other clients in residence and/or to enhance treatment. Provision of such services should be goal-specific and time limited.

b. Individual Therapy - at actual cost but not to exceed $25.00 per hour

Formal treatment goals must be specific and time limited and provided for a designated client by a staff member or other practitioner holding at a minimum a MSW or equivalent degree.

c. Family Therapy - at actual cost but not to exceed $25.00 per hour

Formal treatment goals are specified and time limited and provided to family members consisting of two or more persons by a staff member or other practitioner holding at a minimum an MSW or equivalent degree.

d. Psychiatric or Psychological Services - at actual cost but not to exceed $55.00 per hour

Consultation, evaluation, or treatment by an MD or Ph.D. Formal goals of these services are specified and time-limited. Must be licensed.

e. Other Unique Services - actual cost

These services including unique transportation needs, must be specified, time limited, and approved in the written plan.

3. Monitoring Exceptional Cost Group Care Plans

Case monitors have the primary responsibility to ensure Exceptional Cost Group Care plans are being delivered as agreed and that anticipated benefits are being realized. Monitoring is to take place at the monthly visit to the facility as well as at the quarterly ISP update. Documentation of these visits should be in the case monitor's facility file. The ISP should document progress/lack of progress as a result of the exceptional cost plan.

D. PROCEDURES FOR PAYMENTS EXCEEDING PROGRAM STANDARDS

Quick Reference: For a summary chart including all types of requests for payments exceeding program standards, see Section G ("Group Care Payment Requests Requiring DCFS Admin. Approval": Summary). Also, examples of all new and revised Service Code Data sheets are located at the end of this tan notice.

1. Exceptional Cost Group Care Procedures

a. Preparation and Submittal of an Exceptional Cost Group Care Plan

(1) The exceptional cost budget, referencing to relevant ISP goals when available, must be prepared on the format attached to this tan notice. (This format is called "Attachment A.")

(2) Submit this budget format to your supervisor and then, through center-designated channels, to your DCFS Administrator/Designee. Whenever possible, the most current ISP should be attached to the budget, and the ISP should document the exceptional cost services in the goals/action plans. If an ISP is not yet available, a memo or other substantiating information needs to be attached. Also attach helpful case material such as the social summary which documents the need for the exceptional cost plan.

b. Approval of Exceptional Cost Plan

(1) DCFS administrators/designees are responsible for signing approval, modification, or denial of an exceptional cost budget. Phone approval in emergency situations may be recorded on the budget format. However, required signatures still must be obtained to complete the approval document.

If approval is given, the budget must be signed by a representative from the group home with authority to agree to the plan. An approved Exceptional Cost Group Care budget authorizes the agency to receive payments in excess of their regularly contracted levels. Group care contracts have been amended to allow for this process. A completed, approved plan with signatures by all parties is required prior to authorization.

(2) A copy of all budgets, following administrative decision, should be retained in the DCFS center administrative files. After all signatures have been obtained, place a copy in the child's record.

b. Exceptional Cost Group Care Authorizations

(1) Previous to this notice, most Exceptional Cost Group Care dollars were authorized under SSPS service code 3461 for "Hard to Place" children. This code is now eliminated.

(2) Now, Exceptional Cost Group Care payments are authorized on the new SSPS service code 3471, Exceptional Cost Group Care. Note that this code is to be used only for amounts above the regular rate for the child. Thus, if your authorization is for a Level 3 child, open service code 3410 for the regular amount and code 3471 for all amounts above the Level 3 rate.

2. Additional Payment Request Procedures

a. Additional Payment Requests

(1) Use the DSHS 5-195(X), Additional Payment Request, to request approvals defined as "Additional Payments" -see Section B. Keep one copy and route two to your supervisor. A sample of this form with instructions is attached.

(2) For requests other than clothing, an approved DSHS 5-195(X), Additional Payment Request (including signature by the group care facility), permits the agency to receive payments in excess of their regularly contracted levels. A completed, approved DSHS 5-195(X) with signatures by all parties is required prior to authorization.

(3) With clothing payments, mail a copy of the approved DSHS 5-195(X) to the group care facility for their information. No group care provider signature is required in this case.

(4) A copy of all approved requests should be retained in the DCFS center administrative files. A copy of the request with signatures by all parties should be retained in the child's case record.

b. Additional Payment Request Authorizations

There are three SSPS codes for authorizing Additional Payment Request dollars:

(1) Use the new reason or objective codes titled "Additional Payment Approval" for payments related to these SSPS service codes:

3425 GC Clothing (Special)

3433 GC Transportation

(2) Use the new service code 3275 "GC Addit. Pay. (Other)" for all other foster/receiving care payments exceeding program standards not covered by the service codes in a. and b. above.

3. Procedures for Payments to Facilities Without Regular Contracts

a. Approval procedures:

(1) If it appears that no contracted program is available for the child, the group care coordinator will immediately contact (by telephone if necessary) the state office program manager in order to:

(a) Explore interventions at headquarters level with other DSHS programs and/or with the provider community to determine if a program can be developed for the child at a regularly contracted facility.

(b) Receive technical assistance and consultation on noncontracted providers' capability and performance level.

(c) Receive, if necessary, the approval to explore placement in a facility without a regular contract.

(2) If final approval for placement is given by the DCFS administrator/designee, a memo will be sent to the group care program manager requesting contract initiation. The memo must include:

a. Facility name and address

b. Projected date of placement

c. A budget showing monthly costs and services to be provided

d. Assurance of Inter-state compact approval

4. Authorization

a. Previous to this notice, service code 3461, Group Care Hard to Place, was used for authorizing payments to noncontracted facilities. This code is not to be used for authorizations after July 1, 1985. Authorizations made prior to July 1, 1985, will continue to be paid until they expire or are terminated.

b. Effective July 1, 1985, use the new service code 3476, Group Care Facility Without Regular Contract, for this type of authorization.

E. POLICIES FOR EARLY/ENHANCED DISCHARGE AND AFTER CARE SERVICES (EEDACS)

1. Approval Policy

Effective July 1, 1985, DCFS administrators/designees have approval authority for EEDACS plans initiated for children from their center. Previously, approval was requested from central office. Note: All rates are portal to portal when services are povided in the child's home/community.

2. EEDACS Services and Rates

a. Additional Child Care Staff at Actual cost but not to Exceed $7.21 per hour

Purchase of additional child care staff hours for a designated client beyond the minimum contract requirement in order to expedite the treatment process required for successful discharge. Provision of such services should be goal-specific and time-limited. This service can be delivered in the facility or at the after-care site.

b. Case Management - Client at Actual Cost but not to Exceed $10.00 per hour

Face-to-face activity with a designated client to develop, prepare for or maintain an appropriate placement (includes return home) for the client in the community. This is designed to assure continuity of care, service coordination, and to provide direct service and support activities to the client. Minimum staff qualifications are a BA in social services or an equivalent dêgree, under supervision of an MSW or equivalent.

c. Case Management - Collateral at Actual Cost but not to Exceed $10.00 per hour

Face-to-face activities designed to seek information or discuss a designated client's case/needs with others in order to achieve continuity of care, coordinate services and ensure support for the client. These activities do not include recruitment/training of a foster home. Minimum staff qualifications are BA in social science or equivalent degree (Note: does not include time with other staff from the same agency or DCFS staff). Case manager must be under the supervision of an MSW or equivalent.

d. After-care Placement Development not to Exceed $1,000 per home when recruitment is included. A lesser amount when recruitment is not included.

Recruit, train, and prepare relative, foster, adoptive, or other placement resource for a designated client and achieve placement of designated client. Does not include natural parents.

Recruitment includes licensing or arrangement for licensing a home if needed. If group care provider licenses the home, the group care facility must be licensed as a child-placing agency. The group care facility can also subcontract recruitment and/or licensing activities to a child-placing agency.

Reimbursement for after-care placement development is authorized at the point all specified activities have been completed. If all specified activities are not able to be completed, but a good-faith effort has been documented, a fair and reasonable payment under $1,000 can be negotiated between the department and the group care facility.

e. Individual Therapy at Actual Cost but not to Exceed $25.00 per hour

Formal treatment goals must be directed toward discharge planning and/or after-care services to support a less restrictive placement. The therapy must be time-limited and provided for a designated client by a staff member holding at a minimum a MSW or equivalent degree.

f. Family Therapy at Actual Cost but not to Exceed $25.00 per hour

Formal treatment goals must be directed toward discharge planning and/or after-care services to support a less restrictive placement. The therapy must be time-limited and provided to family members consisting of two or more related persons by a staff member holding at a minimum an MSW or equivalent degree.

g. Transportation at the prevailing Washington State Mileage Rate

Mileage to cover costs of a case manager, therapist, or other staff providing early/enhanced discharge or after-care services in order that face-to-face services be provided where the client resides whenever possible. Also, other collateral transportation costs such as meeting legal obligations, enabling a family to participate in treatment, etc.

h. Facility-Based Back-up Care at the Contracted Daily Rate

As an after-care service; back-up care provided at the group care facility as a support to the after-care setting. The facility's contracted bed limit is not affected by "back-up care." However, the facility cannot exceed its licensed capacity and must maintain staffing levels required in the basic contract.

i. Home-Based Back-up Care at Actual Cost But Not to Exceed $7.21 per hour

As an after-care service; back-up care provided by a group care staff at the site where the child resides.

3. Monitoring

Group care facilities continue to be responsible for submitting quarterly reports during the after care portion of the plan. Similarly, quarterly conferences will be held to evaluate and update the ISP and assess progress with the EEDACS plan.

The DCFS caseworker assumes primary responsibility to monitor EEDACS after care plans.

F. EEDACS PROCEDURES

1. Preparation and Submittal of an EEDACS Plan Request

a. Discharge and after care services depend greatly for their success on the committed involvement of all parties. Therefore, hold a conference that brings together the same parties who sign the Initial Service Plan as well as the DCFS case monitor if different from the DCFS caseworker.

The agreement reached at the conference on goals and action plans for each component of EEDACS should be documented on DSHS 10-166B(X), The Initial ISP, or the DSHS 10-167(X), Quarterly Conference Summary, ISP Update and Placement Evaluation, and signed by all parties. Tentative agreement on the budget can also be reached at this conference.

b. The EEDACS budget, referencing to specific ISP goals, must be prepared on the format attached to this tan notice. (This format is called "Attachment B.")

c. Submit the required budget format to your supervisor and then to your DCFS administrator/designee. Attach the ISP and other helpful case material such as the social summary which documents the need for EEDACS.

d. If the EEDACS "conference" takes place at a time when a quarterly conference would normally take place, the two conference requirements can be met at the same time. In such cases, the group care facility must meet its obligation to submit a quarterly report five days in advance of the scheduled conference.

2. Approving EEDACS

a. DCFS administrators/designees are responsible for signing approval/modification/denial of EEDACS budgets. If approval is given, the budget then must be signed by a group care representative.

An approved EEDACS plan and budget authorizes the facility to receive the specified EEDACS dollars. Group care contracts have been amended to allow for this process. A completed, approved budget with signatures by all parties is required prior to authorization of payment.

b. A copy of all budgets, following administrative decision, should be maintained in the DCFS center administrative files. After all signatures have been obtained, place a copy in the child's case record.

3. Authorizing EEDACS Payments

Previous to this notice, EEDACS funds were authorized on service code 3461, Hard To Place Group Care. These authorizations will continue until they expire or until terminated. Effective July 1, 1985, open all new EEDACS authorizations on one of the following new service codes:

a. 3472 EEDACS - In Care. Use for all in care services provided to a child residing in group care. Can include payments to the group care facility for additional child care staff, case management, individual and family therapy, and transportation.

b. 3473 EEDACS - After Care. Use for all after care services provided after a child leaves group care. Can include payments to the group care facility for case management, individual and family therapy, transportation, and facility and home-based respite care.

c. 3474 EEDACS - Placement Development. Use to recruit, train, prepare, and place with prospective nonparental placement resources. Usually begun when child is in group care, but may extend into post placement. Payment is authorized when all specified activities have been completed. If all specified activities are not able to be completed, but a good-faith effort has been documented by the group care facility, a fair and reasonable payment not to exceed $1,000 can be negotiated between DCFS and the group care facility.

G. GROUP CARE PAYMENT REQUESTS REQUIRING DCFS ADMINISTRATOR APPROVAL VERSUS EXCEPTIONS TO POLICY

Request Type	Characteristics	Examples	Authorization Process	SSPS
Exceptional Cost Group Care	To MAINTAIN a child with severe emotional/ behavioral problems or physical impairments in group care	• Additional staff for extra supervision • Additional counseling services	• Attach budget to justification, e.g., DSHS 10-166B(X) or DSHS 10-167(X) and DSHS 10-166(X) • Obtain DCFS Admin. approval signature and group care rep. signature	Ser. Code 3471 "Exceptional Cost Group Care" in conjunction with a group care maintenance code
Additional Payment Request	Usually one type of need; usually short term	• Clothing beyond program standards • Transportation not covered by group care basic contract	• Complete DSHS 5-195(X) Additional Payment Request • Receive DCFS Admin. approval and group care signature	• Ser. Codes 3425 and 3433 using "Additional Payment Approval" reason or obj. code • Ser. Code 3475 GC Addit. Pay (Other)
Payments to Facilities Without Regular Contracts	• Out-of-state group care facility • In-state facility without a regular group care contract (e.g., Secret Harbor)	• Child has moved out of state with foster parents and now requires group care • Child's needs cannot be met by a regularly contracted facility	• Group Care Pro. Manager authorizes group care coordinator to contact facility without regular contract • Placing caseworker prepares budget and case plan on memo for program manager to to prepare contract	• Ser. Code 3476 GC facility without regular contract REMEMBER INTER-STATE COMPACT
EEDACS	To DISCHARGE a child from group care to a less restrictive setting in the shortest time possible	• Child is close to discharge and requires after-care placement resource and/or support services to facilitate discharge	• Attach budget to DSHS 10-166 B(X) or 10-167(X) and DSHS 10-166(X) • Obtain DCFS Admin. approval signature and group care rep. rep signature	• Ser. Codes 3472 (in conjunction with a group care maintenance code), 3473, and 3474
Exceptions to Policy	Request is contrary to policy in WAC	• Exception to WAC 388-70-024(3)(a) limiting group care placements to 18 consecutive months	• Complete DSHS 5-10(X) Policy Exception Request. Route to supervisor, center, and state office for approval	None

DSHS 5-195(X) (5/85), ADDITIONAL PAYMENT REQUEST

1. Identifying Information

   Self-explanatory.

