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| **DOCUMENT TYPE:** (Required Field) | Manual |
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| **TOPIC:** (Required Field) | Manual Revision |
| **DOCUMENT TITLE:** | Manual G<br>Chapter: 24 |
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06/06/2017

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-167
Issued: September 29, 1983

FROM: Bruce Ferguson, Assistant Secretary
Community Services

For Information Call:
Diana Larsen-Mills, SCAN
234-0432 or Non-SCAN
753-0432

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

SUBJECT: DELETION OF DSHS 14-139, SOCIAL SERVICES APPLICATION FOR FAMILY RECONCILIATION SERVICES

Insert this notice in front of Chapter 24, Manual G, and note on the Green Notice Control Sheet the date Notice G-167 was entered.

A. It is no longer necessary for the DSHS 14-139(X) (Rev. 12/79) form to completed for Family Reconciliation Services cases since this program is provided without regard to income.

B. The new DSHS 4-114(X) (Rev. 12/82) Social Service Intake form will be completed (instead of the DSHS 14-139) for all FRS cases. Program eligibility is documented on the DSHS 4-114(X).

C. Application, eligibility requirements and forms for child placement cases are not changed by this notice.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-114
Issued: April 13, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

IF NOT DELIVERABLE RETURN TO: W/P MANUAL SECTION MS OB-16

SUBJECT: TRACKING INELIGIBLE FAMILY RECONCILIATION SERVICE APPLICANTS

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-114 was entered.

BACKGROUND

A. Due to budget constraints, the contracted Crisis Counseling (Phase II) component of Family Reconciliation Services has been reduced by $690,000 or about 3,032 referrals statewide.

CSO staff provided crisis counseling (Phase I, up to four hours) must also be reduced for certain nonviolent FRS applicants.

B. To implement these reductions, effective immediately, new behavioral eligibility criteria will be applied to those clients seeking FRS.

1. During the initial intake/assessment (first 30 minutes), the service worker should identify cases which are:

a. Nonviolent and
b. Nonrunaway and
c. Drug or alcohol abusing (any family member) or
d. Juveniles who have allegedly committed a criminal offense

and refer them to other (non-DSHS) community agencies. CSO staff may not provide crisis counseling.

2. The above types of cases shall not be referred to FRS Crisis Counseling Contractors.

C. The categories of clients to be screened out (i.e., no service) of the nonviolent FRS population are families in conflict where the principle cause of conflict is drug abuse, alcohol abuse, and/or juvenile criminal offenses. The Juvenile Code for families in conflict allows for the referral of these categories to other community agencies without cost to DSHS-FRS (CCS) contract funds.

D. The normal Intake/Assessment screening process for FRS clients is expected to identify drug and alcohol abusers and juveniles who have committed a criminal offense. The screening process should be limited to thirty minutes or less. Cases involving violence or a runaway are to be served.

E. According to the Children's Needs Assessment study completed by the Office of Research in June of 1981, the ineligible categories are occurring in the population in the following percentages:

1. Drug abuse 15% = 5,102.

2. Alcohol abuse 23% = 7,838.

3. Juvenile criminal behavior 37% = 12,609.

Total 25,559. The numbers of clients listed above are based on a 16-month period.

F. Because the nonviolent population is 51% of all FRS referrals, it is assumed that approximately 51% or 13,035 of the population could be referred out to other non-DSHS agencies for services without cost to contract Crisis Counseling. The present rate of referral to Crisis Counseling contracting agencies and to DSHS Phase II services is 24%. It is expected, therefore, that approximately 3,128 Phase II service reductions can be made.

G. It is not known how many of the nonviolent drug abuse, alcohol abuse, and juvenile criminal behavior referrals have two or more of those problems. Because of this possible overlapping, the total reduction in referrals going on to continuing services in Phase I and Phase II can only be estimated. That is why the Bureau wants to collect specific data about those cases referred out.

ACTION REQUIRED

A. A careful screening of all nonviolent referrals (applicants) for FRS is important because program costs must be reduced. Ineligible clients should be referred out to community agencies using DSHS 2-306(X), Communication/Referral.

B. A six month's data collection project will be undertaken to assess the actual numbers of clients that can be diverted to other community services without cost to contracted Crisis Counseling. CSO service workers should use the attached form for data collection beginning May 1, 1982, and ending November 1, 1982. Most of the data is already on the CSO FRS intake log. A consolidated CSO report should then be sent to the Regional Office for forwarding to SO.

C. The Regional Office will send a consolidated Regional Report to the Bureau of Children's Services, MS OB-41, no later than the 15th of each month. The first report will be due June 15, 1982.

D. If there are any questions about these categories of ineligible clients, please call the Bureau of Children's Services Regional Representative or call Denzel Scott, SCAN 234-0244.

E. On Green Notice G-100, please note section 24.15 C.5.c. should refer to Youth Service Bureau's NOT Juvenile Probation Service.

Attachment

FAMILY RECONCILIATION SERVICES
INELIGIBLE CLIENT REPORTING FORM

Reporting Unit (CSO/Region) #_____

Month of Report_____

A. Number of clients (families) screened out by principle cause of conflict. Only one for each client.

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

B. Number or clients (families) referred out to another source which accepted the referral (response received from DSHS 2-306(X)).

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

C. Average Time Required per client screened and referred out:_____

DIRECTIONS BY SECTION: (This form may be used by line staff for a work sheet and by the Regions for a consolidated report to the Bureau of Children's Services.)

A. In this section, count each client referred for one or more of the three reasons listed for family crisis. If the client has more than one reason, i.e., Drug Abuse and Juvenile Offense, choose the one that appears to be the principle precipitating cause for conflict.

For example, child was drinking and became involved in car theft (car prowl). Try to determine which act most likely triggered the family conflict. The counts in Section A are to be unduplicated.

B. If, for example, you have a resource for each drug abuse case screened/referred out, the number in B 1 should equal the number in A 1. This would also be true for B 2 and B 3. It is possible that the numbers in B 1, B 2, and B 3 will be less than the numbers in A 1, A 2, and A 3. We need to know how many cases go unserved.

C. Please compute the time in fractions of hours that are required to screen and refer out the clients listed above example, .5 hours. We want to review our policy of estimating 30 minutes for intake/assessment.

BCS FORM (4/82)

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-100
Issued: February 3, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

SUBJECT: REDUCTION OF FAMILY RECONCILIATION SERVICES (FRS)

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-100 was entered.

A. The reduction of FRS program FTEs made by the Legislature during the 1981 Special Session requires a reduction in both intake/assessment and continuing FRS services to clients.

Effective March 1, 1982, FRS applicants are to be referred out to other (non-DSHS) community agencies (not DSHS Contract Crisis Counseling Services).

B. Manual G holders should write in the following word additions to the text of Chapter 24.

1. Page 3, Section 24.12 A. 1:

Add to the end of the sentence: "or other social services."

2. Page 6, Section 24.15 C, add new subparagraphs:

"5. Families in nonviolent conflict whose principle cause of conflict is drug abuse, alcohol abuse or juvenile offense (delinquency) shall be referred to an appropriate non-DSHS community social service agency. Appropriate non-DSHS agencies include, but are not limited to:

a. Drug and alcohol abuse centers;

b. Community mental health centers;

c. Juvenile probation/counseling services;

d. Family counseling services.

6. The type of family situation defined in 5. above no longer qualifies that family for CSO FRS services, even if no appropriate non-DSHS agency exists in the community."

