

Policies and Procedures

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1100. Child Safety

1100. Child Safety admin Wed, 07/25/2018 - 09:01

Purpose Statement

Providing for child safety is part of CA's core mission. Safety is the primary and essential focus that informs and guides all decisions made from Intake through case closure. This includes removal and reunification decisions. Assessing the safety of children is essential in all placement settings (in-home and out-of-home).

Laws

[Public Law 93-247 \(as amended\)](#)

[45 Code of Federal Regulations \(CFR\), Part 1340](#)

[45 Code of Federal Regulations \(CFR\), Part 1357.20](#)

[RCW 13.34](#)

[RCW 74.13](#)

[RCW 26.44](#)

[WAC 388-15](#)

[WAC 388-70](#)

Policy

1. Decisions on child safety are based on comprehensive information, logical reasoning and analysis (not incident-based or reactionary).
2. The safety decision making process must include a continuous assessment of present and impending danger throughout the life of the case.
3. A focus on safety must be maintained from the initial assessment through case closure using required tools to assess, control and manage safety threats.
4. Every social worker will assess the safety of the child for present or impending danger. If present danger exists the worker will take an immediate protective action.
5. A decision that a child is unsafe does not mean the child must be removed.
6. A decision to place a child in out-of-home care is a safety decision. This level of intervention is **only** justified when it is clear that child safety cannot be controlled and managed in the home.
7. Conditions for return home are designed to ensure that children are returned when no safety threats exist or an in-home safety plan can be implemented and sustained. Also there is indication that the parents are moving towards change to control and manage child safety.

Resources

- [Unlicensed Placements Policy](#)
- [Appendix A - Practice and Procedure Guide](#)
- [Shared Planning Policy](#)
- [FTDM Policy](#)
- [Trial Return Home Policy](#)
- [DLR/CPS Use of Safety Assessment and Safety Planning Tools Policy](#)

- [Intake Policy](#)
- [2331\(5\) Response to Serious Physical and Sexual Abuse](#)
- Service Agreement Policy
- 43081 Dependency Petition Process

1110. Present Danger

1110. Present Danger admin Wed, 07/25/2018 - 09:29

Purpose Statement

Present danger can occur at anytime throughout the life of a case and must be assessed on a continual basis. A determination must be made if immediate protective actions are necessary to protect a child and the level of intervention required to keep the child safe.

Policy

- A. Assess if present danger exists during any contact with a child to determine if an immediate, significant and clearly observable behavior or situation is actively occurring and is threatening or dangerous to a child.
- B. When present danger exists, identify and take immediate protective action(s) necessary to create child safety.

Procedures

1. When assessing Present Danger in a Family Assessment Response case, document present danger and protective actions through the Present Danger Assessment at least once during service delivery.
2. In all other programs, document all protective actions taken to manage or control present danger in a FamLink case note using the protective action activity code or through completion of the Present Danger Assessment.
3. When children in DCYF care and custody are determined to be in present danger in licensed or unlicensed care, children are removed from that placement. Notify intake per the [Intake Process and Response](#) policy.

Forms

[Protective Action Plan DCYF 15-428](#)

Resources

[Present Danger Guide](#)

[Protective Action Guide](#)

1120. Safety Assessment

1120. Safety Assessment admin Wed, 07/25/2018 - 09:43

Original Date: December 2011

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division and Ruben Reeves, Assistant Secretary of Licensing Division

Purpose

The purpose of this policy is to provide guidance on completing a safety assessment. A safety assessment is:

- A family assessment based on comprehensive information gathered throughout the life of a case.
- Used to identify impending danger and determine if a Safety Plan is needed because children or youth are unsafe.
- To determine the level of supervision during family time visits.

For Licensing Division Child Protective Services (LD CPS) investigators, also follow the [LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 26.44.030](#) Reports, duty and authority to make, duty of receiving agency, duty to notify, case planning and consultation, penalty for unauthorized exchange of information, filing dependency petitions, investigations, interviews of children, records, risk assessment process

[RCW 26.44.195](#) Negligent treatment or maltreatment, offer services, evidence of substance abuse, in-home services, initiation of dependency proceedings

[PL 105-89](#) Adoption Safe Family Act

Policy

Caseworkers must:

1. Determine children's or youth's safety by gathering and assessing comprehensive information about a family's behaviors, functioning, and conditions.
2. Complete a:
 1. [Safety Assessment/Safety Plan DCYF 15-258](#) form in FamLink:

1. At key decision points in a case to determine if safety threats exist and whether a safety plan can be developed with families to control or manage the identified threats.
2. To determine the level of supervision needed for family time.

Procedures

1. Safety Assessment Completion Process

Caseworkers must:

1. Complete a Safety Assessment/Safety Plan DCYF 15-258 form in FamLink at the following key points in a case:
 1. On all screened-in CPS intakes, including new intakes on active cases, no later than 30 calendar days from the date intake was received.
 2. During the completion of the FamLink [Comprehensive Family Evaluation \(CFE\) DCYF 10-480](#) form.
 3. Before recommending unsupervised or overnight visits.
 4. When considering reunification or [trial return home](#).
 5. When there is a change in household members, including those living on the premises who may have frequent contact with children or youth.
 6. When visitors reside on the premises more than five calendar days and children or youth are either:
 1. In-home.
 2. Placed out-of-home and having unsupervised family time in the parent's or guardian's home.
 3. Within 30 days of case transfer by the new primary caseworker.
 4. When considering case closure or new safety or risk factors have been identified since the most recent FamLink Safety Assessment/Safety Plan DCYF 15-258 form was completed.
 5. Before 30-day shelter care hearings and orders authorizing continued shelter care, for the purpose of assessing the level of supervision for family time.
2. Determine if children or youth are safe or unsafe by:
 1. Gathering and assessing information through a review of child welfare history that includes, but is not limited to, the prior:
 1. Intakes
 2. Service interventions

3. Interviews
 4. Observations
2. Verifying information through source documents and contacts with collaterals. Information collected will include, but is not limited to, the following [Gathering Questions](#):
 1. Nature and extent of the maltreatment
 2. Sequence of events that accompany the maltreatment
 3. Child or youth functioning on a daily basis
 4. Parental disciplinary practices
 5. General parenting practices
 6. Adult functioning
 3. Consider and evaluate each potential safety threat using the [five safety threshold criteria](#) to determine if safety threats exist.
 4. Follow the Safety Plan policy and complete a new FamLink Safety Assessment /Safety Plan DCYF 15-258 form as threats emerge or are eliminated throughout the life of the case.
2. Safety Assessment Results
 1. When caseworkers have completed the FamLink Safety Assessment/Safety Plan DCYF 15-258 form and determined whether children or youth are:
 1. Safe, they must submit the assessment for supervisor approval.
 2. Unsafe, they must:
 1. Complete the FamLink Safety Plan Analysis to determine if an:
 1. In-home safety plan can manage or control the safety threats. When a safety plan is identified as being needed, follow the Safety Plan policy.
 2. Out-of-home placement is determined to be necessary, follow the [Placement Out of Home](#) policy.
 2. Submit the Safety Assessment/Safety Plan DCYF 15-258 form to supervisor for approval in FamLink.
 2. When LD CPS investigator notify caseworkers that children or youth in DCYF placement and care authority are unsafe with their licensed or unlicensed caregivers, caseworkers must remove them from placement and follow the [Placement Moves](#) policy.

3. When LD CPS investigators and caseworkers disagree about safety threats:
 1. LD CPS investigators must refer to [LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy.
 2. LD CPS investigators and caseworkers must refer to [Appendix C: Decision Making Matrix](#).
3. Safe Child Consultations:

Caseworkers must conduct Safe Child Consultations by following the Safe Child Consultations Guide document:

 1. Prior to making the decision to recommend removal from the home.
 2. When they:
 1. Need support during a complex case related to safety.
 2. Have identified:
 1. Impeding danger and there is an inability or difficulty safety planning.
 2. Safety concerns for a current or proposed out-of-home relatives or suitable person.
4. Family Time Level of Supervision
Caseworkers must complete the following after the emergent 72-hour initial visit:
 1. Follow the [Family Time and Sibling and Relative Visits](#) policy for:
 1. Emergent 72-hour initial visits.
 2. Ongoing family time visit plans.
 2. Review the Safety Assessment/Safety Plan DCYF 15-258 form in FamLink using the five safety threshold criteria for each parent or guardian to determine the level of supervision for family time prior to the following court hearings.
 1. Thirty-day shelter care hearings and orders authorizing continued shelter care.
 2. Review hearings.
 3. Permanency planning hearings.
 3. Once the five safety threshold criteria have been reviewed to establish if there are any identified safety threats, determine if they can be managed without supervision during the limited amount time required during visits. The Supervision Level Family Time Resource Guide DCYF 10-031 form may be used to assist with this determination.
 1. The types of family time include:

1. Unsupervised which require parents or guardians to:
 1. Be the primary caregivers.
 2. Be able to demonstrate the willingness and ability to safely care for children or youth for the duration of the family time.
 3. Protect children or youth from any safety threats.
 2. Monitored which require parents or guardians to be the primary caregivers during family time, while an approved adult is available to periodically observe and intervene if needed. Parents or guardians must demonstrate the willingness and ability to manage any safety threats and safely care for their children or youth during family time.
 3. Supervised which requires an approved adult to maintain line of sight and sound supervision and intervene if needed.
2. Family time must be:
 1. Unsupervised if any of the five safety threshold criteria are not met.
 2. Monitored if all five criteria are met but monitoring family time can mitigate the safety threat. To determine if monitoring family time can mitigate the safety threat:
 1. Discuss the decision for them to be monitored with the supervisor.
 2. Complete the FamLink Safety Plan Analysis.
 3. Supervised if all five criteria are met and monitoring family time cannot mitigate the safety threat.
 4. For 30-day shelter care hearings, contact the assigned Assistant Attorney General (AAG) to determine what needs to be provided to the court when recommending monitored or supervised family time.
5. Safety Assessment Approval Process
Supervisors must review the safety assessments in FamLink for approval. If not approved, return it to caseworkers for revisions.
 6. Documentation
Caseworkers and LD CPS investigators must:
 1. Follow the [Documentation](#) policy.
 2. Document the evidence supporting the level of supervision for family time in the following locations in FamLink per the Family Time and Sibling and Relative Visits policy for:

1. Thirty-day Shelter Care Hearings and orders authorizing continued shelter care, document in the “Document Family Time Supervision Level Evidence for each parent” section of the FamLink Safety Assessment/Safety Plan DCYF 15-258 form.
2. Review and Permanency Planning Hearings, document in the “Visitation Section” of the FamLink Court Report DCYF 09-095 form or attach the updated Safety Assessment/Safety Plan DCYF 15-258 form to the FamLink Court Report DCYF 09-095 form.
3. Document in FamLink:
 1. When efforts are made to consult with law enforcement (LE) regarding changes to family time or sibling visits because a parent or guardian or sibling has been identified as a suspect in an active criminal investigation for a violent crime that may impact child safety in relation to family time.
 2. When consulting with the AAGs prior to the dissemination of any information about the parent, guardian, or sibling suspect shared by LE.

Forms

[Comprehensive Family Evaluation DCYF 10-480](#)

Court Report DCYF 09-095 (located on the DCYF Forms Repository on the DCYF intranet)

[Safety Assessment/Safety Plan DCYF 15-258](#)

[Safety Plan DCYF 15-259](#)

Supervision Level Family Time Resource Guide DCYF 10-031 (located on the DCYF Forms Repository on the DCYF intranet)

Resources

[Appendix C: Decision Making Matrix](#)

[Case Transfer policy](#)

[Documentation policy](#)

[Family Time and Sibling and Relative Visits policy](#)

[Five Safety Threshold Criteria](#)

[LD CPS Use of Safety Assessment and Safety Planning Tools policy](#)

[Information Gathering Questions](#)

[Placement Out of home and Conditions for Return Home policy](#)

Safe Child Consultation Guide document (located on the DCYF Intranet under Policy & Practice, Child Safety Framework, and Resources)

[Safety Plan policy](#)

[Safety Plan Analysis Guide](#)

Safety Threats Guide (located on the DCYF Intranet under Policy & Practice, Child Safety Framework, and Resources)

[Safety Threshold Guide](#)

[Trial Return Home policy](#)

1130. Safety Plan

1130. Safety Plan admin Wed, 07/25/2018 - 10:41

Original Date: December 2011

Revised Date: July 25, 2021

Policy Review: July 25, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

The purpose of this policy is to provide guidance on developing, implementing, and monitoring safety plans. A safety plan is a written agreement between a family and the Department of Children, Youth, and Families (DCYF) that identifies how safety threats to children or youth will be immediately controlled and managed in the home. Safety plans are effective as long as threats to children and youth's safety exist and the protective capacities of caregivers are insufficient to protect children or youth.

Scope

This policy applies to child welfare (CW) and Licensing Division Child Protective Services (LD CPS) employees.

Laws

[RCW 26.44.030](#) Reports – Duty and authority to make – Duty of receiving agency – Duty to notify – Case planning and consultation – Penalty for unauthorized exchange of information – Filing dependency petitions – Investigations – Interviews of children – Records – Risk assessment process

[RCW 26.44.195](#) Negligent treatment or maltreatment – Offer services – Evidence of substance abuse – In-home services – Initiation of dependency proceedings

[PL 105-89](#) Adoption and Safe Families Act

Policy

1. Caseworkers and LD CPS investigators must:

1. Develop a [Safety Plan DCYF 15-258b](#) in FamLink and follow the [Safety Plan Analysis Guide](#):
 1. When an identified safety threat meets the [safety threshold](#) and children or youth are determined unsafe.
 2. With participants who are suitable, reliable, and can provide a greater level of protection for children or youth than the parents.
2. Verify safety plans:
 1. Will control or manage safety threats.
 2. Have an immediate impact and includes actions that immediately address safety threats.
2. LD CPS investigators must contact the appropriate CW supervisor when they have completed a safety plan on unsafe biological, adoptive, or guardianship children or youth.
3. Caseworkers must:
 1. Follow the [Safety Assessment](#) policy.
 2. Review and monitor safety plans a minimum of twice monthly as long as a safety threat exists.
 3. Revise safety plans and complete a new [Safety Assessment/Safety Plan DCYF 15-258](#) form in FamLink as threats emerge or are eliminated throughout the life of a case.
4. LD employees must follow the [LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy.
5. CW and LD employees must follow the [Documentation](#) policy.

Procedures

1. Caseworkers and LD CPS investigators must:
 1. Develop safety plans with the parents and other safety plan participants when children or youth are identified as unsafe and either:
 1. Remain in the home.
 2. Return home by a court order.
 3. Return home and the safety threats can be managed or controlled in the home.
 2. Assess the suitability and reliability of all potential safety plan participants not acting in their professional capacity, e.g. medical provider, therapist, counselor, etc., by:

1. Conducting a comprehensive interview that addresses identified safety threats.
 2. Reviewing the individual's information in FamLink and other DCYF electronic and hard files.
 3. Reviewing the results of completed [background checks](#) for individuals if they will be having unsupervised access to children or youth.
3. Follow the [Family Team Decision Making](#) policy when considering out-of-home placement or returning children or youth home.
 4. Include the following in safety plans as they pertain to the children or youth and families:
 1. Activities and tasks that control for safety threats or substitutes for diminished caregiver protective capacities.
 2. Use of the family's suitable, formal, and informal supports in order to manage safety threats.
 3. Details for monitoring safety plans.
 4. Supports, safety services, and actions at critical times when safety threats exist.
 5. Formalize any [protective action](#) taken if applicable.
2. LD CPS investigators must follow these additional requirements when safety plans are necessary, per [LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy:
 1. Confirm that any safety plan created in a licensed home for biological, adopted, or guardianship children or youth of a provider is preapproved by the LD Safety Administrator or designee.
 2. Not create safety plans in a licensed home for children or youth in out-of-home care. If a safety threat is indicated, the child or youth must be moved.
3. Supervisors must:
 1. Review and approve the [Safety Plan DCYF 15-258b](#) form in FamLink within two business days of entry and every 30 days thereafter. If:
 1. Supporting the decision, approve the safety plan.
 2. Not supporting the decision, return the safety plan to the caseworker for revisions.
 2. Confirm in FamLink that any safety plan developed as a result of a FamLink override are staffed with the Area Administrator (AA) or designee.

3. Co-assign cases to a caseworker to monitor the case and safety plan, including referring to services, when contacted by an LD CPS investigator after the LD CPS investigator has completed a safety plan.
4. When a safety plan decision is overridden due to compelling reasons:
 1. Caseworkers must complete the following on the Safety Plan page in FamLink:
 1. Select the appropriate compelling reason for the override of the Safety Plan Decision.
 2. Provide an explanation for the compelling reason.
 3. Complete the [Safety Plan DCYF 15-258b](#) form in FamLink if there is an active safety threat and the child or youth has been returned home.
 4. Submit for supervisor approval.
 2. Supervisors must review the [Safety Plan DCYF 15-258b](#) form in FamLink and approve the override based on the compelling reasons given on the Safety Plan page in FamLink. If:
 1. Approved, document in FamLink and submit to AA or designee for verbal approval.
 2. Not approved, return the safety plan and safety assessment to the caseworker for revisions.
 3. AAs or designees must review the [Safety Plan DCYF 15-258b](#) in FamLink and compelling reasons information and verbally inform the supervisor whether the override is approved.

Forms

[Safety Assessment/Safety Plan DCYF 15-258](#)

[Safety Plan DCYF 15-258b](#)

Resources

[Background Checks policy](#)

[Documentation policy](#)

[Family Team Decision Making Meeting policy](#)

[Information Gathering Questions](#)

[LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy

[Present Danger policy](#)

[Protective Action Guide](#)

[Safety Assessment policy](#)

[Safety Plan Analysis Guide](#)

[Safety Threshold Guide](#)

[Protective Action Guide](#)

1135. Infant Safety Education and Intervention

1135. Infant Safety Education and Intervention admin Wed, 07/25/2018 - 11:35

Original Date: October 31, 2014

Revised Date: August 1, 2023

Sunset Review Date: August 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide guidance when working with parents or guardians, families, and caregivers who have newborns and infants to reduce the risk of child abuse and neglect.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[PL 111-320](#) Child Abuse Prevention Treatment Act (CAPTA) Reauthorization Act of 2010

[PL 114-198](#) Comprehensive Addiction and Recovery Act (CARA) of 2016

Policy

1. Newborn, Birth to One Month: Plan of Safe Care
Caseworkers must complete [Plan of Safe Care DCYF 15-491](#) forms with families with open cases as required by CAPTA, when newborns meet at least one of the following criteria:
 1. Diagnosed with neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS) by a health care provider.
 2. Identified as having withdrawal symptoms, are substance-affected, or have fetal alcohol spectrum disorder resulting from prenatal drug and alcohol exposure.
 3. Born to a dependent youth.
2. Birth through Six Months: “Period of PURPLE Crying”

1. Caseworkers must discuss with parents, guardians, and caregivers about their knowledge and understanding of “Period of PURPLE Crying” when working with families.
 2. LD workers must ask parents, guardians, and caregivers if they have previously received information on the “Period of PURPLE Crying,” when investigating, licensing, or approving home studies for families accepting placements.
 3. Caseworkers and LD workers must provide educational materials to parents, guardians, and caregivers who have not received the information.
3. Birth to One Year: Infant Safe Sleep
1. Caseworkers must:
 1. Conduct safe sleep assessments where infants primarily reside, when:
 1. Placing an infant in a new placement setting.
 2. Completing Child Protective Services’ (CPS), Family Voluntary Services’ (FVS), and Child and Family Welfare Services’ (CFWS) interventions involving infants aged birth to one year, even if the infants are not identified as an alleged victim or identified child.
 2. Assess safe sleep conditions during subsequent monthly [health and safety visits](#).
 2. LD workers must complete the following when licensing or approving home studies with families accepting placements for infants:
 1. Assess sleeping environments.
 2. Educate families on safe sleep practices.
 3. CPS investigators must observe and make recommendations for safe sleep environments for infants in licensed and unlicensed placements during an investigation.

Procedures

1. Newborn, Birth to One Month: Plan of Safe Care
 1. Caseworkers must:
 1. Assess newborns, parents or guardians, and caregivers for needs and services.
 2. Complete the [Plan of Safe Care DCYF 15-491](#) form with families within 10 calendar days of DCYF being made aware a newborn meets the criteria in [Policy Section 1](#).

3. Upload a copy or photo of the completed [Plan of Safe Care DCYF 15-491](#) form into FamLink within 10 calendar days from either the date the:
 1. Intake was received.
 2. Newborn of a dependent youth was born.
4. After the plan is created:
 1. Refer to services and resources identified.
 2. Review and provide a copy of the plan to both the:
 1. Parents or guardians
 2. Caregivers
 3. Obtain a signed [Consent DCYF 14-012](#) form from each parent or guardian to share information with other providers working with them, including, but not limited to their:
 1. Substance use disorder treatment providers.
 2. Medication-Assisted Treatment (MAT) providers.
 3. Home visitors, e.g., public health nurses or Parent-Child Assistance Program (PCAP) case managers.
 4. Health care providers.
 5. Early Support for Infants and Toddlers (ESIT) providers.
2. LD workers must:
 1. Assess newborns, parents or guardians, and caregivers for needs and services.
 2. Make recommendations and provide them to caseworkers, if applicable.
3. Caseworkers must:
 1. Follow up on recommendations received from LD workers.
 2. Complete the:
 1. Service referrals.
 2. [Plan of Safe Care DCYF 15-491](#) form, when required.
 3. Monitor the:
 1. Case.
 2. [Plan of Safe Care DCYF 15-491](#), if applicable.

2. Birth through Six Months: “Period of PURPLE Crying”

1. Caseworkers and LD workers must:

1. Determine if the parents, guardians, and caregivers received the “Period of PURPLE Crying” educational DVD or web application. If:

1. Received, discuss any questions the parents, guardians, or caregivers may have regarding the “Period of PURPLE Crying”.

2. Not received:

1. Provide the “Period of PURPLE Crying” educational DVD or web application and, when available, the supplemental booklet.

2. Review and discuss the information outlined in the booklet. The following key points must be discussed with the parents or guardians, and caregivers:

1. The acronym “PURPLE” is used to describe specific characteristics of an infant’s crying and what they are experiencing is normal and a phase in their infant’s development.

2. Their frustration due to “Period of Purple Crying” may cause them to shake or harm the infant, which can result in significant, if not life-threatening effects.

3. Reinforce with them, that if an infant is crying and they become frustrated they should put the infant down in a safe environment to prevent harm to the infant.

2. Play the 10 minute “PURPLE” video for the parents or guardians and caregivers after presenting the booklet, and:

1. Emphasize the importance of the material presented.

2. Reinforce to them that everyone caring for their infant should review the information.

3. Remind them that the 17-minute soothing film on the DVD or web application is available to help them understand ways to soothe their infant and cope with inconsolable crying periods.

3. Documenting “Period of PURPLE Crying”

1. Caseworkers and LD CPS investigators must document the following in a FamLink case note:

1. The discussion that took place with the parents or guardians and caregivers about the “Period of Purple Crying”.
 2. When the parents or guardians and caregivers received the “Period of PURPLE Crying” educational DVD or web application and when a supplemental booklet was provided.
 3. If the parents or guardians and caregivers either:
 1. Indicated they understood the material.
 2. Refused to discuss the “Period of PURPLE Crying” materials.
 2. LD workers must document the discussion that took place with the parents or guardians and caregivers in the licensing provider portal.
4. Birth to One Year: Infant Safe Sleep
1. Caseworkers and LD workers must:
 1. Complete a safe sleep assessment by assessing the infant’s sleeping environment using the [National Institute for Health: What Does a Safe Sleep Environment Look Like?](#), with the parents or guardians, and caregivers of infants younger than one year, during the first face-to-face meeting.
 2. Collaborate with the parents or guardians, and caregivers to create a safe sleep environment. If one does not exist:
 1. Determine whether they have the equipment to create a safe sleep environment appropriate for the infant’s height and weight.
 2. Identify and discuss appropriate safe sleep options with them if they don’t have safe sleep equipment. These options must meet the National and Consumer Product Safety Commission standards and follow the manufacturer’s recommendations for the infant’s height and weight. Safe sleep options include, but are not limited to:
 1. Cribs
 2. Portable cribs
 3. Bassinets
 4. Flat mattresses and fitted sheets
 3. Determine in collaboration with their supervisor the response needed to meet the infant’s needs when either occurs:
 1. Parents, guardians, or caregivers decline to participate in the process of creating a safe sleep environment.

2. There are additional risk factors, e.g., substance use or abuse, or mental health issues associated with the parents', guardians', or caregivers' ability to maintain infant safety and a safe sleep environment.
2. Caseworkers must purchase a safe sleep option in collaboration with the parents or caregivers using one of the following:
 1. Providing them with a local store voucher to purchase one of the safe sleep options.
 2. Ordering the safe sleep option using following the [Amazon E-Voucher](#) DCYF document. If they want the items delivered directly to their home, obtain a signed [Consent DCYF 14-012](#) form allowing DCYF to release their address to Amazon.
 3. Using an office credit card when the safe sleep option is needed immediately.
3. LD workers must purchase a safe sleep option in collaboration with the caregivers by:
 1. Ordering the safe sleep option using [Amazon](#). If they want the items delivered directly to their home, obtain a signed [Authorization and Consent to Share Records DCYF 15-824](#) form allowing DCYF to release their address to Amazon.
 2. Following the [Concrete Goods](#) policy.
4. Caseworkers and LD workers must verify the safe sleep equipment is installed and safe sleep guidelines are being followed once the equipment is received by the parents, guardians, or caregivers.
5. Caseworkers must notify LD SAM licensors or LD regional licensors immediately of concerns or risk factors identified in licensed foster homes or facilities.
6. LD workers must:
 1. Notify caseworkers and CW supervisors of concerns or risk factors found when completing home studies or foster care licenses, and conducting investigations.
 2. Not approve home studies without safe sleep environments.
 3. Assess and mitigate concerns or risk factors when notified by caseworkers in licensed homes or facilities.
5. Documenting the Infant Safe Sleep Assessment
 1. Caseworkers must document the following into FamLink case notes:

1. Results of the safe sleep assessment.
 2. Safety concerns or risk factors identified in the home.
 3. If parents, guardians, or caregivers decline to create a safe sleep environment for the infant.
2. LD workers must document the following into the licensing provider portal:
 1. Results of the safe sleep assessment.
 2. If parents, guardians, or caregivers decline to participate in the process of creating a safe sleep environment for the infant.
 3. Safety concerns or risk factors identified in licensed foster homes or facilities and how those concerns were mitigated.
3. LD CPS investigators must document the following in the LD CPS Investigation Assessment DCYF 09-967 form:
 1. Results of the safe sleep assessment.
 2. If parents, guardians, or caregivers decline to participate in the process of creating a safe sleep environment for the infant.
 3. Safety concerns or risk factors identified in licensed foster homes or facilities and how those concerns were mitigated.
4. CW supervisors must document the decisions made to meet infants' needs in FamLink case notes when parents, guardians, or caregivers:
 1. Decline to participate in the process of creating safe sleep environments.
 2. There are additional risk factors.

Forms

[Authorization and Consent to Share Records DCYF 15-824](#)

[Comprehensive Family Evaluation DCYF 10-480](#)

[Consent DCYF 14-012](#)

[FAR Family Assessment \(FARFA\) DCYF 10-474](#)

LD CPS Investigative Assessment DCYF 09-967 (located on the Forms repository on the DCYF intranet)

[Plan of Safe Care DCYF 15-491](#)

Resources

[Amazon E-Voucher](#) DCYF document (located on the DCYF intranet under Programs, Intake and CPS, and Basic Needs)

[Child Protective Services Family Assessment Response policy](#)

[Child Protective Services \(CPS\) Investigation policy](#)

[Concrete Goods policy](#)

[Consumer Product and Safety Commission](#)

[Family Voluntary Services \(FVS\) policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[National Center on Shaken Baby Syndrome](#)

[National Institute for Health: What Does a Safe Sleep Environment Look Like?](#)

[Placement Out-of-Home and Conditions for Return Home policy](#)

[Safe Infant Sleep and Breastfeeding](#)

[Safe Sleep Card DCYF FS_0043 publication](#)

[Sudden Infant Death Syndrome \(SIDS\) and Safe Infant Sleep](#)

[The Period of Purple Crying](#)

1140. Family Assessment

1140. Family Assessment admin Wed, 07/25/2018 - 11:38

Original Date: December 2011

Revised Date: October 31, 2019

Sunset Review Date: May 31, 2023

Approval: Jody Becker, Deputy Secretary

Purpose

Conducting an assessment of the family is the process of gathering information to gain a greater understanding of how a family's strengths, needs and resources affect child safety, well-being, and permanency. Assessments are completed in partnership with the family to understand what everyday life challenges and individual caregiver patterns of behaviors contribute to child safety threats that will be addressed in case planning.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) caseworkers.