2. Circle Type of Placement

   Choose either FC (Foster Care), RC (Receiving Home Care), CRC (Crisis Residential Care), or GC (Group Care).

3. DDD Child

   If child is open for DDD case services, mark "yes."

4. Circle Type of Legal Status

   Self-explanatory.

5. Brief Description of Need

   Specify clearly what is requested and why the need exists.

6. Alternatives Explored

   Specify options to this request that you have considered and/or explored.

7. Previous Additional Payment Requests

   Self-explanatory.

8. Budget

   Enter amounts, begin/end date for purchase or payment period, and SSPS service code for each type of item.

9. Management Review

   For use by supervisor and area manager.

10. Approving Authority

    To be completed by the Center Administrator or his/her designee. The approving authority always signs before the private agency representative, when PA signature is required.

DSHS 5-195(X) (5/85), ADDITIONAL PAYMENT REQUEST (Cont.)

11. Private Agency Representative

Form is required to be signed by a private agency representative when any additional payments are to be made to the agency. This includes all payments except clothing as clothing payments are made directly to the supplier.

12. Routing

Keep one copy and send two copies to approving authorities per your center policy. Mail one copy to the private agency, if applicable. Following administrative decision, a copy of the request should be retained in DCFS center administrative files and in the child's case record.

DSHS 5-195(X) (5/85), ADDITIONAL PAYMENT REQUEST

WASHINGTON STATE DEPARTMENT OF SOCIAL & HEALTH SERVICES

ADDITIONAL PAYMENT REQUEST

USE THIS FORM TO REQUEST DCFS ADMIN. APPROVAL AND SIGNATURES OF PRIVATE AGENCY IF APPLICABLE

THIS FORM MUST BE PREPARED BY A DCFS CASEWORKER

1. IDENTIFYING INFORMATION

DCFS OFFICE NAME		DCFS CENTER NO.		DATE
SUPERVISOR	PHONE	CASEWORKER		PHONE
CHILD'S NAME		CASE NUMBER		BIRTHDATE

2. CIRCLE TYPE OF PLACEMENT: FC, RC, CRC, GC

NAME OF FACILITY _____ TELEPHONE _____

3. DDD CHILD? ☐ YES ☐ NO

4. CIRCLE TYPE OF LEGAL STATUS: CONSENT TO PLACE—ARP—DEPENDENCY—

OTHER (explain) _____

5. BRIEF DESCRIPTION OF NEEDS (specify rates when applicable)

_____

6. ALTERNATIVES EXPLORED

_____

7. PREVIOUS ADDITIONAL PAYMENT REQUESTS ☐ YES ☐ NO

IF YES, SUMMARIZE _____

DSHS 5-195 (X) (5-85) -1014-

DSHS 5-195(X) (5/85), ADDITIONAL PAYMENT REQUEST (Cont.)

8. BUDGET

a. SINGLE PAYMENT

TYPE OF ITEM _____ SSPS SERVICE CODE _____ TOTAL COST $_____

TO BE PURCHASED BETWEEN ___ MO ___ DAY ___ YR. AND ___ MO ___ DAY ___ YR

b. MONTHLY AND/OR REPEATED PAYMENTS

TYPE OF ITEM _____ PAYMENTS BEGIN ___ MO ___ DAY ___ YR AND END ___ MO ___ DAY ___ YR. MONTHLY COST $_____

SSPS SERVICE CODE _____

TYPE OF ITEM _____ PAYMENTS BEGIN ___ MO. ___ DAY ___ YR AND END ___ MO ___ DAY ___ YR. MONTHLY COST $_____

SSPS SERVICE CODE _____

TOTAL COST OF ADDITIONAL PAYMENTS $_____

9. MANAGEMENT REVIEW

SUPERVISOR: ☐ ENDORSED ☐ NOT ENDORSED SIGNATURE: _____ DATE: _____

AREA MANAGER: ☐ ENDORSED ☐ NOT ENDORSED SIGNATURE: _____ DATE: _____

10. APPROVING AUTHORITY

a. ☐ APPROVED ☐ DENIED (see comments)

b. COMMENTS:

_____

_____

_____

_____

APPROVING AUTHORITY SIGNATURE _____ DATE _____

11. PRIVATE AGENCY REPRESENTATIVE _____ DATE _____
(this signature not necessary for purchase of clothing)

DISTRIBUTION: ROUTE ORIGINAL AND ONE COPY TO APPROVING AUTHORITY
PLACE ONE COPY IN THE CHILD'S FILE
MAIL ONE COPY TO PRIVATE AGENCY IF APPLICABLE

DSHS 5-195 (X) (5-85) (BACK) -1014-

| To be completed by DCFS caseworker/monitor |

B U D G E T

EXCEPTIONAL-COST GROUP CARE: Attach to current DSHS 10-166B(X) or DSHS 10-167(X) and DSHS 10-166A(X) and/or other pertinent material justifying and specifying the plan.

A. GENERAL INFORMATION

1. CHILD'S NAME _____ DCFS CENTER # _____ CASE # ____-D-____
2. FACILITY NAME _____ DCFS CENTER # _____ PHONE # _____
3. PLANNED DISCHARGE DATE ___/___/___

B. BUDGET BREAKDOWN

1. ADDITIONAL CHILD CARE STAFF (See Goal #___)
(At actual cost but not to exceed $7.21/hr.)

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

Hours per month _____

Dollars per hour $_____

2. INDIVIDUAL THERAPY (See Goal # ____)
(At actual cost but not to exceed $25.00/hr.)

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

Hours per month _____

Dollars per hour $_____

_____ (Name of Therapist) _____ Degree

3. FAMILY THERAPY (See Goal # ___)
(At actual cost but not to exceed $25.00/hr.)

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

Hours per month _____

Dollars per hour $_____

_____ (Name of Therapist) _____ Degree

4. PSYCHIATRIC/PSYCHOLOGICAL SERVICES (See Goal#___)
(At actual cost but not to exceed $55.00/hr.)

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

Check one: ____ consultation
____ evaluation
____ treatment

_____ (Name of Provider) _____ Degree

Hours per month _____

Degree and License # _____

Dollars per hour $_____

_____

5. OTHER UNIQUE SERVICES (Goal # ____)
(At actual cost)

From ___/___/___ to ___/___/___

Total Cost $_____

Describe/identify service: _____

Hours per month _____ |OR| Times per month _____

Dollars per hour $ _____ Dollars per time $_____

C. BUDGET SUMMARY

1. Standard group care program monthly rate for client. $ _____

2. Exceptional cost group care cost per month. $ _____

3. Exceptional Cost plan to extend from ___/___/___ to ___/___/___.
(Not to begin prior to date of Admin. approval)

4. Total cost of exceptional-cost plan for ____ months (6 months max) $ _____
(Do not include standard rate)

D. If facility is in different center from center of origin:

_____ agreed to placement and exceptional cost plan on ___/___/___
(Name of Group Care Coordinator in receiving center)

E. DCFS MANAGEMENT REVIEW

I have reviewed and approved the above Exceptional Cost Group Care Budget.

_____ ___/___/___ (Date)
DCFS Caseworker and/or Case Monitor Signature

_____ ___/___/___ (Date)
DCFS Area Manager Signature

_____ ___/___/___ (Date)
DCFS Supervisor

_____ ___/___/___ (Date)
DCFS Administrator Signature

_____ ___/___/___ (Date)
DCFS Group Care Coordinator Signature

|Emergency DCFS Admin.
|phone call approval ___/___/___
|received by _____
|_____ name

F. GROUP CARE FACILITY AGREEMENT

We agree to the above budget and to deliver the services as identified.

_____ ___/___/___ (Date)
Group Care Representative Signature

| To be completed by DCFS caseworker/monitor |

B U D G E T

EARLY/ENHANCED DISCHARGE AND AFTER CARE BUDGET: Attach to DSHS 10-167(X) and/or other pertinent material justifying and specifying the plan

A. GENERAL INFORMATION

1. CHILD'S NAME _____ DCFS CENTER # _____ CASE # _____-D-_____
2. FACILITY NAME _____ DCFS CENTER # _____ PHONE # _____
3. PLANNED DISCHARGE DATE ___/___/___
4. This plan covers _____ months in discharge-focused group care, and _____ months in after care. (Not to exceed six months at a time.)
5. Child is or will be legally free at time of discharge _____ yes _____ no.

B. BUDGET BREAKDOWN

1. ADDITIONAL CHILD CARE STAFF (See Goal # ____)
(At actual cost but not to exceed $7.21/hr.)

Hours per month _____
Dollars per hour $_____

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

2. INDIVIDUAL THERAPY (See Goal # ____)
(At actual cost but not to exceed $25/hr.)

Hours per month _____
Dollars per hour $_____

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

_____ (Name of Therapist) _____ Degree

3. FAMILY THERAPY (See Goal # ____)
(At actual cost but not to exceed $25/hr.)

Hours per month _____
Dollars per hour $_____

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

_____ (Name of Therapist) _____ Degree

4. CASE MANAGEMENT (See Goal # ____)
(At actual cost but not to exceed $10/hr.

|__| With Client
|__| With Collateral
|__| Both

Hours per month _____
Dollars per hour $_____

Cost per month $_____
From ___/___/___ to ___/___/___
Total Cost $_____

_____ (Name of Case Manager) _____ Degree

5. TRANSPORTATION (See Goal #)
(At .205 per mile)

Cost per month $

From ___/___/___ to ___/___/___

Total Cost $_____

|__| For group care staff to provide outreach services during after care.

|__| For family to attend treatment at facility during discharge or after care.

|__| Other _____

_____

6. BACK-UP CARE AS AN AFTER CARE SERVICE ONLY
(See Goal #_____)

Cost per month $_____

From ___/___/___ to ___/___/___

Total Cost $_____

Hours per day = _____
Days per month = _____

Dollars per hour = $_____
|OR| Dollars per day = $_____

|__| Facility-Based (not to exceed contracted daily group care rate).

|__| Home-Based (not to exceed $7.21 per hour, provided by group care staff).

7. AFTER-CARE PLACEMENT DEVELOPMENT
(Not to exceed $1,000 per home when recruitment included. Lesser amount when not included.)

Not to exceed $_____ total

|__| Thorough search of DCFS and other after care placment resources has taken place.

Describe efforts _____

_____

If legally free, registered for WARE _____ yes _____ no. If no, explain _____

_____

List specific development activities to be carried out:

_____

_____

_____

C. BUDGET SUMMARY

1. Standard group care program monthly rate for this client . . . . $_____

2. Discharge focused services per month . . . . . $_____

3. To extend from ___/___/___ to ___/___/___

4. Total cost of discharge-focused services . . . . . *$_____

5. After care services per month . . . . . $_____

6. To extend from ___/___/___ to ___/___/___

7. Total after care cost . . . . . *$_____

8. After care placement development . . . . . *$_____
(Payment to be authorized when specified actions are completed)

9. Total plan (discharge, after care and after care placement development) to extend from ___/___/___ to ___/___/___ (6 months max.)
(Not to begin prior to date of Admin. approval)

10. COST OF TOTAL EEDACS PLAN (add all * items) . . . . . EEDACS $_____

D. If facility is in different center from center of origin:

_____ agreed to placement and EEDACS plan on ___/___/___
(Name of Group Care Coordinator in "receiving center")

E. DCFS MANAGEMENT REVIEW/APPROVAL

I have reviewed and approve the above Early/Enhanced Discharge and After-Care Budget.

_____ ___/___/___ _____ ___/___/___
DCFS Caseworker and/or Case Monitor Signature) (Date) DCFS Area Manager Signature (Date)

_____ ___/___/___ _____ ___/___/___
DCFS Supervisor Signature (Date) DCFS Administrator (Date)

_____ ___/___/___
DCFS Group Care Coordinator

F. GROUP CARE FACILITY AGREEMENT

We agree to the above budget and to deliver the services as identified.