# CHAPTER 24

# FAMILY RECONCILIATION SERVICES (FRS)

Table of Contents

Page

24.00 PROGRAM AUTHORITY 3

24.10 POLICY

24.11 Purpose of Service . . . . . 3
24.12 Service Description. . . . . 3
24.13 General Policies Related to this Service . . . . . 4
24.14 Priorities Related to this Service . . . . . 5
24.15 Eligibility. . . . . 5
24.16 Payment Rates. . . . . 6

24.20 PROGRAM STANDARDS

24.21 Program Expectations/Response Time . . . . . 6
24.22 Appropriate Program/Service Outcomes . . . . . 7
24.23 Monitoring Requirements. . . . . 7

24.30 SERVICE PROCEDURES

24.31 Provision of Intake/Assessment Services (IAS). . . . . 8
24.32 Referrals From Other CSO Catchment Areas . . . . . .10
24.33 Referral to Continuing Services. . . . . .10
24.34 Provision of Crisis Counseling Services (CCS). . . . . .12
24.35 Termination of Service . . . . . .14
24.36 Re-Referrals of FRS Cases. . . . . .14
24.37 FRS Recording Requirements . . . . . .15

24.60 INTERFACE WITH OTHER DSHS SERVICES 16

24.70 INTERFACE WITH NON-DSHS SERVICES 17

24.80 REQUIRED FORMS AND INSTRUCTIONS 17

# CHAPTER 24
# FAMILY RECONCILIATION SERVICES (FRS)

## 24.00 PROGRAM AUTHORITY

Federal: Title 45, Code of Federal Regulations. Title IV, Part B, Child Welfare Services, 220.40 (b) (2).

State: RCW 13.32A.040, RCW 13.32A.090, RCW 13.32A.100, RCW 74.13.020(3)(4), RCW 74.13.031(1)(4)(7), WAC 388-15-010(1)(c), WAC 388-15-570.

## 24.10 POLICY

### 24.11 Purpose of Service

The purpose of the service is to reunite, maintain and strengthen families and to prevent out-of-home placement. Families who are in conflict may request family reconciliation services from the department. Such services shall be provided to alleviate personal or family situations which present a serious and imminent threat to the health or stability of the child or family and to maintain families intact wherever possible.

### 24.12 Service Description

A. Family reconciliation services shall be designed to develop skills and supports within families to resolve family conflicts and may include but are not limited to:

1. Referral to services for suicide prevention, legal, psychological, psychiatric or other medical care, or

2. Provision of counseling and/or information (i.e., about welfare, education, or other social services), as appropriate to the needs of the child and the family.

B. Family Reconciliation Services consist of the following components:

1. Intake/Assessment Services (IAS)

   Short-term counseling directed toward defusing the immediate potential for violence, assessing problems and exploring options leading to problem resolution. (See 24.31)

2. Crisis Counseling Services (CCS)

   Provision is made for time-limited counseling, for developing of skills and supports within family to resolve conflicts or for referring to other resources when appropriate. (See 24.34)

## 24.13 General Policies Related to this Service

A. The department offers Family Reconciliation Services on a voluntary basis to families in conflict or with runaway children.

B. Department policy is to keep families intact and strengthen and support the family units so as to prevent out-of-home placement.

C. The department will operate a single 24-hour, 7 day-a-week intake system for emergent situations including families in conflict, runaway children, and child abuse/neglect cases.

D. Each Community Service Office (CSO) will establish and maintain agreements and procedures with local law enforcement agencies to facilitate provision of 24-hour FRS by the CSO.

E. Each CSO shall establish and maintain agreements with Indian tribal social service agencies and staff and tribal law enforcement agencies regarding 24-hour FRS availability within the boundaries of Indian reservations. Such agreements may include BIA and Indian health services program availability.

F. CSOs may establish agreements with other local agencies such as Crisis Line and/or the community mental health center to provide a 24-hour a day, 7 day-a-week answering service for FRS. The answering service will not screen cases, but will refer all families in conflict and runaway children to the CSO.

G. The intake system will provide, at a minimum, a telephone consultation between a service worker and the client(s).

H. Prior to placement of a child, every attempt shall be made, through the provision of family reconciliation services, to prevent the removal of a child from the family unit. For placement services, see Chapters 31 - Crisis Residential Center, 32 - Child Foster Family Care, and 34 - Private Agency/Child Group Care.

I. In placement of American Indian children, except for emergency receiving home placements for protective purposes, procedures of Chapters 32.33 and 34.35 shall be followed.

J. After intake/assessment and when further counseling is needed (to prevent out-of-home placement, etc.) the counseling time will be at least 60 percent face-to-face. There shall also be flexible scheduling of appointments to meet the family's needs and to provide counseling in the family's home or a neutral community setting.

K. After having entered FRS and while a child is in receiving home or family crisis residential care, the contractor or CSO will continue to provide CCS. The contractor will coordinate with CSO staff who are responsible for filing petitions and completing other court-related functions. (See Chapter 23, Juvenile Court Process.)

L. When the CCS contracting funds allocated are completely expended and there are no funds available to contract for CCS, the CSO staff shall provide CCS or the client may be referred to another community social service agency or to the contracting agency for services to be paid for through the contracting agency's fee schedule without cost to the department.

M. Once a case record and all service authorizations have been closed, and another request is made to provide services to the same client(s) for a new crisis, the referral shall be deemed a re-referral. A crisis with a different child in the family is not a re-referral. (See 24.37.)

N. When services are provided to American Indian children/families, policies outlined in Chapter 01.04, American Indian Policy Statement, will be followed.

O. Service workers will complete all paperwork within five working days after termination of services.

## 24.14 Priorities Related to this Service

A. Priority 1 - Incidents of family conflict which present a serious and imminent threat to the health/stability of the child/family which involve violent or potentially violent behavior.

B. Priority 2 - Children who have run away from home.

C. Priority 3 - Incidents of family conflict which present a serious and imminent threat to the health/stability of the child/family which involve non-violent behavior.

## 24.15 Eligibility

A. Financial Eligibility: FRS services are provided without regard to income. See Chapter 03, Social Service Eligibility for forms and procedures.

B. Program Eligibility: A child and/or his/her parent(s)/guardian are eligible for service when referred to the CSO for services by law enforcement officers, juvenile courts, the parent(s) or the child, and the need is established according to the following criteria:

1. Families in Conflict:

a. The family is experiencing child/parent problems (excluding custody disputes) to the extent that there is serious and imminent threat to the health/stability of the child/family; and

b. Immediate intervention is necessary to prevent further breakdown; and

2. Actual runaways who:

   a. Request service or

   b. Are taken into custody (by a law enforcement agency) because they are:

      (1) Absent from their parent's home without consent and law enforcement has been contacted by the parent, legal guardian or custodian for the child, or

      (2) Found by law enforcement in circumstances which constitute a danger to their physical safety. (For child abuse/neglect incidents, see Chapter 26.)

C. Clients generally not eligible for Family Reconciliation Services:

   1. Families currently receiving counseling services from other DSHS Divisions or Bureaus or community agencies.

   2. Children who have been placed in group or regional crisis residential centers where crisis counseling services are provided as part of the CRC contract. (See Chapter 31, Crisis Residential Care.)

   3. Foster family care or group care cases in need of follow-up service. (See Chapter 32, Child Foster Family Care Services, or Chapter 34, Private Agency/Child Group Care.)

   4. Post-adoption cases still under supervision. (See Chapter 36, Adoption Services.)

## 24.16 Payment Rates

A. No payment is made for Intake/Assessment Services (IAS). For CCS, see vendor contract.

B. For specialized receiving care rates for a child who meets the criteria in 24.15, see Chapter 31 - Crisis Residential Care, and Chapter 32 - Child Family Foster Care.

## 24.21 Program Expectations/Response Time

A. A child's parents shall be immediately notified of the child's: Whereabouts; physical and emotional condition; and the circumstances surrounding his or her referral to the department.

B. A service worker shall initiate contact with a client within four hours after receiving a referral. Up to four hours of intake/assessment counseling, excluding service worker travel time, shall be completed within one working day of the initial request. Exceptions to these response time standards must be authorized in writing by supervisory staff and documented in the service record.

C. Child Protective Service (CPS) and Family Reconciliation Services (FRS) supervisors shall jointly decide the need for a CPS investigation and/or CPS services.

D. Crisis Counseling Services (CCS) are voluntary and are limited to fifteen hours per family. This 15 hour limit does not include the up to four hours of CSO provided intake/assessment. The up to 15 hours CCS must be delivered within 30 calendar days of the request/ referral.

E. Crisis Counseling Services provided to a child placed in receiving care or a family crisis residential center must be delivered immediately to endeavor to return the child to his/her home within the first 72 hours of placement.