Laws

[RCW 26.44.260](#) Family assessment response

[RCW 26.44.270](#) Family assessment, recommendation of services

Policy

1. Assessments of the family are completed at key decision points in a case.
2. Assessments must identify the enhanced protective and diminished protective capacities directly related to the identified safety threats.
3. Family members must be included in the assessment process.
4. Assessments must include information and input from professionals and other collateral contacts that have knowledge about the child and family.
5. Information contained in the Comprehensive Family Evaluation (CFE) DCYF 10-480 form, Investigative Assessment (IA) DCYF 09-967 form and the FAR Family Assessment (FARFA) DCYF 10-474 form will be used to help develop the [case plan](#).

Procedures

Caseworkers must:

1. Complete the FARFA or CFE with the family to address changes in behaviors, conditions, and attitudes related to safety.
2. Complete the [Safety Assessment/Safety Plan DCYF 15-258 form](#) during the completion of the CFE or FARFA.
3. Assess conditions for return home when updating a CFE. Review how the safety threat is or is not:
 1. Being managed by the caregiver;
 2. How the parent is incorporating service provisions into their daily life; and
 3. Being addressed in the family home.
4. Complete the following in FamLink:
 1. LD/CPS Investigative Assessment DCYF 09-967 form within 60 calendar days of DCYF receiving the intake.
 2. Initial CFE within 45 calendar days of a [Family Voluntary Services \(FVS\)](#) or Child and Family Welfare Services (CFWS) case assignment. This includes supervisor approval in FamLink.
 3. FARFA no later than:
 1. Forty-five calendar days from the date the intake was received; or
 2. One hundred and twenty calendar days if a [case plan](#) for services has been developed and the parent or guardian agree to participate in services.

4. The safety assessment within the required timeframes per the [1120 Safety Assessment](#) policy.
5. Update the CFE in FamLink:
 1. Every 90 days after the completion of the prior CFE on [FVS](#) cases.
 2. A minimum of every six months or when a new report to the court is required for a CFWS case.
 3. When conditions for return home have been achieved.
 4. When developing or changing a [case plan](#).
 5. Prior to case closure.

Forms

Comprehensive Family Evaluation DCYF 10-480 (located in FamLink)

LD/CPS Investigative Assessment DCYF 09-967 (located in FamLink)

FAR Family Assessment DCYF 10-474 (located in FamLink)

Resources

Comprehensive Family Evaluation Guide (located under Guides and Tools on the CFWS Children's Administration (CA) Intranet page)

Comprehensive Family Evaluation for Legally Free Children Guide (located under Guides and Tools on the CFWS CA Intranet page)

Investigative Assessment Guide (located under Guides and Tools on the CFWS CA Intranet page)

1150. Case Plan

1150. Case Plan admin Thu, 09/20/2018 - 07:57

Original Date: July 1, 1997

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose Statement

The purpose of this policy is to provide guidance on creating case plans for children, youth, and families.

Scope

This policy applies to child welfare (CW) employees.

Laws

[RCW 13.34](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[RCW 26.44.030](#) Reports - Duty and authority to make-Duty of receiving agency-Duty to notify-Case planning and consultation-Penalty for unauthorized exchange of information-Filing dependency petitions-Investigations-Interviews of children-Records-Risk assessment process.

[RCW 74.13.280](#) Client information.

[RCW 74.13.330](#) Responsibilities of foster parents.

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict.

[RCW 74.14A.025](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict-Policy updated.

[RCW 74.14C.005](#) Findings and intent.

[42 USC 675, Sec. 475](#) Title 42-The Public Health and Welfare

Policy

Caseworkers must develop, monitor, and update case plans:

1. Open more than 45 calendar days for Child and Family Welfare Services (CFWS), Family Voluntary Services (FVS), and Family Assessment Response (FAR) cases.
2. When there is a need to specify actions that parents or guardians must complete to reduce or eliminate safety threats and increase their protective capacities to support their children's or youth's safety and well-being.
3. With family members and community partners. This includes scheduling a Case Plan Contact for FAR and FVS cases.

Procedures

1. Creating Case Plans for CFWS, FVS, and FAR Cases
When working with children, youth, and families and a case plan is needed, caseworkers must create case plans that:
 1. Are family-driven, specific, measurable, attainable, relevant, timely, and understandable by all parties involved to:
 1. Preserve families and prevent future risk of child abuse or neglect.
 2. Support the health, safety, and well-being of the children or youth.
 2. Includes interventions, services, and tasks that:
 1. Build upon family strengths and are driven by individual, cultural, and family needs.

2. Are goal-oriented and directly linked to the identified safety threats and risks.
 3. Address:
 1. Behavioral changes that impact safety by building on strengths and reducing safety threats and risks.
 2. Challenges and barriers to services faced by parents or guardians.
 4. Are least intrusive to:
 1. Engage families.
 2. Address identified safety threats and risks.
 3. Protect children and youth.
 5. Establish a plan for permanency at the onset of service delivery in order to best serve the needs of children or youth and the family when they are placed in out-of-home care.
 6. Achieve the permanency planning goals set for children or youth in out-of-home placement.
3. Includes collaborating with the following individuals:
 1. Parents or guardians
 2. Children or youth, if developmentally appropriate
 3. Children's or youth's tribal Representatives if applicable as outlined in the [Indian Child Welfare Efforts and Tribal Collaboration](#) policy.
 4. The following additional individuals if necessary:
 1. Caregivers
 2. Family supports identified by the parents or guardians
 3. Community stakeholders
 4. Other applicable providers
 4. Begin by discussing Procedure Section 1.a. and 1.b. during a Case Plan Contact with the individuals outlined in Procedure Section 1.c. for FAR and FVS cases.
2. Documenting Case Plans
Caseworkers must:
 1. Document the Case Plan Contact in a FamLink case plan meeting case note.
 2. Document case plans for:
 1. CFWS dependency cases by:

1. Launching [court reports](#) through the Comprehensive Family Evaluation (CFE) DCYF 10-480 form in FamLink.
 2. Completing the [Court Report DCYF 09-095](#) form in FamLink. This includes verifying information on the paper form is used also documented in FamLink.
2. FVS cases and CFWS services cases by:
1. Initiating them within 15 calendar days of case assignment.
 2. Completing them within 45 calendar days of case assignment.
 3. Entering the case plan within the Comprehensive Family Evaluation (CFE) DCYF 10-480 form in FamLink and:
 1. Documenting the Objectives section in the Family or Parent/Caregiver Functioning sections.
 2. Launching case plans from the CFE.
 3. Completing the [Case Plan DCYF 15-259A](#) form in FamLink. The paper form may be used for convenience purposes with the family, but then must be entered into FamLink.
 4. Obtaining all participant signatures.
 5. Providing a copy to the family.
3. Children and youth in out-of-home care under a [Voluntary Placement Agreement \(VPA\)](#) for 60 calendar days or more by completing a [Court Report DCYF 09-095](#) form in FamLink as the case plan.
4. FAR cases, by:
1. Initiating them within 15 calendar days of the date the parent's or guardian's give permission to keep the case open beyond the 45th calendar day for service provision.
 2. Completing the FAR Family Assessment (FARFA) DCYF 10-474 form in FamLink.
 3. Documenting the Objectives section in the Family or Parent/Caregiver Functioning sections.
 4. Launching case plans from the CFE.
 5. The [Case Plan DCYF 15-259A](#) form may be used for convenience purposes with the family, but then must be entered into FamLink.
 6. Obtaining all participant signatures.
 7. Providing a copy to the family.

3. Inform parents or guardians and caregivers of the dates and location of the dependency review and permanency planning hearings if the child or youth is dependent pursuant to a proceeding under [Chapter 13.34 RCW](#).
 4. Document in a case note that the notice has been provided to parents or guardians, caregivers, and children's or youth's tribes, if there is a reason to know the child is or may be an Indian child. Follow these policies:
 1. [Dependency Petition Process](#)
 2. [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#)
 3. [Indian Child Welfare Providing Confidential Records to Tribes](#)
3. Updating Case Plans
Caseworkers must review case plans in conjunction with completing the CFE and update as needed, including when a child or youth is in a trial return home trial [return home](#).

Forms

[Case Plan DCYF 15-259A](#)

[Comprehensive Family Evaluation \(CFE\) DCYF 10-480](#)

[Court Report DCYF 09-095](#)

FAR Family Assessment (FARFA) DCYF 10-474 (located in the Forms repository on the DCYF intranet)

Resources

[Court Report policy](#)

Court Report Mapping and Guidance (located on the CA intranet under CFWS Guides and Tools)

[Dependency Petition Process policy](#)

[Indian Child Welfare Active Efforts and Tribal Collaboration policy](#)

[Indian Child Welfare Reason to Know policy](#)

[Indian Child Welfare Providing Confidential Records to Tribes policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

[Return Home policy](#)

[Voluntary Placement Agreement \(VPA\) policy](#)

1160. Commercially Sexually Exploited Children (CSEC)

1160. Commercially Sexually Exploited Children (CSEC) admin Wed, 07/25/2018 - 11:43

Approval: Jennifer Strus, Assistant Secretary

Original Date: September 29, 2015

Revised Date: July 23, 2017

Sunset Review: July 1, 2021

Purpose

To identify, document and determine appropriate and culturally responsive services for children or youth with an open case in Children's Administration (CA) who are at risk of or are victims of commercial sexual exploitation (CSE).

Scope

This policy applies to all DCFS staff.

Laws

[PL 106-386](#) - Victims of Trafficking and Violence Protections Act of 2000

[PL 113-183](#) - Preventing Sex Trafficking and Strengthening Families Act

PL 114-22 - Justice for Victims of Trafficking Act of 2015

[RCW 9.68A.100](#) - Commercial Sexual Abuse of a Minor – Penalties

[RCW 9.68A.101](#) - Promoting Commercial Sexual Abuse of Minor - Penalty

[RCW 9.68A.102](#) - Promoting Travel for Commercial Sexual Abuse of a Minor - Penalty

[RCW 9.68A.103](#) - Permitting Commercial Sexual Abuse of a Minor - Penalty

[RCW 26.44.020](#) - Definitions

[RCW 26.44.030](#) - Reports – Duty and Authority to Make – Duty of Receiving Agency – Duty to Notify – Case Planning and Consultation – Penalty for Unauthorized Exchange of Information – Filing Dependency Petitions – Investigations – Interviews of Children – Records – Risk Assessment Process

Policy

1. A child or youth will receive a screening to assess whether he or she is a victim of CSE when:
 1. He or she is involved in an open case in any program within CA, in-home with his or her parent or guardian or placed in out-of-home care, and there is suspicion, indication or confirmation that the child or youth may be a victim of CSE.
 2. The child is age 11 years or older at the time of Child and Family Welfare Services (CFWS) case opening either in-home or out-of-home.

3. The child or youth has returned to placement after being missing from care.
2. CA will report to law enforcement within 24 hours any child or youth who has been indicated or confirmed as CSEC regardless of whether or not the child or youth believes he or she has been victimized. CA staff will document the report to law enforcement on the Intake Referral tab in FamLink including the date and time of report and name of the law enforcement agency.
3. Any CA staff who suspects or learns that a child or youth has been sexually exploited will follow the mandatory reporting statute and make a report to intake.
4. A [shared planning meeting](#) will be held for all children or youth in the care and custody of CA when there is indication or confirmation of CSE.

Procedures

1. Screening Children and Youth for CSE Using the CSEC Screening Tool DSHS 15-476
 1. Caseworkers will screen all children and youth involved in open cases (Child Protective Services (CPS) investigations and Family Assessment Response, Division of Licensed Resources(DLR)/CPS, Family Reconciliation Services (FRS), Family Voluntary Services (FVS), CFWS and Adoption) when there is an allegation, suspicion, indication or confirmation that the child is a victim of CSE.
 2. Child Health and Education Tracking (CHET) workers who are co-assigned will screen all youth in the care and custody of CA age 11 years and older at initial placement unless the child has already been screened within 30 days of his or her out-of-home placement.
 3. Missing from Care Locators who are co-assigned will screen children and youth missing from care upon their return from a run episode.
 4. CFWS caseworkers will screen all children and youth:
 1. Age 11 years and older at the time of CFWS case opening if not screened by a CHET worker. This includes children and youth who remain in-home and those placed in out-of-home care.
 2. Who return from a run episode if the screen is not completed by a co-assigned Missing from Care Locator.
2. Case Planning and Services
 1. If the results of the screening tool determine the child or youth is indicated or confirmed as a CSEC, the DCFS caseworker will:
 1. Assess the child and family needs and refer to appropriate services.
 2. Conduct a [shared planning](#) meeting for all children or youth in the care and custody of CA when the CSEC Screening Tool results identify new indicators

or confirmation of CSEC to develop a case plan for safety and stability that addresses needs including but not limited to:

1. Safety
 2. Placement stability
 3. Permanency Plan
 4. Social activities, including prudent parenting standards
 5. Cultural needs
 6. Education
 7. Medical, substance abuse and mental health treatment
 8. Independent Living Skills Program (ILS)
3. Refer children or youth newly confirmed as a CSEC for medical screening and specialized CSEC services as available and appropriate.
 4. Assess and address any additional identified health or safety concerns.
 5. Document the case plan and services in FamLink under the Shared Planning tab or case plan.
2. If the child or youth is a household member of a licensed provider and the screening tool results determine the child or youth is indicated or confirmed for CSEC, the DLR/CPS investigator is responsible for the investigation and will refer the case to DCFS for services.

Forms

- CSEC Screening Tool (DSHS 15-476)

1170. Domestic Violence

1170. Domestic Violence admin Wed, 07/25/2018 - 11:44

Original Date: March 31, 2017

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division and Ruben Reeves, Assistant Secretary of Licensing Division

Purpose

The purpose of this policy is to:

- Recognize and understand the dynamics of domestic violence (DV) in families through the universal screening process.
- Determine the impact of DV on child safety through the specialized DV assessment.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 10.99.020](#) Definitions

[RCW 10.99.030](#) Law enforcement officers-Training, powers, duties-Domestic violence reports

[RCW 26.44.020](#) Definitions

[RCW 42.56.240](#) Investigative, law enforcement, and crime victims

[RCW 70.123.078](#) Disclosure of information

Policy

1. Intake workers must follow the [Intake Process and Response](#) policy and offer DV resources to the referrer on all intakes, screened in or out, when both:
 1. DV is identified.
 2. The referrer is not familiar with DV resources.
2. Caseworkers must:
 1. Complete the universal DV screening at key points in a case to determine if DV is present, including prior to placing in a relative or suitable person's home. DV screenings include interviews and review of records and available databases.
 2. Conduct a Specialized DV Assessment if DV is determined to be present in a case through universal screening.
 3. Use information gathered during the DV screening, the Specialized DV Assessment, and the gathering questions to complete the safety assessment and follow the safety assessment policy. Offer DV resource information to adult victims in open cases when DV is identified.
3. Licensing Division (LD) Child Protective Services (CPS) investigators and LD workers must follow the [Placement Moves](#) policy, if DV poses a threat to children or youth in licensed placements.

Procedures

1. Universal DV Screening
 1. Intake workers must complete the universal DV screening, per the [Intake Process and Response](#) policy.

2. CPS, Family Voluntary Services (FVS), and Child Welfare and Family Services (CFWS) caseworkers must conduct universal DV screenings:
 1. Using individual and separate interviews with all parents, caregivers, adults, children, and youth in the home even if DV was not identified at intake to determine:
 1. If DV is present?
 2. If so, who is the:
 1. Adult victim?
 2. DV perpetrator?
 2. At each of the following times in a case:
 1. At first contact with a family. If not possible, at the next available opportunity. If parents or guardians refuse to meet separately:
 1. Consult with the supervisor.
 2. Document the parents' or guardians' refusal to meet in a case note.
 2. A new screened in intake
 3. Prior to placing a child or youth with a relative or suitable person.
 4. Case Transfer
 5. Re-assessment of safety, per the [Safety Assessment](#) policy.
 3. LD:
 1. CPS investigators must conduct universal DV screening when investigating child abuse or neglect (CA/N) allegations involving a biological family or guardian.
 2. Workers must conduct universal DV screening when completing a home study.
2. Specialized DV Assessment Interview Protocol
Caseworkers, LD CPS investigators and LD workers must:
 1. Conduct a specialized DV assessment when DV is identified, to determine if DV poses a threat to a child's or youth's safety or compromises the family's ability to address other CA/N. This assessment completed using interviews, review of records, and available databases to obtain all of the following information:
 1. DV perpetrator's pattern of assaultive and coercive tactics.
 2. Impact of DV on the:

1. Adult victim
 2. Child or youth
 3. Adult victim, perpetrator, and community protective factors.
 4. The lethality of the DV.
2. Follow [Safety Plan](#) policy if DV is determined to pose a threat to the safety of the child or youth.
3. Complete a Safe Child Consultation if there is an inability to safety plan.
3. Documentation
 1. Intake workers must document the outcome of the universal screening questions in the Additional Risk Factors narrative box of the intake. If the allegation of CA/N involves DV, intake workers must document the information in the Allegation/Concern narrative box, per the Intake Training Manual document.
 2. Caseworkers must document the outcome of the:
 1. Universal DV screen in the following, as applicable:
 1. [Structured Decision Making Risk Assessment \(SDMRA\)](#) tool.
 2. [Investigative Assessment](#).
 3. Family Assessment Response Family Assessment (FARFA).
 4. Comprehensive Family Evaluation (CFE).
 5. [Court Report](#).
 6. Case note for relatives and suitable person placements.
 7. Specialized DV assessment, if conducted, in a case note.
 3. LD CPS investigators must document the outcome of the universal DV screening and specialized DV assessment interview protocol of the DV in a case note and in the LD Risk Assessment Matrix, as applicable.
 4. LD workers must document the outcome of the DV screening and specialized DV assessment interview protocol in a provider note or the home study, as applicable.
 5. Caseworkers and LD CPS investigators must document safety planning information for the victim or children in a case note, labeled confidential DV safety plan and include the confidential information:
 1. The identity of a victim or witness to the crime.
 2. The identity of the DV victim if the victim has filed a complaint with an investigative or law enforcement agency and there is an open criminal investigation.

3. The location of a DV program, including shelters and transitional living facilities.
4. The victim's address information, if he or she signed up for the Address Confidentiality Program (ACP). If the victim is participating in the ACP, use the P.O. Box address that is assigned to them through the Secretary of State.

Resources

Statewide DV resources

- DV Hotline telephone number 1-800-562-6025 V/TTY.
- [Washington State Coalition Against Domestic Violence](#)
- [DSHS DV site](#) (shelters, victim, and perpetrator programs)
- DCYF Domestic Violence site (located on the DCYF intranet under Programs and Intake & CPS)
- [Address Confidentiality Program](#)

Databases to identify previous DV:

- FamLink
- ACES
- BARCODE
- [WA State Courts](#)
- Law enforcement reports

[Case transfers policy](#)

[Family Time and Sibling and Relative Visits policy](#)

Intake Training Manual document (located on the DCYF intranet under Programs and Intake & CPS)

[Safety Assessment policy](#)

[Social Worker's Practice Guide to Domestic Violence DCYF 22-1314 publication](#)

6800. Background Checks

6800. Background Checks sarah.sanchez Tue, 08/28/2018 - 14:06

Original Date: February 1, 1998

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Jennifer Williams, Director of Administrative Services

Purpose

The purpose of this policy is to provide guidance to employees about completing background checks for child welfare purposes.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 13.34.138](#) Review hearings – Findings – Duties of parties involved-in-home placement requirements – Housing assistance

[RCW 26.44.240](#) Out-of-home care – Emergency Placement - Criminal history record check

[RCW 43.43.837](#) Fingerprint-based background checks-Requirements for applicants and service providers – Shared background checks – Fees – Rules to establish financial responsibility

[RCW 74.13.700](#) Denial or delay of licensure or approval of unsupervised access to children

[RCW 74.13.710](#) Out-of-home care – Childhood activities – Prudent parent standard

[RCW 74.15.030](#) Powers and duties of Secretary

[PL105-89](#) Adoption and Safe Families Act of 1997

[PL115-123](#) Family First Prevention Services Act 2018

Policy

Employees must:

1. Complete background checks per the [Guide to Background Checks](#).
2. Only authorize individuals to have unsupervised access to a child or youth after they have passed a background check, even if a court order authorizes unsupervised access.
3. Not authorize individuals for the purpose of the background check if they did not pass the background check.
4. Complete a suitability assessment when required, per the [DCYF Secretary's List of Crimes and Negative Actions](#).

Procedures

1. National Crime Information Center (NCIC) Purpose Code C:
When requesting background checks for Child Protective Services (CPS) investigations or allegations of child abuse or neglect (CAN) NCIC Purpose Code C:
 1. Requestors may call the DCYF [NCIC Background Check Unit \(BCU\)](#) at 1-800-998-3898 or email [NCIC](#) prior to either:

1. Going to the home.
 2. Completing a safety assessment.
 2. Background check specialists must:
 1. Process the NCIC Purpose Code C request per the Background Check Desk Manual.
 2. Provide the completed [NCIC Purpose Code C Background Check Summary DCYF 09-154](#) form to the requestors.
 3. Requestors must review the background information to develop strategies for responding safely to the allegation.
2. NCIC Purpose Code X for Emergent Unlicensed Relatives and Suitable Person Placements
When requesting background checks for emergent unlicensed relative or suitable person placements:
1. Requestors must call NCIC BCU at 1-800-998-3898 or email [NCIC](#) prior to placing children or youth in the care of an unlicensed caregiver.
 2. Background check specialists must:
 1. Process NCIC Purpose Code X requests for adult household members, per the Background Check Desk Manual.
 2. Compare the individual's Code X background information to the [DCYF Secretary's List of Crimes and Negative Actions](#) and within one hour from the time of the request, notify the requestor and their supervisor if the applicant is:
 1. Approved and the requestor may authorize the emergent placement.
 2. Not approved they may:
 1. Not authorize the emergent placement.
 2. Request a non-emergent background check.
 3. Requestors with an approved NCIC Code X must:
 1. Notify NCIC BCU immediately if placement has:
 1. Occurred:
 1. Verify placement care and authority is open in FamLink.
 2. Provide NCIC BCU the additional needed information on either:
 1. The [Unlicensed Caregiver Placement Checklist DCYF 15-280](#) form.

2. By responding to the approval email received from NCIC BCU.
 2. Not occurred, to close out the background check process in the required timeframe.
 2. Complete all of the following within five calendar days of placement, for those completing the:
 1. Online [Background Check Authorization](#) form:
 1. Instruct each individual:
 1. Age 16 and older, living on the premises to complete the online [Background Check Authorization](#) form using Google Chrome browser.
 2. Age 15 and younger, when it is determined a background check is required using the [Guide to Background Checks](#) and to complete the online [Background Check Authorization](#) form using Google Chrome browser.
 2. Obtain their:
 1. Online confirmation code
 2. Full name
 3. Date of birth
 3. Complete the [Background Check Request/Decision DCYF 09-131](#) form.
 4. Send the [Background Check Request/Decision DCYF 09-131](#) form to NCIC BCU.
 2. Hard copy [Background Check Authorization DSHS 09-653](#) form that are individuals with Limited English Proficient (LEP) or are unable to complete the background check form online:
 1. Provide them with a [Background Check Authorization DSHS 09-653](#) form.
 2. Review for completeness and legibility when returned.
 3. Complete the [Background Check Request/Decision DCYF 09-131](#) form for each individual completing the hard-copy form.
 4. Send to the following forms to [NCIC BCU](#), the completed:

1. [Background Check Authorization DSHS 09-653](#)
2. [Background Check Request/Decision DCYF 09-131](#)

4. Background check specialists must:

1. Verify requestors provided the required information from the [Unlicensed Caregiver Placement Checklist DCYF 15-280](#) form or received a response with the required information from the approval Code X email. If placement:

1. Occurred, background check specialist must complete the following in FamLink:

1. Conduct a Provider or Person search.
2. Create or edit the Provider or Person tab to reflect accurate address, phone number, email address, etc., if needed.
3. Add persons as Members to the Provider, as needed.
4. Document the:
 1. Conditional approval in the Background Check tab.
 2. Child Location.
 3. Tracking unpaid placement code.

2. Did not occur, no further action.

2. Complete the following when the final background check result is received:

1. Follow the Background Check Desk Manual when processing background checks.
2. Complete the [Background Check Request/Decision DCYF 09-131](#) form with the background check decision.
3. Notify the following of the decision:
 1. Requestor
 2. Individual, when they have history, or they do not pass the background check.
4. Document the decision in FamLink.

5. Requestors must complete the following when information is received from the background check specialist:

1. Review the decision on the completed [Background Check Request/Decision DCYF 09-131](#) form received from the NCIC BCU.

2. Continue authorization of the individual for the emergent placement if they passed.
3. Not authorize the individual for the emergent placement if they did not pass. A child or youth cannot remain in the home with an unauthorized individual.
4. If the individual did not pass the background check, did not submit their fingerprints, or did not complete the background check form within 15 calendar days from the submission of the NCIC Code X:
 1. Notify the court within seven days of the decision that the individual did not pass the background check and recommend the removal of the child or youth. This includes contacting the assistant attorney general (AAG) to determine when the information can be presented to the court.
 2. Inform the court it may request the background information directly from the individual.
 3. Document the recommendation for removal in a FamLink case note.

3. Non-Emergent Background Checks

1. When requesting background checks for adoption, Child in Need of Services (CHINS), foster care licensing, non-emergent placements, Interstate Compact on the Placement of Children (ICPC) Border Agreement with a non-parent, and [reinstatement of parental rights](#):
 1. Requestors must follow Procedures Section 2.c.ii.A or B., prior to authorizing placement or unsupervised access:
 2. Background check specialists must:
 1. Follow the Background Check Desk Manual when processing background checks.
 2. Complete the [Background Check Request/Decision DCYF 09-131](#) form with the background check decision.
 3. Notify the following:
 1. All requestors of the decision to pass or not pass. If, relatives and suitable persons did not pass for the purpose of placement explain to them the connection between the individual's history and risk to the child's or youth's safety.
 2. Individual, when they pass or do not pass the background check with history and provide them information on how to request a copy of their history.
 4. Document the decision in FamLink.

3. Requestors must, prior to authorizing unsupervised access to children or youth, review the decision on the completed [Background Check Request/Decision DCYF 09-131](#) form received from the BCU and complete the following:
 1. Only authorize individuals for the purpose of the background check if they passed the background check.
 2. Not authorize individuals for the purpose of the background check if they did not pass. If the court places children or youth out-of-home under a shelter care order or in a dependency case and unauthorized individuals remain in the home:
 1. Contact the AAG and notify the court within seven calendar days of the decision that an individual did not pass a background check, per the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 2. Notify the court of individuals not passing a background check and recommend the children or youth move to a different out-of-home placement.
 3. Inform the court to request the background information directly from individuals.
 4. Document recommendations to move children or youth to a different out-of-home placement in a FamLink case note.
2. When the court orders unsupervised access to children or youth, requestors must complete the following if the individual did not complete or pass a background check:
 1. Follow Procedures Section 2.c.ii.A or B., prior to approving unsupervised access to children or youth.
 2. Contact the AAG and notify the court within seven calendar days of the decision that an individual did not pass a background check, per the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 1. Informing the court it may request the background information directly from the individual.
 2. Documenting the recommendation and outcome of the court hearing in a FamLink case note.
3. When the court are considering returning a child or youth to the parent or orders them to return home prior to establishing dependency, requestors must:
 1. Notify the court that DCYF does not have the authority to complete a background check on the individual for the purpose of returning a child or

youth home. If a NCIC Purpose Code C has been completed, that information cannot be shared with the court or the individual.

2. Document the outcome of the court hearing in a FamLink case note.
4. When requesting background checks for contracts, renewals, or other unsupervised access:
 1. Requestors must follow Procedures Section 2.c.ii.A or B., prior to authorizing unsupervised access:
 2. Background check specialists must:
 1. Follow the Background Check Desk Manual when processing background checks.
 2. Complete the [Background Check Request/Decision DCYF 09-131](#) form with the background check decision.
 3. Notify individuals and requestors of the decision.
 4. Document the decision in FamLink.
 3. Requestors must, prior to authorizing unsupervised access to children or youth, review background check decisions on the completed [Background Check Request/Decision DCYF 09-131](#) form received from the BCU and complete the following:
 1. Only authorize individuals for the purpose of the background check if they passed the background check.
 2. Not authorize individuals for the purpose of the background check if they did not pass.
5. When returning dependent children or youth to a parent or ICPC with a parent:
 1. Requestors must follow Procedures Section 2.c.ii.A or B., prior to returning dependent children or youth to a parent.
 2. Background check specialists must:
 1. Follow the Background Check Desk Manual when processing background checks.
 2. Complete the [Background Check Request/Decision DCYF 09-131](#) form with the background check decision.
 3. Send individuals their background information.
 4. Notify the individual and requestor of the decision.
 5. Document the decision in FamLink.

3. Requestors must review the completed [Background Check Request/Decision DCYF 09-131](#) form received from the BCU for each adult individual, including parents, and complete the following:
 1. Request a copy of the background information directly from the adult individual if there is criminal or negative action history.
 2. Determine if there are concerns that may relate directly to the children or youth's safety, permanence, or well-being prior to their return to a parent. If there are concerns, notify the court as soon as possible prior to children or youth returning home.
 3. For adult individuals or parents who may act as a caregiver, determine if any service is needed to increase the child or youth's safety, permanence, or well-being. If a service is needed:
 1. Provide the service prior to children or youth returning to a parent.
 2. Notify the court as soon as possible prior to children or youth returning to a parent.