_____ ___/___/___
Group Care Representative Signature Date

Emergency DCFS Admin.
Phone call approval ___/___/___
Received by _____
name

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: GC Clothing (Special) SERVICE CODE (Item 36): 3425

SERVICE DESCRIPTION: Payment for initial clothing purchased for a child in group receiving/shelter care; or additional clothing approved by a DCFS Administrator/designee in excess of the monthly group care rate.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 1 month

37 REASON: None

38 OBJECTIVE: None

CODE	TITLE
A	To Purchase Initial Clothing (group, shelter/receiving)
B	To Purchase Additional Clothing by Additional Payment Approval

PAYMENT DATA:

Payment Type: One-Time Invoice
39-41 Unit of Service: Each (Ea)
41 Rate: Range $0.01-$200.00
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
2	AFDC-FC
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:
Requires approval by DCFS Administrator/designee on a DSHS 5-195(X), Additional Payment Request.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: GC Transportation SERVICE CODE (Item 36): 3433

SERVICE DESCRIPTION: Payment for the cost of transportation and associated expenses when approved by the DCFS office incurred by or on behalf of a child in group foster care. Payment may be made directly to a vendor or to a group home for reimbursement of expenses. May include the cost of DSHS service worker escort, if approved, for out-of-state transportation.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 1 month

37 REASON:

CODE	TITLE	CODE	TITLE
A	Placement Out of County	H	Placement Failed, Child Returned to Washington
B	Placement Failed, Child Returned	I	Return Runaway to Washington
C	Return Runaway	J	Court Hearing Out of State
D	Court Hearing	L	Additional Payment Approval
E	Counseling/Medical Appointment/ Services		
F	Educational Program		
G	Placement of Child Out of State		

38 OBJECTIVE: None

PAYMENT DATA:

Payment Type: One time payment
39-41 Unit of Service: Each (Ea)
41 Rate: Range $0.01-$1,000.00
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
2	AFDC-FC
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:

1. Payment is made directly to vendor for amount of fare, i.e., plane, bus, etc. (Items 7-11).
2. When expenses are to be reimbursed on a per mile basis, total expenses are calculated and authorized in one payment. Record calculations in "Special Instructions."
3. When escort costs are authorized, enter the name of the service worker in "Special Instructions."
4. Reason Code L requires approval by DCFS Administrator/designee.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: Exceptional Cost GC SERVICE CODE (Item 36): 3471

SERVICE DESCRIPTION: Services to maintain a child in a regularly contracted facility with a rate of payment in excess of the standard and special model rate. Requires separate opening of the appropriate group care maintenance code.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 6 months

37 REASON:

CODE	TITLE
A	DCFS Placement (non DDD/DJR)
B	DCFS Placement of DDD Child
C	DCFS Placement of DJR Child

38 OBJECTIVE:

CODE	TITLE
A	To Return Child Home
B	To Place Child With/Develop a Relative Guardian
C	To Place with Relatives
D	To Prepare for Adoption/Adoption with Subsidy
E	To Place With/Develop Foster Parent/Other Non-Relative Guardian
F	To Develop Long-Term Foster Care Placement with Written Agreement

PAYMENT DATA:

Payment Type: Invoice
39-41 Unit of Service: Month (Mo)
41 Rate: Non-standard, as authorized
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:
Requires approval of DCFS Administrator/designee.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: EEDACS - In Care SERVICE CODE (Item 36): 3472

SERVICE DESCRIPTION: Early/Enhanced Discharge and After Care Services authorized and received while child remains in group care. Can include payments for additional child care staff, case management, individual and family therapy and/or transporation.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 6 months

37 REASON:

CODE	TITLE
A	DCFS Placement (non DDD/DJR)
B	DCFS Placement of DDD Child
C	DCFS Placement of DJR Child

38 OBJECTIVE:

CODE	TITLE
A	To Return Child Home
B	To Place Child With/Develop a Relative Guardian
C	To Place with Relatives
D	To Prepare for Adoption/Adoption with Subsidy
E	To Place With/Develop Foster Parent/Other Non-Relative Guardian
F	To Develop Long-Term Foster Care Placement with Written Agreement

PAYMENT DATA:

Payment Type: Invoice
39-41 Unit of Service: Month (Mo)
41 Rate: Non-standard as authorized
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
2	AFDC-FC
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:
Requires approval of DCFS Administrator/designee.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: EEDACS - After Care SERVICE CODE (Item 36): 3473

SERVICE DESCRIPTION: Early/Enhanced Discharge and After Care Services authorized for services provided after child leaves group care. Includes payments for case management, individual and family therapy, transporation and facility and home-based back-up care.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

32/33 MAXIMUM LENGTH OF SERVICE: 6 months

37 REASON:

CODE	TITLE
A	DCFS Placement (non DDD/DJR)
B	DCFS Placement of DDD Child
C	DCFS Placement of DJR Child

38 OBJECTIVE:

CODE	TITLE
A	To Return Child Home
B	To Place Child With/Develop a Relative Guardian
C	To Place with Relatives
D	To Prepare for Adoption/Adoption with Subsidy
E	To Place With/Develop Foster Parent/Other Non-Relative Guardian
F	To Develop Long-Term Foster Care Placement with Written Agreement

PAYMENT DATA:

Payment Type: Invoice

39-41 Unit of Service: Month (Mo)

41 Rate: Non-standard as authorized

42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:
Requires approval of DCFS Administrator/designee.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: EEDACS - Placement Devel. SERVICE CODE (Item 36): 3474

SERVICE DESCRIPTION: An Early/Enhanced Discharge and After Care Service provided or subcontracted by the group care facility to develop a permanent placement resource for a specific child. Payment is authorized at the completion of a specifically budgeted action plan which can include recruitment, licensing and training activities to prepare a non-parental placement resource.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 1 month

37 REASON:

CODE	TITLE
A	DCFS Placement (non DDD/DJR)
B	DCFS Placement of DDD Child
C	DCFS Placement of DJR Child

38 OBJECTIVE:

CODE	TITLE
A	To Return Child Home
B	To Place Child With/Develop a Relative Guardian
C	To Place with Relatives
D	To Prepare for Adoption/Adoption with Subsidy
E	To Place With/Develop Foster Parent/Other Non-Relative Guardian
F	To Develop Long-Term Foster Care Placement with Written Agreement

PAYMENT DATA:

Payment Type: One Time Invoice
39-41 Unit of Service: Each
41 Rate: Range $0.01-$1,000.00
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:

1. Requires approval of DCFS Administrator/designee.
2. Amounts up to and including $1,000 can be authorized if recruitment of a home is included in the plan. If recruitment is not included, only amounts less than $1,000 can be authorized.
3. If all agreed upon activities are not able to be completed, but a good faith effort has been established, an amount below that already specified may be negotiated.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: GC Addit. Pay (Other) SERVICE CODE (Item 36): 3475

SERVICE DESCRIPTION: This code is used for unique payments which exceed program standard for children residing in group care. It is to be used only when there is no other specific service code available. See Additional Data below.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 6 months

37 REASON:

CODE	TITLE
A	DCFS Placement (non DDD/DJR)
B	DJR Community Residential Placement
C	DCFS Placement of DDD Child
D	DCFS Placement of DJR Parolee

38 OBJECTIVE: None

PAYMENT DATA:

Payment Type: Invoiced
39-41 Unit of Service: Month (Mo)
41 Rate: Range $0.01-$500.00
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:

1. A group care maintenance code must also be open in conjunction with this service code.
2. Use of this service code requires DCFS Administrator/designee approval.
3. When a private agency will receive the payment, a DSHS 5-195(X), Additional Payment Request, signed by both the DCFS Administrator/designee and a private agency representative must be obtained prior to authorization.

154/159
Item No.

PROGRAM: Child Group Care EFF. DATE: 07/01/85

35 SERVICE NAME: GC Fac W/O Reg. Contracts SERVICE CODE (Item 36): 3476

SERVICE DESCRIPTION: Reimbursement for maintenance services in group care facilities requiring a child-specific contract. Includes all out of state facilities and in state facilities without regular contracts such as Secret Harbor.

17/26 RECIPIENT STATUS:

	CHILD	ADULT
PRIMARY	X	
SERVICE	X	

21 Entry Required. See Appendix C, GENERAL INFORMATION

32/33 MAXIMUM LENGTH OF SERVICE: 6 months

37 REASON:

CODE	TITLE
A	DCFS In-State Placement
B	DCFS Out-of-State Placement
C	CPS In-State Placement
D	CPS Out-of-State Placement
E	DDD Child In-State Placement
F	DDD Child Out-of-State Placement
G	DJR Child In-State Placement
H	DJR Child Out-of-State Placement

38 OBJECTIVE:

CODE	TITLE
A	To Return Child Home
B	To Place Child With/Develop a Relative Guardian
C	To Place with Relatives
D	To Prepare for Adoption/Adoption with Subsidy
E	To Place With/Develop Foster Parent/Other Non-Relative Guardian
F	To Develop Long-Term Foster Care Placement with Written Agreement

PAYMENT DATA:

Payment Type: Invoice
39-41 Unit of Service: Month (Mo)
41 Rate: Non-standard as authorized
42 Maximum No. of Units: 1

SOURCE OF FUNDS (Item 31):

CODE	TITLE
2	AFDC-FC
3	Federal Refugee "R"
5	State Funds Only

ADDITIONAL DATA:

1. Group Care Coordinator must contact state office group care program manager to obtain consultation prior to initiating contact with facilities without regular contracts.
2. Approval by DCFS Administrator/designee and contract execution required before authorization can be made.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO: T-30
Issued: 08/28/85

FROM: DIV. OF CHILDREN & FAMILY SVCS.
Shirley Goins, Director

SECTIONS REVISED:
34.50

EFFECTIVE: 10/01/84
FOR INFORMATION CALL:
Non-SCAN 754-1570 or
SCAN 235-1570

IF NOT DELIVERABLE, RETURN TO: MANUAL PRODUCTION UNIT MS OB-16

SUBJECT: CLARIFICATION OF APPROPRIATE USES OF ALTERNATIVE ADMINISTRATIVE REVIEW AND COURT REVIEW HEARINGS

Insert this notice in front of DCFS Manual, Chapter 34 and note on the Tan Notice Control Sheet the date Notice No. T-30 was entered.

A combination of state and federal law requires that each child in foster care have their case reviewed at least every six months either through the Juvenile Court (Chapter 23) or through the Alternative Administrative Case Review process (Chapter 32.42). The first review must be held within six months from the date of placement. In addition, every child who remains in care up to eighteen months must have a dependency or ARP dispositional hearing prior to the end of the eighteenth month from the date of placement (32.13 K, 32.32 D 3 e, 32.33 F 2 e (2), 32.41 H). Court review hearings must then continue every six months thereafter.

TO ENSURE CONTINUED PROPER IMPLEMENTATION OF THE STATE'S CASE REVIEW SYSTEM, THE FOLLOWING CLARIFICATIONS OF CHAPTER 23.31, 23.32, 23.33, 32.42, AND 34.50 ARE PROVIDED FOR THESE SPECIFIC TYPES OF CASES:

A. Case Review for Children Whose Parental Rights Were Terminated Prior to 1978

These children, like all foster children, must have their case reviewed every six months and have a court hearing before the end of the eighteenth month in foster care. They must continue court review hearings every six months thereafter.

Prior to 1978, wardship and juvenile court jurisdiction over these children were often dismissed upon termination of parental rights, because the state law at that time did not require ongoing jurisdiction and review following termination.

For any child coming into foster care or currently in care whose parental rights were terminated prior to 1978, the service worker should determine the length of time the child has been in foster care, and

1. For children whose wardship was dismissed and who have been in foster care seventeen months or more (counting from the date of placement), immediate steps should be taken to either file or petition for dependency or request the court to vacate the prior dismissal order, thereby reinstituting dependency and juvenile court jurisdiction. The case should then be reviewed by the court prior to the end of the eighteenth month, and regular court reviews should be set for every six months thereafter.

2. For children in foster care less than eighteen months, Alternative Administrative Review (32.42) can be used each six months (counting from date of placement) to review the case. However, court jurisdiction must be invoked and a court hearing must be held prior to the end of the eighteenth month in foster care.

   NOTE: Children for whom legal guardianship has been established are exempt from the case review and the court hearing process.

B. Case Review for Children in Adoptive Placement Pending Finalization

RCW 13.34.210 requires that children in adoptive placement continue to have court review hearings every six months until the adoption is final or guardianship is established.

If a problem arises with the court's ability to conduct these review hearings in a timely fashion, the service worker should arrange an Alternative Administrative Review (32.42) to be held within the required six months' time frame. The service worker should continue to actively pursue the court review even though an administrative review was held in the interim.

C. Case Review for Children Who Remain in Shelter Care Status Five Months or More

The components of the state's shelter care process and court orders do not fully satisfy the federal requirements for a case review. Since either a court hearing or administrative review is required before the end of the sixth month from the date of placement, the service worker should:

1. Attempt to move all cases to a fact finding/dispositional hearing prior to the end of the sixth month in care;

2. Seek legal consultation on cases remaining in shelter care status beyond five months; and

3. Within six months, conduct an Alternative Administrative Review (32.42) for any case that, after legal consultation, remains in shelter care status.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-38
ISSUED: 10/25/85

FROM: DIVISION OF CHILDREN/FAMILY SERVICES
Shirley Goins, Director

SECTIONS REVISED:
34.40 B. 1. and 2.

EFFECTIVE: 11/01/85
FOR INFORMATION CALL:
Non-SCAN 753-6761 or
SCAN 234-6761

IF NOT DELIVERABLE, RETURN TO: MANUAL PRODUCTION UNIT MS OB-16

SUBJECT: GROUP CARE CLOTHING AND TRANSPORTATION PROCEDURES

Insert this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-38 was entered.

PROCEDURES FOR ONE TIME CLOTHING AND TRANSPORTATION PAYMENTS

Effective with authorizations after October 31, 1985, on November 1, 1985, the DSHS 6-06(X) Foster Care Invoice Voucher system will no longer be used to make group care clothing and transportation payments. Use the procedures below to make these payments with the SSPS one-time payment process. This process includes issuance of a warrant to a provider when the DSHS 14-154 clears SSPS edits.

When implementing these procedures, be sure to discontinue use of all alternate forms and procedures. Statewide consistency of procedures is necessary to meet requirements of fiscal audits and vendors with multiple outlets.

Note that in each procedure, a document verifying the purchase (i.e., clothing store receipt, billing from travel vendor, A20 from a foster parent) is to be filed in the client's record attached to the DSHS 14-154. This is necessary to meet the requirements of the State Auditor.

Also included in these procedures is a policy requiring supervisor approval on the DSHS 14-154 if the purchaser is to be the same as the authorizer.

Service workers continue to have responsibility for ensuring that the child receives the clothing or transportation.