F. For clients referred to CCS (contract) vendors, if the 24-hour or less response is not required, service workers shall advise the provider by an entry on the delivery order or on the DSHS 154/159 to see (face-to-face contact) the client/family within 72 hours (with the family's agreement).

## 24.22 Appropriate Program/Service Outcomes

The following are possible and appropriate program or service outcomes in order of preference:

A. Child and family receive FRS counseling and the child remains at home.

B. Child and family receive FRS counseling, the child is placed in temporary out-of-home placement, the family ability to cope is strengthened and the child is then returned home to reunite the family.

C. Child and family receive FRS counseling and the child is placed out-of-home in the best interests of the family.

D. Child and family are referred for CCS and they chose not to return and/or contact is lost.

## 24.23 Monitoring Requirements

Regional and state office will monitor the CSOs' practices and procedures, FRS intake logs and client service records relating to the following categories:

A. Procedures to publicize the FRS telephone numbers, compliance with availability of 24-hour a day, seven day-a-week IAS coverage.

B. Agreements and procedures with local law enforcement agencies, including discovering how many service workers and law enforcement officers are familiar with the agreements and procedures.

C. Performance in meeting program expectations of FRS (see 24.21) including time frames (i.e., 4 hour IAS limit, CCS face-to-face within 24 hours, etc.).

D. Compliance with re-referral policy (see 24.37).

E. Recording of information (see 24.38) and verification of authorizations made for provision of any additional CCS (beyond 15 hours).

F. Compliance with procedures for referring families to CCS contractors.

G. Opportunities for CCS contractors to participate in program planning and service coordination including development of local agreements.

## 24.30 SERVICE PROCEDURES

### 24.31 Provision of Intake/Assessment Services (IAS)

A. Contact shall be initiated with the client within four hours after receiving referral. Up to four hours of intake assessment shall be completed within one working day of the initial request. (The four hours of service does not include travel time of service workers.) Any exceptions will be documented as to the reason for not initiating contact and completing the service within the time requirements and will be approved by supervisory staff in writing and noted on an intake log or DSHS 2-305(X), Service Episode Record (SER).

B. During working hours, clients shall be referred to the appropriate service worker/unit, (i.e., situations of child abuse/neglect will be referred directly to Child Protective Services (CPS), and families in conflict or with runaway children will be referred to the Family and Children's Services Unit, see Chapter 02). After working hours, service requests from law enforcement, parent(s) and/or child will be handled through the 24-hour, 7 day-a-week intake system according to local agreements and CSO procedures. (See 24.13.)

C. The child's parent(s) shall be immediately notified of the child's whereabouts, physical and emotional condition and circumstances surrounding his/her referral to the department.

D. The service worker shall inform the parent that it is the paramount concern of the family reconciliation service personnel to achieve a reconciliation between parent and child and to reunify the family. The service worker shall also inform the parent of the program expectations (time frames and procedures) to be followed under the FRS law.

E. Intake/Assessment Tasks:

1. The Intake/Assessment Services (IAS) should include, but not be limited to:

   a. An exploration of the seriousness of the situation that triggered the crisis;

   b. A determination of whether or not the family can recover its coping capabilities in one to three concentrated counseling sessions (i.e., under four hours direct contact).

   c. If the family's strengths are adequate, the concentrated therapy should be provided. If the family strengths are not adequate, an immediate referral or transfer to the longer term (continuing) crisis counseling services should be made.

2. During intake assessment, the service worker shall:

   a. Assess and attempt to defuse any potential for violence;

   b. Gather information and organize material for assessing the family's needs;

   c. Assist the family in defining the problem and identifying options for resolving the situation;

   d. Assess the need for CPS services:

      (1) Report all cases of suspected child physical abuse, sexual abuse, or neglect to CPS.

      (2) CPS and FRS supervisors shall jointly decide the need for a CPS investigation and/or CPS services to be provided either concurrent with or instead of FRS services. It is essential that the continuity of service provision to the family in conflict is not interrupted. CPS shall provide services as outlined in Chapter 26.

3. FRS intake/assessment and/or crisis counseling shall continue for all situations where the family is in conflict and the suspected abuse is secondary to the conflict between the teenager and the parent. These situations shall be reported to CPS, and FRS shall continue unless a CPS investigation is indicated and agreed upon between the CPS and FRS supervisors. (See Chapter 02.)

F. Determine need for FRS according to the priorities in 24.14 and the criteria in 24.15, and either provide short term counseling or refer for continuing services (CSO or contractor provided).

G. Provide information and referral when further CSO services are not appropriate and child/family are better served by another agency. (Referrals may be made for services such as educational services, ongoing counseling, suicide prevention, alcoholism, drug abuse and mental health services.) (See Section 24.70.)

H. For intake assessment activities, use SSPS Code 2401 on authorization forms (DSHS 14-154/159).

## 24.32 Referrals From Other CSO Catchment Areas

A. When a child requests or is referred for FRS but resides in another catchment area; or is a resident, by parental consent or juvenile court order, of another catchment area; the CSO where the child requests service will contact the CSO of residence (i.e., where the child was residing) to determine if the child is an active case.

B. The following procedures will be followed:

1. If the child is not active with the CSO of residence, the CSO where the child appears or is referred will immediately advise the parents/guardian by telephone that the child has been located.

2. If the child is active with the CSO of residence, the latter will immediately notify the parents/guardian that the child has been located.

3. The CSO where the child requests service will:

   a. If necessary, provide receiving care or Crisis Residential Care for the child and make payment for that care.

   b. Arrange with parents to provide or pay for transportation or arrange to return that child to the CSO of residence catchment area. (See Chapter III of Disbursement Manual "Travel Other Than Employee A20s.")

   c. Return the child within the next working day following receiving care placement.

4. If the CSO of residence is providing services, they will be responsible for planning for the child once he or she is returned to the county of residence.

C. See Chapter 02.14, Case Transfer Policies for processing paperwork.

## 24.33 Referral for Continuing Services

A. An eligible (see 23.15) family in conflict or with a runaway child will be referred to:

1. A CCS vendor (service contractor) where available, or, if not available to

2. A CSO Family and Children Services Unit for continuing services as soon as it becomes apparent to the service worker doing the intake that the situation will not be resolved within four hours of the initial contact.

A child may also be referred for out-of-home placement services - see Chapter 31 - Crisis Residential Center, Chapter 32 - Foster Family Care, and Chapter 34 - Private Agency/Child Group Care.

B. The CSO service worker doing intake/assessment shall refer the client for continuing services (whether vendor or CSO provided) by completing the: DSHS 14-139(X), Social Services Application; DSHS 14-24(X), Face Sheet; and DSHS 14-154(X), Social Service Authorization using service code 2401.

It is important that the person receiving the referral have the following information:

1. Client's address and telephone number;

2. Names, address and telephone number of family members;

3. Reason for service (DSHS 14-154(X));

4. A brief summary of the situation; and

5. If available, a signed DSHS 14-139(X) with unexpired eligibility.

C. Referral to a Service Contractor

1. The service worker shall refer the client for contracted services with a DSHS 14-139, Social Services Application.

   a. Whenever possible, the DSHS 14-139(X) this form should be completed and signed by the client prior to referral.

   b. If the client's signature is not obtained prior to referral, the DSHS 14-139(X) may be completed by the service worker or through item 16 and sent to the CCS contractor with a stamped and addressed envelope. The contractor will be requested to return the signed (Items 17 and 24) DSHS 14-139(X) to the CSO service worker.

   c. Once returned, the service worker completes the DSHS 14-139(X) (Items 18-26), files the original in the service record and sends a copy to the client. (See Chapters 02 and 03).

2. The service worker shall send the vendor a copy of the DSHS 14-154(X) authorizing up to 15 hours of crisis counseling services using Service Codes 2442, 2443 or 2444 as appropriate.

3. When the face sheet is completed prior to referral, the service worker may also send a copy of the DSHS 14-24(X), Face Sheet, and/or relevant portions of the Individual Service Plan (DSHS 2-305(X), SER) to the vendor.