Definitions

Emergent or Emergency Placement means limited instances when DCYF is placing children or youth in the home of private individuals, including neighbors, friends, or relatives, as a result of a sudden unavailability of the child's or youth's primary caretaker, per [RCW 26.44.240](#).

Federal Bureau of Investigation (FBI) background check means a fingerprint-based background check, that includes a review of the following:

- Founded findings of abuse or neglect made by DCYF or the Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), Department of Corrections (DOC), FBI, and the Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, Department of Health (DOH), and DSHS.
- Sex offender registry.
- Out-of-state founded findings of CAN, when applicable.
- Western Identification Network (WIN) conviction information, if available.

National Crime Information Center (NCIC) background check means a federal name-based background check and includes a Federal Bureau of Investigation (FBI) background check if the NCIC is for an emergent placement when the individual completes fingerprints that includes a review of the following:

- Founded findings of abuse or neglect made by DCYF or Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), Department of Corrections (DOC) or the Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, Department of Health (DOH), and DSHS.
- Sex offender registry.
- Out-of-state founded findings of CAN, when applicable.
- Western Identification Network (WIN) conviction information.

Washington State background check means an in-state name-based background check that includes a review of the following:

- Founded findings of child abuse and neglect (CAN) made by DCYF or the Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), the Department of Corrections (DOC), or Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, the Department of Health (DOH), and DSHS.
- Sex offender registry.
- Out-of-state founded findings of CAN, when applicable.

Forms

[Background Check Authorization DSHS 09-653](#)

[Background Check Request/Decision DCYF 09-131](#)

[NCIC Purpose Code C Background Check Summary DCYF 09-154](#)

[Unlicensed Caregiver Placement Checklist DCYF 15-280](#)

Resources

Background Check Desk Manual (located on the Background Checks Shared Drive)

[DCYF Secretary's List of Crimes and Negative Actions](#)

[Guide to Background Checks](#)

1700. Case Staffings

1700. Case Staffings admin Wed, 07/25/2018 - 11:45

[Dependency Timeline & Schedule of Case Staffings](#) (PDF)

Purpose Statement

All staffings engage parents in the shared planning process to develop family specific case plans focused on identified safety threats and child specific permanency goals. Working in partnership with families, natural supports and providers helps identify parents' strengths, threats to child safety, focus on everyday life events, and help parents build the skills necessary to support the safety and well-being of their children. The shared planning process integrates all CA staffings.

Policy

1. Engage families, natural supports and providers in case planning. Schedule staffings in a location and time that meets the needs of the parent(s) and their participants whenever possible.
2. Identify all relevant case participants.
3. Schedule staffings to correspond with planning for court hearings whenever possible.
4. Multiple issues impacting children and families may be addressed in one meeting rather than separate meetings held for each issue.
5. Utilize staffings to assist you and the family to develop or review resources or approaches to address child safety.
6. Prepare for staffings by determining how the participants can contribute to the case discussion and planning.
7. Utilize the [concurrent planning](#) process to develop child specific permanency goals.

Resources

Practice Model Website on the Children's Administration Intranet

Forms

[DCYF 14-474 Shared Planning Form](#)

Related Staffings

[43104. Multi Disciplinary Staffings for Youth Exiting Care \(age 17.5\)](#)

[4533. Behavior Rehabilitative Services \(BRS\) Staffing](#)

45431. Foster Care Assessment Program (FCAP)

[10. Local Indian Children Welfare Committee \(LICWAC\)](#)

1710. Shared Planning Meetings

1710. Shared Planning Meetings admin Wed, 07/25/2018 - 11:47

Original Date: September 1, 2006

Revised Date: September 1, 2021

Sunset Review Date: September 30, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

The purpose of this policy is to provide guidance on conducting shared planning meetings (SPMs) to engage parents, children and youth, caregivers, relatives, fictive kin, natural supports, and others, as appropriate, in the development of a plan that prioritizes child safety and meets the support and service needs of the parents, children and youth, and caregivers. These meetings provide an opportunity for information to be shared, case plans to be developed and decisions made that will support the safety, permanency, and well-being of children.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.067](#) Shelter Care, Case Conference, Service Agreement

[RCW 13.34.094](#) Description of Services Provided to Parents

[RCW 13.34.145](#) Permanency planning hearing-Purpose - Time limits-Goals-Review hearing - Petition for termination of parental rights - Guardianship petition - Agency responsibility to provide services to parents - Due process rights

[RCW 74.13.341](#) Transition plan - Qualification for developmental disability services

[RCW 74.13.540](#) Independent Living Services

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

1. SPMs must occur within the required timeframes or when required due to circumstances outlined in the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication for the following meeting types:
 1. [Adoption Planning Review](#)
 2. [Behavioral Rehabilitative Services](#)
 3. [Child Health and Education Tracking \(CHET\)](#)
 4. [Commercially Sexually Exploited Children](#)

5. Developmental Disabilities Services Planning
 6. [End-of-Life Care](#)
 7. [Family Team Decision Making \(FTDM\)](#)
 8. [Foster Care Assessment Program](#)
 9. [Local Indian Child Welfare Advisory Committee](#)
 10. [Mental Health/Substance Abuse Treatment Planning](#)
 11. [Permanency Planning Meeting](#)
 12. [Shelter Care Case Conference](#)
 13. [Transition Staffing: Transition Plan for Dependent Youth 17 through 20 years](#), referred to as Multi-Disciplinary Staffing (For Youth 17.5) in FamLink
2. Participants listed on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication must be invited to SPMs.
 3. Incarcerated parents must be provided access and opportunities to participate in SPMs.
 4. The child's or youth's safety, permanency and well-being must be discussed during SPMs.
 5. [Family time and sibling and relative visits](#) must be discussed during the meeting when children or youth are placed out of the home. Discussions will include a review of the family time and sibling and relative visitation plans, necessary level of supervision during the family time to verify the safety of the child or youth, transportation, and efforts to include relatives and family supports during family time.
 6. SPMs must be documented on the [Shared Planning Meeting DCYF 14-474](#) form in FamLink.

Procedures

1. The assigned caseworker or supervisor must:
 1. Conduct a SPM within the timeframes or circumstances described in the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
 2. Ask youth age 14 and older to identify at least two support persons to attend the meeting who are not the caseworker or caregiver.
 1. One of the individuals selected may be designated to be the youth's advocate when discussing normal childhood activities under the [reasonable and prudent parenting](#) standard.
 2. Any individual identified by the youth must be able to act in the youth's best interest.

3. If the caseworker or tribal agency has good cause to believe the youth's identified support person is not acting in the best interest, he or she may be asked to leave the meeting.
3. Invite participants indicated on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication a minimum of five calendar days before the meeting, when possible. If not possible, the effort to invite participants will be documented in a case note.
4. Ask all individuals invited to the SPM, if they need an interpreter for the SPM, per the following DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
5. Provide alternative methods to participate in the SPMs such as conference calls and video conferencing.
6. Obtain releases of information from parents and youth age 13 and older before the SPM if any information regarding their mental health treatment, substance abuse treatment, access to reproductive services or sexually transmitted diseases/human immunodeficiency virus is discussed or shared with meeting participants.
7. After the [shelter care hearing](#) but before the following SPMs, describe the SPM process to parents requesting or participating in either a:
 1. [FTDM](#)
 2. [Shelter Care Case Conference](#)
 3. [Permanency Planning Meeting](#)
2. If the child or youth, caregiver, or parent is unable to attend the SPM their input will be presented by the assigned caseworker and will be considered.
3. During the meeting, the assigned caseworker or supervisor must:
 1. Present a case history and the child's or youth's and family's current situation.
 2. Provide participants the opportunity to present information and engage in the shared planning process.
 3. Identify family strengths and community and cultural supports.
 4. Address and review the following, when applicable:
 1. Safety
 1. Safety assessments
 2. Safety plans

3. Services needed to reduce safety concerns and increase protective capacities
2. Permanency
 1. All primary and alternate permanency plans.
 2. Progress toward achieving a permanent plan and appropriateness of the case plan to address safety threats and barriers to reunification.
 3. Compelling reasons, if a [termination of parental rights](#) has not been filed within 12 months of the child's or youth's original placement date.
 4. Placement stability
 5. Appropriateness of current placement.
 6. Child's or youth's adjustment in the placement.
 7. The need for services to reduce risk of disruption.
 8. Sibling connections. This includes efforts to place siblings together and maintain sibling visits or contacts.
 9. The level of supervision needed to manage safety threats during family time.
 10. Relative search efforts, status of Tribal affiliation, involvement and notification to relatives and Tribes.
 11. Plan to maintain community and cultural connections.
3. Well-being
 1. Mental health, physical health and well-being of the child or youth, including medical information and needs. This includes determining if a [Wraparound Intensive Services](#) referral needs to be made for a child or youth with complex behavioral health needs.
 2. Alternative plan for assessment and treatment if the child or youth has been denied mental health or substance abuse services.
 3. Services to support healthy development and attachment. This includes normal childhood activities under the [reasonable and prudent parenting](#) standard.
 4. The child's or youth's connections with siblings and other relatives. For youth 16 and above, this includes discussing skills and strategies to safely reconnect with any identified family members and provide guidance and services to assist the youth.

5. Child's or youth's education status, needs and supports. Assign tasks and responsibilities as appropriate for their education to include but not limited to, school enrollment, transportation, referrals for school-based services.
 6. Results of the [CHET](#) screening and other assessments if available. If [CHET](#) results are not available, present results at the next scheduled SPM.
 7. Services and activities needed to support the youth in their [transition to adulthood](#):
 1. For youth 14 years of age and older as part of transition planning:
 1. Education
 2. Employment
 3. Housing
 4. Health insurance
 5. Mentors and continuing supports
 2. For youth 15 years of age and older, status of referrals to [Independent Living Services](#) contract providers.
 3. For youth 16 through 16.5 years of age, who may be eligible for [DDA](#) services:
 1. Eligibility for developmental disability waiver services.
 2. Services the youth wants or needs on exit from dependency.
 3. Advanced planning for:
 1. Residential services provided by [DDA](#).
 2. Housing options available from other entities.
 4. Action plans to have services in place following the youth's exit from a dependency.
 8. Cultural or Tribal connections.
4. Document the following using the [Shared Planning Meeting DCYF 14-474](#) form in FamLink, within the required [documentation](#) timeframes:
 1. All information discussed during SPMs.

2. Individuals who were invited and attended the meeting.
3. All Individuals were provided the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy.
5. Create and update the following, but not limited to, when needed:
 1. [Safety Plan](#)
 2. [Family Time and Sibling and Relative Visitation Plan](#)
 3. Comprehensive Family Evaluation
 4. [Court Report](#), for dependent children
 5. [Case Plan](#), for FAR and FVS cases
 6. Education Plan
 7. [Transition Plan for Youth Exiting Care DCYF 15-417](#)
 8. Referrals to services

Forms

[Parents Information Sheet for Shared Planning Meetings and Staffings DCYF 15-260](#)

[Shared Planning Meeting DCYF 14-474](#)

[Transition Plan for Youth Exiting Care DCYF 15-417](#)

Resources

[Prudent Parenting Guide DCYF CWP 0078 publication](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP)

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

[Understanding the Dependency Court Process DCYF CWP_0044 publication](#)

1720. Family Team Decision Making Meetings

1720. Family Team Decision Making Meetings admin Wed, 07/25/2018 - 11:49

Original Date: December, 2010

Revised Date: October 20, 2022

Sunset Review Date: October 31, 2026

Approved by: Frank Ordway, Chief of Staff

Purpose

Family Team Decision Making (FTDM) meetings follow the [Shared Planning Meeting](#) model of engaging the family and others who are involved with the family to participate in critical decisions regarding the removal of children from their home, placement stabilization and prevention, and reunification or placement into a permanent home.

Laws

[RCW 13.34.067](#) Shelter Care, Case Conference, Service Agreement

[RCW 13.34.145](#) Permanency planning hearing, purpose, time limits, review hearing, petition for termination of parental rights, guardianship petition, agency responsibility to provide services to parents, due process rights

Policy

1. FTDM meetings must occur within the required timelines, unless approved by the area administrator (AA).
2. Participants listed on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication must be:
 1. Invited to the FTDM meeting.
 2. Asked if they need an interpreter for the FTDM, per the following DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
3. Incarcerated parents must be provided access and opportunities to participate in FTDM meetings.
4. FTDM meetings must be documented in FamLink using the [Shared Planning Meeting DCYF 14-474](#) form.

Procedures

Caseworkers must:

1. Conduct a FTDM meeting within the following timeframes convene additional FTDM meetings as needed:
 1. Prior to:

1. Removing a child and anytime out-of-home placement of a child is being considered.
 2. Moving a child from one placement to another.
 3. Trial return home or reunification of a child with parents.
 4. The end of a Voluntary Placement Agreement.
2. No later than 72 hours after a child is placed:
 1. Into protective custody by law enforcement and prior to the shelter care hearing.
 2. With a new caregiver due to an unplanned change in placement.
 3. On a Voluntary Placement Agreement when there is an emergency and the FTDM cannot occur prior to placement.
 3. If the FTDM cannot occur within the required timeframe and is approved by the AA, the caseworker must document the reason, date of approval, and notify the FTDM facilitator.
2. Certain circumstances may require that an individual be excluded from participating in the FTDM meeting. Those circumstances include, but are not limited to the following:
 1. The excluded individual is the subject in an on-going criminal investigation.
 2. It is unsafe for an individual to participate in the meeting.
 3. If the child, caregiver or parent is unable to attend the FTDM meeting, their input will be presented and considered in the decision-making process.
 4. If the FTDM is being combined with a [Shelter Care Case Conference](#), a parent must consent to the caregiver's attendance. For all other FTDMs combined with other [shared planning meetings](#), if a parent does not consent to the caregiver's attendance, the caregiver will be asked to leave when parent's information is being discussed.
5. Follow DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) when working with parents, children, and caregivers with LEP. This includes providing qualified interpreters as needed or requested.
 2. 6.03 Access to Services for Individuals with Disabilities by providing:
 1. Qualified interpreters as needed or requested.
 2. The [Public Notice of Nondiscrimination DCYF HR_0012](#) publication at a minimum to:
 1. All participants at their first SPM.

2. Participants with a disability annually while the case they are involved in is open with DCYF.
3. 6.04 Supporting LGBTQIA+ Individuals when making placement decisions for children or youth that are exploring or identify as LGBTQIA+.
6. Document in the appropriate place on the [Shared Planning Meeting DCYF 14-474](#) form in FamLink within seven calendar days:
 1. All persons who were invited and who attended.
 2. The [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to all participants, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy.
 3. Complete Section 8 on the form.
 4. Discussions regarding safety, permanency and well-being outlined in the [Shared Planning Meeting](#) policy.
 5. Any decisions reached and any plans made at the meeting.

Forms

[Shared Planning DSHS 14-474](#)

Resources

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy

[Family Team Decision Making Guide for Caseworkers DCYF CWP_0080 publication](#)

[Family Team Decision Making Meetings DCYF CWP_0039 publication](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Permanent and Concurrent Planning policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

[Shared Planning Meeting policy](#)

[Shelter Care Case Conference policy](#)

1730. Shelter Care Case Conference

1730. Shelter Care Case Conference admin Wed, 07/25/2018 - 11:50

Purpose

Provide an opportunity to develop and specify in a written case plan the expectations of both CA and the parent regarding the care and placement of their child.

Laws

[RCW 13.34.067](#)

[RCW 74.14A.020](#)

[RCW 13.34](#)

Policy

1. Following Shelter Care and no later than thirty days prior to Fact Finding hearing CA will facilitate a conference to develop a written service agreement.
2. Required participants must be invited to the Shelter Care Case Conference.

Procedures

1. Schedule a Case Conference meeting when the court establishes shelter care and no later than thirty days before the Fact Finding court hearing.
2. Invite to the case conference the following individuals:
 1. Parents
 2. Youth (as developmentally appropriate)
 3. Parents and youth's assigned counsel
 4. GAL or CASA
 5. Tribe(s)
 6. Other persons identified and agreed upon by the parties
3. Develop a written case plan including the expectations of CA and the parents regarding the care and placement of the parent's child.
4. Document the Case Conference within the Shared Planning Page in FamLink.

Forms

- Case Plan

1740. Child Protection Teams (CPT)

1740. Child Protection Teams (CPT) admin Wed, 07/25/2018 - 11:51

Purpose

Child Protection Teams provide confidential, multi-disciplinary consultation and recommendations to the Department on cases where there will not be an FTDM, and there is a risk of serious or

imminent harm to a young child and when there is dispute if an out-of home placement is appropriate.

Laws

[Executive Order 12-04](#)

[WAC 388-15-033](#)

Policy

1. Regional Administrators (RA), or their designee, must establish and maintain at least one Child Protection Team in each region.
2. Child Protection Teams will include at least four selected professionals that provide services to abused and neglected children or their families.
3. Child Protection Team recommendations are advisory to CA staff.

Procedures

1. Child Protection Teams participants may include:
 1. Law enforcement
 2. Physicians, and/or other medical professionals
 3. Mental health/substance abuse counselors
 4. Educators, CASA's, foster parents
 5. Domestic Violence advocates and/or experts
 6. DSHS staff with specific and complementary skills/knowledge to a CPT
 7. Other Mandated Reporters
 8. Professionals who play a significant role with the family
2. Staff are required to submit a [CPT Case Presentation Summary](#) to the CPT Coordinator:
 1. In all child abuse or neglect investigation cases in which the assessment requires the Department to offer services, and a Family Team Decision Making (FTDM) meeting will not or cannot be held, and the child's age is six years or younger; and
 2. In all child abuse and neglect cases where serious professional disagreement exists regarding a risk of serious harm to the child and where there is a dispute over whether out-of-home placement is appropriate.
 3. When the Department chooses to bring a case to CPT believing that such a consultation may assist in improving outcomes for a particular child.
3. CPT Coordinators must:

1. Coordinate and manage CPT membership, recruitment, training, scheduling, record-keeping including CPT recommendations, reporting and communication for the CPT.
2. Provide in writing the CPT staffing recommendations to the assigned worker and supervisor following the staffing.
3. Maintain a tracking system to document activity for staffings and recommendations.
4. Document the CPT in the Shared Planning section in FamLink per Shared Planning FamLink Manual.

Forms

- [DCYF 15-266 CPT Staffing Recommendations](#)
- [DCYF 15-268 CPT Case Presentation Summary](#)

Resources

- Child Protection Team Volunteer Handbook

1750. Adoption Planning Reviews (APR)

1750. Adoption Planning Reviews (APR) admin Wed, 06/07/2023 - 08:50

Original Date: July 1, 2023

Sunset Review Date: July 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to establish requirements when conducting Adoption Planning Reviews (APR).

APRs are a type of [shared planning meeting \(SPM\)](#) that:

- Takes place prior to [Termination of Parental Rights \(TPR\)](#).
- Identifies prospective adoptive placements and additional services for children or youth.
- Determines if [Open Adoption Agreements \(OAA\) or Letters of Intent](#) are appropriate when adoption is identified as the permanent plan.
- Develops recruitment plans for children or youth not placed in a prospective adoptive placement.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.145](#) Permanency planning hearing-Purpose-Time limits-Goals-Review hearing-Petition for termination of parental rights-Guardianship petition-Agency responsibility to provide services to parents-Due process rights

[RCW 26.33.080](#) Petition for relinquishment-Filing-Written consent required

[RCW 26.33.110](#) Petition for termination-Time and place of hearing-Notice of hearing and petition-Contents

[RCW 26.33.350](#) Medical reports-Requirements

[RCW 26.33.380](#) Family and social history report required-Identity of birth parents confidential

[RCW 70.02.220](#) Sexually transmitted diseases-Permitted and mandatory disclosures

[RCW 74.13.289](#) Blood-borne pathogens-Client information-Training

Policy

Child and Family Welfare Services (CFWS) caseworkers:

1. Must conduct an APR within 30 calendar days of one of the following:
 1. Courts changing the permanent plan to adoption.
 2. Submitting a [TPR](#) referral to the Assistant Attorney General (AAG).
 3. Accepting a relinquishment of parental rights.
2. May combine APRs with [permanency planning meetings](#).

Procedures

1. Identifying a Family as a Prospective Adoptive Placement
 1. CFWS caseworkers must complete the following when children or youth are placed with families that would like to be identified as a prospective adoptive placement:
 1. Verify:
 1. The [relative search](#) was completed and relatives have been contacted, per the [Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons](#) policy.
 2. Both the [chapter 13.36 RCW](#) guardianship and the [chapter 11.130 RCW](#) guardianship of a minor using the [Permanency Planning Matrix CWP_0088](#) publication has been discussed with the child's or youth's parents and caregivers, as an alternative to [TPR](#) and [adoption](#), per the [Guardianships](#) policy.
 3. Caregivers have a current [home study](#) approving them as an adoptive placement. If the home study either:

1. Has not been completed:
 1. Complete the home study request in the [DCYF- Child Welfare Field Ops Hub SharePoint](#) to notify the LD Kinship Notification Unit.
 2. Follow the [Background Checks](#) policy.
2. Is not current:
 1. Determine in consultation with adoption caseworkers if an adoption home study update is required, per the [Completing Home Studies](#) policy.
 2. Complete kinship home study request in the [DCYF- Child Welfare Field Ops Hub SharePoint](#) to notify the LD Kinship Notification Unit.
 3. Follow the [Background Checks](#) policy.
2. Complete the [Family Genetic and Medical History DCYF 13-041](#) form with both birth parents, if not completed.
3. Initiate referrals for social, medical, mental health, educational, or other appropriate assessments or services for the child or youth, if applicable.
4. Schedule an APR when required with the individuals identified on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
5. During APRs:
 1. Follow the steps in the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
 2. Determine if:
 1. The family will be able to safely meet the child's or youth's needs.
 2. Being adopted by the prospective adoptive family is in the child's or youth's best interest.
 3. An [OAA or Letter of Intent](#) is in the child's or youth's best interest. If so, discuss the process with the birth and prospective adoptive families, per the [OAA or Letter of Intent](#) policy.
 3. Identify the prospective adoptive families' supports and determine if other supports or services are needed to meet the child's or youth's needs.

4. Provide prospective adoptive families the following information in collaboration with adoption caseworkers regarding:
 1. Children or youth and their birth family, per the [Identifying Adoptive Families](#) policy.
 2. [Adoption support](#), per the [Pre-Adoption Services and Adoption Finalization](#) policy.
 3. Adoption services, including information that could have an effect on parenting the child or youth. This is separate from discussions with the birth parents about an [OAA](#).
 5. Inform families they may consult with a specialist in their community prior to:
 1. Agreeing to adopt children or youth.
 2. Signing the Family Genetic and Medical History-Adoption DCYF 13-041A form.
 6. Notify the prospective adoptive family that available health, mental health, education, and birth family history information and the [Family Genetic and Medical History DCYF 13-041](#) form will be provided to them by the adoption caseworker prior to finalizing the adoption.
2. Recruitment for Children or Youth not in a Prospective Adoptive Placement
CFWS caseworkers must develop the recruiting and post-termination plan when children's or youth's current caregiver is not a prospective adoptive placement for them by:
 1. Completing the [Family Genetic and Medical History DCYF 13-041](#) form with the birth parents, if not completed.
 2. Obtaining both the parent's or guardians' signatures for dependent children or youth on the [Release and Consent for Child Specific Recruitment DCYF 09-611](#) form to allow recruitment to begin. This form is not used for legally-free children or youth. If approval is not obtained from both parents or guardians, inform them that DCYF will request a court order to begin recruitment.
 3. Scheduling an APR when required with the individuals identified on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
 4. Utilizing the following publications during the APR:
 1. [Guide to Shared Planning Meetings DCYF CWP_0070](#).
 2. [Child-Specific Recruitment Services in Washington State DCYF CWP_0054](#).

5. Obtaining a court order to begin recruitment services for dependent children and youth when signatures are not obtained by both parents or guardians on the [Release and Consent for Child Specific Recruitment DCYF 09-611](#) form.
6. Documenting the recruiting and post termination plan in FamLink in one of the following forms:
 1. [Court Report DCYF 09-095](#)
 2. [Shared Planning Meeting DCYF 14-474](#)
7. Referring:
 1. Dependent children or youth to the:
 1. Recruitment resources selected on the [Release and Consent for Child Specific Recruitment DCYF 09-611](#) form within seven calendar days after either:
 1. The APR, if the [Release and Consent for Child Specific Recruitment DCYF 09-611](#) form was signed by both parents.
 2. Court approval.
 2. Adoption consortium, with both parents' or guardians' approval or when ordered by the court, by notifying the regional adoption program manager (RAPM) or designee of the following:
 1. Child's or youth's name
 2. Date of birth
 3. Case number
 4. Date of the [WA Access](#) registration
 5. [WA Access](#) registration number
 3. Selection committee when home studies for placement are received, per the [Identifying Adoptive Families](#) policy.
 2. Legally-free children or youth to:
 1. The appropriate recruitments services on the [Child-Specific Recruitment Services in Washington State DCYF CWP_0054](#) publication within seven calendar days from the APR.
 2. Adoption consortium, by notifying the RAPM or designee of the following:
 1. Child's or youth's name
 2. Date of birth

3. Case number
 4. Date of the [WA Access](#) registration
 5. [WA Access](#) registration number
3. Selection committee when home studies for placement are received, per the [Identifying Adoptive Families](#) policy.

Forms

[Acknowledgement of Child's Adoptive File Provided to Adoptive Family DCYF 10-500](#)

[Family Genetic and Medical History DCYF 13-041](#)

Family Genetic and Medical History-Adoption DCYF 13-041A (located in the Forms repository on the DCYF intranet)

[Court Report DCYF 09-095](#)

[Release and Consent for Child Specific Recruitment DCYF 09-611](#)

[Shared Planning Meeting DCYF 14-474](#)

Resources

[Applying as a Foster Parent or Unlicensed Caregiver policy](#)

[Background Checks policy](#)

[Child-Specific Recruitment Services in Washington State DCYF CWP_0054 publication](#)

[Completing Home Studies policy](#)

[Court Report policy](#)

[DCYF- Child Welfare Field Ops Hub SharePoint Kinship Home Study Request](#)

[Documentation policy](#)

[Termination of Parental Rights \(TPR\) policy](#)

[Guardianships policy](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Identifying Adoptive Families policy](#)

[Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons policy](#)

Letter of Intent Recommended Sample Template (located on the Adoptions forms DCYF intranet page)

Open Adoption Agreement Recommended Sample Template (located on the Adoptions forms DCYF intranet page)

[Open Adoption Agreements and Letters of Intent policy](#)

[Permanency Planning Matrix CWP_0088 publication](#)

[Pre-Adoption Services and Adoption Finalization policy](#)

[Shared Planning Meetings policy](#)

[WAC 110-60-0070 What adoption services does the department provide for children in the department's care and custody?](#)

[WAC 110-60-0080 What adoption services does the department provide for prospective and approved adoptive families?](#)

2200. Intake Process and Response

2200. Intake Process and Response admin Wed, 07/25/2018 - 11:52

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose

The purpose of this policy is to provide guidance to child welfare intake employees when receiving and processing reports of child abuse and neglect (CA/N), imminent risk of serious harm, or requests for non-CPS services on a 24-hour basis.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 9A.16.100](#) Use of Force-Policy-Actions Presumed Unreasonable

[RCW 13.34.030](#) Juvenile Court Act-Definitions

[RCW 13.34.360](#) Transfer of Newborn to Qualified Person-Criminal Liability-Notification to Child Protective Services-Definitions

[RCW 26.44.020](#) Abuse of Children-Definitions

[RCW 26.44.030](#) Abuse of Children-Reports Duty and Authority to Make-Duty of Receiving Agency-Duty to Notify-Case Planning and Consultation-Penalty for Unauthorized Exchange of Information-

Filing Dependency Petitions-Investigations-Interviews of Children-Records-Risk Assessment Process

[RCW 46.61.687](#) Child Restraint System Required-Conditions-Exceptions-Penalty for Violation-Dismissal-Noncompliance Not Negligence-Immunity

[Chapter 74.13 RCW](#) Child Welfare Services

[Chapter 74.15 RCW](#) Care of Children, Expectant Mothers, Persons with Developmental Disabilities

Policy

1. DCYF will be available to accept reports of CA/N or imminent risk of serious harm, and receive requests for services on a 24-hour basis.
2. Intake workers must:
 1. Gather information from referrers to:
 1. Complete intakes with allegations of CA/N or imminent risk of serious harm in FamLink.
 2. Process requests for non-CPS service intakes and send them to the appropriate programs for resources and referral consideration, e.g. [Family Voluntary Services \(FVS\)](#), [Family Reconciliation Services \(FRS\)](#), Child and Family Welfare Services (CFWS), or Licensing Division (LD).
 2. Create intakes in FamLink on the date and time DCYF receives the information.
 3. Follow the [Indian Child Welfare \(ICW\) Intake](#) policy when there is reason to know a child who is the alleged victim or identified child of a report is or may be an Indian child who is affiliated with either:
 1. A [Washington State federally recognized tribe](#)
 2. An out-of-state tribes with a [Memoranda of Agreement \(MOA\)](#) with Washington State.
 4. Send screened in intakes related to employees, volunteers, interns, and work study students to intake supervisors immediately when they are a subject or alleged perpetrator in the report.
 5. Make screening decisions using the [Structured Decision Making for Intake DCYF CWP_0113](#) publication.
3. Intake area administrators (AA) or intake supervisors must make the final screening decision on intakes at the intake level.