A. Clothing Payment Procedures

1. Service worker authorization procedures.

a. Service worker receives approval to purchase clothing for child in placement either using the Additional Payment Request or obtaining supervisor's approval for $100 purchases at time of initial placement. Remember that the group home must have a copy of the approved Additional Payment Request in these files (see T-24).

b. Service worker completes a DSHS 14-154 for each vendor that is anticipated, but leaves exact cost of services blank. If a group home chooses to purchase the clothes and be reimbursed by the department, they will be the vendor.

c. At bottom of the DSHS 14-154 the service worker notes:

(1) The maximum amount, i.e., "NOT TO EXCEED $100."

(2) The name of the purchase. If purchaser is the service worker, supervisor must initial the DSHS 14-154.

(3) Clothing items to be purchased. If exact items are not known, use a general description, such as "Misc clothing for a 2 year old girl."

d. Client and Vendor copy are routed to the group home representative.

2. Purchaser/vendor procedures for payment to clothing vendor.

a. Purchaser goes to vendor, selects clothing, and in exchange for the clothing, gives the vendor the Vendor copy of the DSHS 14-154.

b. Vendor gives purchaser an itemized receipt for purchase. The vendor may attach their copy of the receipt to their copy of the DSHS 14-154 so that they can be matched to the Remittance Advice accompanying the warrant (see 5. b. below).

c. Purchaser signs receipt and routes it to the DCFS office.

3. Group home procedures: reimbursement to group home.

   a. Group home representative purchases clothing with own funds within constraints of the DSHS 14-154.

   b. Group home representative requests a separate receipt for the clothing, signs it, and routes it to the DCFS office.

4. Post-purchase procedures.

   a. Worker compares DSHS 14-154 to the receipt and resolves any discrepancies with purchaser.

   b. Worker enters exact amount of purchase on the DSHS 14-154.

   c. The DSHS 14-154 is transmitted.

   d. A warrant is issued directly to the provider.

5. Vendor payment procedures.

   a. Vendor receives warrant with form A-2 Vendor Remittance Advice showing clients and warrant amounts.

   b. Vendor may match the amount and names on the A-2 with the vendor copy of the DSHS 14-154. Discrepancies are to be resolved with the service worker.

B. Transportation Payment Procedures

1. If the travel has already occurred, caseworker opens and closes DSHS 14-154 in same action showing actual amount of the payment.

2. If the travel has not occurred, use clothing procedures.

3. Attach verification of travel expense to record copy of DSHS 14-154. If the group home provides the transportation, they need to submit a signed A20, Travel Expense Voucher.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-48
Issued: 7/18/86

FROM: Jerome Wasson, Acting Director
DIVISION OF CHILDREN & FAMILY SERV.

SECTIONS REVISED:
34.12 A. & 34.35

EFFECTIVE: On Receipt
FOR INFORMATION CALL:
John Weeden
SCAN 234-6761 or
Non-SCAN 753-6761

IF NOT DELIVERABLE RETURN TO DSHS STOCKROOM MS FB-11

SUBJECT: PERMANENCY PLANNING AND CASE REVIEW ACTIVITIES FOR CHILDREN IN GROUP HOME PLACEMENTS

Place this notice in front of Chapter 34 of the DCFS Manual and note on the Tan Notice Control Sheet the date Notice No. T-48 was entered.

A. BACKGROUND

In the 1985 rewrite of DCFS Chapter 34, the intent was that Chapter 32 policy and procedure material related to permanency planning and case review (court or administrative) would be applicable to youth in group care.

A recent federal audit of Washington State's compliance with P.L. 96-272 suggested a need to have greater specificity in cross-references to Chapter 32.

B. ACTION REQUIRED

1. Under Section 34.12 A., add as item 7:

   Other services necessary to achieve a permanent placement for the child.

2. Under Section 34.35, add as item E:

   Court Reviews/Administrative Reviews

   The policies and procedures in Chapter 32, Section 32.40, apply to group care placements.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-55
Issued: 04/01/87

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Audrey Fetters, Assistant Secretary

SECTIONS REVISED
34.40 B.2

EFFECTIVE: 05/01/87
FOR INFORMATION CALL:
John Weeden
Non-SCAN 753-6761 or
SCAN 234-6761

FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY: MANUAL PRODUCTION UNIT AT MS OB-16. IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM, MS FB-11

SUBJECT: GROUP CARE TRANSPORTATION POLICY REVISION

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-55 was entered.

I. Background

Policies for transportation related to children in foster/group care and dependents have historically involved a complex system of WAC's and administrative approvals. This Tan Notice, along with a similar notice in Chapter 32, is the result of WAC and DCFS Manual revisions designed to simplify foster/group care transportation policy. The key to this revision is the repeal of WAC 388-70-056 "Transportation and Other Expenses -- Reimbursement" effective May 1, 1987. These rules are replaced by DCFS Manual Policy that focuses on the need for the transportation and the resources available for payment.

Service workers have, in the past, needed supervisory or DCFS Administrator/designee approval for many transportation payments. Now, if a proposed payment meets four basic guidelines, (ISP consistency or supports the permanent plan, or prevents a foster/group care placement and is not payable by another resource) the service workers may authorize payments up to $400 for the total trip expense. Payments above $400.00 need first line supervisory approval. The need for Exception to Policies and Additional Payment Requests is eliminated.

II. Policy

A. Group care related transportation expenses can be reimbursed when the transportation is:

1. consistent with the ISP, or

2. supports a permanent plan, or

3. directly prevents a foster/group care placement, and

4. is not payable by another resource.

B. If the total cost of the transportation is greater then $400.00, first line supervisory approval is necessary.

C. There are three types of transportation affected by this policy:

1. Transportation related to making a foster/group care placement. This would normally include:

a. Transporting the child to the placement.

b. Transporting the child to any medical, psychological or school related appointments.

c. Transportation of parents, relatives and permanent planning resources related to the placement.

2. Transportation necessary during the placement other than visitations. This would normally include transportation for:

a. Mental health treatment

b. School related activities

c. Court hearings

3. Transportation for visits to the child's home.

D. Consider the following resources in the order listed before committing the department to pay transportation costs or authorizing payments.

1. Parents/guardian/family

2. Volunteers (individual or organization)

3. Other states

4. Schools

5. Reimbursement by Medicaid for transportation provided by foster parents, guardian, other family members, or volunteers to/from covered medical services.

6. Title XIX medical coupon for services from ambulance, cabulance and taxi providers. (Require prior approval by the Area Medical Unit excepting

7. Group care transportation funds

III. Procedures

A. Payment may be made to any transportation provider.

B. Use payment procedures in Tan Notice T-38 in front of Chapter 34.

C. For payments in excess of $400.00, the firstline supervisor shall initial the DSHS 14-154/159.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-63
Issued: 04/08/87

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Audrey Fetters, Assistant Secretary

SECTIONS REVISED
34.12, 34.14, 34.21, 34.30, 34.32, 34.33, 34.35, 34.36, 34.99
as described below

EFFECTIVE: 04/15/87
FOR INFORMATION CALL:
Sue Browning at
Non-SCAN 586-0253 or
SCAN 321-0253

FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY: MANUAL PRODUCTION UNIT AT MS OB-16. IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM, MS FB-11

SUBJECT:
1. REVISION OF GROUP CARE PERIODIC REVIEW/INDIVIDUAL SERVICE PLAN FORM.
2. REVISION OF PREPLACEMENT PROCEDURES AND THE DEVELOPMENT OF THE ISP.
3. REVISION OF QUARTERLY REPORTS, CONFERENCES, AND ISP REVIEW PROCEDURE.
4. REVISION OF RECORD MAINTENANCE PROCEDURE.
5. REVISION OF GROUP CARE PERMANENT PLANNING SERVICE DESCRIPTION.
6. REVISION OF GROUP CARE HARD-TO-PLACE PLAN PROCEDURE.
7. CLARIFICATION OF PLACEMENT RESPONSIBILITY RELATED TO MEDICAL ISSUES.

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-63 was entered.

A. BACKGROUND

Following the 1986 P.L. 96-272 audit of Washington State's policy and procedures, the federal government recommended that a standardized ISP form be developed to address all case plan issues audited by the federal government.

Because the case plan format and time-line for reports for completing the group care ISP and ISP update format have been changed, procedures to meet these requirements have been revised. The new DSHS 15-209(X), Periodic Review Report/Individual Service Plan, is now required semi-annually, instead of quarterly.

Group care initial and quarterly conference policy and procedures have been modified to improve the treatment planning and permanency planning process and to enhance coordination of activities between DCFS and group care providers. Roles and responsibilities of all parties have been modified to reflect these changes. Although the DSHS 10-167(X), Group Care Quarterly Report Form, has been eliminated, a Group Care Treatment Plan and a Group Care Quarterly Report are required quarterly, as defined by contract.

Revision of the record maintenance procedure, the group care permanency planning service description procedure and the group care hard-to-place plan procedure is necessary due to the revision of the ISP.

Finally, this notice provides clarification of DCFS responsibility to provide group care providers with appropriate medical authorizations. This clarification is necessary due to wide-spread misinterpretation by DCFS caseworkers regarding current policy.

B. ACTION REQUIRED

Revise 34.12.C.3.b. and c. Case Monitor Roles and Responsibilities as follows:

b. Specifically, the responsibilities of the case monitor shall include: Facilitating/attending initial and quarterly conferences, serving as an extension of the DCFS caseworker, notifying the assigned caseworker of children's needs, notifying the assigned caseworker of the outcome of quarterly conferences, and keeping a narrative record of each conference in the facility program file.

c. Visiting each facility assigned to them on a monthly basis. These monitoring visits may be made in conjunction with an initial or quarterly conference.

Revise 34.12.C.4 - DCFS Caseworker Roles and Responsibilities to include:

f. Completion of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, at the time of referral to group care, at the time of placement in group care, and every six months thereafter. When the time period between the referral to group care and the child's actual placement in group care is less than sixty days, the DSHS 15-209(X) revision may be confined to updating the report period section listed on page one of the DSHS 15-209(X), copying the rest of the DSHS 15-209, then distributing the new updated 15-209(X) as described on the form.

Revise 34.14.A.2. - Service Priorities for Children and Families Requesting Group Care Placement as follows:

2. Developing and monitoring the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, for the child and family.

Revise 34.21.e. - Program Expectations/Response Times as follows:

e. An initial conference will occur between the caseworker, the case monitor, the child, the child's parent(s), and the group care staff to ensure implementation of the Periodic Review Report/Individual Service Plan and the Group Care Provider Treatment Plan. The case monitor will represent DCFS at all quarterly conferences. The child's DCFS caseworker may attend the quarterly conference depending on staffing levels and budgeting constraints. Case specific waivers may be made to this requirement. See section 34.12 D.

Revise 34.22 - Appropriate Program/Service Outcomes - as follows:

The appropriate outcome for group care is <u>to achieve the permanent plan</u> and to prepare children to live in a less restrictive setting in the shortest possible time.

Revise 34.31.A.2.e. and g. Group Care Intake Screening and Approval Process - as follows:

e. The purpose (outcome) of placement and the services to be provided to the child and family are clearly stated, are discussed with the child and the child's parent(s) and are documented on the DSHS 15-209(X), Periodic Review Report/Individual Service Plan and DSHS 10-166A(X), Group Care Social Summary/Referral form. Copies of all DSHS 15-209(X) reports will be provided to the child's parent(s).

g. (2) The purpose of the placement is clearly specified and documented on the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

Revise 34.32.A.1-5, Request for Approval to Place as follows:

A. Request for Approval to Place

1. Complete the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, and the DSHS 10-166A(X), Group Care Social Summary/Referral, form. As an attachment to the DSHS 15-209(X), include a list of the type and dates of prior placements of the child and reasons why prior placements terminated.

2. Route one copy of the DSHS 15-209(X) to the child's parents.

3. Follow regional procedure for obtaining approval for placement.

4. If approval for group care is given, route four copies of the DSHS 15-209(X), the DSHS 10-166A(X), and attachments to the group care coordinator for facility selection.

Revise 34.32.B.1. 2. and 4. as follows:

1. The group care coordinator will determine if an in-region placement is available, sending copies of the DSHS 15-209(X) and the DSHS 10-166A(X) to facilities based on a determination of regional goals for prioritizing in-region placement, the earliest availability of placement, and the child's needs.

2. If it appears no in-region placement is available, the group care coordinator will contact coordinators in other regions to explore availability of an out-of-region placement. At least two copies of the completed DSHS 15-209(X) and the DSHS 10-166A(X) will be sent to out-of-region group care coordinators for placement consideration. These can then be used by the coordinator for referral to facilities within their region.

4. Once the group care coordinator has made a referral to the group home, the group home may contact the caseworker to discuss child specific issues. If a group care provider agrees to accept a child for placement, details of the placement date, date for completion of the initial conference, and notification of all parties of the initial conference will be worked out by the caseworker and provider. The initial conference must be completed within two weeks of the actual placement.

Revise 34.33.A., Preplacement Conference as follows:

A. Initial Conference

When a facility has been identified as willing to consider the child for their program, the DCFS caseworker will coordinate an initial conference between the child, family, case monitor, and facility staff.

The DSHS 15-209(X), Periodic Review Report/Individual Service Plan, will be revised and distributed to all parties at the actual time of placement.

The facility will complete and distribute to all parties a proposed Initial Treatment Plan within two weeks of placement. Important aspects of the proposed treatment plan include:

1. Specific goals to be achieved by all parties within the next three months that facilitate the earliest possible achievement of the permanent plan;

2. Treatment activities and expected frequency of treatment activities;

3. Clear identification of responsibilities and expectations of all parties to achieve treatment goals;

4. A family focus aimed towards building specific skills; and

5. A discussion of how/why treatment goals and activities will facilitate the implementation of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

The initial conference will occur within two weeks of the actual placement. Important aspects of the conferences include:

1. A clarification of the involvement and responsibility of the child, child's parent(s), DCFS caseworker, the case monitor, and facility staff;

2. A discussion/resolution of issues based on the content of the DSHS 15-209(X) and the proposed Group Care Initial Treatment Plan focused on determining if both documents:

   a. Appear to be consistent with each other and working towards the same outcomes;

   b. Are family-focused;

   c. Are time-limited;

   d. Focus on building specific skills;

   e. Include input from parent(s) and child,

   f. Will achieve the permanent plan by the earliest possible date, and

   g. Set the date and time of the quarterly conference. <u>This conference will be no more than 90 days from the initial conference</u>.