4. After the 30-day authorized service period has expired and an A-19, Invoice Voucher, with an itemized client listing and a closing summary (including the disposition) have been received from the contractor, the service worker shall terminate contracted services. The case closure will be accomplished within three (3) working days after the closing summary has been received.

D. Referral to a Family, Group or Regional Crisis Residential Center

1. A child from a family in conflict or a runaway child shall be referred to a family, group or a regional crisis residential center or appropriate CSO placement staff as soon as it becomes apparent to the service worker doing intake that the situation will not be resolved within four hours and the child requires placement in a crisis residential facility. (See Chapter 31, Crisis Residential Care.)

a. Family Crisis Residential Center

The service worker doing intake shall refer the child to the appropriate Family and Children's Service Unit for placement in a family crisis residential center and where available refer the child to a vendor for crisis counseling services. If vendor CCS is not available, CCS will be provided by CSO Family and Children's Services Unit staff (see Chapter 02).

b. Group or Regional Crisis Residential Center

The CSO service worker doing intake shall refer the child to appropriate CSO staff for placement in a group or regional crisis residential center which will provide all needed services, including CCS (see Chapter 31, Crisis Residential Care and vendor contracts).

2. The family, group or regional crisis residential center must provide the CSO with client status information as/when requested.

E. The service worker doing intake shall use the DSHS 14-159 to terminate intake/assessment (2401) services.

## 24.34 Provision of Crisis Counseling Services (CCS)

A. Crisis counseling services must be entered into voluntarily by parent and child and must be time-limited and goal oriented.

B. The CSO service worker shall respond to the CCS referral with a face-to-face contact with the child/family:

1. Immediately in emergent situations, and

2. Within 24 hours of referral in nonemergent situations unless the service worker doing intake specifically indicates on the social services referral that the face-to-face contact within 24 hours is not required.

3. Within 72 hours with the client's agreement when there are scheduling problems on the part of the client. The scheduling problems should be documented in client's service record (DSHS 2-305(X)).

C. There may be some situations in which the service worker will be unable to contact the client. In these situations, it is still the responsibility of the service worker to initiate efforts to contact the client and to document the unsuccessful efforts to reach the client in the service record. The documentation shall explain the procedures used by the service worker to reach the client. One of the procedures shall be a visit to the client's home or last known location.

D. Crisis Counseling Services (i.e., service workers), are expected to be available on a 24-hour, 7 day-a-week basis.

1. If a child is or must be placed in receiving care or a family crisis residential center (see Chapter 31, Crisis Residential Care), the contracting agency or the CSO will offer crisis counseling services in sufficient intensity for possible return of the child to his/her own home within the first 72 hours.

2. When time beyond the 72 hours of receiving care (excluding Sundays and holidays) or family crisis residential center care (excluding Saturdays, Sundays and holidays) is required, the contracting agency or CSO will:

a. Obtain a signed consent from the parents/legal guardian to place (DSHS 9-04(X), Placement Authorization and Acknowledgment); or,

b. Cooperate in preparing the petition (see Chapter 23, Juvenile Court Process); and

c. As requested, appear in Juvenile Court as an expert witness in the court hearing to support an appropriate order.

E. A maximum of 15 hours of concentrated crisis counseling services may be authorized and provided to alleviate personal/family situations which present a serious and imminent threat to the health stability of the child/family.

1. The 15 hours must be delivered within 30 calendar days of the request.

2. Requests for exceptions to this requirement must be made in writing to the local CSO administrator/designee. The approved request and authorization must be recorded in the client's service record (DSHS 2-305(X)).

F. The service worker should be flexible in scheduling sessions to meet the needs of the family in crisis.

1. When appropriate, service workers should contact the family and/or child in their home or a community (neutral) location. Such outreach is appropriate when face-to-face contact has not occurred as specified in 24.13 J. and when:

a. Prompt initiation of service is necessary to complete the service service within the time limit; or

b. Counseling would be more effective if performed in the home or community location.

2. An explanation for not providing services in client's home or community contact shall be part of the service worker's case evaluation (DSHS 2-305(X)).

G. Client eligibility and provision of service will be documented in the CSO service record using the forms described in 24.38. For CSO provided crisis counseling services, service workers shall use service code 2402 on the DSHS 14-154/159 authorization forms.

## 24.35 Termination of FR Services

A. FR Services are terminated when:

1. The crisis situation has been resolved or the family can no longer benefit from additional services.

2. The client/family refuses to cooperate, has moved or lost contact.

3. Client/family is referred to another program/agency for services.

4. Referral of the child to foster care services is necessary.

B. For termination procedure, see Chapter 04, Social Service Payment System.

C. Evaluation of service outcome and Individual Service Plan is recorded on on the DSHS 2-305(X), Service Episode Record (see Chapter 02.11).

## 24.36 Re-Referrals of FRS Cases

A. A referral of another child in the same family (not previously referred) is not a re-referral.

B. Re-referrals (i.e., all services previously terminated) will be provided up to four hours CSO counseling intake/assessment service during which the service worker shall review with the family what they learned from prior services and discuss the skills needed to handle the current family conflicts. An assessment shall be made as to whether the family can be effectively assisted before additional (beyond four hours) counseling/continuing service is authorized.

C. The service worker shall review the case with the unit supervisor for possible extension of service beyond four hours. Any referral for continuing services resulting from such a conference will be referred only for the number of hours that are estimated necessary to resolve the problem. Re-referrals should in no case be for more than 8 additional hours of service unless the need for those additional hours is documented and approved by the supervisor.

D. The absolute maximum number of additonal service hours and service days a re-referral may receive is 15 hours within 30 days.

## 24.37 FRS Recording Requirements

A. Some FRS service episodes will last less than one hour and will not require the opening of a service record (i.e., face sheet, authorization forms, Service Episode Record).

In all situations which are resolved or referred outside (i.e., no further CSO action required) within the first hour by the CSO service worker doing intake, the information required for monitoring (see 24.23) will be recorded on an intake log.

B. CSOs may develop a format but any intake log shall contain the following information for each person referred for intake/assessment:

1. Name of client(s).
2. Date and time of referral to CSO.
3. Date and time of service worker contact with client(s).
4. Type of contact (telephone or face-to-face).
5. Source of referral.
6. Brief description of presenting problem (i.e., family in conflict, runaway).
7. Service disposition (who did what).
8. Date and time of disposition.
9. Length of time of service provided by service worker.

C. The intake log information should be kept for two years following initial intake.

D. When a service record is opened, the DSHS 2-305(X), Service Episode Record should contain all the information listed in 24.37 A. plus:

1. Date, type and time of service worker contact with others (i.e., referral source, parent, collateral contacts, etc.).

2. Length of time spent with each contact.

3. Family's immediate presenting problem and needs.

4. Family's specific and immediate objectives.

5. How client(s) participated in determining the objectives.

6. Results of service (outcome).

E. For situations requiring one to four hours of direct service by the service worker doing intake or for situations where the decision is made within the first hour to refer the client to a contractor (either CCS or family/group or regional crisis residential center) for services, the following forms must be completed:

| | | |
|---|---|---|
| 1. | DSHS 14-24(X) | Face Sheet |
| 2. | DSHS 14-139(X) | Social Services Application |
| 3. | DSHS 14-154(X) | Social Services Authorization |
| 4. | DSHS 14-159 | Change of Service Authorization |
| 5. | DSHS 2-305(X) | Service Episode Record (SER) - note special information required in 24.23) |

## 24.60 INTERFACE WITH OTHER DSHS SERVICES

The service worker has the responsibility to be aware of and when necessary and appropriate, use all available resources within the department. (See Chapter 02). Each CSO has the responsibility to develop referral procedures. The following services may be utilized:

A. Service workers to provide crisis counseling services to families/children referred within the CSO. (See Chapter 02)

B. CPS when child abuse/neglect is suspected/indicated. (See Chapter 26)

C. Crisis residential, child group care and foster care services when out-of-home placement is indicated. (See Chapters 31, 32 and 34.)