Procedures

1. Intake workers must complete the following when receiving information from referrers:

1. Conduct a comprehensive interview with referrers, including making reasonable efforts to obtain their name, address, and contact information.
2. Complete FamLink person searches for all individuals, alleged victims, alleged subjects, parents, guardians, and family members listed in the intake.
3. Collect additional information when needed to determine the appropriate intake screening decision or response time. Intake workers may seek clarifying information from collateral contacts when available.

4. Process reports with allegations of CA/N that place children or youth at [imminent risk of serious harm](#) from any source and in any form, and document these in a FamLink intake. For:

1. Sufficiency Screenings

Screen in intakes for Child Protective Services (CPS) intervention when the following sufficiency screening criteria is met:

1. Alleged victim is under 18 years of age.
2. Allegation, if true, minimally meets the WAC definition of CA/N or it is alleged a child's or youth's circumstance places them at imminent risk of serious harm and the alleged subject is either:
 1. In the role of a parent, guardian, person acting in loco parentis, or unknown.
 2. Providing care in a facility subject to licensing by DCYF or in other state-regulated care.

2. Allegations of CA/N or Imminent Risk of Serious Harm

1. Document the FamLink intake utilizing the following:

1. Chronicity Indicator
2. [Structured Decision Making for Intake DCYF CWP_0113](#) publication
3. Intake Training Manual document

2. Determine assignment to one of the following:

1. CPS Investigation
2. CPS Family Assessment Response (FAR)
3. LD CPS.

3. Screen in for a:

1. CPS or LD CPS investigation if the allegation meets one or more of the following sufficiency screening criteria:

1. A child or youth in the household or facility is having sexualized contact or engaging in sexual behaviors with other children or youth in the home that is not considered common based on childhood development. For behaviors that may be considered common for childhood development, see the [Sexual Development and Behavior in Children](#).
 2. Sexual abuse or sexual exploitation.
 3. Serious physical abuse or serious neglect.
 4. Physical abuse of a child under age four, for child welfare.
 5. CA/N reported by a health care provider, regarding a child under age five.
 6. Injury or bruise on a non-mobile infant, from birth to one year of age, regardless of the explanation about how the injury or bruise occurred.
 7. A report is received from:
 1. Law enforcement (LE) or the prosecutor's office for a criminal offense against a child or youth and the report provides reasonable cause to believe the child or youth suffered CA/N.
 2. LE when a parent or guardian has been arrested for criminal mistreatment of a child or youth in the fourth degree, per [chapter 9A.42 RCW](#).
2. CPS investigation if the allegation meets one or more of the following sufficiency screening criteria:
 1. There is an open dependency case involving the child or youth victim or another member of the household.
 2. A dependency action was closed within the previous 12 months and involved the child or youth victim or a household member who may be a parent, guardian, or caregiver of the child or youth, or another adult who resides in the home.
 3. An alleged victim or subject is named in three or more intakes screened in for investigation or FAR in the past 12 months.

3. LD CPS investigation when there is an allegation of CA/N in a licensed facility or facility subject to licensing by LD, a child placing agency, or in a state-regulated facility screening as:
 1. Physical abuse when the use of physical restraint is alleged to be excessive or improperly applied.
 2. Neglect for:
 1. Physical assaults between two or more children or youth resulting in offsite medical attention or hospitalization.
 2. Sexual assaults between two or more children or youth.
 3. Children or youth that attempt suicide resulting in injury requiring medical attention or hospitalization.
 4. CPS FAR when it is indicated on the [Structured Decision Making for Intake DCYF CWP_0113](#) publication.
5. Process reports with no CA/N allegations and document in a FamLink intake for screen-in CPS Risk Only reports when a child or youth is at imminent risk of serious harm and there are no CA/N allegations. These include, but are not limited to reports:
 1. From LE about a sexually aggressive youth under age eight.
 2. From the prosecutor's office about a sexually aggressive youth under age 12 who will not be prosecuted.
 3. Involving CA/N allegations against an individual age:
 1. Eighteen through 20:
 1. Residing in a state-regulated or licensed facility, or a facility subject to licensing.
 2. Enrolled in Extended Foster Care in a licensed foster home, not including supervised independent living (SIL) placements.
 2. Eighteen through 24 residing in a Juvenile Rehabilitation Division (JRD) facility.
 4. Of a child or youth at imminent risk of serious harm and one or more of the following are met, they:
 1. Have an open DCYF case.

2. Are in the care of a licensed or unlicensed provider.
6. Screen in reports to CPS investigations made by a health care provider licensed per [chapter 18.57 RCW](#) and [chapter 18.71 RCW](#), on the basis of an expert medical opinion that CA/N or sexual assault may have or has occurred and that the child's or youth's safety will be seriously endangered if they return home, per [RCW 26.44.030](#).
7. Screen in reports from anonymous referrers only when alleged CA/N or risk meets the sufficiency screening criteria and one or more of the following exists:
 1. There is a serious threat of substantial harm to a child or youth.
 2. The allegations include conduct involving a criminal offense that has occurred, or is about to occur, in which the child or youth is the victim.
 3. A household member has a prior founded report of CA/N within three years of receiving the most recent intake.
8. Inform the referrer that, if they choose to remain anonymous and the allegation is assessed at a lower risk, the intake will not be assigned for CPS investigation or FAR.
9. Screen in all reports of CA/N or imminent risk of serious harm involving a licensed facility or a facility subject to licensing, regardless of the anonymity of the referrer.

2. After Hours Intakes

Intake workers must complete the following for intakes received after business hours, on weekends, and state holidays:

1. Intake workers must immediately notify the intake supervisor of emergent intakes received after business hours, on weekends, and state holidays.
2. Intake supervisor must contact the after-hours supervisor or AA for an after-hours response when:
 1. A child or youth is in present or impending danger.
 2. An emergent face-to-face cannot be completed during normal business hours.

3. Timeframes for Intakes

Intake workers must complete intakes following these timeframes and intake pathways:

1. Four hours:
 1. Emergent CPS, FVS, CFWS emergent placements, and [transfers of newborns to qualified persons](#)
 2. CPS Risk Only
 3. LD CPS and LD CPS Risk Only

4. FRS
2. Four business hours, i.e., 8:00 a.m. to 5:00 p.m., Monday through Friday, excluding holidays:
 1. Non-Emergent CPS Investigation
 2. CPS FAR
 3. Non-Emergent LD CPS
3. Two business days, i.e., 8:00 a.m. to 5:00 p.m., Monday through Friday, excluding holidays:
 1. CPS screen-out
 2. Third Party
 3. CFWS
 4. FVS, non-CPS request for services
 5. Rule Infraction
 6. ICPC home study request, per the [ICPC Placed in Washington State](#) policy.
4. Health Care Provider Referrals on Newborns Birth to One Month
Intake workers must complete the following when receiving referrals from health care providers:
 1. Screen in reports involving newborns diagnosed with neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS), exposed to or affected by substances, including alcohol, cannabis, prescription medications, and any drug with abuse potential to the following:
 1. CPS Risk Only when there is no CA/N allegation, but the risk factors indicate imminent risk of serious harm.
 2. CPS investigation, CPS FAR, or LD CPS investigation when there is a CA/N allegation.
 2. Screen out reports involving newborns when there are no allegations of CA/N or imminent risk of serious harm using the community [Plan of Safe Care Pathway](#), when they are born exposed to or affected by:
 1. Methadone or buprenorphine and a health care provider verified that their birth parent is taking it as prescribed.
 2. Opioids and a health care provider verified that their birth parent is taking it as prescribed.

3. Medications or a combination of medications with abuse potential and a health care provider verified that their birth parent is taking them as prescribed.
 4. Cannabis.
5. Universal Domestic Violence (DV) Screening
Intake workers must:
 1. Complete the universal DV screen on all intakes by asking the following screening questions, “Has any adult used or threatened to use physical force against an adult in the home?” If so, the intake worker must ask, “Who did what to whom?”
 2. Offer DV resource information to the referrer on all screened-in or out intakes when DV is identified and the referrer is not familiar with DV resources. Resource information is located on the following websites:
 1. [Washington State Coalition Against DV](#)
 2. [Department of Social and Health Services DV](#)
 3. Document in FamLink, per the Intake Training Manual document.
6. [Commercially Sexually Exploited Children \(CSEC\)](#)
Intake workers must complete the following for referrals involving suspected or confirmed allegations of CSEC:
 1. Complete the intake [CSEC](#) screening question by asking the referrer “Do you suspect the child or youth is a victim of commercial sexual exploitation?” If yes, the explanation must be documented in the narrative box.
 2. Assign all intakes with suspected or confirmed allegations of CSEC to CPS or LD CPS investigations when:
 1. There are allegations of CA/N.
 2. The alleged subject is a parent, guardian, legal custodian, or acting in loco-parentis.
 3. Follow regional protocol to verify that LE is notified within 24 hours of the time the intake is received on all suspected or confirmed CSEC-related intakes when there is reasonable cause to believe a crime has been committed. The intake worker will notify the LE agency with jurisdiction when the 24-hour notification requirement cannot be met by caseworkers or the field supervisor managing the straw assignments.
7. Unregulated Child Custody Transfers
Intake workers receiving reports alleging unregulated custody transfers of adopted children or youth have occurred, must:

1. Follow the Intake Training Manual document when reports are received alleging unregulated custody transfers of adopted children or youth.
 2. Complete intake screening decisions following Procedures 1.c.
8. Request for Services (Non-CPS)
- Intake workers receiving requests for services for families, children, or youth who do not have allegations of CA/N or imminent risk of serious harm must:
1. Document the intake in FamLink.
 2. Process the following requests for services by screening in intakes for:
 1. [FVS](#) when a parent or guardian requests:
 1. In-home services.
 2. Temporary placement of a child or youth.
 2. [FRS](#) when receiving a request:
 1. For a youth age 12 through 17, for either a family assessment for:
 1. A Child in Need of Services (CHINS)
 2. An At-Risk Youth (ARY) petition
 2. From a youth age 12 through 17, parent or guardian, caregiver, LE, Tribal or DCYF caseworker, HOPE Center, Crisis Residential Center (CRC), or Overnight Youth Shelter (OYS) employee and:
 1. A family member is experiencing immediate family crisis due to conflict or a youth exhibiting high risk behaviors.
 2. They request immediate assistance from DCYF.
 3. CRCs, OYs, or host homes making reports involving a runaway youth when there are no allegations of CA/N:
 1. FRS for youth age 12 and older.
 2. FVS for youth age 11 and younger.
 4. [CSEC](#) services for the youth, when requests are received from the youth, parent, guardian, or community member:
 1. FRS for youth age 12 and older.
 2. FVS for youth age 11 and younger.
 5. CFWS when:
 1. Services are requested for a family, child, or youth, the request is appropriate, and services are available. The caregiver, child, youth,

provider, community member, or other child welfare agency may make a service request.

2. A parent transfers a newborn, birth to 72-hours old, anonymously at a hospital emergency room, open fire station, or federally designated rural health clinic during its hours of operation and personnel are present to accept the infant, per [RCW 13.34.360](#).
3. Parents or guardians request emergent temporary placement for children or youth.
6. [Extended Foster Care \(EFC\)](#) for youth age 18 through 20 who are requesting services and were dependent on their 18th birthday. This includes dependent youth who are in the custody of JRD, DOC, county detention, or jail and who otherwise meet the eligibility criteria. The intake is assigned to the local office in the nearest area where the youth currently resides.
7. Non-CPS rule infraction reports on:
 1. LD licensed homes or facilities.
 2. Illegally operating child care or foster homes.
 3. State regulated facilities for children, youth, and young adults.
8. Title IV-E and non-Title IV-E Tribal Placement or Payment Only on all tribal payment requests, for both open and closed cases, unless it is a modification to an existing payment-only case.
9. LE Child Welfare Checks

Intake workers must complete the following if there is an indication the child or youth may be in present danger and a LE child welfare check may be needed:

 1. Consult immediately with the intake supervisor.
 2. Follow policies:
 1. [Present Danger](#)
 2. DCYF Administrative 2.0 Mandatory Reporting Requirements
10. Alerts and Requests from Other States

Intake workers must generate intakes when alerts or requests are received from another state by:

 1. Screening in intakes when the child or youth is:
 1. In Washington State and there:
 1. Are allegations of CA/N that occurred in Washington State meeting the sufficiency screen.

2. Is imminent risk of serious harm.
2. Alleged to have been abused or neglected during a recent visit in Washington State with a parent, guardian, or caregiver who:
 1. Has ongoing contact with the child or youth.
 2. Is a resident of Washington State.
 3. Returned the child or youth to the other parent, guardian, or caregiver out-of-state at the time of the intake.
2. Screening out intakes:
 1. When it is determined the child or youth is not in Washington State and there are no allegations of CA/N occurring in Washington State.
 2. With requests for courtesy home walkthroughs or child welfare checks for a child or youth residing in Washington State, if there are no allegations of CA/N or imminent risk of harm and refer to appropriate resources, e.g., [Interstate Compact on the Placement of Children \(ICPC\)](#) or a local office to refer to LE.

11. Contracted Providers Intakes

Intake workers must:

1. Screen out CPS intakes for:
 1. Contracted providers not acting as any of the following:
 1. Parent
 2. Guardian
 3. Loco-parentis
 2. Individuals that do not have a DCYF license as a third party and send to the local office to refer to LE if an alleged crime has been committed.
2. Contact the contracts manager using [Survey Monkey Complaint Tool](#) when receiving non-CPS complaints regarding contracted providers that do not have a DCYF license.
3. Notify the DCYF headquarters contracts manager when made aware of a screened in CPS intake related to either of the following individuals or their biological family:
 1. A contracted provider who is not licensed or subject to be licensed by DCYF.
 2. An employee or sub-contractor of the provider.

12. Information for Referrers

Intake workers must:

1. Provide assurance to referrers that DCYF will make all legal and reasonable efforts to maintain their confidentiality.
2. Inform referrers:
 1. Their names may be disclosed for:
 1. Court proceedings.
 2. Dependency or criminal court proceedings.
 3. Criminal investigations by LE including malicious or false reporting.
 4. Court ordered disclosure.
 2. That reports or testimony made in good faith have immunity under [RCW 26.44.060](#).

13. Additional Intake Requirements

Intake workers must:

1. Generate and submit the following to their supervisor:
 1. Intakes regardless of where the child or youth resides in Washington State.
 2. A new intake on an open case when a report is received alleging new CA/N or imminent risk of serious harm.
 3. An intake when reports are received regarding a pregnant woman's alleged abuse of substances, e.g. alcohol, cannabis, prescription medications, or another drug with abuse potential. The intake may be screened-out, when there are no CA/N allegations or imminent risk of serious harm to children or youth in her care.
 4. A new screened out intake when caseworkers receive additional reports of the same CA/N allegations that are already documented in an intake, excluding facility-related intakes, and:
 1. Select the reason code option of "Allegation Documented in Previous Intake."
 2. Include the previous intake number in the explanation dialogue box in the FamLink Decision tab.
2. Identify a youth as a subject only when they are the parent of the alleged victim.
3. Complete the following when a child or youth is reported to intake as [Missing from Care \(MFC\)](#).
 1. Notify caseworkers and their supervisors.
 2. Refer to the Intake Training Manual document for notification details.

3. Document the notification in a FamLink case note.
 4. Follow the:
 1. [Photograph Documentation](#) policy when a photograph is received.
 2. [Audio Recording](#) policy when an audio recording is received.
 5. Respond to [inquiry only](#) calls by providing resource information as requested and available. Inquiry only calls are not documented in FamLink and do not require screening, because there is no CA/N allegation, concern, or request for services specific to DCYF.
14. Intakes Alleging Abuse or Neglect by Employees, Volunteers, Interns, and Work Study Students
1. Intake supervisors must complete the following for intakes alleging DCYF employees, volunteers, interns, or work study students as a subject of CA/N when they are:
 1. A parent, guardian, or acting in loco parentis:
 1. Screen in reports of CA/N or imminent risk of serious harm.
 2. Immediately notify the intake AA or designee and follow their direction.
 3. Create and restrict the case and provider in their name, per the DCYF Administrative 13.06 Records Management and Retention policy.
 2. Working for DCYF and the allegation occurs when conducting their job duties:
 1. Screen out as a third-party intake and send the intake to the local office to refer to LE if the alleged incident is a crime.
 2. Immediately notify the intake AA or designee and follow their direction.
 3. Create and restrict the case in their name, per the DCYF Administrative 13.06 Records Management and Retention policy.
 2. Intake AAs must:
 1. Notify appointing authorities or designees when notified of intakes involving employees, volunteers, interns, and work study students.
 2. Provide direction to intake supervisors.
 3. Attach the intake to the email.
 4. Indicate if the referral was sent to LE.

3. Appointing authorities notified of an intake involving their employees, volunteers, interns, and work study students must follow DCYF Administrative 2.01 Reporting Child, Youth, and Vulnerable Adult Abuse policy.
15. Intake supervisors must complete the following for intakes:
1. Review all intakes to make a final screening decision based on information in the intake and FamLink, and critical thinking that balances child safety, risk, and mitigating factors.
 2. Assign them to the appropriate pathway.
 3. Confirm all previous allegations were documented by intake workers when additional reports of the same CA/N allegations are received.
 4. Restrict case or provider records as required per the DCYF Administrative 13.06 Records Management and Retention policy when documenting an intake.
 5. Review case history and current allegations on all intakes.
 6. Determine if:
 1. Cumulative harm exists, per [RCW 26.44.020\(18\)](#).
 2. Either of the following is necessary to gather additional information to make a final screening decision:
 1. Call back to the referrer.
 2. Collateral contact.
 7. Review FamLink desktop alerts during their shift prior to clearing intakes. If there is an alert on a child or youth identified in the intake, notify the assigned office immediately.
 8. Document intake time frame extensions explaining the rationale within seven calendar days of approving the extensions. Extensions are not to exceed two hours and are approved only by intake supervisors to allow intake workers additional time to complete:
 1. Collateral contacts.
 2. Gather additional information.

Forms

Intake Report DCYF 14-260 (located in the Forms repository on the DCYF intranet)

Resources

[Audio Recording policy](#)

[Child Safety Framework](#)

[Commercially Sexually Exploited Children \(CSEC\) policy](#)

DLR – CPS Handbook – Investigating Abuse and Neglect in State-Regulated Care (located on the Licensing Division page on the DCYF intranet)

DCYF Administrative 2.0 Mandatory Reporting Requirements

DCYF Administrative 13.06 Records Management and Retention policy

[DCYF Safety of Newborn Children Law](#)

[Department of Social and Health Services Domestic Violence](#)

[Extended Foster Care \(EFC\) Program policy](#)

[Indian Child Welfare \(ICW\) Intake policy](#)

[Interstate Compact on the Placement of Children \(ICPC\) Placed in Washington State policy](#)

Licensing Division Child Abuse and Neglect Practice Guide

[Mandated Reporter Toolkit](#)

[Photograph Documentation policy](#)

[Plan of Safe Care Pathway](#)

[Present Danger policy](#)

[The National Child Traumatic Stress Network Sexual Development and Behavior in Children: Information for Parents and Caregivers](#)

[Social Worker’s Practice Guide to Domestic Violence](#)

[Structured Decision Making for Intake DCYF CWP_0113 publication](#)

Intake Training Manual document (located on the Intake & CPS page on the DCYF intranet)

Tribal Agreements (located on the ICW page on the DCYF intranet)

[WAC 110-30-0030 What is child abuse or neglect?](#)

[Washington State Coalition Against Domestic Violence](#)

[Washington State Tribes Intake and After Hours Field Response Contact Information](#)

[Youth Missing from Care policy](#)

2310. Child Protective Services (CPS) Initial Face-To-Face (IFF) Response

2310. Child Protective Services (CPS) Initial Face-To-Face (IFF) Response admin Wed, 07/25/2018 - 11:54

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

[Policy Update Memo Effective December 5, 2022-Child Welfare](#)

[Policy Update Memo Effective January 3, 2023-Licensing Division](#)

Purpose

The purpose of this policy is to provide direction when making initial face-to-face (IFF) contact with victims or identified children and youth for child protective services (CPS) cases.

Scope

This policy applies to Child Welfare (CW) and Licensing Division (LD) CPS employees

Laws

[RCW 26.44.020](#) Definitions

[RCW 26.44.030](#) Reports-Duty and authority to make-Duty of receiving agency-Duty to Notify-Case planning and consultation-Penalty for unauthorized exchange of information-Filing dependency petitions-Investigations-Interviews of children Records-Risk assessment process

[RCW 74.13.031](#) Duties of the department-Child welfare services-Children's services advisory committee

Policy

Caseworkers, after-hours workers, and LD CPS investigators must:

1. Meet in-person with the victims or identified children or youth within the following timeframes once DCYF receives the intake:
 1. Twenty-four hours for emergent responses.
 2. Seventy-two hours for non-emergent responses.
2. CPS caseworkers must:
 1. Determine if there is reason to know children are or may be Indian children, as outlined in the Indian Child Welfare (ICW) Reason to Know Tribal Inquiry policy.
 2. If there is reason to know children are or may be Indian children, follow ICW policies:
 1. [Tribal-State Memoranda of Agreement \(MOA\)](#) if there is a MOA in place with the tribe.
 2. [CPS Investigation and Family Assessment Response](#) to conduct a CPS investigation or CPS FAR.

Procedures

1. Required Efforts to Conduct the IFF

1. Caseworkers must:

1. Within 24-hours or 72-hours of receiving the intake, at a minimum, complete one of the following, unless upon discussion with the supervisor it is determined attempts to locate the victims or identified children or youth is not in the best interest of their safety:

1. Make two physical attempts to complete in-person contact with the victims or identified children or youth in a location where it is reasonable to expect they will be located.

2. Complete all of the following:

1. One physical attempt to complete the in-person contact with the victims or identified children or youth within the response time at a location where it is reasonable to expect the victims or identified children or youth to be found.

2. One collateral contact with a minimum of one individual who may have knowledge of the family or current location of the victims or identified children or youth in an effort to determine their location and make in-person contact within the timeframes. If a collateral contact is unable to be located discuss next steps with the supervisor.

3. A second physical attempt when the first in-person attempt was not successful and the location is known or new information is obtained. If a new location is identified that is not in close proximity to the location of the initial attempt, attempts to coordinate initial contact must occur by the end of the day.

2. Discuss with their supervisor if it is determined the IFF may not be achieved within the timeframes and whether an extension or exception is needed if the victims or identified children or youth have:

1. Not been located after two attempts and if additional attempts need to be made within the timeframes.

2. Been located, but:

1. Are temporarily out-of-state for a verified specific period of time and the other state declines to complete a courtesy IFF. If this occurs, obtain verification from a reliable source that the children or youth are out-of-state and when they are expected to return.

2. Law Enforcement (LE) requested to delay the IFF contact and notified the caseworker they are prohibited from making any contact, including conducting a [present danger](#) assessment, per the County Child Abuse, Fatality, and Criminal Neglect Investigation Protocols. If this occurs, obtain the name of the LE officer requesting to delay the IFF and request the length of time the IFF is expected to be delayed.
2. LD CPS investigators must complete the following for victims or identified children or youth:
 1. Determine their legal status.
 2. Verify whether they are:
 1. In the placement care and authority of DCYF.
 2. A biological or adoptive child of an individual who is not named as a subject of the intake. If they are, obtain parental or guardian permission prior to contacting the victim, unless the victims or identified children or youth are determined to be at imminent risk of harm.
 3. Within 24-hours or 72-hours of being assigned an intake, at a minimum, complete all of the following:
 1. One physical attempt to complete the in-person contact with the victims or identified children or youth within the response time at a location where it is reasonable to expect the victims or identified children or youth to be found.
 2. One collateral contact with a minimum of one individual who may have knowledge of the family or current location of the victims or identified children or youth in an effort to determine their location and make contact within the timeframes.
 4. Discuss with their supervisor when the IFF may not be achieved within the timeframes to determine whether an extension or exception is needed. If the victims or identified children or youth have been located, but:
 1. Are temporarily out-of-state for a verified specific period of time and the other state declines to complete a courtesy IFF. If this occurs, obtain verification from a reliable source that the children or youth are out-of-state and when they are expected to return.
 2. LE requested to delay the IFF contact and notified them that they are prohibited from making any contact, including conducting a [present danger](#) assessment, per the County Child Abuse, Fatality, and Criminal Neglect Investigation Protocols. If this occurs, obtain the

name of the LE officer requesting to delay the IFF and request the length of time the IFF is expected to be delayed.

3. Caseworkers and LD CPS investigators must:

1. Add any victims who were not initially identified on the original intake when there are no new allegations of child abuse and neglect (CA/N) to the Investigative Assessment or FAR Family Assessment, and complete the IFF:
 1. Per the original screening decision.
 2. From the date and time additional victims are identified, and within:
 1. Twenty-four hours, for emergent responses.
 2. Seventy-two hours, for non-emergent responses.
2. Generate a new intake if additional victims are identified with new allegations of CA/N.
3. Discuss with their supervisor if any worker safety concerns are identified and need to be addressed through assistance from LE or additional supports.
4. Continue to attempt to locate the victims or identified children or youth within the required timeframes and complete the following efforts, if:
 1. Caregivers indicate they do not know where the victims or identified children or youth are located and they have not contacted LE to report them as a runaway or missing, caseworkers must make a report to LE.
 2. There is verification from a reputable source that the victims or identified children or youth has moved out-of-state before the IFF is conducted, caseworkers and LD CPS investigators must contact that state's child welfare agency to report the allegations of CA/N.
 3. The victims or identified children or youth are temporarily out-of-state and the child welfare agency of that state was contacted to request an IFF. If the state is unresponsive or refuses to complete the IFF and there are safety concerns:
 1. Call LE for a welfare check.
 2. Discuss with their supervisor the need for an extension either:
 1. Every seven days when there is no verifiable date the child or youth is expected to return to Washington State.

2. When there is a verifiable date the child or youth is returning to Washington State.
 3. Complete the IFF within 24-hours of DCYF knowing the child or youth has returned to Washington State.
 4. The IFF contact has been delayed due to a LE request. If this occurs:
 1. Discuss with their supervisor the need for an extension either:
 1. Every seven days when LE doesn't provide a date the IFF can be completed.
 2. When LE provides a date.
 2. Provide the name of the LE officer and the date the IFF can be completed.
 3. Complete the IFF within 24 hours of LE allowing the IFF.
 5. Not complete IFF contacts out of Washington State.
 4. Caseworkers and LD CPS investigators may refer to the Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 as a resource when victims or identified children or youth cannot be located.
2. IFF Requirements During After Hours
 1. When emergent intakes require an immediate response during after-hours:
 1. CW after-hours supervisors must:
 1. Contact:
 1. A CW after-hours supervisor or area administrator (AA) and request the after-hours worker to respond if an extension is not recommended by either the CW after-hours supervisor or the LD CPS on-call supervisor.
 2. An on-call LD CPS supervisor to determine if an after-hours response is necessary on an LD CPS intake or whether an extension is appropriate on a LD CPS case.
 2. Make the final decision if there is conflict regarding a screening decision for an after-hours 24-hour emergent intake.
 2. An after-hours supervisor or AA must contact the after-hours worker to:
 1. Attempt to make the IFF.
 2. Address worker safety.

2. CI supervisors must email emergent intakes to the after-hours supervisor or AA when an emergent intake does not require immediate response by an after-hours worker.
 3. After-hours supervisors must review non-emergent intakes assigned to the straw email box to determine if the IFF initial timeframe will expire before the next calendar day and assess the need to initiate after-hours contact.
 4. When present danger is identified during the IFF by after-hour workers, the following must be completed:
 1. After-hours workers must immediately report to their supervisor present danger has been identified and describe the protective actions taken.
 2. After-hours supervisors or AA's must:
 1. Review and verbally approve the protective action taken.
 2. Document the protective action and approval in a FamLink case note.
3. Extensions to the IFF Timeframe
 1. CW supervisors must:
 1. Only enter IFF extensions when any of the following occurs:
 1. The intake was received by an intake caseworker on the last business day of a work week and it was not reviewed by an intake supervisor until the next business day. The field supervisor receiving the screened-in intake may approve a 24-hour extension from the date and time the intake supervisor made the final screening decision.
 2. The safety of the victims or identified children or youth will be compromised if an extension is not granted. The IFF may be extended with AA approval.
 3. A CPS intake is screened out by an intake supervisor and the assigned field supervisor screens-in the intake.
 4. A reliable verification has been obtained by the caseworker that the child or youth is out-of-state for a specific period of time and the other state does not respond or declines to complete a courtesy IFF. When this occurs:
 1. Review the verification obtained that the child or youth is out-of-state. If the date of return is:
 1. Verified, enter the extension until the scheduled return date.