3. Regions may develop procedures for resolution of issues raised in the conference that cannot be resolved by the case monitor.

When a case planning dispute involves a child from another region, the "receiving" region's procedures for dispute resolution shall be used to settle the conflict. However, if the "sending" region disagrees with the proposed settlement for the dispute, it has the ultimate authority for determining if the child should continue in the group home program. Disputes which can't be settled to the satisfaction of both regions may be referred to the Regional Administrators or their designees for resolution.

Revise 34.33.B., Completion of the DSHS 15-209(X), the Periodic Review Report/Individual Service Plan, as follows:

B. Completion of the DSHS 15-209:

1. The DSHS 15-209(X) is completed to ensure compliance with case plan requirements for Public Law 96-272. This law requires the content of DSHS 15-209(X) to:

   a. Address progress and compliance with the case plan by the parent(s),

   b. Clearly identify permanency planning goals and dates for achieving the plan,

   c. Discuss the appropriateness of the type of placement,

   d. Address the restrictiveness of placement and proximity to the parent(s) home,

   e. Describe the services necessary to achieve the plan,

   f. Identify what preventative services have been offered to the family to prevent placement,

   g. Document parental involvement in the development of the plan.

   DSHS 15-209 is the most important document relating to placement. A copy of the DSHS 15-209(X) shall be sent to the parents with the date sent clearly noted on the DSHS 15-209. Other copies are distributed as indicated on the DSHS 15-209.

2. The completion of the DSHS 15-209(X) and subsequent quarterly conference dates may be coordinated to synchronize their completion with juvenile court review hearings as long as the DSHS 15-209(X) is completed within a six-month

time period of the last completed DSHS 15-209(X). Quarterly conference dates and other required reporting may be moved earlier to accomplish this synchronization but shall not be moved beyond the six-month review period identified in the previous DSHS 15-209(X).

For example: A DSHS 15-209(X) is completed on 3/01/87. A quarterly conference occurs on 3/15/87. The next court review is scheduled for 8/01/87. The DSHS 15-209(X) completion date of 8/31/87 is moved to 7/01/87 to synchronize with the court review. The next quarterly conference is moved to 7/14/87. The next DSHS 15-209(X) completion date is six months later: 12/31/87.

3. The DSHS caseworker shall have the lead responsibility for completion of the initial and subsequent DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The DSHS 15-209 should be completed and distributed to parent(s), child, case monitor, and group care facility 14 days before any scheduled court review hearing, at any time it is revised, and must be revised semi-annually. A new DSHS 15-209 is prepared for every other quarterly conference, i.e, at time of placement in group care, before the second quarterly conference, the 4th quarterly conference, etc.

4. The case monitor shall be present at all group care conferences in order to meet the child and family, clarify monitor roles and responsibilities, facilitate the group care conference, and act as an extension of the DCFS caseworker in the absence of the caseworker.

Revise 34.33.D. as follows:

D. For a child eligible for adoption support services, the DCFS caseworker will forward a copy of the DSHS 15-209(X) with the adoption support application to the adoption support program manager using procedures described in Chapter 32.

Add to 34.34.D., Placement Responsibility Related to Medical Issues as follows:

9. The DCFS caseworker will ensure the group care agency accepting a child for placement is provided with a DSHS 9-04, Voluntary Consent to Place Form, authorizing emergency medical care. The caseworker has the authority to sign the DSHS 9-04 when the child is in the temporary custody of the division or when the child's parents have signed a DSHS 9-04, Voluntary Consent to Place form, authorizing DCFS to provide consent to emergency medical care for their child.

Revise 34.35.A.2.b.(1.) as follows:

(1) The services provided by the agency to prepare the child to return to a less restrictive setting and achieve the permanent plan as expressed in the DSHS 15-209(X), Periodic Review Report/ Individual Service Plan, the Group Care Treatment Plan, the Group Care Progress Report, and the worker's interview with the child and parent(s).

Revise 34.35.B.1-6., Quarterly Reports, Conferences and ISP Review as follows:

B. Quarterly Reports, Conferences, Periodic Review Report/Individual Service Plan Review and Treatment Plan Review:

1. Prior to the quarterly conference, the DCFS caseworker will ensure the Group Care Quarterly Report and the proposed Group Care Treatment Plan is received from the group care agency 30 days in advance. The Group Care Quarterly Report and the Group Care Treatment Plan are sent to both the DCFS caseworker and the case monitor.

2. The DCFS caseworker is responsible to review and approve Quarterly Reports and Treatment Plans submitted by providers.

a. The DCFS caseworker will be responsible to ensure the Group Care Quarterly Report and Treatment Plan provides complete and descriptive information on the children's status.

b. Through the monitoring of the Group Care Quarterly Report and Treatment Plan the DCFS caseworker will ensure children with special education needs are receiving the required educational services.

c. The DCFS caseworker with supervisory approval may return to the provider any Group Care Quarterly Report or Group Care Treatment Plan not meeting expectations of the division. If returned, the Group Care Quarterly Report or Group Care Treatment Plan shall be attached to a letter outlining the caseworker's concerns and sent to the group care agency with a carbon copy to the DCFS Administrator.

d. Group homes are responsible for submitting copies of the Group Care Quarterly Report and Group Care Treatment Plan 30 days prior to the quarterly conference.

When providers regularly fail to submit the Group Care Quarterly Report or Group Care Treatment Plan in a timely manner, no payment shall be made until reports are received.

e. When providers consistently fail to submit timely Quarterly Reports and/or when they continually submit Quarterly Reports not adequate to the expectation of the division, the DCFS Administrator shall notify the regional Group Care Coordinator and request technical assistance/consultation on the problem as a contract compliance issue. If the regional Group Care Coordinator believes the problem is not resolvable at the regional level, he/she shall contact the state office group care program manager for technical assistance/consultation.

3. A copy of the Group Care Quarterly Report and the Group Care Treatment Plan is always maintained in the child's case record. The case monitor shall also maintain a copy of these documents in the facility monitoring file.

4. DCFS will monitor the group home through monthly monitoring visits, quarterly conferences, and review of the Group Care Quarterly Report and the Group Care Treatment Plan. They will ensure that group care staff are encouraging and assisting parents and siblings to make visitation in accordance with agreements specified in the juvenile court order and the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

   a. The parents shall participate in any modification of the visitation agreement.

   b. Efforts made by the DCFS caseworker or case monitor to involve the parents with the placement should be carefully documented in the child's record.

   c. Should contact with parents be broken, the DCFS caseworker must ensure that efforts are made to locate the child's parents by DCFS. Efforts to locate parents will be documented in the child's record.

   d. The parent must be informed of changes in the medical condition or whereabouts of the child, unless this information would endanger the child. Efforts to notify the child's parents of changes in the child's medical condition will be documented in the child's record and of whereabouts on the DSHS 15-209(X).

5. a. A quarterly conference will be held by the case monitor with the child, parent(s) and group care staff to address:

(1) Progress and compliance in achieving goals outlined in the previous Periodic Review Report/ Individual Service Plan and the Group Care Treatment Plan,

(2) The need for continuing group care services/placement.

(3) The new Group Care Treatment Plan,

(4) Whether the Group Care Treatment Plan goals and activities are consistent with and support the achievement of the permanent plan and other activities described in DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

(5) The need for a revised treatment plan due to caseworker or parent/child input at the quarterly conference. If needed, the group care agency will prepare a revised Treatment Plan within two weeks of the quarterly conference and distribute to the caseworker, case monitor, parent(s) and child. The revised plan becomes a part of both the child's and case monitor record.

(6) The need for modification of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The case monitor will forward written recommendations for proposed modifications to the DCFS caseworker. The DCFS caseworker will evaluate any such recommendations for modifications in the DSHS 15-209(X) and will inform the group care agency, the case monitor, the parent(s), and the child of his/her decisions regarding changes in the DSHS 15-209(X). If the DCFS caseworker does modify the DSHS 15-209(X), copies of the revised DSHS 15-209(X) will be sent to the group care agency, the case monitor, parent(s) and child.

5. b. To address situations when conflict regarding the content of case planning and treatment planning activities cannot be resolved by the case monitor, regions may develop procedure for resolving such conflict. (See 34.33A.)

6. Periodic Review Report Individual Service Plan Update.

   a. The DCFS caseworker has the responsibility for revising the DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The DSHS 15-209(X) is completed at time of group care referral, is revised at time of group care placement, and at least every six months thereafter. The periodic review report period dates on the DSHS 15-209(X) update shall start by no later than the day after the previous DSHS 15-209(X) report period expires.

   b. The DCFS caseworker is responsible for completing and distributing copies of the DSHS 15-209(X) to the group care agency, the case monitor, parents and child, at least 14 days before the initial conference, the second quarterly conference, the fourth quarterly conference, etc.

   c. The case monitor for out-of-region placements will usually carry ongoing responsibility for representing DCFS at all quarterly conferences and shall be responsible for maintaining a narrative recording in the DCFS facility file of all quarterly conferences and for communicating the content of such conferences back to the DCFS caseworker.

Revise 34.35.B.8. as follows:

8. Upon completion of the quarterly conference, the case monitor will send a copy of any proposed modifications of the DSHS 15-209(X) to the DCFS caseworker. The monitor shall communicate with the caseworker regarding the content of the quarterly conference. A narrative recording regarding the quarterly conference will be placed in the facility file. The monitor shall also notify the caseworker of the date for the next quarterly conference and invite the caseworker to be present (if his/her travel budget and staff time permits).

Revise 34.35.C.2., Record Maintenance, as follows:

2. Case monitors will maintain a working file for facilities for whom they perform monitoring services. The file will be called the Facility Monitoring file. A running narrative of dates of site visits, observations, quarterly conference summaries, and action taken will be part of the facility program file.

   Copies of the DCFS 15-209(X), social summary, group care treatment plan, and group care progress report shall also be placed in the Facility Monitoring file and be retained for one year

following the child's discharge from the facility. These files will be used as one source for contract compliance (performance based monitoring).

Regions may develop regional procedure for the organization and location of Facility Monitoring files. However, the material listed above should be readily available for reading by supervisors and auditors.

Revise 34.35.D.3.a. and b. as follows:

a. The DCFS caseworker in cooperation with the parent(s) and child shall define a permanent planning outcome goal when completing the DSHS 15-209(X) at the time of referral for group care placement.

b. The DCFS caseworker shall assess in conjunction with the case monitor, group care provider, parent(s), and child, the appropriateness of the permanency plan on, at a minimum, a semi-annual basis. Modifications/revisions to the permanency plan that are the result of the group care quarterly conference may result in an earlier than semi-annual revision of the DSHS 15-209(X), if the caseworker believes such a modification is necessary.

Revise 34.35.B.3. and 4., Group Care Hard-To-Place Request/Approval Procedure, as follows:

3. If the HTP request is for a child not placed in group care previously, the service worker will submit the most recent DSHS 15-209(X) and DSHS 10-166B with the referral memo.

4. If the HTP request is for a child previously placed in group care, the service worker will submit the most recent DSHS 15-209(X), the most recent Group Care Treatment Plan and the most recent Group Care Progress Report.

Revise 34.99, Required Forms and Instructions as follows:

Delete: DSHS 10-166(X) Group Care Screening/Approval Form,
DSHS 10-166B(X) Initial Service Plan,
DSHS 10-167(X) Group Care Quarterly Report Form,
DSHS 10-167A(A) Quarterly Conference Summary, ISP Update and Placement Evaluation.

Add: DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-73
Issued: 07/11/88

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Katharine Briar, Assistant Secretary

SECTIONS REVISED:
32.13 K, 32.41

EFFECTIVE: Immediately
FOR INFORMATION CALL:
Dan Gadman
Non-SCAN 753-0561 or
SCAN 234-0561

IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM MS FB-11
FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY: OFFICE OF STAFF SERVICES AT MS OB-22

SUBJECT:
1. EXTENSION OF VOLUNTARY PLACEMENT LIMITATION TO 180 DAYS
2. PROCEDURES FOR USE OF THE DSHS 9-04B, VOLUNTARY PLACEMENT AGREEMENT

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-73 was entered.

A. BACKGROUND

DSHS originally placed limitations on the length of voluntary placements as a means to reduce risk of foster care drift and delayed permanency planning. In implementing P.L. 96-272, DSHS restricted voluntary placements to three months in order to ensure timeliness of court reviews. In addition, because Washington State did not have authority to claim Title IV-E funds on voluntary placements, this restriction also reduced expenditures in the state-funded foster program.

With the development of the Administrative Review system for P.L. 96-272 and amendment of the state's Title IV-E plan to allow IV-E payments on certain voluntary placements, it is now possible to expand the use of voluntary placements.

This material describes those placement situations which are appropriate to authorize under a voluntary agreement between DSHS and the parent. Procedures for completing DSHS 9-04B Voluntary Placement Agreement which meets the requirements of P.L. 96-272 are also given. An agreement format, rather than the consent to place format, is used. This emphasizes the responsibilities which both the parent and state have to ensure that activities occur which will result in the child's return home or movement toward an alternate permanent placement. This material also implements procedures for obtaining signatures under the state of Washington Parenting Act of 1987.

Until further notice, private placement agencies will continue to use the DSHS 9-04(X) Placement Authorization and Acknowledgement form for children placed under their supervision. DCFS staff should continue to use the DSHS 9-04(X) for court-ordered placements for parents to acknowledge, if appropriate, their responsibility to make payments to the Office of Support Enforcement.