D. EPSDT for evaluation/determination of child's health status, when appropriate. (See Chapter 48)

E. Homemaker services to maintain children in their own home in lieu of out-of-home placement. (See Chapter 40)

F. Developmental Disabilities Case Services and Home Aid Resources for the developmentally disabled.

G. Day care services when appropriate. (See Chapter 28).

## 24.70 INTERFACE WITH NON-DSHS SERVICES

The service worker receives referrals from and makes referrals to community resources according to CSO agreements/procedures. Such resources include but are not limited to:

A. Law enforcement agencies within the community who will refer families in conflict and runaway children for FRS.

B. Juvenile courts who may refer families/children for FRS or may assist the CSO when court action is necessary.

C. Service contractors who FRS to families/children referred by the CSO.

D. Community Crisis Line agencies and community mental health centers.

## 24.80 REQUIRED FORMS AND INSTRUCTIONS

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

| | |
|---|---|
| DSHS 2-305(X) | Service Episode Record (SER) (10/78) |
| DSHS 9-04(X) | Placement Authorization and Acknowledgment (Rev. 7/78) |
| DSHS 14-05(X) | Application for Foster Care and Support Enforcement Services (Rev. 11/78) |
| DSHS 14-24(X) | Face Sheet (Rev. 9/78) |
| DSHS 14-139(X) | Social Services Application (Rev. 12/79) |
| DSHS 14-154(X) | Social Services Authorization (Rev. 9/80) |
| DSHS 14-159 | Change of Service Authorization (Rev. 1/81) |

B. There are no forms specific to Family Reconciliation Services. CSOs are authorized to estabish their own format for intake logs.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-114
Issued: April 13, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

IF NOT DELIVERABLE RETURN TO: W/P MANUAL SECTION MS OB-16

SUBJECT: TRACKING INELIGIBLE FAMILY RECONCILIATION SERVICE APPLICANTS

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-114 was entered.

BACKGROUND

A. Due to budget constraints, the contracted Crisis Counseling (Phase II) component of Family Reconciliation Services has been reduced by $690,000 or about 3,032 referrals statewide.

CSO staff provided crisis counseling (Phase I, up to four hours) must also be reduced for certain nonviolent FRS applicants.

B. To implement these reductions, effective immediately, new behavioral eligibility criteria will be applied to those clients seeking FRS.

1. During the initial intake/assessment (first 30 minutes), the service worker should identify cases which are:

   a. Nonviolent and
   b. Nonrunaway and
   c. Drug or alcohol abusing (any family member) or
   d. Juveniles who have allegedly committed a criminal offense

   and refer them to other (non-DSHS) community agencies. CSO staff may not provide crisis counseling.

2. The above types of cases shall not be referred to FRS Crisis Counseling Contractors.

C. The categories of clients to be screened out (i.e., no service) of the nonviolent FRS population are families in conflict where the principle cause of conflict is drug abuse, alcohol abuse, and/or juvenile criminal offenses. The Juvenile Code for families in conflict allows for the referral of these categories to other community agencies without cost to DSHS-FRS (CCS) contract funds.

D. The normal Intake/Assessment screening process for FRS clients is expected to identify drug and alcohol abusers and juveniles who have committed a criminal offense. The screening process should be limited to thirty minutes or less. Cases involving violence or a runaway are to be served.

E. According to the Children's Needs Assessment study completed by the Office of Research in June of 1981, the ineligible categories are occurring in the population in the following percentages:

1. Drug abuse 15% = 5,102.

2. Alcohol abuse 23% = 7,838.

3. Juvenile criminal behavior 37% = 12,609.

Total 25,559. The numbers of clients listed above are based on a 16-month period.

F. Because the nonviolent population is 51% of all FRS referrals, it is assumed that approximately 51% or 13,035 of the population could be referred out to other non-DSHS agencies for services without cost to contract Crisis Counseling. The present rate of referral to Crisis Counseling contracting agencies and to DSHS Phase II services is 24%. It is expected, therefore, that approximately 3,128 Phase II service reductions can be made.

G. It is not known how many of the nonviolent drug abuse, alcohol abuse, and juvenile criminal behavior referrals have two or more of those problems. Because of this possible overlapping, the total reduction in referrals going on to continuing services in Phase I and Phase II can only be estimated. That is why the Bureau wants to collect specific data about those cases referred out.

ACTION REQUIRED

A. A careful screening of all nonviolent referrals (applicants) for FRS is important because program costs must be reduced. Ineligible clients should be referred out to community agencies using DSHS 2-306(X), Communication/Referral.

B. A six month's data collection project will be undertaken to assess the actual numbers of clients that can be diverted to other community services without cost to contracted Crisis Counseling. CSO service workers should use the attached form for data collection beginning May 1, 1982, and ending November 1, 1982. Most of the data is already on the CSO FRS intake log. A consolidated CSO report should then be sent to the Regional Office for forwarding to SO.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-167
Issued: September 29, 1983

FROM: Bruce Ferguson, Assistant Secretary
Community Services

For Information Call:
Diana Larsen-Mills, SCAN
234-0432 or Non-SCAN
753-0432

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

SUBJECT: DELETION OF DSHS 14-139, SOCIAL SERVICES APPLICATION FOR FAMILY RECONCILIATION SERVICES

Insert this notice in front of Chapter 24, Manual G, and note on the Green Notice Control Sheet the date Notice G-167 was entered.

A. It is no longer necessary for the DSHS 14-139(X) (Rev. 12/79) form to completed for Family Reconciliation Services cases since this program is provided without regard to income.

B. The new DSHS 4-114(X) (Rev. 12/82) Social Service Intake form will be completed (instead of the DSHS 14-139) for all FRS cases. Program eligibility is documented on the DSHS 4-114(X).

C. Application, eligibility requirements and forms for child placement cases are not changed by this notice.

C. The Regional Office will send a consolidated Regional Report to the Bureau of Children's Services, MS OB-41, no later than the 15th of each month. The first report will be due June 15, 1982.

D. If there are any questions about these categories of ineligible clients, please call the Bureau of Children's Services Regional Representative or call Denzel Scott, SCAN 234-0244.

E. On Green Notice G-100, please note section 24.15 C.5.c. should refer to Youth Service Bureau's NOT Juvenile Probation Service.

Attachment

FAMILY RECONCILIATION SERVICES
INELIGIBLE CLIENT REPORTING FORM

Reporting Unit (CSO/Region) #_____

Month of Report_____

A. Number of clients (families) screened out by principle cause of conflict. Only one for each client.

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

B. Number or clients (families) referred out to another source which accepted the referral (response received from DSHS 2-306(X)).

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

C. Average Time Required per client screened and referred out:_____

DIRECTIONS BY SECTION: (This form may be used by line staff for a work sheet and by the Regions for a consolidated report to the Bureau of Children's Services.)

A. In this section, count each client referred for one or more of the three reasons listed for family crisis. If the client has more than one reason, i.e., Drug Abuse and Juvenile Offense, choose the one that appears to be the principle precipitating cause for conflict.

For example, child was drinking and became involved in car theft (car prowl). Try to determine which act most likely triggered the family conflict. The counts in Section A are to be unduplicated.

B. If, for example, you have a resource for each drug abuse case screened/referred out, the number in B 1 should equal the number in A 1. This would also be true for B 2 and B 3. It is possible that the numbers in B 1, B 2, and B 3 will be less than the numbers in A 1, A 2, and A 3. We need to know how many cases go unserved.

C. Please compute the time in fractions of hours that are required to screen and refer out the clients listed above example, .5 hours. We want to review our policy of estimating 30 minutes for intake/assessment.

BCS FORM (4/82)

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-100
Issued: February 3, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

SUBJECT: REDUCTION OF FAMILY RECONCILIATION SERVICES (FRS)

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-100 was entered.

A. The reduction of FRS program FTEs made by the Legislature during the 1981 Special Session requires a reduction in both intake/assessment and continuing FRS services to clients.

Effective March 1, 1982, FRS applicants are to be referred out to other (non-DSHS) community agencies (not DSHS Contract Crisis Counseling Services).