2. Not verified, enter an extension every seven calendar days until the IFF contact occurs.
2. Document the caseworker's efforts made to verify the child or youth is still out-of-state when there is no verifiable return date with each new extension.
5. LE requested to delay the IFF contact and tells the caseworker they are not to make any contact with the victims or identified children or youth, including a present danger assessment, per the County Child Abuse, Fatality, and Criminal Neglect Investigation Protocols. When this occurs:
 1. Verify the name of the LE officer requesting the delay and the length of time estimated for the delay. If LE:
 1. Provides a specific date when the IFF can occur, enter the extension for that date.
 2. Does not provide a specific date, enter an extension every seven calendar days until the IFF occurs.
 2. Document the:
 1. Verification of the continued need for the delay, with each new extension.
 2. The caseworker's efforts made to obtain a date from LE allowing the IFF when a date is not provided.
6. Efforts to locate, as described in Procedures Section 1.a., were made by caseworkers within the 24-hour or 72-hour timeframes. When this occurs:
 1. Review the caseworker's documented efforts to locate the victims or identified children or youth.
 2. Enter an extension if required efforts to locate the victims or identified children or youth has been made, every:
 1. Twenty-four hours on emergent intakes, until the IFF contact occurs.
 2. Seventy-two hours on non-emergent intakes, until the IFF occurs, excluding weekends and holidays.
 3. Not enter an extension if additional efforts need to be made and discuss with caseworkers what additional efforts are needed.

2. Continue to monitor efforts made, when required, and add a new extension if the victims or identified children or youth have not been seen within the following timeframes. Every:
 1. Twenty-four hours until the IFF occurs for assigned 24-hour timeframes.
 2. Seventy-two hours, excluding weekends and holidays, for assigned 72-hour timeframes.
 3. Seven calendar days if LE requested the delay or until the date the child or youth will return to Washington State and a verifiable date is not available.
2. LD CPS supervisors must review requests for an extension and only approve extensions when the following occurs:
 1. The safety of the victims or identified children or youth will be compromised if an extension is not granted and the extension is approved by the LD AA.
 2. LE requested to delay the IFF contact and notified the investigator they are not to make any contact with the victims or identified children or youth, including a [present danger](#) assessment, per the County Child Abuse, Fatality, and Criminal Neglect Investigation Protocols. When this occurs:
 1. Verify the name of the LE officer requesting the and the length of time estimated for the delay. If LE:
 1. Provides a specific date when the IFF can occur, enter the extension for that date.
 2. Does not provide a specific date, enter an extension every seven calendar days until the IFF occurs.
 2. Document the:
 1. Verification of the continued need for the delay, with each new extension.
 2. The investigator's efforts made to obtain a date from LE when a date is not provided.
 3. An intake screening decision changed from screen-out to screen-in and the timeframe expired.
 4. A reliable verification has been obtained by the caseworker that the child or youth is out-of-state for a specific period of time and the other state does not respond or declines to complete a courtesy IFF. When this occurs:
 1. Review the verification obtained that the child or youth is out-of-state. If the date of return is:

1. Verified, enter an extension until the scheduled return date.
 2. Not verified, enter an extension every seven calendar days until the IFF contact occurs.
2. Document the caseworker's efforts made to verify the child or youth is still out-of- state when there is no verifiable return date with each new extension.
5. Victims or identified children or youth are in the care and custody of a non-subject parent or guardian who is protective.
6. Efforts to locate were made by LD CPS investigators within the 24-hour and 72-hour timeframes. When this occurs, assigned supervisors must:
 1. Review the LD CPS investigator's efforts to locate the victims or identified children or youth.
 2. Approve the extension, if the required efforts to locate the victims or identified children or youth have been made every:
 1. Twenty-four hours on emergent intakes, until the IFF contact occurs.
 2. Seventy-two hours on non-emergent intakes, until the IFF occurs, excluding weekends and holidays.
 3. Not enter an extension, if additional efforts need to be made and discuss with the LD CPS investigator what additional efforts are needed.
7. The victims or identified children or youth:
 1. Are temporarily in another state and that state has refused to complete a courtesy IFF.
 2. Have been moved out of state and an IFF is requested from the other state.
 3. Was allegedly abused in a licensed facility that does not provide care during weekends or holidays, and the extension is approved by an LD CPS supervisor.
 4. Is no longer placed in the facility.
8. LD CPS supervisors must continue to monitor the efforts and add a new extension if the victim or identified child or youth has not been seen every 72 hours, excluding weekends and holidays, for assigned 24 or 72-hour time frames.

3. When an extension is not entered and continued efforts to locate the victims or identified children or youth are required, CW and LD supervisors must verify those efforts are made until the IFF occurs.
4. Exceptions to the IFF
If an IFF cannot to be completed, CW or LD CPS supervisors must only use and approve exceptions to IFFs if:
 1. The victim or identified child or youth:
 1. Can't be located and all reasonable efforts to locate them have been exhausted throughout the life of the case.
 2. Is deceased.
 3. Has moved out-of-state and a new intake has been completed by the receiving state.
 2. The allegation involves a child care facility investigation and the biological parent or guardian will not allow their child or youth to be interviewed.
5. During IFF Contact with the Victims or Identified Children or Youth
When completing the IFF with the victims or identified children or youth:
 1. Caseworkers, after-hours workers, or LD CPS investigators must:
 1. Assess for present danger.
 2. Take protective action if present danger is identified.
 3. Address all allegations of CA/N.
 4. Observe and document the physical condition and behaviors of the victim or identified child or youth.
 5. Follow the [Photograph Documentation](#) policy when photographing the victim or identified child or youth's physical conditions or environment to document CA/N.
 6. Follow the [Interviewing a Victim or Identified Child](#) policy when conducting comprehensive interviews.
 7. Observe the victims or identified children or youth's living environment, if possible.
 2. Caseworkers and after-hours workers must gather relevant and sufficient information by completing the following:
 1. [Safety Assessment](#), within 30 calendar days from the date of intake.
 2. [Structured Decision Making Risk Assessment \(SDMRA\)](#), the timeframes specified in the [SDMRA](#) policy.

3. LD CPS investigators must complete a [safety assessment](#) and [safety plan](#) for biological, adoptive, and guardianship children or youth when there is an identified safety threat.
6. After the IFF
 1. Once the IFF has been completed, caseworkers, after-hours workers, and LD CPS investigators must:
 1. Contact intake as soon as possible, but no later than 48 hours, if there is a new allegation of CA/N to report, per [RCW 26.44.030](#).
 2. Immediately call 911 to report information to LE about crimes against children or youth, and when they believe the child or youth are in present danger, per the [Mandated Reports to Law Enforcement](#) policy.
 2. Once the IFF has been completed, caseworkers and LD CPS investigators must:
 1. Follow the [Commercially Sexually Exploited Children \(CSEC\)](#) policy.
 2. Complete the [Commercially Sexually Exploited Child \(CSEC\) Screen DCYF 15-476](#) form, if children or youth are suspected or confirmed to be victims of CSEC.
7. Documenting in FamLink
 1. Caseworkers, after-hours workers, or LD CPS investigators must complete the following within three calendar days:
 1. [Document](#) the following information in an IFF case note in FamLink:
 1. All IFF contacts or attempted contacts, including the date and time.
 2. If anyone else was present during the contact.
 3. If present danger was identified and any protective action was taken.
 2. Upload all photographs and audio recordings into FamLink, per the [Photograph Documentation](#) and [Audio Recording](#) policies.
 2. Supervisors must document the following in the explanation section of the Extension/Exception details box in FamLink for:
 1. Extensions within three calendar days of determining if the extension is approved and include the following:
 1. Rationale for the extension.
 2. Timeframes for the extension, as follows:
 1. Twenty-four hours on emergent intakes, until the IFF contact occurs.

2. Seventy-two hours on non-emergent intakes, until the IFF occurs, excluding weekends and holidays.
3. Seven calendar days for:
 1. LE delays and the timeframe of the delay is unavailable. If available, document the extension using the date provided.
 2. Children or youth who are temporarily out-of-state and the timeframe of when they will return to Washington State is unavailable. If available, document the extension date the child is scheduled to return to Washington State.
3. Name of the LE officer and agency, if applicable.
2. Exceptions within three calendar days of determining if the exception is approved and include the rationale for the exception.

Forms

Commercially Sexually Exploited Child (CSEC) Screen DCYF 15-476 (located in the Forms repository on the DCYF intranet)

FAR Family Assessment (FARFA) DCYF 10-474 (located in the Forms repository on the DCYF intranet)

Investigative Assessment (IA) DCYF 09-967 (located in the Forms repository on the DCYF intranet)

[Safety Plan DCYF 15-258B](#)

Resources

[Audio Recording policy](#)

[Commercially Sexually Exploited Children \(CSEC\) policy](#)

County Child Abuse, Fatality and Criminal Neglect Investigation Protocols, (located on the CA intranet)

[Documentation policy](#)

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

[Indian Child Welfare CPS and FAR policy](#)

[Indian Child Welfare Memoranda of Agreement policy](#)

[Interviewing a Victim or Identified Child policy](#)

Investigating Abuse and Neglect in State-Regulated Care Handbook (located on the CA intranet)

[Mandated Reports to Law Enforcement policy](#)

[Photograph Documentation policy](#)

[Present Danger policy](#)

[Safety Assessment policy](#)

[Safety Plan policy](#)

[Structured Decision Making Risk Assessment \(SDMRA\) policy](#)

Tribal Contact and Coordination Guidelines, (located on the CA intranet)

2331. Child Protective Services (CPS) Investigation

2331. Child Protective Services (CPS) Investigation admin Wed, 07/25/2018 - 12:29

Original Date: December 2011

Revised Date: July 1, 2024

Policy Review: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance on conducting investigations when intakes are screened-in with allegations of child abuse or neglect (CA/N) or when children or youth are believed to be at imminent risk of harm.

Scope

This policy applies to child welfare (CW) and Licensing Division (LD) Child Protective Services (CPS) employees.

Laws

[Chapter 26.33 RCW](#) Adoption

[RCW 26.44.030](#) Reports, Duty and authority to make-Duty of receiving agency-Duty to notify-Case planning and consultation-Penalty for unauthorized exchange of information-Filing dependency petitions-Investigations-Interviews of children-Records-Risk assessment process.

[RCW 26.44.100](#) Information about rights-Legislative purpose-Notification of investigation, report, and findings

[RCW 26.44.185](#) Investigation of child sexual abuse, Revision and expansion of protocols-Child fatality, child physical abuse, and criminal child neglect cases.

[RCW 74.13.031](#) Duties of department, Child welfare services-Children's services advisory committee.

[RCW 74.14B.010](#) Children's services workers-Hiring and training

Policy

1. DCYF will complete investigations on screened-in intakes for allegations of CA/N in the following timeframes, unless law enforcement (LE) has determined additional time is needed, per County Child Abuse, Fatality and Criminal Investigations Protocols. For:
 1. CW employees, within 60 days from the date the allegations were reported.
 2. LD CPS employees, within 45 days from the date the allegations were reported.
2. Regional administrators (RA) or designee must:
 1. Develop CPS guidelines with the military base commander or designee for families living on-post within the region. Guidelines and procedures may include off-post families.
 2. Collaborate with county prosecutors and offices to establish and maintain county child abuse investigation protocols, per [RCW 26.44.185](#).
3. LD CPS employees must follow the Investigating Abuse and Neglect in State-Regulated Care Handbook.
4. Caseworkers and LD CPS investigators must:
 1. Contact LE if there is information about a crime that has been committed against a child, youth, or vulnerable adult, or the child's or youths' welfare is endangered.
 2. Determine if there is reason to know a child is or may be an Indian child per the [Indian Child Welfare \(ICW\) Reason to Know](#) policy.
 3. If the child is or may be an Indian child, follow applicable ICW policies, including:
 1. [Tribal/State Memoranda of Agreement](#), if there is one in place.
 2. [Active Efforts and Tribal Collaboration](#).

Procedures

1. CW and LD CPS supervisors must:
 1. When there is a disagreement between supervisors about an intake screening decision or a CPS investigation identified to transfer to Family Voluntary Services (FVS), consult with:
 1. The safety administrator for LD CPS.
 2. The area administrator (AA) for CW.
 2. For CPS Risk Only screened-in intakes, assign them:
 1. Per the [Case Assignment](#) policy.

2. To the assigned CPS Family Assessment Response (FAR), CPS Investigation, FVS, or Child and Family Welfare Services (CFWS) caseworker, if the case is already open to that caseworker. That caseworker will complete the CPS risk-only investigation.
 3. To CPS investigation caseworkers. If the case is co-assigned, assign the intake to the CPS investigation caseworker.
 4. To a LD CPS investigator if the Risk Only is provider related.
3. Conduct [monthly supervisor case reviews](#), review all [Safety Plans](#), and document the reviews in a FamLink case note.
4. Review [Investigative Assessments \(IA\)](#) submitted for approval. When reviewing for approval, confirm the case documentation is comprehensive and complete and document in FamLink. If:
 1. Not approved, return case to caseworkers for continued work with instructions of what work needs to be completed before resubmitting for transfer or closure.
 2. Approved, transfer or close the case.
5. Review cases involving intercountry adoptions and complete the following once the IAs are approved:
 1. Complete the Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form.
 2. Email the Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form to the [United States Department of State](#) in an encrypted email within seven calendar days.
 3. Include "unregulated custody transfer" in the email subject line.
6. Close cases when:
 1. Court intervention is not necessary or appropriate.
 2. Services are not needed or have been declined.
 3. All components of the investigation have been completed.
 4. There is no active safety threat per the [Safety Assessment](#) policy.
7. Transfer case assignments to:
 1. FVS or FRS when families are participating in services.
 2. CFWS when a dependency has been filed.
8. Review and approve requests to extend investigations that remain open past 90 calendar days from the date and time of intake when LE or prosecutors have

determined additional time is needed or to comply with the County Child Abuse, Fatality, and Criminal Investigation Protocols.

9. Submit cases for a statewide CPS alert to the [FamLink Service Desk](#) when reasonable efforts to locate the child or youth have been exhausted and either the:
 1. Court has authorized pick-up of the child.
 2. Child or youth is believed to be in present danger or unsafe.
 10. If children or youth are out-of-state and believed to be unsafe, make a CPS report to the state where it is believed the children or youth are located.
2. When conducting investigations:
1. Prior to face-to-face contact or investigative interviews with children or youth, caseworkers and LD CPS investigators must:
 1. Review case history, if applicable.
 2. Coordinate with local LE per County Child Abuse, Fatality and Criminal Investigations Protocols, when applicable.
 3. Contact referrers to verify the information in the intake is clear and complete and to learn additional needed information such as the families schedule and child's likely whereabouts.
 4. Maintain confidentiality of case information with non-mandatory reporters. Case information may only be shared with mandated reporters as long as the information is pertinent to the CPS case.
 5. Notify the Department of Defense Family Advocacy Program, per the military Memorandum of Understanding, when investigations involve military parents or guardians.
 2. Caseworkers and LD CPS investigators must conduct face-to-face contacts and interviews with children and youth, per [Child Protective Services \(CPS\) Initial Face-to-Face Response](#) policy.
 3. Caseworkers must conduct [monthly health and safety visits](#) with children and youth and monthly visits with parents or guardians when cases are open longer than 60 calendar days, per the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 4. Caseworkers must conduct in-person interviews of children's or youth's parents or guardians and subjects, and LD CPS investigators must conduct in-person interviews with subjects. When conducting interviews:
 1. Caseworkers must notify children or youth's parents or guardians:

1. Of any CA/N allegations made against them at the initial point of parent or guardian contact, while maintaining the:
 1. Confidentiality of the person making the allegations.
 2. Safety and protection of children or youth.
 3. Integrity of the investigation process.
2. When children or youth are taken into protective custody.
2. Caseworkers and LD CPS investigators must:
 1. Identify and verify all individuals living in the home and assess for safety threats and risk.
 2. Provide [infant safety education and intervention](#) for all children in the family age birth to one year, per the [Infant Safety Education and Intervention](#) policy.
 3. Conduct a [universal domestic violence \(DV\) screening](#) and at key points in a case, i.e., a new intake is received, at case transfer, or when re-assessing safety to identify if DV is present. If DV is identified, follow the [DV](#) policy and verify all persons, e.g., children and youth, caregivers, and subjects, are interviewed separately, if possible.
 4. Follow the [Child Protective Services \(CPS\) Initial Face-To-Face \(IFF\) Response](#) policy when a child cannot be located within response timeframes. This includes making reasonable efforts to locate the family using the Guidelines for Reasonable Efforts to Locate Children or Parents as a resource if the family cannot be located.
5. Safety, Risk, and Investigative Assessments
 1. Caseworkers and LD CPS investigators must:
 1. Complete a [Safety Assessment](#) within 30 calendar days from the date of the intake and at key decision points in a case. For:
 1. Caseworkers, follow the [Safety Assessment](#) policy.
 2. LD CPS investigators, follow the [LD CPS Use of Safety Assessment and Safety Planning Tools](#) policy.
 2. Discuss cases with their supervisor to determine if children or youth will be placed in out-of-home care when a safety threat is identified and cannot be managed with a Safety Plan.
 3. Complete the [Investigative Assessment \(IA\)](#) on all investigations within the following timeframes from when the intake is received:

1. 60 calendar days for CW employees.
 2. 45 calendar days for LD CPS employees.
 4. Document and submit an extension on the Extension/Exception tab in FamLink when requesting extensions on investigations remaining open beyond 90 calendar days from the date the intake is received due to LE or prosecutor collaboration to their supervisor.
 5. Follow the Unregulated Child Custody Transfers Facts and Responsibilities Sheet for all unregulated custody transfers. This includes:
 1. Determining the country from which the child or youth was adopted.
 2. Notifying the supervisor and documenting any intercountry adoptions in the IA.
 2. Caseworkers must complete the [Structured Decision Making Risk Assessment \(SDMRA\)](#) within the timeframe specified in the [SDRMA](#) policy.
6. Safety Plans
- Caseworkers and LD CPS investigators must complete a:
1. [Safety Plan DCYF 15-258B](#) form if safety threat is identified and can be controlled and managed in the home.
 2. [Plan of Safe Care DCYF 15-491](#), per the [Infant Safety Education and Intervention](#) policy, with families when newborns are either:
 1. Identified as substance affected by a health care provider.
 2. Identified as having withdrawal symptoms resulting from prenatal drug and alcohol exposure.
 3. Born to a dependent youth.
7. Consultations, Evaluations, and Referrals
- Caseworkers and LD CPS investigators must:
1. Request a prompt [Child Abuse and Neglect Medical Consultation \(Med-Con\)](#) with a Child Protection Medical Consultant provider for treatment for children or youth if:
 1. Indicators of serious CA/N exist.
 2. Children are age three or younger with a physical abuse allegation.
 3. The alleged CA/N cannot be reasonably attributed to the explanation and a diagnostic finding would clarify the assessment of risk or determine the need for medical treatment.

4. The alleged neglect includes concerns that children or youth are being deprived of food, underweight, or starved.
 2. Contact the regional Child Protection Medical Consultant for consultation on medications and children with complex medical issues, when applicable.
 3. Seek legal authority for the medical examination if parents or guardians do not comply with the request. Contact your assigned Assistant Attorney General for consultation.
 4. Contact the [Washington Poison Control Center](#) if consultation is needed about prescribed or non-prescribed medications.
 5. Refer children or youth with complex behavioral health needs for a Wraparound Intensive Services (WISe) screen, per the [WISe](#) policy.
 6. Make referrals to [Early Support for Infants and Toddlers \(ESIT\)](#) services within two business days of identifying children younger than three years old with a possible developmental delay. To refer:
 1. Contact the Family Resources Coordinator at 1-800-322-2588 or through the [ESIT website](#).
 2. Inform the child's parents or guardians of the ESIT referral and that the services are no cost to the family and:
 1. Voluntary for non-dependent children.
 2. Mandatory for dependent children.
8. Investigating Allegations of Serious Physical and Sexual Abuse
Caseworkers and LD CPS investigators must:
 1. Consult with the [Child Abuse and Neglect Medical Consultation \(Med-Con\)](#) or with a Child Advocacy Center (CAC) physician:
 1. To determine if children or youth alleged to be sexually abused need a medical examination.
 2. When there is an allegation of sexual abuse that includes physical injury to children or youth or the potential for them to have a sexually transmitted disease.
 3. When children or youth are seriously injured.
 4. When there is a pattern of injury to young children because of alleged CA/N.
 2. Verify the physician examining children or youth are affiliated with Med-Con or a CAC. If children or youth are examined or were previously examined by a

physician who is not affiliated with the Med-Con or a CAC, refer the case to the Med-Con or CAC physician so they are aware of:

1. Current allegations
 2. Available medical information
 3. Previous injuries
 4. Indications they have been abused or neglected in the past.
3. Except when the court has determined the children or youth are safe to remain in the home, place children or youth in out-of-home care when they:
1. Have suffered a serious non-accidental injury and a safety plan separating the children or youth from the subject cannot be developed.
 2. Are a sibling of a child who has been fatally or seriously injured due to abuse or neglect and a safety plan separating the child or youth from the subject cannot be developed.
 3. Have a parent or guardian who has been determined to be unwilling or incapable, i.e., due to mental illness or substance abuse, of supervising or protecting the children or youth and an in-home safety plan cannot be developed to assure the supervision or protection of the children or youth.
 4. Have been sexually abused and a safety plan cannot be developed to protect them from the subject.
4. Follow the [Safety Assessment](#) policy and if the child or youth is unsafe and safety threats can be controlled or managed in the home, complete a [Safety Plan DCYF 15-259](#) form, per the [Safety Plan](#) policy.
5. Prior to allowing contact between the alleged perpetrator and victim:
1. Consider the psychological harm and physical safety of the children or youth.
 2. Consult with LE, treatment providers, and others involved with the family.
 3. Verify contact between the children or youth and the person who poses the safety threat is sufficiently monitored by a protective individual.
 4. Obtain supervisor approval.
9. Case Coordination and Collateral Contacts
Caseworkers and LD CPS investigators must:

1. Follow the [Background Checks](#) policy, when applicable.
2. Contact LE if assistance is needed to:
 1. Coordinate on investigations where a crime may have been committed against a child or youth.
 2. Assure the safety of children, youth, or employees.
 3. Observe or preserve evidence.
 4. Determine if children or youth are in need of protective custody.
 5. Enforce a court order.
 6. Assist with the investigation.
3. Consult with supervisors if children or youth are unsafe and LE does not place them into protective custody.
4. Interview professionals and other individuals who may have knowledge of the children or youth, parents or guardians, or the allegations of CA/N including but not limited to:
 1. Non-custodial parents
 2. School personnel
 3. Medical providers
 4. Childcare providers
 5. Relatives
 6. Neighbors
 7. Other adults or children living in the home
 8. Other individuals identified by parents or caregivers
 9. Tribal social workers, law enforcement
5. Seek expert consultation and evaluation of issues that may pose a child safety threat or [present danger](#), e.g., housing inspector, health department or other local authority, etc.

10. Additional Requirements

Caseworkers and LD CPS investigators must:

1. Follow the [Hospital Holds](#) policy when children or youth are placed on a hospital hold by a physician or hospital administrator.
2. Follow the [Sexually Aggressive Youth \(SAY\)](#) policy when investigating SAY intakes.

3. Make a report to intake when any child or youth in an open case is believed to be at imminent risk of serious harm or there is a new allegation of CA/N not included in the original intake.
 4. Send a False Reporting Letter DCYF 09-070 form to any person believed to have made a false report of CA/N by certified mail.
3. Concluding an Investigation
- Upon completion of an investigation, caseworkers and LD CPS investigators must:
1. Notify all persons named in the intake as subjects of the abuse or neglect findings, and their rights of review and appeal, per the [CPS Investigative Findings Notification](#) policy.
 2. Inform the Washington State federally recognized tribe of the outcome of the investigation when children or youth meet the definition of an [Indian child](#).
 3. Transfer case to FVS, FRS, or CFWS when services are provided, including placement in out-of-home care through [Voluntary Placement Agreements \(VPA\)](#) or court order.
 4. Close cases and submit to their supervisor when:
 1. All components of the investigation have been completed.
 2. Services are not needed or have been declined.
 3. Court intervention is not necessary or appropriate.
 4. There is no active safety threat.

Forms

Child Custody Transfer DCYF 10-157 (located in the Forms repository on the DCYF intranet)

[Child's Physical Description DCYF 15-359](#)

False Reporting Letter DCYF 09-070 (located in the Forms repository on the DCYF intranet)

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

[Plan of Safe Care DCYF 15-491](#)

[Safety Assessment/Safety Plan DCYF 15-258](#)

[Safety Plan DCYF 15-258B](#)

[Washington State Court Forms](#)

Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form (located in the Forms repository on the DCYF intranet)

Resources

[Audio Recording policy](#)

[Background Check policy](#)

[Case Assignment policy](#)

[Child Abuse and Neglect Medical Consultation \(Med-Con\)](#)

[Child Protective Services \(CPS\) Initial Face-To-Face \(IFF\) Response policy](#)

[Conversation Guide: Talking with parents About Early Learning and Family Support Programs publication](#)

[Conversation Guide: Early Learning Programs in Washington publication](#)

[CPS Investigative Findings Notification policy](#)

[Domestic Violence policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Hospital Holds policy](#)

[Indian Child Welfare Active Efforts and Tribal Collaboration policy](#)

[Indian Child Welfare Tribal Inquiry policy](#)

[Indian Child Welfare Tribal-State Memoranda of Agreement policy](#)

[Infant Safety Education and Intervention policy](#)

[Interviewing a Victim or Identified Child policy](#)

[Investigative Assessment policy](#)

[LD CPS Use of Safety Assessment and Safety Planning Tools policy](#)

[Monthly Supervisor Case Reviews policy](#)

[Photograph Documentation policy](#)

[Present Danger policy](#)

[Safety Assessment policy](#)

[Safety Plan policy](#)

[Sexually Aggressive Youth \(SAY\) policy](#)

[Structured Decision Making Risk Assessment \(SDMRA\) policy](#)

[Understanding the Dependency Court Process DCYF CWP_0044 publication](#)

Unregulated Child Custody Transfers Facts and Responsibilities Sheet (located on the DCYF intranet in the CPS/Intake section)

[Voluntary Placement Agreements \(VPA\) policy](#)

[Wraparound with Intensive Services \(WiSe\) policy](#)

Child Protection Medical Consultation Network (located on the programs DCYF Child Welfare intranet page)

County Child Abuse, Fatality and Criminal Investigations Protocols (located on the DCYF Child Welfare programs law enforcement protocols page)

Guidelines for Reasonable Efforts to Locate Children or Parents (located on the Forms repository on the DCYF Child Welfare intranet)

Investigating Abuse and Neglect in State-Regulated Care Handbook (located on the DCYF Child Welfare Licensing Division page)

Military MOU (located on the DCYF Child Welfare Memorandums of Understanding page)

FVS Supervisory Review Checklist (located on the DCYF Child Welfare Programs page)

2332. Child Protective Services Family Assessment Response

2332. Child Protective Services Family Assessment Response admin Wed, 07/25/2018 - 12:40

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Policy Review: June 9, 2026

Approved by: Frank Ordway, Chief of Staff

Purpose Statement

The purpose of this policy is to provide guidance on completing a Child Protective Services (CPS) Family Assessment Response (FAR). FAR is a CPS alternative response to a screened-in allegation of abuse or neglect. FAR focuses on children and youth safety along with the integrity and preservation of families when lower risk allegations of maltreatment have been screened-in for intervention.

Scope

This policy applies to child welfare (CW) employees.

Laws

[Chapter 26.33 RCW](#) Adoption.

[RCW 26.44.010](#) Declaration or Purpose

[RCW 26.44.020](#) Definitions

[RCW 26.44.030](#) Reports, Duty and Authority, Duty of Receiving Agency, Duty to Notify, Case Planning and Consultation, Penalty for Unauthorized Exchange of Information, Filing Dependency

Petitions, Investigations, Interviews of Children, Records, and Risk Assessment Process
[RCW 26.44.031](#) Records, Maintenance and Disclosure, Destruction of Screened-Out, Unfounded, or Inconclusive Reports, Rules and Proceedings for Enforcement
[RCW 26.44.170](#) Alleged child abuse or neglect, Use of alcohol or controlled substances as contributing factor, Evaluation
[RCW 26.44.195](#) Negligent treatment or maltreatment, Offer of services, Evidence of substance abuse, In-home services, Initiation of dependency proceedings
[RCW 26.44.260](#) Family Assessment Response
[RCW 26.44.270](#) Family Assessment and Recommendation of Services
[RCW 26.44.272](#) Family Assessment, Assessment for Child Safety and Well-being, Referral to Preschool, Child Care, or Early Learning Programs and Communicating with and Assisting Families
[RCW 74.13.020](#) Definitions
[RCW 74.13.031](#) Duties of Department, Child Welfare Services and Children's Services Advisory Committee

Policy

1. The Department of Children, Youth, and Families (DCYF) must:
 1. Assess families in response to screened-in allegations of abuse or neglect and evaluate the safety of children and youth to determine if services are needed for the family to improve or restore family well-being.
 2. Contact law enforcement if there is information about a crime that has been committed against a child, youth, or vulnerable adult, or the children or youths' welfare is endangered, per the [Mandated Reports to Law Enforcement](#) policy.
2. Caseworkers must include tribes in case planning if children or youth are determined by the tribe to be a member or the biological child of a member and eligible for membership, per the [Chapter 3 Inquiry and Verification of Child's Indian Status of the Indian Child Welfare Manual \(ICW\)](#).
3. Area administrators (AAs) must resolve any disagreements regarding the pathway of a CPS FAR intake.