In addition, and until further notice, DCFS staff and private placement agencies shall continue to accept voluntary placement consents relative to Indian Children only when validated by the juvenile court.

B. ACTION REQUIRED

Delete the text of Section 32.13 K of the DCFS Manual and replace the text with the following:

K. Use of Voluntary Placement

Voluntary placements are limited to 180 days, unless an extension is approved by the regional administrator or area manager and an administrative review has occurred.

DCFS may not extend a voluntary placement if the extension will result in the child being in continuous out-of-home care for longer than eighteen months without a court review hearing.

DCFS shall not use voluntary placements in those cases where the return of a child to his/her parents would pose a risk of imminent harm to the child or in situations where the family is not working cooperatively with the department.

DCFS shall not enter into a voluntary placement agreement unless DCFS is reasonably assured that the parent agreeing to placement has the legal authority to do so. In all voluntary placements, DSHS staff shall work diligently to involve both parents in case planning.

C. PROCEDURES

Delete the text of Section 32.41 of the DCFS Manual and replace it with the following:

32.41 Voluntary Consent Placement Requesting DSHS Financial Support

A. When assessing the appropriateness of placement on a voluntary basis versus a court ordered one, DCFS service worker should evaluate the following factors:

1. Would the child be at risk of imminent harm if the parents withdrew their support from the voluntary agreement?

2. Are the parents entering into the agreement willingly? Do they comprehend their responsibilities under the agreement and the responsibilities they have given to DCFS?

3. Does the plan for out-of-home care have a short term focus limited to 180 days or less and is the permanent plan to return the child to his/her parents?

4. Will a lack of early court involvement delay achieving a permanent placement?

5. Are the child's placement needs such that it is appropriate to provide placement services on a trial basis, rather than having them ordered by the court?

6. Does the child need the protection of the court in order to ensure he/she receives services or does DCFS need the authority of the court in order to deliver services?

B. The DCFS service worker shall complete the Voluntary Placement Agreement (DSHS 9-04 B, copy attached) by:

1. Involving both parents in the discussion and the decision to place the child in care. If one parent is not immediately available, the case worker should work with the other parent to involve the absent parent, and hold preliminary discussions with the signing parent as to what actions will occur if the absent parent should request visits or termination of the voluntary placement.

2. Reviewing and discussing the contents of the agreement with the parents including the activities which they will engage in and the activities DCFS will engage in, in order to meet the terms of the agreement.

3. Establishing and recording the time period, both begin and <u>end</u> dates, for the voluntary placement on the form. Projecting the <u>end</u> date of the placement is critical in maintaining the short term focus of the placement.

4. Advising parents of the need to request termination of an agreement in writing and with 72 hours notice if they wish to end the placement prior to its agreed termination.

C. The DCFS service worker shall obtain the parent(s) signature on the placement agreement. For legal and case planning reasons, efforts should be made to secure both parent's signatures on the placement agreement. <u>If only one parent is available, a voluntary placement agreement should not be negotiated unless</u>:

1. The parent who signs is a single parent, or by divorce or legal separation is the custodial parent; or

2. The parent has authority pursuant to a parenting plan to sign the agreement, or is the parent with whom the child resides the majority of the time as specified in the parenting plan, or has been designated custodian of the child in the parenting plan.

If only one parent signs the voluntary placement agreement, that parent must also certify under penalty of perjury that they have the authority to sign the agreement. If DCFS staff doubts the authenticity of the parent's statement, the worker shall obtain consultation with the Assistant Attorney General, or reevaluate the plan for a voluntary placement.

D. The DCFS service worker must also sign the voluntary placement agreement for it to be valid.

E. The DCFS service worker is responsible for monitoring the Voluntary Placement Agreement. If at any point the DCFS service worker determines that the parent(s) are not complying with the voluntary placement agreement, or if the child's needs are not being met through the voluntary placement, the service worker may exercise the options of either terminating the placement or taking steps to have the placement become court-ordered.

F. The DCFS service worker may request an exception to the 180 day limit. Regional Administrators or Area Managers have the authority to grant exceptions to the 180 day limit on voluntary placements if:

1. An <u>administrative review has occurred</u> and has recommended that placement continue on a voluntary basis, <u>and</u>

2. The extension will not cause the child to remain in out-of-home care for a period of eighteen months without a court review hearing being held that meets the requirements of P.L. 96-272, <u>and</u>

3. Continued voluntary placement is appropriate in that one of the following exists:

   a. The return of the child to his own home or other permanent placement is imminent; or

   b. The child is seventeen years of age or older.

G. Child placement agencies will continue to use the DSHS 9-04(X), Placement Authorization and Acknowledgement form for children whose voluntary placement is supervised by them. NOTE: If DCFS is supervising the placement but "borrowing" a Child Placement Agency home, the Voluntary Placement Agreement, rather than the Placement Authorization and Acknowledgement form is to be used.

H. The DCFS service worker should continue to use the DSHS 9-04(X) for court-ordered placements for parents to acknowledge, when appropriate, their responsibility to make payments to the Office of Support Enforcement.

I. Until further notice, the procedures outlined in the DCFS policy memo dated July 17, 1987 on the subject "Indian Child Welfare Bill," will be followed relative to the voluntary placement of Indian Children in foster care. DCFS will not make or approve voluntary placement of Indian children into foster care unless the consent is executed in writing before the court and appropriately validated by the court.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-76
Issued: 08/03/88

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Katherine Briar, Assistant Secretary

SECTIONS REVISED:
T-24, Chapter 34

EFFECTIVE: 07/01/88
FOR INFORMATION CALL:
Ken Guza
Non-SCAN 753-3812 or
SCAN 234-3812

IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM MS FB-11
FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY OFFICE
OF STAFF SERVICES AT MS OB-22

SUBJECT: 1. GROUP CARE EXCEPTIONAL COST NON-MAINTENANCE
2. GROUP CARE EXCEPTIONAL COST MAINTENANCE

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-76 was entered.

A. BACKGROUND

Tan Notice T-24 describes the approval and/or authorization procedures for Exceptional Cost Group Care. This Tan Notice modifies that policy by separating authorizations under Exceptional Cost into categories that are allowable/non-allowable under Federal Title IV-E reimbursements.

In order to ensure that federal funding is obtained for exceptional cost group care, it is necessary to identify if the exceptional cost item or activity is a maintenance item or a non-maintenance item.

Maintenance items refer to exceptional cost activities or purchases that are primarily for and directly related to the physical care or supervision of the child. Maintenance items do not include activities which are of a therapeutic or behavior modification nature.

Non-Maintenance items refer to exceptional cost activities that are not directly related to the physical care and supervision of the child. Most items purchased under an exceptional cost plan are clearly identifiable as maintenance or non-maintenance items. However, in the case of additional funds for child care staff, it will be necessary to identify if the child care staff additional hours are for supervision of the child or for therapeutic interventions. Sometimes additional child

care hours are for both. In those cases, it is necessary to estimate the portion of time (and dollar authorization) that is for supervision as a maintenance cost and the portion of time and dollars that is for therapeutic intervention and other exceptional cost non-maintenance items.

B. ACTION REQUIRED

1. Effective on receipt of the new DSHS 5-10(X) 7-88, Exception Request Form, discontinue use of:

   a. DSHS 5-195(X), Additional Payment Request found in T-24.

   b. Exceptional Cost Group Care budget format in T-24.

2. Effective with issuance of SSPS Service Code 3470 and 3471, authorize Exception Cost Group Care as follows:

   a. Use Service Code 3470, Group Care Exceptional Cost Maintenance for approved items or activities that are related to maintenance of the child in group care. Maintenance items and activities include:

      - Special clothing purchases
      - Furniture or equipment necessary for the physical care of the child
      - Additional child care staff hours to supervise the child.

   b. Use Service Code 3471, Group Care Exceptional Cost Non-Maintenance for approved services that are not related to the maintenance of the child in group care. Non-Maintenance activities include:

      - Purchased therapy
      - Purchased recreation programs
      - Additional social work hours
      - Additional child care hours to oversee a behavior modification program.

c. In instances where the use of additional child care hours include both Maintenance and Non-Maintenance services, estimate the portion of time (and dollar authorization) assigned to each function and use both codes 3470 and 3471:

(1) Use code 3470 for that portion of the additional child care hours (and dollars) that are for supervision, and

(2) Use code 3471 for that portion of the additional child care hours (and dollars) that are for therapeutic interventions and other non-maintenance activities.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-81
Issued: 09/12/88

FROM: Katharine Briar, Assistant Secretary
Children, Youth and Family Services

SECTIONS REVISED: 32.61
(Also add to Chapters 24, 26, and 34)

EFFECTIVE: July 1, 1988
FOR INFORMATION CALL:
Dick Anderson
SCAN: 234-0240
Non-SCAN: 753-0240

IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM MS FB-11
FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY OFFICE OF STAFF SERVICES AT MS OB-22.

SUBJECT:
1. SOCIAL WORKERS ROLE IN DETERMINING ELIGIBILITY FOR FEDERAL FUNDING FOR CHILDREN IN OUT-OF-HOME CARE
2. REVISED APPLICATION PROCEDURES FOR OTHER FINANCIAL BENEFITS ON BEHALF OF CHILDREN IN OUT-OF-HOME CARE
3. USE OF ELIGIBILITY ACTION REFERRAL, DSHS 14-279
4. USE OF FAMILY FACE SHEET, DSHS 14-24
5. USE OF FINANCIAL RESOURCES DATA SHEET, DSHS 14-281
6. USE OF FINANCIAL RESOURCES REDETERMINATION DATA SHEET, DSHS 14-280

Place this notice in front of DCFS Manual Chapters 24, 26, 32, 34, and note on the Tan Notice Control Sheet the date Notice T-81 was entered.

A. BACKGROUND

Recent federal audits have identified problems in the current methods of determining eligibility for federal financial participation in the state's foster care program. In order to assure that the state makes maximum use of federal resources in financing its program of providing foster care and adoption support, new procedures are being introduced.

These policies and procedural changes meet the following objectives:

1. Enhance federal financial participation in the foster care program.

2. Ensure that all other benefits for which children are eligible are claimed on their behalf.

3. Streamline the role of the Social Worker in accomplishing such tasks as data collection, eligibility determination, referral for other financial benefits, and enumeration procedures.

4. Specialize the function of eligibility determination by placing responsibility for this activity with staff trained in this function.

The revised eligibility process and accompanying forms were developed in conjunction with recommendations received from State IV-B/IV-E Coordinators, Work Environment Action Committee (WEAC), and numerous social services staff in DCFS offices.

In the past, Title IV-E eligibility determinations have been made by social workers who completed the DSHS 14-140(X) forms. With the development of these new procedures, the social worker's primary role is to collect data from the child's family regarding their available financial resources. In addition, the revised procedures are designed to identify other financial resources for which the child and/or parents may be eligible.

B. POLICY STATEMENT

DCFS shall review the circumstances of every child placed in foster care to determine the child's eligibility for Title IV-E and/or other financial benefits.

The DCFS Social Worker shall review each case when the child first enters care and every six months thereafter if necessary. The role of the Social Worker is to collect data regarding the family's social and financial circumstances.

The Eligibility Specialist shall analyze the data, make eligibility determinations, apply for other financial benefits, and notify appropriate parties of the results of these actions.

C. ELIGIBILITY PROCEDURES FOR CHILDREN WHOSE PLACEMENT IS SUPERVISED BY DSHS

1. The DCFS Social Worker shall take the following actions on each initial placement:

a. Authorize payment within five working days of placement. Indicate state funds (code 5) as the initial source of funds on the SSPS Social Services Authorization, DSHS 14-154(X).

b. Complete/obtain the following items within thirty (30) days of placement.

(1) Family Face Sheet, DSHS 14-24(X);

(2) Financial Resources Data Sheet, DSHS 14-281, on all children whose placement is supervised by DSHS, including those in private agency care if DSHS is the supervising agency;

(3) The Child Placement and Legal History, DSHS 15-192;

(4) Social Services Authorization, DSHS 14-154(X);

(5) ITIS Clearance (if already available);

(6) Notification to Financial Services, DSHS 14-226(X); and

(7) The Voluntary Placement Agreement or petition and court order leading to the initial removal from the home.

c. Transmit a copy of the above items to the Eligibility Specialist using the Eligibility Action Referral, DSHS 14-279, as a cover memo. The Social Worker completes Part I of this form indicating which of the above listed items are attached.

d. Request the Eligibility Specialist determine the child's IV-E eligibility. Complete Part II of the Eligibility Action Referral, DSHS 14-279.

e. Request the Eligibility Specialist assist in applying for benefits to which the child may be entitled. The application procedures for benefits which require efforts in addition to the completion of forms (such as personal office visits for SSI benefits), will continue to be conducted by the Social Worker. Since local office procedures vary throughout the state, the roles of the Eligibility Specialist and Social Worker in applying for other financial benefits may vary accordingly. It shall be the responsibility of each region to define these roles according to local practice.

f. Change the DSHS 15-159 to show the correct source of funds after notification is received from the Eligibility Specialist as described in the next section.

2. The Eligibility Specialist shall take the following action upon notification of each placement:

a. Receive the Eligibility Action Referral, DSHS 14-279, and accompanying packet of materials from the Social Worker.

b. Determine IV-E eligibility for the child.

c. Notify the Social Worker of the correct source of funds via the color coded forms; Notification of Funding Category for Placement, DSHS 2-501, 2-501A, and 2-501B.

NOTE: In addition to notifying the Social Worker of the correct source of funds, some regions may elect to have the Eligibility Specialist also enter the change on SSPS. The IV-E Coordinator in each region will determine this responsibility.

d. Assist the Social Worker in the application for other benefits such as SSI, SSA, Veteran's benefits, etc.

e. Make referrals to the Office of Support Enforcement and Provider Services if the child has other medical insurance.