B. Manual G holders should write in the following word additions to the text of Chapter 24.

1. Page 3, Section 24.12 A. 1:

Add to the end of the sentence: "or other social services."

2. Page 6, Section 24.15 C, add new subparagraphs:

"5. Families in nonviolent conflict whose principle cause of conflict is drug abuse, alcohol abuse or juvenile offense (delinquency) shall be referred to an appropriate non-DSHS community social service agency. Appropriate non-DSHS agencies include, but are not limited to:

a. Drug and alcohol abuse centers;

b. Community mental health centers;

c. Juvenile probation/counseling services;

d. Family counseling services.

6. The type of family situation defined in 5. above no longer qualifies that family for CSO FRS services, even if no appropriate non-DSHS agency exists in the community."

# CHAPTER 24

# FAMILY RECONCILIATION SERVICES (FRS)

Table of Contents

Page

24.00 PROGRAM AUTHORITY 3

24.10 POLICY

24.11 Purpose of Service . . . . . 3
24.12 Service Description. . . . . 3
24.13 General Policies Related to this Service . . . . . 4
24.14 Priorities Related to this Service . . . . . 5
24.15 Eligibility. . . . . 5
24.16 Payment Rates. . . . . 6

24.20 PROGRAM STANDARDS

24.21 Program Expectations/Response Time . . . . . 6
24.22 Appropriate Program/Service Outcomes . . . . . 7
24.23 Monitoring Requirements. . . . . 7

24.30 SERVICE PROCEDURES

24.31 Provision of Intake/Assessment Services (IAS). . . . . 8
24.32 Referrals From Other CSO Catchment Areas . . . . . .10
24.33 Referral to Continuing Services. . . . . .10
24.34 Provision of Crisis Counseling Services (CCS). . . . . .12
24.35 Termination of Service . . . . . .14
24.36 Re-Referrals of FRS Cases. . . . . .14
24.37 FRS Recording Requirements . . . . . .15

24.60 INTERFACE WITH OTHER DSHS SERVICES 16

24.70 INTERFACE WITH NON-DSHS SERVICES 17

24.80 REQUIRED FORMS AND INSTRUCTIONS 17

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-167
Issued: September 29, 1983

FROM: Bruce Ferguson, Assistant Secretary
Community Services

For Information Call:
Diana Larsen-Mills, SCAN
234-0432 or Non-SCAN
753-0432

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

SUBJECT: DELETION OF DSHS 14-139, SOCIAL SERVICES APPLICATION FOR FAMILY RECONCILIATION SERVICES

Insert this notice in front of Chapter 24, Manual G, and note on the Green Notice Control Sheet the date Notice G-167 was entered.

A. It is no longer necessary for the DSHS 14-139(X) (Rev. 12/79) form to completed for Family Reconciliation Services cases since this program is provided without regard to income.

B. The new DSHS 4-114(X) (Rev. 12/82) Social Service Intake form will be completed (instead of the DSHS 14-139) for all FRS cases. Program eligibility is documented on the DSHS 4-114(X).

C. Application, eligibility requirements and forms for child placement cases are not changed by this notice.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-114
Issued: April 13, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

| IF NOT DELIVERABLE RETURN TO: W/P MANUAL SECTION MS OB-16 |
|---|

SUBJECT: TRACKING INELIGIBLE FAMILY RECONCILIATION SERVICE APPLICANTS

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-114 was entered.

BACKGROUND

A. Due to budget constraints, the contracted Crisis Counseling (Phase II) component of Family Reconciliation Services has been reduced by $690,000 or about 3,032 referrals statewide.

CSO staff provided crisis counseling (Phase I, up to four hours) must also be reduced for certain nonviolent FRS applicants.

B. To implement these reductions, effective immediately, new behavioral eligibility criteria will be applied to those clients seeking FRS.

1. During the initial intake/assessment (first 30 minutes), the service worker should identify cases which are:

   a. Nonviolent and
   b. Nonrunaway and
   c. Drug or alcohol abusing (any family member) or
   d. Juveniles who have allegedly committed a criminal offense

   and refer them to other (non-DSHS) community agencies. CSO staff may not provide crisis counseling.

2. The above types of cases shall not be referred to FRS Crisis Counseling Contractors.

C. The categories of clients to be screened out (i.e., no service) of the nonviolent FRS population are families in conflict where the principle cause of conflict is drug abuse, alcohol abuse, and/or juvenile criminal offenses. The Juvenile Code for families in conflict allows for the referral of these categories to other community agencies without cost to DSHS-FRS (CCS) contract funds.

D. The normal Intake/Assessment screening process for FRS clients is expected to identify drug and alcohol abusers and juveniles who have committed a criminal offense. The screening process should be limited to thirty minutes or less. Cases involving violence or a runaway are to be served.

E. According to the Children's Needs Assessment study completed by the Office of Research in June of 1981, the ineligible categories are occurring in the population in the following percentages:

1. Drug abuse 15% = 5,102.

2. Alcohol abuse 23% = 7,838.

3. Juvenile criminal behavior 37% = 12,609.

Total 25,559. The numbers of clients listed above are based on a 16-month period.

F. Because the nonviolent population is 51% of all FRS referrals, it is assumed that approximately 51% or 13,035 of the population could be referred out to other non-DSHS agencies for services without cost to contract Crisis Counseling. The present rate of referral to Crisis Counseling contracting agencies and to DSHS Phase II services is 24%. It is expected, therefore, that approximately 3,128 Phase II service reductions can be made.

G. It is not known how many of the nonviolent drug abuse, alcohol abuse, and juvenile criminal behavior referrals have two or more of those problems. Because of this possible overlapping, the total reduction in referrals going on to continuing services in Phase I and Phase II can only be estimated. That is why the Bureau wants to collect specific data about those cases referred out.

ACTION REQUIRED

A. A careful screening of all nonviolent referrals (applicants) for FRS is important because program costs must be reduced. Ineligible clients should be referred out to community agencies using DSHS 2-306(X), Communication/Referral.

B. A six month's data collection project will be undertaken to assess the actual numbers of clients that can be diverted to other community services without cost to contracted Crisis Counseling. CSO service workers should use the attached form for data collection beginning May 1, 1982, and ending November 1, 1982. Most of the data is already on the CSO FRS intake log. A consolidated CSO report should then be sent to the Regional Office for forwarding to SO.

C. The Regional Office will send a consolidated Regional Report to the Bureau of Children's Services, MS OB-41, no later than the 15th of each month. The first report will be due June 15, 1982.

D. If there are any questions about these categories of ineligible clients, please call the Bureau of Children's Services Regional Representative or call Denzel Scott, SCAN 234-0244.

E. On Green Notice G-100, please note section 24.15 C.5.c. should refer to Youth Service Bureau's NOT Juvenile Probation Service.

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FAMILY RECONCILIATION SERVICES
INELIGIBLE CLIENT REPORTING FORM

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3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

C. Average Time Required per client screened and referred out:_____

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A. In this section, count each client referred for one or more of the three reasons listed for family crisis. If the client has more than one reason, i.e., Drug Abuse and Juvenile Offense, choose the one that appears to be the principle precipitating cause for conflict.

For example, child was drinking and became involved in car theft (car prowl). Try to determine which act most likely triggered the family conflict. The counts in Section A are to be unduplicated.

B. If, for example, you have a resource for each drug abuse case screened/referred out, the number in B 1 should equal the number in A 1. This would also be true for B 2 and B 3. It is possible that the numbers in B 1, B 2, and B 3 will be less than the numbers in A 1, A 2, and A 3. We need to know how many cases go unserved.

C. Please compute the time in fractions of hours that are required to screen and refer out the clients listed above example, .5 hours. We want to review our policy of estimating 30 minutes for intake/assessment.

BCS FORM (4/82)

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-100
Issued: February 3, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

SUBJECT: REDUCTION OF FAMILY RECONCILIATION SERVICES (FRS)

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-100 was entered.

A. The reduction of FRS program FTEs made by the Legislature during the 1981 Special Session requires a reduction in both intake/assessment and continuing FRS services to clients.