Procedures

1. When conducting a FAR, caseworkers must:
 1. Make initial contact with the parents or guardians and children and youth. This includes:
 1. Contacting parents or guardians by phone when possible to:
 1. Inform them that a CPS FAR referral has been received regarding their children or youth.
 2. Arrange an initial meeting. Unannounced home visits may occur when efforts to contact them have been unsuccessful or the safety of the children or youth will be compromised.

3. Provide them with the [FAR Brochure](#) and verbally explain the CPS FAR and investigation pathways that includes their:
 1. Rights under CPS FAR.
 2. Options to participate or decline in CPS FAR.
 4. Ask if they agree or disagree to participate in CPS FAR.
 5. Discuss the IFF requirements and collaborate with them to conduct the [IFF](#) within 72 hours.
 6. Consult with supervisor:
 1. If the parents or guardians decline or interfere with the [IFF](#) and safety assessment of the children or youth.
 2. To determine if cases need to be transferred to CPS investigation.
 7. Submit cases for a statewide CPS alert to the FamLink Service Desk when reasonable efforts to locate a child or youth have been exhausted and either:
 1. The child or youth is believed to be in present danger or unsafe.
 2. The court has authorized pick-up of the child.
2. Complete a [CPS investigation](#) on risk-only intakes, screened-in on an open CPS FAR case, unless the risk-only intake is assigned to another office, per the [Case Assignment](#) policy.
 3. Complete an assessment of the family. This includes:
 1. Reviewing case history, if applicable.
 2. Contacting referrers to verify the information in the intake is clear and complete and to learn additional information such as the family's schedule and child or youth's likely whereabouts.
 3. Maintaining confidentiality of case information with non-mandatory reporters. Case information may only be shared with mandated reporters as long as the information is pertinent to the CPS case.
 4. Assessing for [present danger](#) on all children and youth in the home and documenting results in a case note.
 5. Taking immediate protective action if a child or youth is in [present danger](#).
 6. Partnering with families to identify collateral contacts to speak with regarding family circumstances and the safety of children or youth.

7. Contacting relevant collateral contacts to gain information about the allegations and overall family functioning related to safety and risk.
8. Gathering comprehensive information to complete the FARFA DCYF 10-474 form in FamLink, which includes completing the:
 1. [Safety Assessment/Safety Plan DCYF 15-258](#) form within 30 calendar days
 2. [Structured Decision Making Risk Assessment \(SDMRA\)](#) within 45 calendar days
 3. [Case Plan DCYF 15-259A](#) form, if services are being offered.
9. Assessing all identified children or youth victims in the home for safety within 72 hours of the date and time the intake was received.
10. Seeing face-to-face all children or youth in the home not identified as victims prior to the completion of the [Safety Assessment/Safety Plan DCYF 15-258](#) form.
11. Identifying and verifying all individuals living in the home and on the premises and assess for safety threats and risk.
12. Providing [infant safety education and intervention](#) for all children in the household age birth to one year, per the [Infant Safety Education and Intervention](#) policy.
13. Completing a [Safety Plan DCYF 15-258B](#) form with the family when safety threats are identified and can be managed in the home with a safety plan.
14. Placing children or youth out-of-home by a [Voluntary Placement Agreement DCYF 15-431](#) form, law enforcement, or court order when safety cannot be managed with a [safety plan](#), per the [Safety Assessment](#) policy.
15. Collaborating with families to determine if there is a need for childcare, preschool, home visiting services, or other early learning services for non-school-age children. This includes:
 1. [Early Support for Infants and Toddlers \(ESIT\)](#) services within two business days of identifying children younger than three years old with a possible developmental delay. To refer:
 1. Contact the Family Health Hotline at 1-800-322-2588 or through the [ESIT website](#).
 2. Inform the parents or guardians of the ESIT referral and that the services are no cost to families and are voluntary.
 2. Preschool, licensed child care for non-school-aged children, or home visiting services to programs enrolled in the DCYF [Early](#)

[Achievers Program](#). The programs must rate a level 3, 4, or 5 in the Early Achievers Program unless either:

1. Families live in an area with no programs that rate 3 or higher in the [Early Achievers Program](#) or if all the childcare programs that meet this requirement are full.
 2. The program is not able to meet the needs of children.
 3. Children are already attending a program and the parents or guardians do not wish to change programs.
16. Referring children or youth with complex behavioral health needs for a Wraparound Intensive Services (WISe) screen, per the [WISe policy](#).
17. Completing the Commercially Sexually Exploited Child (CSEC) Screening Tool DCYF 15-476 when there is suspicion, indication, or confirmation that children or youth may be a victim of [commercial sexual exploitation](#).
18. Determining whether it is probable that the use of substances, including alcohol, marijuana, or prescription medications, contributed to the alleged abuse or neglect.
19. Inquiring about the children or youth's possible membership or eligibility for membership in a federally recognized tribe. This includes,
1. Following the [ICW Manual Chapter 3.0 Inquiry and Verification of Child's Indian Status](#).
 2. Contacting the tribe if children or youth are members or eligible for membership with a Washington state tribe to:
 1. Determine the tribe's level of involvement.
 2. Identify any tribal services and resources available to families.
 3. Review and follow any [memorandum of understanding](#) for Washington state tribes for families residing on or off a reservation.
20. Conducting a universal [domestic violence \(DV\)](#) screening at key points in a case, i.e., a new intake, case transfer, and re-assessment of safety, to identify if DV is present. If DV is identified, follow the [Domestic Violence](#) policy and interview all persons, e.g. children, youth, caregivers, or alleged perpetrators separately.
21. Reporting any new allegation of Child Abuse/Neglect (CA/N) identified during the assessment, following the [Intake and Response](#) policy.

22. Gathering comprehensive information about families to assess children and youth safety and needs and strengths of families.
23. Completing the CPS FAR Family Assessment (FARFA) within:
 1. 45 calendar days from the intake, if services are not being offered.
 2. 120 calendar days from the intake, if services are being offered and parent or guardian permission has been obtained to leave the case open.
24. Follow the [Photograph Documentation](#) policy if photographs of children or youth or the home environment are needed.
25. Follow the Unregulated Child Custody Transfers Facts and Responsibilities Sheet for all unregulated custody transfers. This includes:
 1. Determining the country from which the child or youth was adopted.
 2. Notifying the supervisor and documenting any intercountry adoptions in the FARFA.

2. CPS FAR supervisors must:

1. Review and assign screened-in intakes.
2. Discuss the intake with CPS investigation supervisors and determine if the pathway should be changed to an CPS investigation.
3. Contact their AA if there are disagreements regarding the pathway of a CPS FAR intake.
4. If after reviewing the intake, determine that a child or youth's safety or the integrity of the assessment would be compromised if the parents or guardians were notified prior to the completion of the [initial face-to-face \(IFF\)](#) meeting, discuss completing the [IFF](#) prior to contacting the parents or guardians with the CPS FAR caseworker.
5. Conduct [monthly supervisor case reviews](#), review all [safety plans](#), and document the reviews in a FamLink case note.
6. Review CPS FARFAs and [Investigative Assessments](#) (IAs) submitted for approval. This includes confirming the case documentation is comprehensive and complete and documenting reviews in FamLink. If:
 1. Approved, transfer cases to the appropriate program or close them.
 2. Not approved, return cases to caseworkers for continued work with instructions of what work needs to be completed before resubmitting for transfer or closure.
7. Review cases involving intercountry adoptions and complete the following once FARFAs are approved:

1. Complete the Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form.
 2. Email the Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form to the [United States Department of State](#) in an encrypted email within seven calendar days.
 3. Include "unregulated custody transfer" in the email subject line.
8. Conduct a case staffing with the CPS investigation supervisors to determine how the intake must be assigned when a new intake screens-in for:
1. CPS FAR and the case is open to a CPS investigation caseworker.
 2. CPS investigation and the case is open to a CPS FAR caseworker.
9. Transfer CPS FAR cases to CPS investigation if:
1. There is indication of severe maltreatment or abuse by parents or guardians.
 2. The parents or guardians decline to participate in CPS FAR.
 3. The parents or guardians refuse to allow the CPS FAR caseworkers to complete an [Initial Face-to-Face \(IFF\)](#) or interview the identified children or youth for the [safety assessment](#).
10. If a case is transferred as described in Procedure Section 2. h., determine who will be responsible for the [IFF](#) and if an extension is necessary. Make this determination along with the CPS investigation supervisors.
3. Case Planning, Ongoing Safety Assessments, and Case Transfers
Caseworkers must:
1. Follow the [SDMRA](#) policy to determine if cases need to be left open for services.
 2. If services are being offered and will remain open beyond 45 days:
 1. Discuss services with the parents or guardians by the 45th day.
 2. Develop a [case plan](#) within 15 days of parent's or guardian's agreement.
 3. Obtain parent's or guardian's permission to leave the case open up to 120 days for case planning and service provision.
 3. Provide [concrete goods](#) and supports that strengthen the families' ability to safely care for and meet their children's or youth's needs. Concrete goods must be directly related to the issues of safety and risk identified in the assessment.
 4. Conduct monthly [health and safety visits](#) for all children and youth, parents or guardians, and out-of-home caregivers for cases open longer than 60 days.
 5. Follow the [Case Transfer](#) policy when a dependency petition has been filed.

4. Documentation

1. Caseworkers must document the following in FamLink case notes:
 1. Parents or guardians were provided information about the CPS FAR and investigations pathway.
 2. Parents or guardians were provided with the [FAR Brochure](#).
 3. Parents' or guardians' verbal decision to participate in:
 1. The CPS FAR pathway.
 2. Services that require cases to remain open more than 45 calendar days from the date the intake was received.
 4. Any discussions with parents or guardians regarding child care or early learning services, if appropriate.
2. Supervisors must document in the Extension/Exceptions page in FamLink:
 1. IFF extensions or exceptions, per the [Child Protective Services \(CPS\) Initial Face-To-Face \(IFF\) Response](#) policy.
 2. Cases that remain open beyond the 45 days.
 3. Reasons for changing the intake screening decision on the Intake Decision tab.

5. Concluding a CPS FAR Case

1. Caseworkers must:
 1. Close cases and submit to their supervisor for approval when:
 1. Cases are within 45 calendar days from the date intake is received, unless parents or guardians receiving services consent to the case remaining open for up to 120 calendar days, per [RCW 26.44.030](#).
 2. Families are not in need of services and there is no present danger or an identified safety threat.
 3. They are unable to locate families and all required ongoing efforts to locate the children and youth and parents or guardians are complete, per the [IFF](#) policy. See the Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 as a resource.
 4. Parents or guardians are no longer requesting services and the child is deemed safe through the safety assessment.
 2. Send families the FAR Closing Letter DCYF 10-498 no later than five calendar days after the supervisor approves case closure.

2. Supervisors must review the documentation and determine whether the case is approved for closures when:
 1. Cases are within 45 calendar days from the date intake is received, unless parents or guardians receiving services consent to the cases remaining open up to 120 calendar days, per [RCW 26.44.030](#).
 2. Families are not in need of services and there is no present danger or an identified safety threat.
 3. Caseworkers were unable to locate families and all required ongoing efforts to locate the children and youth and parents or guardians, are complete, per the [IFF](#) policy.

Forms

[Case Plan DCYF 15-259A](#)

Commercially Sexually Exploited Child (CSEC) Screening Tool DCYF 15-476 (located in the Forms repository on the DCYF intranet)

[FAR Family Assessment DCYF 10-474](#)

FAR Assessment Response (FAR) Closing Letter DCYF 10-498 (located in the Forms repository on the DCYF intranet)

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

[Safety Assessment/Safety Plan DCYF 15-258](#)

[Safety Plan DCYF 15-258B](#)

[Voluntary Placement Agreement DCYF 15-431](#)

Washington State Unregulated Child Custody Report for the United States Department of State DCYF 09-035 form (located in the Forms repository on the DCYF intranet)

Resources

[Case Assignment policy](#)

[Case Plan policy](#)

[Case Transfer policy](#)

[Child Protective Services \(CPS\) Investigation policy](#)

[Child Protective Services \(CPS\) Initial Face-To-Face \(IFF\) Response policy](#)

[Commercially Sexually Exploited Children \(CSEC\) policy](#)

[Concrete Goods policy](#)

[Conversation Guide: Talking with parents About Early Learning and Family Support Programs publication](#)

[Conversation Guide: Early Learning Programs in Washington publication](#)

[Domestic Violence policy](#)

[Early Achievers Program](#)

[Early Support for Infants and Toddlers \(ESIT\)](#)

[Family Assessment Response \(FAR\) Brochure](#)

[Family Voluntary Services policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Indian Child Welfare Manual](#)

[Intake and Response policy](#)

[Investigative Assessment \(IA\) policy](#)

[Photograph Documentation policy](#)

[Present Danger policy](#)

[Protective Action Plan Guide](#)

[Safety Assessment policy](#)

[Safety Plan policy](#)

[Structured Decision Making Risk Assessment \(SDMRA\) policy](#)

[Tribal/State Memorandum of Understanding](#)

Unregulated Child Custody Transfers Facts and Responsibilities Sheet (located on the CA intranet in the CPS/Intake section)

[Voluntary Placement Agreement policy](#)

[Wraparound with Intensive Services \(WISe\) policy](#)

2333. Interviewing a Victim or Identified Child

2333. Interviewing a Victim or Identified Child admin Wed, 07/25/2018 - 12:41

Original Date: 2017

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

To provide direction to child welfare (CW) and Licensing Division (LD) Child Protective Services (CPS) employees when interviewing a victim or identified child who has been allegedly abused or neglected or is at imminent risk.

Scope

This policy applies to CW and LD CPS employees.

Laws

[RCW 26.44.030](#) Reports, duty and authority to make, duty of receiving agency, duty to notify, case planning consultation, penalty for unauthorized exchange of information, filing dependency petitions, investigations, interviews of children, records, risk assessment process

[RCW 74.14B.010](#) Children's services workers, hiring and training

Policy

1. Before conducting interviews and assessments of children alleged to have been seriously physically or sexually abused, caseworkers or LD CPS investigators must complete the specialized training per [RCW 74.14B.010](#).
2. Caseworkers and LD CPS investigators must:
 1. Comply with county protocol and collaborate with law enforcement and others on the investigation, per the protocol, and on coordinating the interview of children who have been physically or sexually abused.
 2. Follow policies:
 1. [Indian Child Welfare CPS Investigation and Family Assessment Response](#) when there is reason to know children are or may be Indian children.
 2. DCYF Administrative:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) when working with parents, children, and caregivers with LEP. This includes also following the DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy when caseworkers or LD CPS investigators are dual language employees and are conducting the child abuse interview in the child's or youth's language.
 2. 6.03 Access to Services for Individuals with Disabilities when working with children or youth, parents or guardians, or individuals with a disability.

3. Provide:

1. Qualified interpreters to individuals as needed, per DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
2. The child's or youth's parents or caregivers with the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication at initial contact, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy.

3. Caseworkers or LD CPS investigators must:

1. Make an initial face-to-face (IFF) present danger assessment with the victim or identified child per the [Child Protective Services \(CPS\) Initial Face-to-Face \(IFF\) Response](#) policy. The IFF is required within the following timeframes from the date and time the Department of Children, Youth, and Families (DCYF) receives the intake:
 1. 24-hour for emergent response.
 2. 72-hour for non-emergent response.
2. Complete a face-to-face present danger assessment of children who are not a victim or identified child in the intake although are related to the household. Gather information to complete the safety assessment.
3. Assess if [present danger](#) exists during any contact with a child to determine if an immediate, significant and clearly observable behavior or situation is actively occurring and is threatening or dangerous to a child. Take immediate protective action if a child is in present danger.
4. Follow the Washington State federally recognized [Tribal/State Memoranda of Agreement](#), if applicable, when interviewing a child who may be affiliated with a federally recognized tribe.
5. When a child cannot be located and reasonable efforts have been exhausted, or face-to-face contact cannot occur, consult with the supervisor and follow the [CPS IFF](#) policy.

4. Prior to the investigative interview

1. Caseworkers conducting the investigative interview or LD CPS investigators must interview the child outside the presence of their parent, caregiver, alleged perpetrator and sibling or other children living in the household. The interview may be conducted at a school, child care facility, child's home, etc. DCYF staff cannot transport children for an interview unless the child has been placed in protective

custody by law enforcement first or the court has ordered shelter care or the child is dependent.

2. Parent or Guardian Permission
 1. The FAR caseworker must obtain the parent's permission prior to the IFF and interview unless the child's safety or the integrity of the assessment would be compromised if the parent was notified prior to the completion of the IFF.
 2. The LD CPS investigator must obtain the parent's permission prior to the IFF and interview if the child is not in the placement and care authority (PCA) of DCYF.
3. Conduct a comprehensive interview with every victim or identified child who is developmentally able to communicate within ten calendar days from the date and time the intake is received if not already completed at the IFF.
4. Additional requirements
Caseworkers or LD CPS investigators will
 1. Review all the allegations, child abuse or neglect (CA/N) history and available information to prepare for the IFF and interview.
 2. Coordinate interviews of physical abuse, sexual abuse or criminal neglect of a child per the county child abuse investigation protocol located on the DCYF intranet. Protocols may authorize an interview of the child by law enforcement, a child advocacy center, another agency or forensic interviewer.
 3. Conduct the interview in a neutral environment, e.g., school, child care, whenever possible. When interviewing children in their home, choose as neutral environment as possible and in a location separate from the parent or guardian.
 4. Refer to the DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy when working with a child with LEP. Caseworkers may conduct the child abuse interview in the child's language if they are approved dual language employees, per the DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy.
5. During the interview
Caseworkers or LD CPS investigators must:
 1. Avoid saying or doing anything that could be construed as leading, suggestive, or influencing the child.
 2. Make reasonable efforts to [audio record](#) child interviews when there is:
 1. A CPS investigation involving allegations of physical or sexual abuse.

2. A CPS family assessment involving a physical abuse allegation, and the child is being interviewed without their parent present due to concerns that the safety of the child will be compromised if the parent is present.
 3. Use near verbatim documentation if a child physical or sexual abuse interview is not being audio recorded.
 3. Gather relevant and sufficient information; including observations of the child's appearance and non-verbal communication, to complete the [safety](#) and [risk](#) assessments to determine:
 1. If there are safety threats.
 2. How the child and family are functioning.
 3. Level of risk to the child in their environment.
 4. To verify that the interviews are voluntary, complete the following:
 1. Ask the child during the introduction, if they agree to the interview.
 2. Ask the child if they want another adult present during the interview. Make reasonable efforts to accommodate the child's wishes if they indicate yes.
 3. Make a reasonable effort to have the interview observed by another adult so long as the child does not object and the presence of the other adult will not intrude in the interview or jeopardize the investigation.
 4. Inform any other adult prior to the interview starting and away from the child that they may be called as a witness to the interview.
 5. Ask the child, during the interview, if they would like a break. This can be done if the child appears uncomfortable during the interview, or at any time.
 5. Follow [Photograph Documentation](#) policy when photographing a child's physical condition to document CA/N.
6. After the interview
Caseworkers or LD CPS investigators must:
 1. Notify the parent of the interview at the earliest possible point in the investigation that will not jeopardize the safety or protection of the child or the course of the investigation.
 2. Document the following in FamLink, within three calendar days of completion, the:
 1. Interview, including the child's appearance and non-verbal communication. If the interview is documented in near-verbatim, document the interview within fifteen calendar days of the completion of the interview.
 2. [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to the child or youth's parents and caregivers at initial contact.

3. When any child on an open case is believed to be at imminent risk of serious harm or there is a new allegation of CA/N, the caseworker must make a report to intake.
4. If during the child interview, there is information about a crime against a child and the caseworker believes the child is in danger, the caseworker must call 911 and make a law enforcement report. If the child is not believed to be in danger, the caseworker will make a report to intake.
5. If a child interview was audio recorded, follow the [Audio Recording](#) policy.
6. If staff receive a request for a copy of or to listen to an audio or video recording of a child interview conducted by the department staff must:
 1. Determine if the request is a public disclosure or discovery request. If the request is related to litigation with which DCYF is involved (such as a dependency, termination, guardianship, or tort case), then caseworkers must consult with the AAG to determine if the request is a discovery request.
 2. If the request is a public disclosure request, then immediately forward it to the Public Disclosure Unit per the DCYF Administrative 13.05 Public Records Request and Disclosure policy.
 3. If the request is a discovery request, made by a party to the case, forward it to the dependency discovery manager. If the request seeks release of or access to an audio or video recording of a child forensic interview, then consult with the AAG or attorney before providing the recording.
7. Supervisors must confirm:
 1. All child victims or identified children were interviewed.
 2. Allegations of CA/N were addressed.
 3. Children not a victim or identified child in the intake related to the household had a face-to-face present danger assessment before the safety assessment was completed.
 4. Child interviews and contacts were documented in FamLink.

Forms

[Child's Physical Description DCYF 15-359](#)

LD/CPS Investigative Assessment DCYF 09-967 (located on the Forms repository on the DCYF intranet)

[Safety Assessment DCYF 15-258](#)

[Safety Plan DCYF 15-258B](#)

Resources

[Audio Recording policy](#)

[Child Protective Services \(CPS\) Initial Face-To-Face \(IFF\) Response policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy

DCYF Administrative 13.05 Public Records Request and Disclosure policy

[Indian Child Welfare CPS Investigation and Family Assessment Response policy](#)

[Photograph Documentation policy](#)

[Present Danger policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

Structured Decision Making Risk Assessment on the DCYF intranet.

[Tribal/State Memoranda of Agreement](#)

2334. Interviewing Subjects or Family Assessment Response Participants

2334. Interviewing Subjects or Family Assessment Response Participants admin Wed, 07/25/2018 - 12:42

Original Date: 2017

Revised Date: September 1, 2021

Sunset Review Date: September 30, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

To provide direction for interviewing Child Protective Services (CPS) investigation subjects or Family Assessment Response (FAR) participants who have allegedly abused or neglected a child.

Scope

This policy applies to child welfare and Licensing Division (LD) CPS employees.

Laws

[RCW 26.44.030](#) Reports - Duty and authority to make - Duty of receiving agency - Duty to notify - Case planning and consultation - Penalty for unauthorized exchange of information - Filing dependency petitions - Investigations - Interviews of children - Records - Risk assessment process

Policy

1. The caseworker or LD CPS investigator must:
 1. Conduct individual and face-to-face interviews of each subject or FAR participant. If they refuse to be interviewed, consult with the supervisor and document in FamLink.
 2. If the subject or FAR participant cannot be located, continue efforts to locate until:
 1. The interview occurs, or
 2. Reasonable efforts to locate have been exhausted. See Guidelines for Reasonable Efforts to Locate Children and/or Parents on the DCYF intranet.
 3. Follow the Washington State federally recognized tribe's [Memorandum of Understanding](#) when interviewing a subject or FAR participant who is affiliated with a federally-recognized tribe.
 4. Prior to the interview
 1. Review all the allegations, child abuse or neglect (CA/N) history and available information to prepare for the interview and ensure all the allegations are fully investigated or assessed.
 2. Coordinate interviews of physical abuse, sexual abuse or criminal neglect of a child with law enforcement or another forensic interviewing specialist per county child abuse investigation protocols.
 3. Adhere to the following DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy when working with a subject or FAR participant with LEP. Caseworkers may conduct the interview in the subject or participant's language if they are approved dual language employees, per the DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy.
 2. 6.03 Access to Services for Individuals with Disabilities.
 4. If [domestic violence \(DV\)](#) is alleged or suspected, conduct separate interviews of the subject, parent, caregiver, each child in the household and witness, if applicable.
 5. The LD CPS investigators must also:
 1. Interview subjects separately.
 2. Notify foster parents about the Foster Intervention Retention and Support Team (FIRST) program.

6. If a parent or caregiver requests to audio or video record a meeting, inform them that DCYF employees do not consent to audio or video recording of meetings or discussions. Discontinue the meeting or conversation if the parent or caregiver refuses to cooperate. If a meeting is discontinued, inform the supervisor immediately and document in FamLink.

5. During the interview

1. Inform the subject or FAR participant of all CA/N allegations at the initial contact except when child safety may be jeopardized. Maintain the confidentiality of the referrer.
2. Provide:
 1. Qualified interpreters for the subject or FAR participant as needed or requested, per DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
 2. All subjects and FAR participants with the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication at initial contact.
3. Provide information about the subject's rights, including a right to respond to the allegations
4. Gather relevant and sufficient information to assess present danger, and complete the safety and risk assessments to determine:
 1. If there are safety threats.
 2. How the child and family are functioning.
 3. Level of risk to the child in his or her environment.
 4. The subject or FAR participant's accessibility to the child.
5. Conduct universal DV screening per the [DV policy](#), and document the information in FamLink.
6. Additional requirements
 1. A caseworker must follow the [Indian Child Welfare Manual Chapter 3. Inquiry and Verification of Child's Indian Status](#)
 2. The [FAR](#) worker must also:
 1. Explain the FAR pathway.
 2. Review and upload signed FAR agreement in FamLink.

3. The CPS or LD CPS investigator must also provide information about making and appealing [investigation findings](#).

6. After the interview

1. Document the:

1. Interview, including whether the subject or FAR participant was unavailable or unwilling to be interviewed, by either:
 1. Near verbatim documentation any time an alleged perpetrator makes statements regarding the alleged serious physical or sexual abuse. Information that does not include discussion of the allegations may be summarized.
 2. Upload in FamLink a copy of any near verbatim documentation obtained by a law enforcement officer.
2. [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to individuals at initial contact in a case note in FamLink, per the DCYF Administrative DCYF 6.03 Access to Services for Individuals with Disabilities policy.

2. Obtain permission from the parent, legal guardian, or caregiver before taking a photograph of his or her home or items inside the home. Caseworkers may take photographs of conditions or items outside the home and in public view without permission. See [Photograph Documentation](#) policy.
3. Make a report to intake when any child on an open case is believed to be at imminent risk of serious harm or there is a new allegation of child abuse or neglect (CA/N).
4. If during the subject interview, the subject or FAR participant provides information about a crime against a child or a vulnerable adult and the caseworker believes the child or vulnerable adult is in danger, the caseworker must call 911 and make a law enforcement report. If the child or vulnerable adult is not believed to be in danger, the caseworker will make a report to intake or Adult Protective Services.

2. The supervisor must confirm all alleged subjects or FAR participants were interviewed, and the allegations of CA/N were addressed and documented in FamLink. If the subject or FAR participant was not interviewed, ensure the case documentation includes the reason why the interview did not occur and efforts to locate, if applicable.

Forms

[Background Check Authorization DCYF 09-653](#)

[Consent DCYF 14-012](#)

[Indian Identity Request DCYF 09-761](#)

Notification to Parents DCYF 16-219 (located on the Forms repository on the DCYF intranet)

[Plan of Safe Care DCYF 15-491](#)

[Safety Plan DCYF 15-258B](#)

Temporary Custody Notification DCYF 09-731 (located on the Forms repository on the DCYF intranet)

Resources

[CPS Investigative Findings Notification policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy

DSHS Administrative 18.82 Bilingual/Multilingual Employees-Assignment Pay, Certification, and Responsibilities policy

[Domestic Violence policy](#)

Guidelines for Reasonable Efforts to Locate Children and/or Parents (located on the Child and Family Welfare Services DCYF intranet page)

[Indian Child Welfare Manual Chapter 3. Inquiry and Verification of Child's Indian Status](#)

[Photograph Documentation policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

[Tribal/State Memorandums of Understanding](#)

2335. DLR/CPS Use Of Safety Assessment And Safety Planning Tools

2335. DLR/CPS Use Of Safety Assessment And Safety Planning Tools admin Wed, 07/25/2018 - 13:00

1. On all DLR/CPS intakes alleging the biological or adoptive child of a licensee is the victim of CA/N in which the child is not placed in out-of-home care, the assigned DLR/CPS Investigator will complete a Safety Assessment within 30 calendar days. The Safety Assessment may be documented directly in FamLink per [Safety Section policy](#).
2. Once the assigned DLR/CPS investigator has completed a Safety Assessment and Safety Plan, and has determined that there is a need for monitoring of the Safety Plan and/or provision of services, the DLR/CPS Supervisor shall contact the appropriate DCFS Supervisor.

3. The Supervisor will ensure that the appropriate DCFS case assignment will occur to provide monitoring of the Safety Plan and/or provision of services.
4. In the event of disagreement between the DLR/CPS Supervisor and the DCFS Supervisor, the matter will be immediately referred up the chain of command for resolution.
5. As with any case transfer, appropriate staffings will occur to ensure the transition of services to the family.
6. When DCFS staff assume responsibility for the case, DCFS also assumes responsibility for making ongoing decisions about the safety of the child and/or provision of services. DCFS and DLR will utilize joint staffings and shared decision making whenever appropriate, especially if the license remains active. DLR completes the investigation of the allegation.