3. Six-Month Eligibility Redetermination Process

Children who are eligible for Title IV-E funding must have their eligibility redetermined every six months.

a. Four weeks prior to the redetermination month, the Eligibility Specialist will notify the Social Worker by sending the Financial Resources Redetermination Data Sheet, DSHS 14-280.

b. The Social Worker completes the Redetermination Data Sheet and returns it to the Eligibility Specialist within 20 days. Include an updated copy of the DSHS 15-192, Child Placement and Legal History.

c. The Eligibility Specialist completes the review and advises the Social Worker via the color coded DSHS 2-501, 2-501A, or 2-501B if the child continues to be eligible for IV-E or if the source of funds should be changed.

4. Purpose of Forms

The Family Face Sheet, Financial Resources Data Sheet, and Financial Resources Redetermination Data Sheet are used to:

a. Function as a face sheet for all children receiving DSHS services.

b. Serve as a data collection instrument on the family and child(ren)'s social and financial circumstances.

c. Provide information for the Eligibility Specialist at the time of the Title IV-E semi-annual redetermination.

d. Provide information for referral to the Office of Support Enforcement.

e. Provide information for Provider Services in claiming third party liability medical insurance.

f. Provide information for WIN referral.

g. Provide information relative to other benefits for which the child might be entitled.

h. Provide information necessary to file a social security number application.

i. Serve as the source document to validate claims for Title IV-E federal funds in the foster care program.

D. PROCEDURES FOR CHILDREN WHOSE PLACEMENT IS SUPERVISED BY A CHILD PLACING AGENCY (CPA)

1. The CPA shall take following action:

a. Complete pages 1 and 2 of the Source of Funds Application, DSHS 14-140(X). This form serves as the face sheet instead of the DSHS 14-24(X).

b. Submit the DSHS 14-140(X) to the appropriate DCFS office along with the ISP and legal authority to place.

2. The DCFS Social Worker shall take the following action:

a. Authorize payment within five working days for children whose placement they have approved. Indicate source of funds as state (code 5).

b. Submit copies of the following items to the Eligibility Specialist within 30 days of placement.

(1) Eligibility Action Referral Form;

(2) DSHS 14-140(X);

(3) Social Services Authorization, DSHS 14-154(X);

(4) Notification to Financial Services, DSHS 14-226(X); and

(5) Placement Authorization and Acknowledgement, DSHS 9-04(X), or court order authorizing placement.

3. The Eligibility Specialist shall take the following action:

a. Refer the case to the Office of Support Enforcement or Provider Services, if appropriate.

b. Review for potential benefits from other sources such as SSI or SSA.

c. Inform the Social Worker if there are benefits to which the child may be entitled and assist in the application process.

E. PLACEMENTS NOT REQUIRING A IV-E DETERMINATION

The following types of placements do not require a referral to the Eligibility Specialist for a IV-E determination.

1. Placements lasting less than 72 hours (excluding weekends, holidays).

2. Relative placements where no foster care payment is made because the relative elects to receive AFDC benefits. A referral is required should the child be later removed and placed in a home where a foster care payment is made.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-76
Issued: 08/03/88

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Katherine Briar, Assistant Secretary

SECTIONS REVISED:
T-24, Chapter 34

EFFECTIVE: 07/01/88
FOR INFORMATION CALL:
Ken Guza
Non-SCAN 753-3812 or
SCAN 234-3812

IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM MS FB-11
FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY OFFICE
OF STAFF SERVICES AT MS OB-22

SUBJECT: 1. GROUP CARE EXCEPTIONAL COST NON-MAINTENANCE
2. GROUP CARE EXCEPTIONAL COST MAINTENANCE

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-76 was entered.

A. BACKGROUND

Tan Notice T-24 describes the approval and/or authorization procedures for Exceptional Cost Group Care. This Tan Notice modifies that policy by separating authorizations under Exceptional Cost into categories that are allowable/non-allowable under Federal Title IV-E reimbursements.

In order to ensure that federal funding is obtained for exceptional cost group care, it is necessary to identify if the exceptional cost item or activity is a maintenance item or a non-maintenance item.

Maintenance items refer to exceptional cost activities or purchases that are primarily for and directly related to the physical care or supervision of the child. Maintenance items do not include activities which are of a therapeutic or behavior modification nature.

Non-Maintenance items refer to exceptional cost activities that are not directly related to the physical care and supervision of the child. Most items purchased under an exceptional cost plan are clearly identifiable as maintenance or non-maintenance items. However, in the case of additional funds for child care staff, it will be necessary to identify if the child care staff additional hours are for supervision of the child or for therapeutic interventions. Sometimes additional child

care hours are for both. In those cases, it is necessary to estimate the portion of time (and dollar authorization) that is for supervision as a maintenance cost and the portion of time and dollars that is for therapeutic intervention and other exceptional cost non-maintenance items.

B. ACTION REQUIRED

1. Effective on receipt of the new DSHS 5-10(X) 7-88, Exception Request Form, discontinue use of:

   a. DSHS 5-195(X), Additional Payment Request found in T-24.

   b. Exceptional Cost Group Care budget format in T-24.

2. Effective with issuance of SSPS Service Code 3470 and 3471, authorize Exception Cost Group Care as follows:

   a. Use Service Code 3470, Group Care Exceptional Cost Maintenance for approved items or activities that are related to maintenance of the child in group care. Maintenance items and activities include:

      - Special clothing purchases
      - Furniture or equipment necessary for the physical care of the child
      - Additional child care staff hours to supervise the child.

   b. Use Service Code 3471, Group Care Exceptional Cost Non-Maintenance for approved services that are not related to the maintenance of the child in group care. Non-Maintenance activities include:

      - Purchased therapy
      - Purchased recreation programs
      - Additional social work hours
      - Additional child care hours to oversee a behavior modification program.

c. In instances where the use of additional child care hours include both Maintenance and Non-Maintenance services, estimate the portion of time (and dollar authorization) assigned to each function and use both codes 3470 and 3471:

(1) Use code 3470 for that portion of the additional child care hours (and dollars) that are for supervision, and

(2) Use code 3471 for that portion of the additional child care hours (and dollars) that are for therapeutic interventions and other non-maintenance activities.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-73
Issued: 07/11/88

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Katharine Briar, Assistant Secretary

SECTIONS REVISED:
32.13 K, 32.41

EFFECTIVE: Immediately
FOR INFORMATION CALL:
Dan Gadman
Non-SCAN 753-0561 or
SCAN 234-0561

IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM MS FB-11
FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY: OFFICE OF STAFF SERVICES AT MS OB-22

SUBJECT: 1. EXTENSION OF VOLUNTARY PLACEMENT LIMITATION TO 180 DAYS

2. PROCEDURES FOR USE OF THE DSHS 9-04B, VOLUNTARY PLACEMENT AGREEMENT

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-73 was entered.

A. BACKGROUND

DSHS originally placed limitations on the length of voluntary placements as a means to reduce risk of foster care drift and delayed permanency planning. In implementing P.L. 96-272, DSHS restricted voluntary placements to three months in order to ensure timeliness of court reviews. In addition, because Washington State did not have authority to claim Title IV-E funds on voluntary placements, this restriction also reduced expenditures in the state-funded foster program.

With the development of the Administrative Review system for P.L. 96-272 and amendment of the state's Title IV-E plan to allow IV-E payments on certain voluntary placements, it is now possible to expand the use of voluntary placements.

This material describes those placement situations which are appropriate to authorize under a voluntary agreement between DSHS and the parent. Procedures for completing DSHS 9-04B Voluntary Placement Agreement which meets the requirements of P.L. 96-272 are also given. An agreement format, rather than the consent to place format, is used. This emphasizes the responsibilities which both the parent and state have to ensure that activities occur which will result in the child's return home or movement toward an alternate permanent placement. This material

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF DCFS MANUAL

NOTICE NO.: T-63
Issued: 04/08/87

FROM: CHILDREN, YOUTH, AND FAMILY SERVICES
Audrey Fetters, Assistant Secretary

SECTIONS REVISED
34.12, 34.14, 34.21, 34.30, 34.32, 34.33, 34.35, 34.36, 34.99
as described below

EFFECTIVE: 04/15/87
FOR INFORMATION CALL:
Sue Browning at
Non-SCAN 586-0253 or
SCAN 321-0253

FOR MANUAL DISTRIBUTION CHANGES, PLEASE NOTIFY: MANUAL PRODUCTION UNIT AT MS OB-16. IF NOT DELIVERABLE, RETURN TO: DSHS STOCKROOM, MS FB-11

SUBJECT:
1. REVISION OF GROUP CARE PERIODIC REVIEW/INDIVIDUAL SERVICE PLAN FORM.
2. REVISION OF PREPLACEMENT PROCEDURES AND THE DEVELOPMENT OF THE ISP.
3. REVISION OF QUARTERLY REPORTS, CONFERENCES, AND ISP REVIEW PROCEDURE.
4. REVISION OF RECORD MAINTENANCE PROCEDURE.
5. REVISION OF GROUP CARE PERMANENT PLANNING SERVICE DESCRIPTION.
6. REVISION OF GROUP CARE HARD-TO-PLACE PLAN PROCEDURE.
7. CLARIFICATION OF PLACEMENT RESPONSIBILITY RELATED TO MEDICAL ISSUES.

Place this notice in front of DCFS Manual, Chapter 34, and note on the Tan Notice Control Sheet the date Notice No. T-63 was entered.

A. BACKGROUND

Following the 1986 P.L. 96-272 audit of Washington State's policy and procedures, the federal government recommended that a standardized ISP form be developed to address all case plan issues audited by the federal government.

Because the case plan format and time-line for reports for completing the group care ISP and ISP update format have been changed, procedures to meet these requirements have been revised. The new DSHS 15-209(X), Periodic Review Report/Individual Service Plan, is now required semi-annually, instead of quarterly.

Group care initial and quarterly conference policy and procedures have been modified to improve the treatment planning and permanency planning process and to enhance coordination of activities between DCFS and group care providers. Roles and responsibilities of all parties have been modified to reflect these changes. Although the DSHS 10-167(X), Group Care Quarterly Report Form, has been eliminated, a Group Care Treatment Plan and a Group Care Quarterly Report are required quarterly, as defined by contract.

Revision of the record maintenance procedure, the group care permanency planning service description procedure and the group care hard-to-place plan procedure is necessary due to the revision of the ISP.

Finally, this notice provides clarification of DCFS responsibility to provide group care providers with appropriate medical authorizations. This clarification is necessary due to wide-spread misinterpretation by DCFS caseworkers regarding current policy.

B. ACTION REQUIRED

Revise 34.12.C.3.b. and c. Case Monitor Roles and Responsibilities as follows:

b. Specifically, the responsibilities of the case monitor shall include: Facilitating/attending initial and quarterly conferences, serving as an extension of the DCFS caseworker, notifying the assigned caseworker of children's needs, notifying the assigned caseworker of the outcome of quarterly conferences, and keeping a narrative record of each conference in the facility program file.

c. Visiting each facility assigned to them on a monthly basis. These monitoring visits may be made in conjunction with an initial or quarterly conference.

Revise 34.12.C.4 - DCFS Caseworker Roles and Responsibilities to include:

f. Completion of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, at the time of referral to group care, at the time of placement in group care, and every six months thereafter. When the time period between the referral to group care and the child's actual placement in group care is less than sixty days, the DSHS 15-209(X) revision may be confined to updating the report period section listed on page one of the DSHS 15-209(X), copying the rest of the DSHS 15-209, then distributing the new updated 15-209(X) as described on the form.

Revise 34.14.A.2. - Service Priorities for Children and Families Requesting Group Care Placement as follows:

2. Developing and monitoring the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, for the child and family.

Revise 34.21.e. - Program Expectations/Response Times as follows:

e. An initial conference will occur between the caseworker, the case monitor, the child, the child's parent(s), and the group care staff to ensure implementation of the Periodic Review Report/Individual Service Plan and the Group Care Provider Treatment Plan. The case monitor will represent DCFS at all quarterly conferences. The child's DCFS caseworker may attend the quarterly conference depending on staffing levels and budgeting constraints. Case specific waivers may be made to this requirement. See section 34.12 D.

Revise 34.22 - Appropriate Program/Service Outcomes - as follows:

The appropriate outcome for group care is <u>to achieve the permanent plan</u> and to prepare children to live in a less restrictive setting in the shortest possible time.

Revise 34.31.A.2.e. and g. Group Care Intake Screening and Approval Process - as follows:

e. The purpose (outcome) of placement and the services to be provided to the child and family are clearly stated, are discussed with the child and the child's parent(s) and are documented on the DSHS 15-209(X), Periodic Review Report/Individual Service Plan and DSHS 10-166A(X), Group Care Social Summary/Referral form. Copies of all DSHS 15-209(X) reports will be provided to the child's parent(s).

g. (2) The purpose of the placement is clearly specified and documented on the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

Revise 34.32.A.1-5, Request for Approval to Place as follows:

A. Request for Approval to Place

1. Complete the DSHS 15-209(X), Periodic Review Report/Individual Service Plan, and the DSHS 10-166A(X), Group Care Social Summary/Referral, form. As an attachment to the DSHS 15-209(X), include a list of the type and dates of prior placements of the child and reasons why prior placements terminated.

2. Route one copy of the DSHS 15-209(X) to the child's parents.

3. Follow regional procedure for obtaining approval for placement.

4. If approval for group care is given, route four copies of the DSHS 15-209(X), the DSHS 10-166A(X), and attachments to the group care coordinator for facility selection.

Revise 34.32.B.1. 2. and 4. as follows:

1. The group care coordinator will determine if an in-region placement is available, sending copies of the DSHS 15-209(X) and the DSHS 10-166A(X) to facilities based on a determination of regional goals for prioritizing in-region placement, the earliest availability of placement, and the child's needs.