Effective March 1, 1982, FRS applicants are to be referred out to other (non-DSHS) community agencies (not DSHS Contract Crisis Counseling Services).

B. Manual G holders should write in the following word additions to the text of Chapter 24.

1. Page 3, Section 24.12 A. 1:

Add to the end of the sentence: "or other social services."

2. Page 6, Section 24.15 C, add new subparagraphs:

"5. Families in nonviolent conflict whose principle cause of conflict is drug abuse, alcohol abuse or juvenile offense (delinquency) shall be referred to an appropriate non-DSHS community social service agency. Appropriate non-DSHS agencies include, but are not limited to:

a. Drug and alcohol abuse centers;

b. Community mental health centers;

c. Juvenile probation/counseling services;

d. Family counseling services.

6. The type of family situation defined in 5. above no longer qualifies that family for CSO FRS services, even if no appropriate non-DSHS agency exists in the community."

# CHAPTER 24

# FAMILY RECONCILIATION SERVICES (FRS)

Table of Contents

Page

24.00 PROGRAM AUTHORITY 3

24.10 POLICY

24.11 Purpose of Service . . . . . 3
24.12 Service Description. . . . . 3
24.13 General Policies Related to this Service . . . . . 4
24.14 Priorities Related to this Service . . . . . 5
24.15 Eligibility. . . . . 5
24.16 Payment Rates. . . . . 6

24.20 PROGRAM STANDARDS

24.21 Program Expectations/Response Time . . . . . 6
24.22 Appropriate Program/Service Outcomes . . . . . 7
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24.34 Provision of Crisis Counseling Services (CCS). . . . . .12
24.35 Termination of Service . . . . . .14
24.36 Re-Referrals of FRS Cases. . . . . .14
24.37 FRS Recording Requirements . . . . . .15

24.60 INTERFACE WITH OTHER DSHS SERVICES 16

24.70 INTERFACE WITH NON-DSHS SERVICES 17

24.80 REQUIRED FORMS AND INSTRUCTIONS 17

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-167
Issued: September 29, 1983

FROM: Bruce Ferguson, Assistant Secretary
Community Services

For Information Call:
Diana Larsen-Mills, SCAN
234-0432 or Non-SCAN
753-0432

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

SUBJECT: DELETION OF DSHS 14-139, SOCIAL SERVICES APPLICATION FOR FAMILY RECONCILIATION SERVICES

Insert this notice in front of Chapter 24, Manual G, and note on the Green Notice Control Sheet the date Notice G-167 was entered.

A. It is no longer necessary for the DSHS 14-139(X) (Rev. 12/79) form to completed for Family Reconciliation Services cases since this program is provided without regard to income.

B. The new DSHS 4-114(X) (Rev. 12/82) Social Service Intake form will be completed (instead of the DSHS 14-139) for all FRS cases. Program eligibility is documented on the DSHS 4-114(X).

C. Application, eligibility requirements and forms for child placement cases are not changed by this notice.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-114
Issued: April 13, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

| IF NOT DELIVERABLE RETURN TO: W/P MANUAL SECTION MS OB-16 |
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SUBJECT: TRACKING INELIGIBLE FAMILY RECONCILIATION SERVICE APPLICANTS

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BACKGROUND

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and refer them to other (non-DSHS) community agencies. CSO staff may not provide crisis counseling.

2. The above types of cases shall not be referred to FRS Crisis Counseling Contractors.

C. The categories of clients to be screened out (i.e., no service) of the nonviolent FRS population are families in conflict where the principle cause of conflict is drug abuse, alcohol abuse, and/or juvenile criminal offenses. The Juvenile Code for families in conflict allows for the referral of these categories to other community agencies without cost to DSHS-FRS (CCS) contract funds.

D. The normal Intake/Assessment screening process for FRS clients is expected to identify drug and alcohol abusers and juveniles who have committed a criminal offense. The screening process should be limited to thirty minutes or less. Cases involving violence or a runaway are to be served.

E. According to the Children's Needs Assessment study completed by the Office of Research in June of 1981, the ineligible categories are occurring in the population in the following percentages:

1. Drug abuse 15% = 5,102.

2. Alcohol abuse 23% = 7,838.

3. Juvenile criminal behavior 37% = 12,609.

Total 25,559. The numbers of clients listed above are based on a 16-month period.

F. Because the nonviolent population is 51% of all FRS referrals, it is assumed that approximately 51% or 13,035 of the population could be referred out to other non-DSHS agencies for services without cost to contract Crisis Counseling. The present rate of referral to Crisis Counseling contracting agencies and to DSHS Phase II services is 24%. It is expected, therefore, that approximately 3,128 Phase II service reductions can be made.

G. It is not known how many of the nonviolent drug abuse, alcohol abuse, and juvenile criminal behavior referrals have two or more of those problems. Because of this possible overlapping, the total reduction in referrals going on to continuing services in Phase I and Phase II can only be estimated. That is why the Bureau wants to collect specific data about those cases referred out.

ACTION REQUIRED

A. A careful screening of all nonviolent referrals (applicants) for FRS is important because program costs must be reduced. Ineligible clients should be referred out to community agencies using DSHS 2-306(X), Communication/Referral.

B. A six month's data collection project will be undertaken to assess the actual numbers of clients that can be diverted to other community services without cost to contracted Crisis Counseling. CSO service workers should use the attached form for data collection beginning May 1, 1982, and ending November 1, 1982. Most of the data is already on the CSO FRS intake log. A consolidated CSO report should then be sent to the Regional Office for forwarding to SO.

C. The Regional Office will send a consolidated Regional Report to the Bureau of Children's Services, MS OB-41, no later than the 15th of each month. The first report will be due June 15, 1982.

D. If there are any questions about these categories of ineligible clients, please call the Bureau of Children's Services Regional Representative or call Denzel Scott, SCAN 234-0244.

E. On Green Notice G-100, please note section 24.15 C.5.c. should refer to Youth Service Bureau's NOT Juvenile Probation Service.

Attachment

# FAMILY RECONCILIATION SERVICES
# INELIGIBLE CLIENT REPORTING FORM

Reporting Unit (CSO/Region) #_____

Month of Report_____

A. Number of clients (families) screened out by principle cause of conflict. Only one for each client.

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

B. Number or clients (families) referred out to another source which accepted the referral (response received from DSHS 2-306(X)).

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

C. Average Time Required per client screened and referred out:_____

DIRECTIONS BY SECTION: (This form may be used by line staff for a work sheet and by the Regions for a consolidated report to the Bureau of Children's Services.)

A. In this section, count each client referred for one or more of the three reasons listed for family crisis. If the client has more than one reason, i.e., Drug Abuse <u>and</u> Juvenile Offense, choose the one that appears to be the principle precipitating cause for conflict.

For example, child was drinking and became involved in car theft (car prowl). Try to determine which act most likely triggered the family conflict. The counts in Section A are to be unduplicated.

B. If, for example, you have a resource for each drug abuse case screened/referred out, the number in B 1 should equal the number in A 1. This would also be true for B 2 and B 3. It is possible that the numbers in B 1, B 2, and B 3 will be less than the numbers in A 1, A 2, and A 3. We need to know how many cases go unserved.

C. Please compute the time in fractions of hours that are required to screen and refer out the clients listed above example, .5 hours. We want to review our policy of estimating 30 minutes for intake/assessment.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-100
Issued: February 3, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

SUBJECT: REDUCTION OF FAMILY RECONCILIATION SERVICES (FRS)

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-100 was entered.

A. The reduction of FRS program FTEs made by the Legislature during the 1981 Special Session requires a reduction in both intake/assessment and continuing FRS services to clients.

Effective March 1, 1982, FRS applicants are to be referred out to other (non-DSHS) community agencies (not DSHS Contract Crisis Counseling Services).

B. Manual G holders should write in the following word additions to the text of Chapter 24.

1. Page 3, Section 24.12 A. 1:

Add to the end of the sentence: "or other social services."