2350. Audio Recording

2350. Audio Recording admin Wed, 07/25/2018 - 13:03

Original Date: April 1, 2004

Revised Date: September 1, 2021

Sunset Review Date: September 30, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

To provide guidance to staff on recording and retaining child interviews and retention of voicemail messages for evidentiary purposes. This policy also provides the agency response when parents or others want to record discussions or meetings with the Department of Children, Youth, and Families (DCYF) employees.

Scope

This policy applies to child welfare and Licensing Division (LD) Child Protective Services (CPS) employees.

Laws

[RCW 13.50.010](#) Definitions—Conditions when filing petition or information—Duties to maintain accurate records and access—Confidential child welfare records.

[RCW 26.44.035](#) Response to complaint by more than one agency-Procedure- Written records.

[RCW 26.44.180](#) Investigation of child sexual abuse—Protocols—Documentation of agencies' roles.

[RCW 26.44.185](#) Investigation of child sexual abuse-Revision and expansion of protocols-Child fatality, child physical abuse, and criminal child neglect cases.

[RCW 70.125.030](#) Definitions.

[RCW 74.14B.010](#) Children's services workers-Hiring and training.

Policy

1. Audio Recording of Child Physical Abuse or Sexual Abuse Interviews

Caseworkers must:

1. Successfully complete specialized training which meets the [RCW 74.14B.010](#) requirements for conducting interviews with children who are allegedly physically or sexually abused.
2. Caseworkers and investigators must comply with the county protocol and collaborate with law enforcement and others on the investigation, per the protocol, and on coordinating the interview of children who have been seriously physically or sexually abused. Follow local protocol when a child abuse interview is conducted by law enforcement, a child advocacy center, another agency or forensic interviewer. If caseworkers or investigators are present during a child abuse interview conducted by another agency or individual pursuant to a local protocol, DCYF equipment may be used to make an audio recording of the interview if the protocol permits.
3. Follow [Interviewing a Victim and Identified Child](#) policy.
4. Make reasonable efforts to audio record child interviews when there is a:
 1. [CPS investigation](#) of physical or sexual abuse allegations.
 2. [CPS Family Assessment Response \(FAR\)](#) to a physical abuse allegation, and the child is being interviewed without their parent present due to concerns that child safety would be compromised if their parent was present.
5. Use near verbatim documentation when conducting the interview and audio recording is not possible or appropriate due to any of following:
 1. The child:
 1. Is too young or developmentally unable to verbally communicate.
 2. Refuses to participate if the interview is audio recorded.
 3. Demonstrates emotional distress or discomfort about being audio recorded.
 2. The joint CPS/law enforcement investigation team agrees it is not appropriate.
 3. Another agency is conducting and documenting the interview and DCYF will request a copy of the interview.
6. Prior to the interview:

1. If the child interview takes place after the [initial face-to-face \(IFF\)](#) and child safety will not be compromised, ask the parent or legal guardian for permission before conducting the child interview.
 2. If the parent or legal guardian allows the interview, seek permission to audio record the interview. If the parent refuses, document the interview as near verbatim.
 3. Permission from the parent or legal custodian to the interview is not necessary when the child has been placed in protective custody or is in the care and custody of DCYF.
 4. Obtain the child's verbal consent to audio record if the child is developmentally able to consent. If the child refuses to be audio recorded, use near verbatim documentation.
 5. Follow DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) when working with children or youth with LEP. This includes also following the DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy, as they may conduct the child abuse audio recorded interview in the child or youth's language if they are an approved dual language employee.
 2. 6.03 Access to Services for Individuals with Disabilities.
7. During the audio recorded interview
1. Provide:
 1. Qualified interpreters as needed or requested, per DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
 2. The [Public Notice of Nondiscrimination DCYF HR_0012](#) publication to the child or youth's parent or guardian, per the 6.03 Access to Services for Individuals with Disabilities.
 2. Begin the interview by recording:
 1. Caseworker name and role.
 2. Date, time and location of the interview
 3. Child's full name.
 4. Verbal consent from the child, and permission to audio record.

5. Whether the child wants a third party present. If so, record the name and job title or role of the third party.
 3. Re-ask the child during the interview if it's okay to continue talking or if the child wants a break.
 4. Record the name and role of anyone entering or exiting the room, and the time the interview is concluded. After the child leaves the room, the caseworker will record observations of the child's emotional and physical state during the interview process.
8. After the interview
1. Store all DCYF audio recordings, and audio recordings provided to DCYF from law enforcement or a contracted provider in the case file or, when compatible, upload into FamLink within ten calendar days of the completion of the interview.
 2. Document in a FamLink case note the:
 1. Summary of the contents of the audio recording, including as applicable:
 1. The name of the interviewer.
 2. The name of the agency providing the copy of the recording.
 3. Name of the child.
 4. Date, time and location of the interview.
 5. Third parties present for the interview.
 6. Child's statements in regarding the allegations of CA/N.
 2. [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to the child or youth's parent or guardian at initial contact, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy
 3. Follow office procedures when requesting a transcription of the audio recording if any of the following conditions apply:
 1. A child reports CA/N during an interview.
 2. A dependency proceeding is planned or in process.
 3. A law enforcement agency, including a prosecuting attorney, requests a transcript.
 4. An individual having a legal right to do so requests disclosure of file materials.

5. An interview is part of a LD CPS investigation and there is a founded finding.
 4. Document near verbatim interviews in FamLink and include questions establishing a voluntary interview and the child's responses, including:
 1. The child's permission for the interview.
 2. Whether the child wants a third party or anyone else present.
 3. Date, time and location of the interview.
 4. The child's emotional and physical state during the
 5. If DCYF employees receive a request for a copy of or to listen to an audio recording of a child interview, they must:
 1. Determine if the request is a public disclosure or discovery request. If the request concerns dependency or tort litigation caseworkers must consult with the assigned AAG to determine if the request is a discovery request.
 2. If the request is a public disclosure request, then immediately forward it to the [Public Disclosure Unit](#) per the DCYF Administrative 13.05 Public Records Request and Disclosure policy.
 3. If the request is a discovery request, then forward it to the dependency discovery manager. If the request seeks release of or access to an audio or video recording of a child interview, consult with the assigned AAG or attorney for your office before providing the recording
2. If a parent or caregiver requests to audio or video record a meeting, inform the parent that DCYF employees do not consent to audio or video recording of meetings or discussions. Discontinue the meeting or conversation if the parent refuses to cooperate. If a meeting is discontinued, inform the supervisor immediately.
3. If retaining a voicemail from a parent or caregiver for evidentiary purposes, complete the following:
 1. Retain the entire message. Do not make any edits or alterations and upload into FamLink. For help, contact [the Information Technology Division \(ITD\) service desk](#).
 2. If audio recording of voicemail is not possible, use near verbatim documentation of the entire voicemail message.

Resources

[Child Abuse Interviewing and Assessment Alliance Training](#)

County Child Abuse, Fatality and Criminal Investigation Protocols (located on the Intake & CPS DCYF intranet page)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities

DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy

DCYF Administrative 13.05 Public Records Request and Disclosure policy

[Interviewing a Victim or Identified Child policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

Quick Reference Guide, Audio Recording CPS Child Interviews (located on the Audio Recording & Photograph Documentation CPS Staff DCYF intranet page)

2421. Emergency Planning for Children in Out-of-Home Care

2421. Emergency Planning for Children in Out-of-Home Care admin Wed, 07/25/2018 - 13:04

Purpose

To store current photographs, height and weight information for children in out-of-home care, in case of a disaster or emergency.

Policy

The assigned Social Worker will collect and document the following information **within (5) five business days** of a child *entering* out-of-home care (date of OPD):

- Photograph
- Height & Weight

Update photographs and height and weight information as follows:

- Significant changes in the child occur (e.g. change in appearance, major weight loss or gain)
- **Every 6 months** for children less than 6 years old
- **Annually** for children 6 years and older

Procedure

Store electronic file of child(s) photograph in the electronic Filing Cabinet for their case. Contact your local office RAFT Gatekeeper to have the photograph uploaded. See "Digital Photo Quick Help Guide" for instructions on the file upload steps and naming convention.

Social Worker Documentation

Document the following information about the child photograph in the electronic filing cabinet in the information management system:

- Child name
- Date photograph taken
- Child age
- Child's height/weight
- Identifying marks/information

For child photographs stored in the case file document the following information on the back of the photograph and place it in an envelope in front of the most current case record binder:

- Date photograph was taken
- Child's date of birth
- Height and weight

2440. CPS Service Delivery

2440. CPS Service Delivery admin Wed, 07/25/2018 - 13:06

Approval: Jennifer Strus, Assistant Secretary

Original Date: March 31, 2017

Policy Review: March 31, 2020

Purpose

Provide guidance for Child Protective Services (CPS) investigation caseworkers to determine if voluntary services are needed and whether services will be delivered by the CPS caseworker or Family Voluntary Services (FVS) caseworker. Services are directed at eliminating safety threats, preventing placement, reducing risk and increasing the parent's protective capacities to assure the child's safety and well-being.

Laws

[RCW 26.44.180](#) Investigation of child sexual abuse -- Protocols -- Documentation of agencies' roles.

Policy

1. The CPS investigation caseworker must:
 1. Determine if voluntary services are necessary and in the child's best interest when there is an identified safety threat on the [Safety Assessment](#) or a moderate high or high risk score on the [Structured Decision Making Risk Assessment \(SDMRA\)](#) by completing all of the following:
 1. Consult with a CPS supervisor and review the following information:

1. Safety Assessment
 2. Initial interviews
 3. Case history
 4. SDMRA
2. Consider the following factors:
 1. Identified safety threats.
 2. Existing protective factors within the family and their support system.
 3. Level of family crisis.
 4. Family's ability and willingness to engage in services and achieve their goals within the time period specified.
 5. Services that will help maintain or restore a safe, stable family environment.
 6. Whether safety and protection of the child does not appear to require court intervention.
2. If voluntary services are expected to last less than 60 calendar days from the intake date and the case is not transferred to FVS, complete the following:
 1. Initiate referrals to service providers or community resources at any time during the investigation when brief services are expected to be completed within sixty days. Examples include:
 1. Removal of health and safety hazards from the home or minor repairs.
 2. The family will benefit from additional resources, e.g., childcare, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), bus pass, public health nurse, First Steps, Women, Infant and Children (WIC), Domestic Violence programs, Early Support for Infants and Toddlers (ESIT), or family planning.
 2. Coordinate with family members and community partners when recommending services.
 3. Complete a new safety assessment at key decision points per CA [Safety Assessment](#) policy.
 4. Ensure services paid by CA are completed within the investigation timeframe of 60 days unless there is an extension resulting from law enforcement request per [RCW 26.44.185](#).

3. If the case will transfer to [FVS](#), initiate referrals to service providers or community resources and work with the CPS supervisor to:
 1. End the CPS assignment if the investigation is complete.
 2. Co-assign the case if the investigation is not complete.
 4. Consult with the CPS supervisor to determine if court intervention is needed if a family declines services, and any of the following exists:
 1. Safety threats exist and cannot be managed or controlled in the home.
 2. There is a moderate high or high risk score on the SDMRA.
 3. Reasonable efforts have not increased the parent's protective capacities.
 5. If a child's safety cannot be managed or controlled in the home:
 1. Initiate a [Voluntary Placement Agreement \(VPA\)](#) when the child is anticipated to safely return to his or her parent within 90 days.
 2. Initiate court intervention if the child is not anticipated to return to his or her parent within 90 days.
2. The CPS supervisor must:
1. Collaborate with the FVS supervisor when it is determined that FVS is appropriate, and a FVS caseworker is assigned.
 2. Consult with the area administrator (AA) when there is a disagreement about a CPS investigation identified for FVS.
 3. Document in a supervisory case note his or her review of the completed investigation, and transfer to FVS.

2540. Investigative Assessment

2540. Investigative Assessment admin Wed, 07/25/2018 - 13:07

Policy

The Investigative Assessment (IA) must be completed in FamLink within 60 calendar days of Children's Administration receiving the intake.

1. A complete Investigative Assessment will contain the following information:
 1. A narrative description of:
 1. History of CA/N (prior to the current allegations, includes victimization of any child in the family and the injuries, dangerous acts, neglectful conditions, sexual abuse and extent of developmental/emotional harm).
 2. Description of the most recent CA/N (including severity, frequency and effects on child).

3. Protective factors and family strengths.
2. Structured Decision Making Risk Assessment (SDMRA) tool.
3. Documentation that a determination has been made as to whether it is probable that the use of alcohol or controlled substances is a contributing factor to the alleged abuse or neglect.
4. Disposition; e.g., a description of DCFS case status.
5. Documentation of Findings regarding alleged abuse or neglect. Findings will be based on CA/N codes designated in the intake according to the following definitions:
 1. Founded means: Based on the CPS investigation, available information indicates that, more likely than not, child abuse or neglect did occur as defined in WAC 388-15-009.
 2. Unfounded means: The determination following an investigation by CPS that, based on available information, it is more likely than not that child abuse or neglect did not occur or there is insufficient evidence for the department to determine whether the alleged child abuse did or did not occur as defined in WAC 388-15-009. RCW 26.44.020
 3. If a court in a civil or criminal proceeding, considering the same facts or circumstances contained in the CA case being investigated, makes a judicial finding by a preponderance of the evidence or higher that the subject of the pending investigation has abused or neglected the child, CA shall adopt the finding in its investigation.
 4. When a criminal or civil finding differs from an unfounded finding on a completed investigation or closed case, CA will, upon request, consider the changing the CA/N finding to founded.

Procedure

When CA staff considers a criminal or civil findings that differs from an unfounded finding on a completed investigation or closed case, they must:

1. Compare the court case with the department case to ensure the same facts are considered.
2. Discuss the judicial findings with the CPS supervisor and Area Administrator to determine if the CA findings should be changed.
3. Send a new CPS Founded letter and follow regular CAPTA procedures, if it is determined the findings should be changed.
5. When a third founded finding is made involving the same child or family within the previous 12 months, CA must promptly notify the Office of the Ombudsman of the contents of the report and disposition of the investigation.

2541. Structured Decision Making Risk Assessment

2541. Structured Decision Making Risk Assessment admin Wed, 07/25/2018 - 13:08

Original Date: October 22, 2007

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose Statement

The purpose of this policy is to provide guidance on how to complete a Structured Decision Making Risk Assessment® (SDMRA). The SDMRA focuses on the characteristics of the caregivers and children living in a household. Completing the SDMRA in conjunction with the Safety Assessment gives caseworkers an objective appraisal of the risk to a child, and identifies if services are needed.

Scope

This policy applies to child welfare (CW) employees.

Laws

[RCW 26.44.030](#) Reports – Duty and authority to make – Duty of receiving agency Duty to notify – Case planning and consultation – Penalty for unauthorized exchange of information – Filing dependency petitions – Investigations – Interviews of children – Record – Risk assessment process.

[Executive Order 12-04](#) Amending the Use of Community Protection Teams

Policy

1. DCYF must conduct risk assessments when investigating or assessing allegations of child abuse or neglect (CA/N) on screened-in referrals requiring a Child Protective Services (CPS) investigation or Family Assessment Response (FAR). This includes Risk Only intakes.
2. Caseworkers must:
 1. Complete risk assessments:
 1. Using the Structured Decision Making Risk Assessment (SDMRA) DCYF 15-16-208 form in FamLink in the following timeframes from the date of intake:
 1. 60 days for CPS investigations.
 2. 60 days for Risk Only intakes
 3. 45 days for CPS FAR.
 2. Prior to offering ongoing services or transferring the case to another program area.

2. Offer services to families with a high SDMRA score.
3. Conduct a Child Protection Team (CPT) staffing for all investigations with a high SDMRA score on all identified child victims age six years or younger, unless a Family Team Decision Meeting (FTDM) is held.
3. Caseworkers may offer services to families with a moderately high SDMRA score.
4. Caseworkers must not offer services to families when observable, verifiable, and describable changes have been made within the family that reduce the identified risk in the SDMRA, unless a safety threat exists.

Procedures

1. When the SDMRA is complete, caseworkers must do the following:
 1. When the SDMRA score is “high”:
 1. Offer services to families, unless observable, verifiable, and describable changes have been made within the family. When this occurs, document this on the Family Assessment Response Family Assessment (FARFA) and Investigative Assessment (IA) disposition tab in FamLink.
 2. Follow the [Child Protection Teams \(CPT\)](#) policy, when applicable.
 2. When the SDMRA scores is "moderately high," consider offering services.
 3. When children or youth are determined to be unsafe, follow the [Safety Plan](#) policy.
 4. Refer families to appropriate evidence-based or promising programs where available, when services are offered. If they are not available, refer other relevant agency-contracted or community services.
2. If circumstances exist for the family that are not captured by the SDMRA and the caseworker has reason to believe the family’s risk is higher than the SDMRA results, they may increase the risk level through a discretionary override, allowing for services to be offered.
3. During monthly supervisor reviews and when cases are submitted for closure, supervisors must:
 1. Review the SDMRA scores and verify that the Structured Decision Making Risk Assessment DCYF 16-208 form in FamLink is filled out accurately and timely.
 2. Verify that services were offered, when needed.

Forms

[Safety Assessment/Safety Plan DCYF 15-258](#)

[Safety Plan DCYF 15-258B](#)

Structured Decision Making Risk Assessment DCYF 16-208 (Located in the Forms repository on the DCYF intranet)

Resources

[Child Protection Teams \(CPT\) policy](#)

[Comparing and Understanding the Differences: Risk of Maltreatment, Present Danger, Impending Danger - article](#)

[CPS Service Delivery policy](#)

Structured Decision Making Procedures Manual (Located on the DCYF intranet)

[The Differences between Risk and Safety - article](#)

2559. Hospital Holds

2559. Hospital Holds admin Wed, 07/25/2018 - 13:11

Original Date: September 1995

Revised Date: July 1, 2024

Policy Sunset Review: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

Hospital administrators or physicians have legal authority to delay discharge of a child or youth through a hospital hold for up to 72 hours, without DCYF taking placement and care authority (PCA). The hospital administrator or physician must believe a child or youth is in imminent physical harm if released to their parents or guardians. This policy provides direction on how to respond to a hospital hold.

Scope

This policy applies to child welfare employees.

Laws

[RCW 26.44.056](#) Protective detention or custody of abused child-Reasonable cause-Notice- Time limits-Monitoring plan-Liability

Policy

Caseworkers must:

1. Assess if the child or youth is in imminent physical harm due to child abuse or neglect if discharged to the parents or guardians, when hospital administrators or physicians puts a child or youth on a hospital hold.

2. Obtain the PCA of the child or youth if it is determined that they are in imminent physical harm and a [safety plan](#) cannot be developed to control or manage the identified threat.

Procedures

Caseworkers must complete the following when children or youth are placed on hospital holds:

1. Contact the hospital to identify and determine the child's or youth's:
 1. Release date.
 2. Medical issues if they are not ready for discharge.
 3. Medical and behavioral needs once released.
2. Document the information received from the hospital in a FamLink case note.
3. Follow the [Indian Child Welfare \(ICW\) Intake](#) policy when there is reason to know children are or may be Indian children.
4. If the child or youth is at risk of imminent physical harm and placement is being considered, follow the [Safety Assessment](#) and [Family Team Decision Making \(FTDM\)](#) policies and when it is determined the child or youth:
 1. May be safely discharged home, return them to the parents or guardians.
 2. Cannot be safely discharged to their parents or guardians:
 1. Obtain PCA through one of the following:
 1. Child Custody Transfer DCYF 10-157 form, when DCYF takes PCA of a child or youth from a hospital hold and:
 1. Verify the Child Custody Transfer DCYF 10-157 form has been signed by one of the following:
 1. Hospital administrator
 2. Physician
 2. Upload the completed and signed form into FamLink.
 3. Review the discharge summary to identify the child's or youth's medical and behavioral needs.
 4. Verify the child or youth receives necessary follow-up health care as specified by the medical provider in the [Health Care Services for Children Placed in Out-of-Home Care](#) policy.
 2. Court order
 3. [VPA](#)
 2. Follow these policies:

1. [Out-of-Home Placements](#)
2. [Dependency Petition Process](#)
3. [Medically Fragile Children](#)

Forms

Child Custody Transfer DCYF 10-157 (located in the Forms repository on the DCYF intranet)

Resources

[Dependency Petition Process policy](#)

[Family Team Decision Making \(FTDM\) policy](#)

[Health Care Services for Children Placed in Out-of-Home Care policy](#)

[ICW Intake policy](#)

[Medically Fragile Children policy](#)

[Out-of-Home Placements policy](#)

[Safety Assessment policy](#)

[Safety Plan policy](#)

[Voluntary Placement Agreement \(VPA\) policy](#)

2559B. CPS Investigative Findings Notification

2559B. CPS Investigative Findings Notification admin Wed, 07/25/2018 - 13:12

Approval: Jennifer Strus, Assistant Secretary

Original Date: September 1976

Revised Date: July 23, 2017

Policy Review: July 1, 2021

Purpose

To inform subjects of the Child Protective Services (CPS) investigative findings including information regarding requests for review of founded findings.

Scope

This policy applies to all Children's Administration staff.

Laws

P.L. 93-247 Child Abuse Prevention and Treatment Act

P.L 111-320 Child Abuse Prevention and Treatment Act Amendment

[RCW 26.44.100](#) Information about Rights and Notification of Investigation, Report and Findings

[RCW 26.44.125](#) Alleged Perpetrators Right to Review and Amendment of Finding Hearing

[WAC 388-15-065](#) Does CPS have to notify the alleged perpetrator of the results of CPS investigation?

[WAC 388-15-069](#) How does CPS notify the alleged perpetrator of the finding?

[WAC 388-15-073](#) What information must be in the CPS finding notice?

Policy

CA staff must:

1. Notify subjects of all approved CPS investigative findings in writing and orally, whenever possible, whether founded or unfounded and provide the [required information](#) regarding the steps necessary to request a CA founded finding review.
 1. Document efforts to notify and inform subjects of the finding and process for requesting review of a founded finding in a case note.
 2. Retain a hard copy of the founded or unfounded letter in the case file.
 3. Founded findings:
 1. Send a founded finding letter to the subject's last known address or known location by certified mail, return receipt requested. This includes:
 1. Documenting the certified mail tracking number on the letter and Deliver Tracking page in FamLink.
 2. Retaining the Domestic Return Receipt (green card) when received with the parent's signature or if it is returned undeliverable in the case file.
 2. Personally serve the founded finding letter if the certified mail is returned and the department is actively working with the subject on an open case in any CA program. If the subject refuses to accept the in-person delivery, CA staff must document that the caseworker attempted to hand deliver a copy of the finding letter to subject and the subject refused to accept the letter. This information is documented in the Delivery Tracking page in FamLink.
 4. Unfounded findings:
 1. Document the date the letter was provided and how it was provided to the subject in the Delivery Tracking page in FamLink.
 2. Send the unfounded finding letter to the subject's last known address or known location by United States (U.S.) mail or encrypted email.

3. If provided via encrypted email, upload a copy of the email sent to the subject showing the letter is attached in the email into FamLink.
2. If a court in a civil or criminal proceeding, considering the same facts or circumstances contained in the CPS investigation, makes a judicial finding by a preponderance of the evidence (or higher standard) that the subject of the pending investigation has abused or neglected the child, CA will adopt the finding in its investigation.
3. When a court in a civil or criminal proceeding make a finding that differs from an unfounded finding on a completed investigation or closed case, CA will, upon request, consider changing the CA/N finding to founded.
 1. Compare the court case with the department case to ensure the same facts are considered.
 2. Discuss the judicial finding with the CPS supervisor and area administrator to determine if the CA finding should be changed.
 3. Send a new CPS founded finding letter to the subject and follow regular CAPTA procedures, if it is determined the finding should be changed.
4. Promptly notify the Office of the Family of Children's Ombuds of the contents of the report and disposition of the investigation when a third founded finding is made involving the same child or family within the previous 12 months.
5. Notify the guardian ad litem or court appointed special advocate, if assigned to a child involved in the investigation, of the disposition of the investigation

Forms

CPS Founded Letter DSHS 09-913

CPS Unfounded Letter DSHS 09-912

DLR/CPS Founded Letter DSHS 09-913a

DLR/CPS Unfounded Letter 09-912a and 09-912b

Resources

[2559C CPS Investigative Founded Findings Review](#)

[2540 Investigative Assessment policy](#)

4431. Legal Jurisdiction and Office Assignment

4431. Legal Jurisdiction and Office Assignment sarah.sanchez Tue, 08/28/2018 - 11:29

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Original Date: September 2006

Revised Date: July 1, 2024

Purpose

To support a child's safety, permanency and well-being, this policy provides direction to caseworkers about determining which county is the correct legal venue in which to file the dependency petition or termination case, and when and how to request a change in jurisdiction.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 13.34.040](#) Petition to court to deal with dependent child - Application of federal Indian Child Welfare Act.

Policy

1. When DCYF files a dependency petition, the case will be assigned to the office where the child and parent, guardian, or legal custodian reside. If they reside in different counties, priority is given to what is in the child's best interest, and to the county where the child is most likely to return home.
2. If the child or parent, guardian or legal custodian does not reside in Washington State but the child is located in Washington State, contact the Assistant Attorney General (AAG) to discuss legal jurisdiction. If DCYF files a dependency petition, the case will be assigned to the office where the child is located at the time of filing.
3. Before requesting that the court transfer legal jurisdiction, all of the following must apply:
 1. The parent or legal custodian with whom reunification is planned has lived in a different county than where the dependency petition was originally filed for a minimum of three consecutive months;
 2. The supervisors and area administrators (AA) in the sending and receiving offices agree to the case transfer; and
 3. The AAGs in the sending and receiving counties also agree to the transfer.
4. If there is agreement as described above and the receiving county's court accepts legal jurisdiction, the sending supervisor must verify that the case documentation is complete and transfer the case to the receiving supervisor within five business days of receiving the court order to transfer legal jurisdiction. If the receiving county's court denies the request to transfer jurisdiction, the sending office must retain primary office assignment.
5. Follow [Indian Child Welfare Transferring Cases to Tribal Court](#) policy when the child or youth is an Indian child and case transfer is:
 1. Requested by the tribes.

2. Accepted by the tribes after being requested by the parents or children.
6. Disagreements about office assignments must be resolved at the lowest level possible. If the disagreement remains unresolved, the supervisors and AAs must work with the regional administrators (RAs) or their designees to resolve it.
7. Legal jurisdiction can only be transferred to other Washington counties and cannot be transferred to counties in other states.

Resources

[Indian Child Welfare Transferring Cases to Tribal Court Policy](#)

5400. Child Care

5400. Child Care sarah.sanchez Tue, 08/28/2018 - 13:40

Original Date: July 1, 1995

Revised Date: July 28, 2019

Policy Review: July 31, 2023

Approved by: Ross Hunter, Secretary

Purpose

The purpose of this policy is to provide guidance to Department of Children, Youth, and Families (DCYF) child welfare employees on how to authorize payment for quality child care to meet the needs of children in-home or in out-of-home care and promote safety, permanency, and well-being.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) child welfare employees.

Laws

[RCW 43.216.020](#) Department duties

[RCW 43.216.250](#) Secretary's licensing duties

[RCW 74.13.020](#) Definitions

[RCW 74.15.020](#) Definitions

Policy

Caseworkers:

1. May authorize child care for eligible children residing in their parent's home and in out-of-home care, per WACs [110-15-4500 - 4580](#).

2. Are responsible authorizing child care for eligible children in out-of-home care.
3. Must verify the child meets the following eligibility criteria prior to authorizing child care:
 1. The child has an open child welfare case.
 2. The child is 12 years old or younger or is under age 19 with verified special needs per [WAC 110-15-0220](#).
 3. The child's case plan identifies the need for child care and that need is based on the needs of the family.
4. Must verify child care services are provided by a qualified provider, per [WAC 110-15-0125](#).
5. Must authorize payment within the rates established for daily child care per WACs [110-15-0200](#), [110-15-0205](#), and [110-15-0245](#).
6. Must authorize payment within the rates established for special needs child care per WACs [110-15-0225](#), [110-15-0230](#), and [110-15-0235](#).
7. Must notify child care providers 10 calendar days in advance of a planned termination, e.g., planned placement move, or as soon as possible for an urgent and unanticipated termination of child care services, e.g., unplanned or court ordered move.

Procedures

1. Child Care for Children in an Out-of-Home Placement
When accessing child care for children in DCYF care and custody placed in out-of-home care, the caseworkers must:
 1. Determine if early learning programs are available to meet the child care needs of the family and enroll children in either:
 1. Early Head Start
 2. Head Start
 3. Early Childhood Education and Assistance Program (ECEAP)
 2. Authorize child welfare funded child care as needed for:
 1. Caregivers who have on-going commitments, such as part-time or full-time employment, or continuing education to maintain employment.
 2. Extraordinary circumstances that require child care, e.g., a child enrolled in a child care program who needs continuity of care between placements or the caregiver is experiencing short-term employment transition.
 3. Not authorize child care funding for:
 1. Any family when at least one caregiver is not employed and is at home.