2. If it appears no in-region placement is available, the group care coordinator will contact coordinators in other regions to explore availability of an out-of-region placement. At least two copies of the completed DSHS 15-209(X) and the DSHS 10-166A(X) will be sent to out-of-region group care coordinators for placement consideration. These can then be used by the coordinator for referral to facilities within their region.

4. Once the group care coordinator has made a referral to the group home, the group home may contact the caseworker to discuss child specific issues. If a group care provider agrees to accept a child for placement, details of the placement date, date for completion of the initial conference, and notification of all parties of the initial conference will be worked out by the caseworker and provider. The initial conference must be completed within two weeks of the actual placement.

Revise 34.33.A., Preplacement Conference as follows:

A. Initial Conference

When a facility has been identified as willing to consider the child for their program, the DCFS caseworker will coordinate an initial conference between the child, family, case monitor, and facility staff.

The DSHS 15-209(X), Periodic Review Report/Individual Service Plan, will be revised and distributed to all parties at the actual time of placement.

The facility will complete and distribute to all parties a proposed Initial Treatment Plan within two weeks of placement. Important aspects of the proposed treatment plan include:

1. Specific goals to be achieved by all parties within the next three months that facilitate the earliest possible achievement of the permanent plan;

2. Treatment activities and expected frequency of treatment activities;

3. Clear identification of responsibilities and expectations of all parties to achieve treatment goals;

4. A family focus aimed towards building specific skills; and

5. A discussion of how/why treatment goals and activities will facilitate the implementation of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

The initial conference will occur within two weeks of the actual placement. Important aspects of the conferences include:

1. A clarification of the involvement and responsibility of the child, child's parent(s), DCFS caseworker, the case monitor, and facility staff;

2. A discussion/resolution of issues based on the content of the DSHS 15-209(X) and the proposed Group Care Initial Treatment Plan focused on determining if both documents:

   a. Appear to be consistent with each other and working towards the same outcomes;

   b. Are family-focused;

   c. Are time-limited;

   d. Focus on building specific skills;

   e. Include input from parent(s) and child,

   f. Will achieve the permanent plan by the earliest possible date, and

   g. Set the date and time of the quarterly conference. <u>This conference will be no more than 90 days from the initial conference</u>.

3. Regions may develop procedures for resolution of issues raised in the conference that cannot be resolved by the case monitor.

When a case planning dispute involves a child from another region, the "receiving" region's procedures for dispute resolution shall be used to settle the conflict. However, if the "sending" region disagrees with the proposed settlement for the dispute, it has the ultimate authority for determining if the child should continue in the group home program. Disputes which can't be settled to the satisfaction of both regions may be referred to the Regional Administrators or their designees for resolution.

Revise 34.33.B., Completion of the DSHS 15-209(X), the Periodic Review Report/Individual Service Plan, as follows:

B. Completion of the DSHS 15-209:

1. The DSHS 15-209(X) is completed to ensure compliance with case plan requirements for Public Law 96-272. This law requires the content of DSHS 15-209(X) to:

   a. Address progress and compliance with the case plan by the parent(s),

   b. Clearly identify permanency planning goals and dates for achieving the plan,

   c. Discuss the appropriateness of the type of placement,

   d. Address the restrictiveness of placement and proximity to the parent(s) home,

   e. Describe the services necessary to achieve the plan,

   f. Identify what preventative services have been offered to the family to prevent placement,

   g. Document parental involvement in the development of the plan.

   DSHS 15-209 is the most important document relating to placement. A copy of the DSHS 15-209(X) shall be sent to the parents with the date sent clearly noted on the DSHS 15-209. Other copies are distributed as indicated on the DSHS 15-209.

2. The completion of the DSHS 15-209(X) and subsequent quarterly conference dates may be coordinated to synchronize their completion with juvenile court review hearings as long as the DSHS 15-209(X) is completed within a six-month

time period of the last completed DSHS 15-209(X). Quarterly conference dates and other required reporting may be moved earlier to accomplish this synchronization but shall not be moved beyond the six-month review period identified in the previous DSHS 15-209(X).

For example: A DSHS 15-209(X) is completed on 3/01/87. A quarterly conference occurs on 3/15/87. The next court review is scheduled for 8/01/87. The DSHS 15-209(X) completion date of 8/31/87 is moved to 7/01/87 to synchronize with the court review. The next quarterly conference is moved to 7/14/87. The next DSHS 15-209(X) completion date is six months later: 12/31/87.

3. The DSHS caseworker shall have the lead responsibility for completion of the initial and subsequent DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The DSHS 15-209 should be completed and distributed to parent(s), child, case monitor, and group care facility 14 days before any scheduled court review hearing, at any time it is revised, and must be revised semi-annually. A new DSHS 15-209 is prepared for every other quarterly conference, i.e, at time of placement in group care, before the second quarterly conference, the 4th quarterly conference, etc.

4. The case monitor shall be present at all group care conferences in order to meet the child and family, clarify monitor roles and responsibilities, facilitate the group care conference, and act as an extension of the DCFS caseworker in the absence of the caseworker.

Revise 34.33.D. as follows:

D. For a child eligible for adoption support services, the DCFS caseworker will forward a copy of the DSHS 15-209(X) with the adoption support application to the adoption support program manager using procedures described in Chapter 32.

Add to 34.34.D., Placement Responsibility Related to Medical Issues as follows:

9. The DCFS caseworker will ensure the group care agency accepting a child for placement is provided with a DSHS 9-04, Voluntary Consent to Place Form, authorizing emergency medical care. The caseworker has the authority to sign the DSHS 9-04 when the child is in the temporary custody of the division or when the child's parents have signed a DSHS 9-04, Voluntary Consent to Place form, authorizing DCFS to provide consent to emergency medical care for their child.

Revise 34.35.A.2.b.(1.) as follows:

(1) The services provided by the agency to prepare the child to return to a less restrictive setting and achieve the permanent plan as expressed in the DSHS 15-209(X), Periodic Review Report/ Individual Service Plan, the Group Care Treatment Plan, the Group Care Progress Report, and the worker's interview with the child and parent(s).

Revise 34.35.B.1-6., Quarterly Reports, Conferences and ISP Review as follows:

B. Quarterly Reports, Conferences, Periodic Review Report/Individual Service Plan Review and Treatment Plan Review:

1. Prior to the quarterly conference, the DCFS caseworker will ensure the Group Care Quarterly Report and the proposed Group Care Treatment Plan is received from the group care agency 30 days in advance. The Group Care Quarterly Report and the Group Care Treatment Plan are sent to both the DCFS caseworker and the case monitor.

2. The DCFS caseworker is responsible to review and approve Quarterly Reports and Treatment Plans submitted by providers.

a. The DCFS caseworker will be responsible to ensure the Group Care Quarterly Report and Treatment Plan provides complete and descriptive information on the children's status.

b. Through the monitoring of the Group Care Quarterly Report and Treatment Plan the DCFS caseworker will ensure children with special education needs are receiving the required educational services.

c. The DCFS caseworker with supervisory approval may return to the provider any Group Care Quarterly Report or Group Care Treatment Plan not meeting expectations of the division. If returned, the Group Care Quarterly Report or Group Care Treatment Plan shall be attached to a letter outlining the caseworker's concerns and sent to the group care agency with a carbon copy to the DCFS Administrator.

d. Group homes are responsible for submitting copies of the Group Care Quarterly Report and Group Care Treatment Plan 30 days prior to the quarterly conference.

When providers regularly fail to submit the Group Care Quarterly Report or Group Care Treatment Plan in a timely manner, no payment shall be made until reports are received.

e. When providers consistently fail to submit timely Quarterly Reports and/or when they continually submit Quarterly Reports not adequate to the expectation of the division, the DCFS Administrator shall notify the regional Group Care Coordinator and request technical assistance/consultation on the problem as a contract compliance issue. If the regional Group Care Coordinator believes the problem is not resolvable at the regional level, he/she shall contact the state office group care program manager for technical assistance/consultation.

3. A copy of the Group Care Quarterly Report and the Group Care Treatment Plan is always maintained in the child's case record. The case monitor shall also maintain a copy of these documents in the facility monitoring file.

4. DCFS will monitor the group home through monthly monitoring visits, quarterly conferences, and review of the Group Care Quarterly Report and the Group Care Treatment Plan. They will ensure that group care staff are encouraging and assisting parents and siblings to make visitation in accordance with agreements specified in the juvenile court order and the DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

   a. The parents shall participate in any modification of the visitation agreement.

   b. Efforts made by the DCFS caseworker or case monitor to involve the parents with the placement should be carefully documented in the child's record.

   c. Should contact with parents be broken, the DCFS caseworker must ensure that efforts are made to locate the child's parents by DCFS. Efforts to locate parents will be documented in the child's record.

   d. The parent must be informed of changes in the medical condition or whereabouts of the child, unless this information would endanger the child. Efforts to notify the child's parents of changes in the child's medical condition will be documented in the child's record and of whereabouts on the DSHS 15-209(X).

5. a. A quarterly conference will be held by the case monitor with the child, parent(s) and group care staff to address:

(1) Progress and compliance in achieving goals outlined in the previous Periodic Review Report/ Individual Service Plan and the Group Care Treatment Plan,

(2) The need for continuing group care services/placement.

(3) The new Group Care Treatment Plan,

(4) Whether the Group Care Treatment Plan goals and activities are consistent with and support the achievement of the permanent plan and other activities described in DSHS 15-209(X), Periodic Review Report/Individual Service Plan.

(5) The need for a revised treatment plan due to caseworker or parent/child input at the quarterly conference. If needed, the group care agency will prepare a revised Treatment Plan within two weeks of the quarterly conference and distribute to the caseworker, case monitor, parent(s) and child. The revised plan becomes a part of both the child's and case monitor record.

(6) The need for modification of the DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The case monitor will forward written recommendations for proposed modifications to the DCFS caseworker. The DCFS caseworker will evaluate any such recommendations for modifications in the DSHS 15-209(X) and will inform the group care agency, the case monitor, the parent(s), and the child of his/her decisions regarding changes in the DSHS 15-209(X). If the DCFS caseworker does modify the DSHS 15-209(X), copies of the revised DSHS 15-209(X) will be sent to the group care agency, the case monitor, parent(s) and child.

5. b. To address situations when conflict regarding the content of case planning and treatment planning activities cannot be resolved by the case monitor, regions may develop procedure for resolving such conflict. (See 34.33A.)

6. Periodic Review Report Individual Service Plan Update.

   a. The DCFS caseworker has the responsibility for revising the DSHS 15-209(X), Periodic Review Report/Individual Service Plan. The DSHS 15-209(X) is completed at time of group care referral, is revised at time of group care placement, and at least every six months thereafter. The periodic review report period dates on the DSHS 15-209(X) update shall start by no later than the day after the previous DSHS 15-209(X) report period expires.

   b. The DCFS caseworker is responsible for completing and distributing copies of the DSHS 15-209(X) to the group care agency, the case monitor, parents and child, at least 14 days before the initial conference, the second quarterly conference, the fourth quarterly conference, etc.

   c. The case monitor for out-of-region placements will usually carry ongoing responsibility for representing DCFS at all quarterly conferences and shall be responsible for maintaining a narrative recording in the DCFS facility file of all quarterly conferences and for communicating the content of such conferences back to the DCFS caseworker.

Revise 34.35.B.8. as follows:

8. Upon completion of the quarterly conference, the case monitor will send a copy of any proposed modifications of the DSHS 15-209(X) to the DCFS caseworker. The monitor shall communicate with the caseworker regarding the content of the quarterly conference. A narrative recording regarding the quarterly conference will be placed in the facility file. The monitor shall also notify the caseworker of the date for the next quarterly conference and invite the caseworker to be present (if his/her travel budget and staff time permits).

Revise 34.35.C.2., Record Maintenance, as follows:

2. Case monitors will maintain a working file for facilities for whom they perform monitoring services. The file will be called the Facility Monitoring file. A running narrative of dates of site visits, observations, quarterly conference summaries, and action taken will be part of the facility program file.

   Copies of the DCFS 15-209(X), social summary, group care treatment plan, and group care progress report shall also be placed in the Facility Monitoring file and be retained for one year

following the child's discharge from the facility. These files will be used as one source for contract compliance (performance based monitoring).

Regions may develop regional procedure for the organization and location of Facility Monitoring files. However, the material listed above should be readily available for reading by supervisors and auditors.

Revise 34.35.D.3.a. and b. as follows:

a. The DCFS caseworker in cooperation with the parent(s) and child shall define a permanent planning outcome goal when completing the DSHS 15-209(X) at the time of referral for group care placement.

b. The DCFS caseworker shall assess in conjunction with the case monitor, group care provider, parent(s), and child, the appropriateness of the permanency plan on, at a minimum, a semi-annual basis. Modifications/revisions to the permanency plan that are the result of the group care quarterly conference may result in an earlier than semi-annual revision of the DSHS 15-209(X), if the caseworker believes such a modification is necessary.

Revise 34.35.B.3. and 4., Group Care Hard-To-Place Request/Approval Procedure, as follows:

3. If the HTP request is for a child not placed in group care previously, the service worker will submit the most recent DSHS 15-209(X) and DSHS 10-166B with the referral memo.

4. If the HTP request is for a child previously placed in group care, the service worker will submit the most recent DSHS 15-209(X), the most recent Group Care Treatment Plan and the most recent Group Care Progress Report.

Revise 34.99, Required Forms and Instructions as follows:

Delete: DSHS 10-166(X) Group Care Screening/Approval Form,
DSHS 10-166B(X) Initial Service Plan,
DSHS 10-167(X) Group Care Quarterly Report Form,
DSHS 10-167A(A) Quarterly Conference Summary, ISP Update and Placement Evaluation.

Add: DSHS 15-209(X), Periodic Review Report/Individual Service Plan.