2. Page 6, Section 24.15 C, add new subparagraphs:

"5. Families in nonviolent conflict whose principle cause of conflict is drug abuse, alcohol abuse or juvenile offense (delinquency) shall be referred to an appropriate non-DSHS community social service agency. Appropriate non-DSHS agencies include, but are not limited to:

a. Drug and alcohol abuse centers;

b. Community mental health centers;

c. Juvenile probation/counseling services;

d. Family counseling services.

6. The type of family situation defined in 5. above no longer qualifies that family for CSO FRS services, even if no appropriate non-DSHS agency exists in the community."

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-167
Issued: September 29, 1983

FROM: Bruce Ferguson, Assistant Secretary
Community Services

For Information Call:
Diana Larsen-Mills, SCAN
234-0432 or Non-SCAN
753-0432

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

SUBJECT: DELETION OF DSHS 14-139, SOCIAL SERVICES APPLICATION FOR FAMILY RECONCILIATION SERVICES

Insert this notice in front of Chapter 24, Manual G, and note on the Green Notice Control Sheet the date Notice G-167 was entered.

A. It is no longer necessary for the DSHS 14-139(X) (Rev. 12/79) form to completed for Family Reconciliation Services cases since this program is provided without regard to income.

B. The new DSHS 4-114(X) (Rev. 12/82) Social Service Intake form will be completed (instead of the DSHS 14-139) for all FRS cases. Program eligibility is documented on the DSHS 4-114(X).

C. Application, eligibility requirements and forms for child placement cases are not changed by this notice.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-114
Issued: April 13, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

| IF NOT DELIVERABLE RETURN TO: W/P MANUAL SECTION MS OB-16 |
|---|

SUBJECT: TRACKING INELIGIBLE FAMILY RECONCILIATION SERVICE APPLICANTS

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-114 was entered.

BACKGROUND

A. Due to budget constraints, the contracted Crisis Counseling (Phase II) component of Family Reconciliation Services has been reduced by $690,000 or about 3,032 referrals statewide.

CSO staff provided crisis counseling (Phase I, up to four hours) must also be reduced for certain nonviolent FRS applicants.

B. To implement these reductions, effective immediately, new behavioral eligibility criteria will be applied to those clients seeking FRS.

1. During the initial intake/assessment (first 30 minutes), the service worker should identify cases which are:

a. Nonviolent and
b. Nonrunaway and
c. Drug or alcohol abusing (any family member) or
d. Juveniles who have allegedly committed a criminal offense

and refer them to other (non-DSHS) community agencies. CSO staff may not provide crisis counseling.

2. The above types of cases shall not be referred to FRS Crisis Counseling Contractors.

C. The categories of clients to be screened out (i.e., no service) of the nonviolent FRS population are families in conflict where the principle cause of conflict is drug abuse, alcohol abuse, and/or juvenile criminal offenses. The Juvenile Code for families in conflict allows for the referral of these categories to other community agencies without cost to DSHS-FRS (CCS) contract funds.

D. The normal Intake/Assessment screening process for FRS clients is expected to identify drug and alcohol abusers and juveniles who have committed a criminal offense. The screening process should be limited to thirty minutes or less. Cases involving violence or a runaway are to be served.

E. According to the Children's Needs Assessment study completed by the Office of Research in June of 1981, the ineligible categories are occurring in the population in the following percentages:

1. Drug abuse 15% = 5,102.

2. Alcohol abuse 23% = 7,838.

3. Juvenile criminal behavior 37% = 12,609.

Total 25,559. The numbers of clients listed above are based on a 16-month period.

F. Because the nonviolent population is 51% of all FRS referrals, it is assumed that approximately 51% or 13,035 of the population could be referred out to other non-DSHS agencies for services without cost to contract Crisis Counseling. The present rate of referral to Crisis Counseling contracting agencies and to DSHS Phase II services is 24%. It is expected, therefore, that approximately 3,128 Phase II service reductions can be made.

G. It is not known how many of the nonviolent drug abuse, alcohol abuse, and juvenile criminal behavior referrals have two or more of those problems. Because of this possible overlapping, the total reduction in referrals going on to continuing services in Phase I and Phase II can only be estimated. That is why the Bureau wants to collect specific data about those cases referred out.

ACTION REQUIRED

A. A careful screening of all nonviolent referrals (applicants) for FRS is important because program costs must be reduced. Ineligible clients should be referred out to community agencies using DSHS 2-306(X), Communication/Referral.

B. A six month's data collection project will be undertaken to assess the actual numbers of clients that can be diverted to other community services without cost to contracted Crisis Counseling. CSO service workers should use the attached form for data collection beginning May 1, 1982, and ending November 1, 1982. Most of the data is already on the CSO FRS intake log. A consolidated CSO report should then be sent to the Regional Office for forwarding to SO.

C. The Regional Office will send a consolidated Regional Report to the Bureau of Children's Services, MS OB-41, no later than the 15th of each month. The first report will be due June 15, 1982.

D. If there are any questions about these categories of ineligible clients, please call the Bureau of Children's Services Regional Representative or call Denzel Scott, SCAN 234-0244.

E. On Green Notice G-100, please note section 24.15 C.5.c. should refer to Youth Service Bureau's NOT Juvenile Probation Service.

Attachment

FAMILY RECONCILIATION SERVICES
INELIGIBLE CLIENT REPORTING FORM

Reporting Unit (CSO/Region) #_____

Month of Report_____

A. Number of clients (families) screened out by principle cause of conflict. Only one for each client.

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

B. Number or clients (families) referred out to another source which accepted the referral (response received from DSHS 2-306(X)).

1. Drug Abuse_____

2. Alcohol Abuse_____

3. Juvenile Offender_____

Total of lines 1, 2, and 3_____

C. Average Time Required per client screened and referred out:_____

DIRECTIONS BY SECTION: (This form may be used by line staff for a work sheet and by the Regions for a consolidated report to the Bureau of Children's Services.)

A. In this section, count each client referred for one or more of the three reasons listed for family crisis. If the client has more than one reason, i.e., Drug Abuse and Juvenile Offense, choose the one that appears to be the principle precipitating cause for conflict.

For example, child was drinking and became involved in car theft (car prowl). Try to determine which act most likely triggered the family conflict. The counts in Section A are to be unduplicated.

B. If, for example, you have a resource for each drug abuse case screened/referred out, the number in B 1 should equal the number in A 1. This would also be true for B 2 and B 3. It is possible that the numbers in B 1, B 2, and B 3 will be less than the numbers in A 1, A 2, and A 3. We need to know how many cases go unserved.

C. Please compute the time in fractions of hours that are required to screen and refer out the clients listed above example, .5 hours. We want to review our policy of estimating 30 minutes for intake/assessment.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington

TO: HOLDERS OF MANUAL G

NOTICE NO: G-100
Issued: February 3, 1982

FROM: Bruce Ferguson, Assistant Secretary
Community Services

FOR INFORMATION CALL:
Denzel Scott
SCAN 234-0244 or
non-SCAN 753-0244

SUBJECT: REDUCTION OF FAMILY RECONCILIATION SERVICES (FRS)

Place this notice in front of Chapter 24, Manual G, and note on Green Notice Control Sheet the date Notice G-100 was entered.

A. The reduction of FRS program FTEs made by the Legislature during the 1981 Special Session requires a reduction in both intake/assessment and continuing FRS services to clients.

Effective March 1, 1982, FRS applicants are to be referred out to other (non-DSHS) community agencies (not DSHS Contract Crisis Counseling Services).

B. Manual G holders should write in the following word additions to the text of Chapter 24.

1. Page 3, Section 24.12 A. 1:

Add to the end of the sentence: "or other social services."

2. Page 6, Section 24.15 C, add new subparagraphs:

"5. Families in nonviolent conflict whose principle cause of conflict is drug abuse, alcohol abuse or juvenile offense (delinquency) shall be referred to an appropriate non-DSHS community social service agency. Appropriate non-DSHS agencies include, but are not limited to:

a. Drug and alcohol abuse centers;

b. Community mental health centers;

c. Juvenile probation/counseling services;

d. Family counseling services.

6. The type of family situation defined in 5. above no longer qualifies that family for CSO FRS services, even if no appropriate non-DSHS agency exists in the community."