2. Caregivers requesting child care for placement stabilization. In these cases, respite or other services must be offered.
 4. Document the need for child care in the [case plan](#).
 2. Child Care for Children Living In-Home with their Parents or Guardians
When accessing child care for children with an open DCYF case living in their own home, caseworkers must:
 1. Determine if early learning programs are available to meet the child care needs of the family and enroll children in either:
 1. Early Head Start
 2. Head Start
 3. ECEAP
 2. Authorize child welfare funded child care for children living in their own homes if determined that resources in (2a.) are not available to address safety concerns or to prevent out of home placements. Child welfare funded child care may be paid, prior to referring the family to Working Connections Child Welfare Continuing Child Care (CWCCC):
 1. On any open case, for a maximum of three months; or
 2. For cases open less than three months. Payments must end at time of case closure.
 3. Document the need for child care in FamLink.
3. Accessing CWCCC for Children Living in their Home with their Parents or Guardians
Caseworkers must:
 1. Inform the family of the following eligibility requirements for CWCCC:
 1. Children must be residing with the parent or guardian with case types of CPS investigations or FAR, FVS, FRS, CFWS in-home or trial return home. Families achieving permanency through guardianship, guardianship of a minor, or adoption are not eligible.
 2. Child care must be included in the child's case plan.
 3. The parent must access the benefits within six months of the child welfare case closure.
 2. Inform parent or guardians receiving child care funded by child welfare, that they are eligible for 12 months of CWCCC funded child care once their child welfare funding has ended, without co-pay or work requirements.
 1. Request the parent's or guardian's consent to disclose their eligibility to CWCCC to receive a continuation of subsidized child care. If parents or

guardians do not consent to disclose eligibility, inform them they may still receive child care funded by child welfare for up to three months while the case is open.

2. Complete the Service Referral in FamLink including the date the child welfare payment will end and document that the parent or guardian gave consent to disclose their eligibility to CWCCC and the name of the parent or guardian giving consent.
 3. Provide the parent or guardian the date the child welfare child care payment will end.
 4. If child welfare has been paying the provider's usual rate, inform the parent or guardian that providers who do not accept the subsidized rate will not be eligible to receive payment under CWCCC.
 5. If child welfare has been paying for child care with an unlicensed in-home/relative provider, inform the parent or guardian that these providers are not eligible to receive payment under CWCCC and a licensed provider will need to be identified.
 6. Notify the parent or guardian they must complete the application process for CWCCC by calling 1-844-626-8687 prior to the child welfare payment end date or beginning of CWCCC payment, so there is no lapse in child care subsidy payments. CWCCC is unable to back-date payment and the parent or guardian will be responsible for any child care costs incurred prior to application.
3. Complete a Service Referral in FamLink using the category "Child Care- Referral Only" if at the time of case closure, the family has not been receiving child welfare funded child care or does not need child care, but there is evidence that the family will need child care in the near future for the safety of the children.
 1. Request the parent's or guardian's consent to disclose their eligibility to CWCCC to receive subsidized child care after case closure.
 2. Document in a case note and in the Service Referral in FamLink that the parent or guardian gave consent to disclose their eligibility to CWCCC and the name of the parent or guardian giving consent.
 3. Notify the parent or guardian that they must complete the application process for CWCCC by calling 1-844-626-8687 within six months of the child welfare case closure to receive 12 months of CWCCC subsidized child care. CWCCC is unable to back-date payment and the parent or guardian will be responsible for any child care costs incurred prior to application.
4. Payment for Licensed Child Care
Caseworkers must:

1. Authorize payment for licensed child care when the provider accepts the DCYF child care subsidy rates and one of the following criteria is met:
 1. The child care center is licensed by DCYF or the equivalent agency in another state.
 2. The family home providing the child care has a child care license through DCYF or the equivalent agency in another state.
 3. The home or center is certified by DCYF or equivalent agency in another state if the child care program or family home is exempted from the licensing requirements by DCYF, e.g., military, public schools or Tribal Nations.
2. Obtain area administrator approval to pay the provider's usual rate on the [Administrative Approval Request DCYF 05-210](#) when:
 1. It is in the child's best interest; and
 2. Subsidized child care is not obtainable or reasonably accessible.
3. Authorize payment of a registration fee to the providers when a child either:
 1. Is first enrolled with a provider.
 2. Is enrolled with a child care provider during the eligibility period outlined in the Working Connections and Seasonal Child Care Subsidy Program [chapter 110-15 WAC](#).
 3. Leaves child care and then returns to the same provider more than 60 days later.
4. If funds are available, authorize a monthly field trip or quality enhancement fee up to \$30 dollars per child or the provider's actual cost for the field trip, whichever is less, either:
 1. Directly to a licensed or certified family home child care provider if the child care is provided by a licensed or certified family home care provider.
 2. As reimbursement to the out-of-home caregiver if the child care is provided in a licensed child care center.
 1. The field trip or quality enhancement fee is intended to cover the provider's actual expenses for:
 1. Admission
 2. Enrichment programs or ongoing lessons
 3. Public transportation or mileage reimbursement at the Office of Financial Management rate for the use of a private vehicle

4. The cost of hiring a nonemployee to provide an activity at the child care site in-house field trip activity
 5. The purchase or development of a prekindergarten curriculum
 2. The field trip or quality enhancement fee will not cover fees or admission costs for adults on field trips, or food purchased on field trips.
 3. The fee must be required of all parents whose children are in the provider's care.
5. Payments for Unlicensed Child Care
Caseworkers must:
 1. Authorize payment for child care that is provided by unlicensed relatives or Family, Friends and Neighbors (FFN) only if the provider is a:
 1. Person unrelated to the child providing child care in the child's own home.
 2. Relative, as defined by [RCW 74.15.020 \(2\) \(a\) \(i\)-\(vi\)](#), who lives outside the child's home, and provides child care in the child's home or in the relative's own home.
 2. Not authorize unlicensed child care payment when the care is provided by:
 1. Biological mother or father
 2. Adoptive mother or father
 3. Siblings living with either parent, or siblings under the age of 18
 4. Stepmother or stepfather
 5. Step-siblings living with either parent, or step-siblings under the age of 18
 3. Complete or confirm the following, before unlicensed FFN provider child care can be authorized:
 1. Verify the age, maturity, and suitability of the caregiver per [WAC 110-16-0010](#). The caregiver must be:
 1. Eighteen years of age or older.
 2. A U.S. citizen or legally allowed to work in the U.S.
 3. Of sufficient physical, emotional, and mental health to meet the needs of the child.
 2. Complete a background check per [Background Check](#) policy.
 3. Verify the FFN provider meets the requirements in [chapter 110-16 WAC](#).

6. Special Needs Child Care Rate

Caseworkers must:

1. Confirm the child has a physical, mental, emotional or behavioral condition that requires a higher level of care as verified by a health, mental health, or education professional with at least a master's degree.
2. Obtain documentation supporting the higher level of care needed from the health, mental health, or education professional.
3. Determine applicable rate per WACs [110-15-0225](#), [110-15-0230](#), and [110-15-0235](#).
4. Verify that the special needs care only covers care required to meet the child's additional needs above the daily routine care required. This includes:
 1. Ambulatory assistance
 2. Feeding and hygiene assistance
 3. Communication or behavioral intervention and support as applicable and needed
 4. Other needs specific to the care of the child
5. Verify the provider's training needs and the child's equipment needs are not covered by special needs care.
6. Complete the [Administrative Approval Request DCYF 05-210](#) form for the additional cost of care and attach the supporting documentation.
7. Obtain approval from the area administrator on [Administrative Approval Request DCYF 05-210](#) form for the additional cost of care.

7. Planned Termination of Child Care Services

Caseworkers must:

1. Give child care providers notice, at least 10 calendar days prior to the planned termination date, such as a planned placement move or permanency. Notice must be provided either:
 1. Verbally (in-person or telephone)
 2. In writing using the Child Care Planned Termination DCYF 10-433 form
 3. By email
2. Document termination in FamLink case notes.
3. Terminate payment authorization in FamLink.

8. Urgent and Unanticipated Terminations of Child Care Services

Caseworkers must:

1. Notify the child care provider as soon as possible of the urgent or unanticipated termination, such as an urgent or emergent move or court order.
2. Reimburse the provider for any child care services provided or costs incurred in anticipation of providing ongoing child care.
3. Document termination and notice in FamLink case notes.
4. Terminate payment authorization in FamLink.

Forms

[Administrative Approval Request DCYF 05-210](#)

Child Care Planned Termination DCYF 10-433 (located in the Forms repository on the DCYF intranet)

5200. Foster Parent Liability Plan

5200. Foster Parent Liability Plan admin Wed, 04/10/2019 - 06:45

Original Date: July 01, 1997

Revised Date: April 09, 2019

Sunset Review Date: April 30, 2023

Approval: Ross Hunter, Secretary

Purpose

This policy establishes guidelines for implementing the Foster Parent Liability Plan, Liability Plan, which provides insurance coverage for foster parents licensed under [chapter 74.15 RCW](#). The coverage includes personal injury and property damage caused by foster parents or foster children that occurred while the children were in foster care. This policy also provides the means to assist foster parents in obtaining a legal defense when claims have been filed against them resulting from the performance of their official duties.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) caseworkers.

Law

[RCW 4.24.590](#) Liability of foster parents

[RCW 4.92.060](#) Action against state officers, employees, volunteers, or foster parents - request for defense

[RCW 4.92.070](#) Actions against state officers, employees, volunteers, or foster parents - defense by attorney general - legal expenses

[RCW 74.14B.080](#) Liability insurance for foster parents

[RCW 74.15](#) Care of children, expectant mothers, persons with developmental disabilities

Policy

1. DCYF will administer a Liability Plan for foster parents licensed under chapter 74.15 RCW that includes:
 1. Paying claims subject to available funds, individual claim limits, and eligibility requirements.
 2. Providing third-party liability claim management services for the Liability Plan.
 3. Developing and updating written instructions, guidelines, procedures, and forms to implement the terms of the Liability Plan.
 4. Provide the distribution of claims.
2. Caseworkers who have questions regarding policy, interpretation of the Liability Plan, submission of claims, or actions in response to claims or lawsuits must contact:

The Department of Enterprise Services/Office of Risk Management (DES/ORM)

P.O. Box 41466

Olympia, WA 98504-4166

Phone: (360) 407-2260

3. DCYF will authorize liability coverage payment in the following claims:
 1. When a third party incurs expenses as a result of actions of foster parents or foster or respite care children placed in a foster home and personal or bodily injury or property damage has occurred.
 2. Claims resulting from a foster parent's acts or omissions while performing, or intending to perform, the delivery of family foster care and supervision of foster or respite care children.
4. Upon receipt of a claim from a foster parent, the caseworker must:
 1. Review the claim for accuracy, completeness, and timeliness.
 2. Return the claim to the foster parent if the:
 1. Correct form was not used: [Third Party Claim Checklist form DCYF 18-400A](#) or Foster Parent Reimbursement Claim and Checklist form DCYF 18-400, as applicable;
 2. Foster Parent Reimbursement Claim and Checklist form DCYF 18-400 is not submitted within 30 days of an injury, damage, or loss; or

3. [Third Party Claim Checklist form DCYF 18-400A](#) is not submitted within sixty days of injury, damage, or loss.
 4. Information is incomplete;
 5. Appropriate documents are not attached; or
 6. Claim form is not signed and dated.
3. Complete the caseworker section on the correct form for the claim.
 4. Forward the original claim form with documents attached to:

DCYF
P.O. Box 40981
Olympia, WA 98504-0988

5. Upon notification from a foster parent of an impending lawsuit by a third party, the caseworker must:
 1. Supply the foster parent with a Request for Individual Defense Attorney General (AG) form #163 provided to DCYF by the Office of the Attorney General (OAG).
 2. the DES/ORM of an impending lawsuit within 24 hours from the initial notification by the foster parent using one of the following methods:
 1. In writing at:

DES/ORM
PO Box 41466
Olympia, WA 98504-1466;

2. By fax transmittal to DES/ORM (360) 407-8022;
 3. By email at DES/ORM at RiskManagement@des.wa.gov; or
 4. By phone at (360) 407-2260.
6. When a request for defense is made by a foster parent, the caseworker must:
 1. Supply the foster parent with a Request for Individual Defense AG Form #163 provided to DCYF by the OAG.
 2. Notify DES/ORM, in writing, within twenty-four hours of notice of a lawsuit.
 3. Contact the OAG Torts Division within twenty-four hours of notice of a lawsuit.
 4. Forward the original Request for Individual Defense AG Form #163 and the Summons and Complaint to the OAG Torts Division and retain copies in the child's service and licensing record.

Forms

Foster Parent Reimbursement Claim and Checklist DCYF 18-400

[Third Party Claim Checklist DCYF 18-400A](#)

Request for Individual Defense AG Form #163 (available through local OAG)

Resources

[WAC 110-50-1000 What are the department's responsibilities and limitations for reimbursement for damage or loss caused by a child in family foster care?](#)

5600. Interstate Compact on the Placement of Children

5600. Interstate Compact on the Placement of Children sarah.sanchez Tue, 08/28/2018 - 13:41

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Effective Date: July 1984

Revised Date: July 1, 2024

Sunset Review: July 31, 2028

Purpose

The Interstate Compact on the Placement of Children (ICPC) governs the arrangement of all placements of children in the Department of Children, Youth, and Family (DCYF) placement and care authority who cross state boundaries.

Laws

[Chapter 26.34 RCW](#) Interstate Compact on Placement of Children

[PL 109-239](#) Safe & Timely Interstate Placement of Foster Children Act

Policy

1. Headquarters (HQ) ICPC is responsible for administering and overseeing the Compact to ensure compliance with federal and state regulations.
2. Children requiring ICPC in or out-of-state placement must be placed in a safe and suitable environment, and with persons or facilities meeting qualifications of the state where the child is located, to provide for the care of the child.
3. Child safety, permanency and well-being must be the focus throughout the home study process, supervision and ICPC closure.
4. ICPC Offices are responsible for monitoring licensed group care facilities as guided by the Compact:
 1. Approving placement prior to sending the child.
 2. Monitoring the facility while the child is placed there.
 3. Preventing abandonment of a child in a residential facility in another state.

5. ICPC must be followed when a child is placed across state lines in the following situations:
 1. Relatives or foster care placements for public child welfare agencies.
 2. Parent placement unless the court has found the parent to be fit and the placement with the parent is in the child's best interest as determined by the court.
 3. Adoption, including public child welfare agency and private independent adoptions.
 4. Group Care or Residential placements, public child agency and private parent placements.
6. Caseworkers must notify HQ ICPC immediately if:
 1. A placement is disrupting and whether services are recommended to assist in stabilizing the placement, e.g., individual or family counseling, crisis intervention services, etc.
 2. A child is removed or can no longer remain in the approved placement home.
 3. Any intake received on a child placed in or out-of-state on an ICPC placement resource.
7. The ICPC is violated in the following situations:
 1. Placing a child in or out-of-Washington without ICPC approval.
 2. Extending a visit.
 3. Establishing a permanent plan without HQ ICPC concurrence.
 4. Parents moving into an approved ICPC placement without HQ ICPC approval.
8. Consequences if the compact is not followed (applies to in or out-of-state ICPC placements):
 1. A child may need to return to the state that has jurisdiction.
 2. A child in another state without ICPC approval does not receive courtesy supervision or services.
 3. ICPC request may not be processed or denied.
 4. Sanctions

Resources

[Interstate Compact on the Placement of Children Placed Out-of-State policy](#)

[Interstate Compact on the Placement of Children Placed in Washington State policy](#)

5601. Interstate Compact on the Placement of Children Placed Out-of-State

5601. Interstate Compact on the Placement of Children Placed Out-of-State sarah.sanchez Tue, 08/28/2018 - 13:41

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Effective Date: July 1984

Revised Date: July 1, 2024

Sunset Review: July 31, 2028

Purpose

To seek a safe and suitable placement resource and courtesy supervision for a Washington State child placed out-of-state through the Interstate Compact on the Placement of Children (ICPC).

Laws

[Chapter 13.24 RCW](#) Interstate Compact for Juveniles

[Chapter 26.34 RCW](#) Interstate Compact on Placement of Children

[RCW 74.13A.125](#) Interstate Agreements for Adoption of Children with Special Needs-Adoption Assistance and Medical Assistance in State Plan

[PL 109-239](#) Safe & Timely Interstate Placement of Foster Children Act

Policy

1. ICPC Out-of-State
 1. Request and Approval Process
 1. An ICPC request and approval is required prior to:
 1. Sending a dependent child out-of-state for placement with the following:
 1. Biological parents - unless the court has found the parent to be fit and that placement with the parent is in the child's best interest.
 2. Relatives
 3. Foster home
 4. Adoptive home
 5. Residential program or group care facility.
 2. Sending children who are or may be Indian out-of-state if the Department of Children, Youth, and Families (DCYF) or the tribe has jurisdiction and would like to request an ICPC, per the [Indian Child Welfare Requests and Payments for ICPC](#) policy.

2. Caseworkers must contact the Washington State probation or parole office when a child is on probation or parole to verify the applicability of Interstate Compact on Juveniles prior to submitting an ICPC request.
3. Headquarter (HQ) ICPC must receive approval from the receiving state's ICPC Compact Administrator or alternate prior to a child's out-of-state placement.
4. States may choose to contract out their ICPC home study or courtesy supervision services. Washington State cannot impose any restrictions on another state's decision to contract out for these services.

2. Placement

1. Caseworkers must place a child in an out-of-state placement within six months of the placement approval date on the [Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100A DCYF 15-092](#).
2. DCYF maintains jurisdiction after a child is placed out-of-state and is responsible for the case work and financial obligations including medical and educational expenses.
3. Caseworkers must request [monthly health and safety visits](#) from the receiving state.
4. HQ ICPC receives Supervision Reports quarterly from the receiving state for a child in an approved parent, relative, foster or adoptive ICPC out-of-state placement. HQ forwards the report to the caseworker.
5. A child placed out-of-state must return to Washington State within 5 business days if the receiving state requests return.
6. Caseworkers must notify HQ ICPC if an ICPC violation has occurred and work diligently to come into ICPC compliance. Coming into compliance could include:
 1. Submitting an ICPC request to DCYF HQ.
 2. Returning a child to Washington State.
7. HQ ICPC must maintain the ICPC record in FamLink.
8. Written concurrence from the receiving state's ICPC office must be received prior to finalizing a permanent plan, changing a placement, or transferring custody.

3. Closing an ICPC

HQ ICPC closes the ICPC case when any of the following occur:

1. A permanent plan for the child is achieved which occurs only after a period of supervision, placement stability and by agreement of the receiving state's ICPC office.
2. A child is no longer placed in an approved placement.
3. An approved ICPC placement will not be used.

Procedures

1. ICPC Out-of-State

1. Request and Approval Process

1. Caseworkers must submit a completed [Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100 A DCYF 15-092](#) form with supporting documents (See checklist located on the ICPC page on the Intranet) to HQ ICPC.
2. HQ ICPC reviews and forwards the ICPC packet to the receiving state.
3. Caseworkers must:
 1. Receive the following from HQ ICPC before placing a child out-of-state.
 1. An approved Home Study (not required for residential/group care).
 2. Approved and signed Interstate Compact on the Placement of Children (ICPC) – 100A DCYF 15-062 form.
 2. Review the receiving state's home study to determine whether it adequately evaluates the safety, suitability, and competence of the caregivers. Note: home study requirements vary in each state and are completed according to the laws and regulations of the receiving state, e.g., fingerprint based [background checks](#) for relative placements are not completed in every state.
 3. May resubmit a placement request to HQ ICPC if the placement request is denied and the reasons for denial have been corrected. The receiving state may, at its discretion, accept the new request.
 4. Submit the [Interstate Compact on the Placement of Children \(ICPC\) Report on Child's Placement Date or Change of Placement - 100B DCYF 15-093](#) form if the approved placement will not be used.

2. Placement

1. Caseworkers submits the [Interstate Compact on the Placement of Children \(ICPC\) Report on Child's Placement Date or Change of Placement - 100B DCYF 15-093](#) form within 5 business days of placement to HQ ICPC.
 2. HQ ICPC forwards the 100B form to the receiving state.
 3. Caseworkers:
 1. Are responsible for travel as outlined in the [Approving Client Travel Transportation Activities](#) policy.
 2. Must initiate foster care payment for a child placed in an approved foster placement.
 4. HQ ICPC forwards quarterly supervision reports for parent, relative, foster and adoptive homes to the caseworker.
 5. Caseworkers must:
 1. Contract for health and safety visits for children in group care or as otherwise required and not provided.
 2. Review supervision reports to assist in case planning, and to initiate any services that would benefit the placement.
 3. Coordinate with their regional contracts manager to initiate and pay for services out-of-state.
 4. Notify HQ ICPC if an ICPC violation has occurred and work diligently to come into ICPC compliance. This could include:
 1. Submitting an ICPC request.
 2. Returning a child to Washington State.
 5. Request written concurrence through HQ ICPC. Concurrence only occurs after a period of supervision and placement stability.
3. Closing an ICPC
1. Caseworkers must:
 1. Receive concurrence from the receiving state ICPC office, completes the permanent plan and submits the 100B and appropriate court order to HQ ICPC.
 2. Submits 100B when a child returns to Washington State, the approved placement is not utilized, or a child is no longer in the approved ICPC placement.
 2. HQ ICPC forwards the 100B and court order to the receiving state ICPC office to close the compact agreement.

Forms

[Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100A DCYF 15-092](#)

[Interstate Compact on the Placement of Children \(ICPC\) Report on Child's Placement Date or Change of Placement - 100B DCYF 15-093](#)

ICPC Statement of DCYF Worker DCYF 10-491 (located on the Forms repository on the DCYF intranet)

Resources

[Border Agreement Request Form](#)

ICPC Financial and Medical Plan (located on the Child Welfare Intranet, under Programs, under ICPC)

ICPC Intranet Page (located on the Child Welfare Intranet, under Programs, under ICPC)

ICPC Checklist

[Indian Child Welfare Requests and Payments for Interstate Compact on the Placement of Children for Indian Children policy](#)

[WAC 110-50-0580 To whom does the department make payment for foster care](#)

[WAC 110-50-0460 Reimbursement to foster families that reside in or move to another state.](#)

5602. Interstate Compact on the Placement of Children Placed in Washington State

5602. Interstate Compact on the Placement of Children Placed in Washington State sarah.sanchez Tue, 08/28/2018 - 13:42

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Effective Date: July 1984

Revised Date: July 1, 2024

Sunset Review: July 31, 2028

Purpose

To assess the safety and suitability of a placement resource and provide courtesy supervision at the request of a sending state for a child placed through interstate Compact in parent, relative, foster, and adoptive homes in Washington State.

Laws

[Chapter 13.24 RCW](#) Interstate Compact for Juveniles

[Chapter 26.34 RCW](#) Interstate Compact on Placement of Children

Policy

1. ICPC In-State

1. Request and Approval Process

1. Department of Children, Youth, and Family (DCYF) HQ ICPC receives a written request from another state to assess a placement resource.
2. HQ ICPC approval is required before a child is placed in Washington State.
3. HQ ICPC must document the placement request information in the ICPC record.
4. Washington State may choose to contract out its ICPC home study or courtesy supervision services.

2. Placement

1. The sending state must place a child in Washington within six months of the placement approval date noted on the [Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100A DCYF 15-092](#) 100A form.
2. The sending agency maintains jurisdiction and is responsible for the case work and financial obligations for the placement.
3. Caseworkers must:
 1. Complete [monthly health and safety visits](#).
 2. Determines the placement no longer meets the needs of the child. The child may be removed from his or her home and placed in a safe and appropriate setting.
 3. Notify HQ ICPC and the sending state.
 4. Submit quarterly supervision reports for biological parent, relative, foster, or adoptive homes to the HQ ICPC office. HQ ICPC sends quarterly supervision reports to the sending state's ICPC office.
4. HQ ICPC can request a child return to the sending state within 5 business days if the placement is no longer in the best interest of the child.
5. The sending state cannot move toward finalizing a permanent plan until a period of supervision, placement stability and with a written recommendation from HQ ICPC.

3. Closing an ICPC

HQ ICPC closes the compact agreement when any of the following are met:

1. A permanent plan for a child is achieved which occurs only after a period of supervision, placement stability and with agreement from HQ ICPC.
2. A child is no longer placed in an approved placement.
3. An approved ICPC placement will not be used.

Procedures

1. ICPC In-State

1. Request and Approval Process

1. HQ ICPC receives the home study request and sends it to Central Intake for a non-CPS intake and case creation.
2. HQ ICPC sends the home study request to the Washington State local office for assignment.
 1. Licensing Division completes the relative, foster, and adoptive home studies following the Family Home Study Guide.
 2. Child Welfare Division completes the parent home study using the Parent Home Study Guide.
3. Caseworkers must send the completed home study with placement recommendations by the due date on the ICPC request. If the home study is not completed by the due date, a preliminary report or closing letter must be provided.
4. The completed home study or closure letter is due no later than 180 calendar days after assignment.
5. HQ ICPC will send the home study or closure letter and [Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100A DCYF 15-092100A](#) placement decision to the sending state.

2. Placement

1. HQ ICPC sends notification to the local supervisor to begin supervision.
2. Local office supervisor assigns the case for courtesy supervision.
3. Caseworkers must complete the first [health and safety](#) visit no more than 30 calendar days after HQ ICPC case assignment to the local office is made. Continue monthly visits until HQ ICPC provides written notification to stop courtesy supervision.
4. Caseworkers may remove the child and place them in a safe and appropriate placement if the ICPC placement no longer meets the needs of the child.

1. Caseworkers must notify HQ ICPC and the sending state immediately.
 2. Caseworkers may place the child in a licensed facility or with relative or suitable persons.
 3. In cases where the placement resource is uncooperative, and present danger exists, the caseworkers must take a [protective action](#).
 4. If a shelter care hearing is held, inform the court that the child is placed in Washington State pursuant to ICPC and that another state maintains legal jurisdiction. DCYF, the sending state and courts will work together until the child is returned to the sending state.
 5. Caseworkers must complete a quarterly supervision report and send to HQ ICPC within 10 business days after the last home visit of the quarter. HQ ICPC forwards the report to the sending state. HQ ICPC requests a written recommendation from caseworkers regarding finalization of the permanent plan upon the request of sending state.
 6. HQ ICPC reviews recommendations and provides written decision to the sending state and the finalization of the permanent plan can occur.
 7. HQ ICPC will inform the sending state ICPC office of any placement concerns.
3. Closing an ICPC
1. HQ ICPC notifies the caseworker of ICPC case closure when:
 1. A permanent plan is achieved and the [Interstate Compact on the Placement of Children \(ICPC\) Report on Child's Placement Date or Change of Placement - 100B DCYF 15-093](#) form and/or court order is received.
 2. Placement is no longer in the child's best interest and notification was provided to the sending state of compact termination.
 3. A child returns to the sending state.
 2. HQ ICPC will provide written notification to the caseworker when the ICPC is closed.
 3. HQ ICPC closes the FamLink case.

Forms

Border Agreement (located on the DCYF intranet under Programs and ICPC)

[ICPC Closure Letter DCYF 09-104](#)

[Interstate Compact for Placement of Children \(ICPC\) Parent Home Study DCYF 10-536](#)

[Interstate Compact on the Placement of Children \(ICPC\) Placement Request – 100A DCYF 15-092](#)

[Interstate Compact on the Placement of Children \(ICPC\) Report on Child's Placement Date or Change of Placement - 100B DCYF 15-093](#)

[Home Study DCYF 10-043](#)

[Washington State ICPC Quarterly Supervision Report DYCF 16-217](#)

Resources

ICPC Intranet Page (located on the Child Welfare Intranet, under Programs and ICPC)

5700. Adoption Support

5700. Adoption Support sarah.sanchez Tue, 08/28/2018 - 13:43

Original Date: 1971

Revised Date: September 23, 2019

Sunset Review: September 30, 2023

Approved By: Jody Becker, Deputy Secretary

Purpose

To provide support to adoptive families interested in adopting children with special needs in order to remove the barriers that would prevent adoption.

Scope

This policy applies to child welfare adoption caseworkers and adoption support workers.

Laws

[RCW 28.B.118.010](#) Washington College Bound Scholarship

[RCW 74.13.031](#) Duties of department, child welfare services, children's services advisory committee

[RCW 74.13A.005](#) Adoption support, state policy enunciated

[RCW 74.13A.007](#) Adoption support expenditures, findings, intent

[RCW 74.13A.020](#) Adoption support program administration, rules and regulations, disbursements from general fund criteria, limits

[RCW 74.13A.030](#) Both continuing payments and lump sums payments authorized

[RCW 74.13A.055](#) Voluntary amendments to agreements, procedure when adoptive parties disagree

[RCW 74.13A.060](#) Nonrecurring adoption expenses

[PL 96-272](#) Adoption support and Child Welfare Act of 1980

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act of 2008

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

[42 U.S.C. 671](#) State plan for foster care and adoption assistance

[42 U.S.C. 673](#) Adoption and guardianship assistance program

[42 U.S.C. 675](#) 42 U.S.C. 675 Definitions

Policy

1. Determining Adoption Support Eligibility and Special Needs

Adoption support workers must:

1. Determine if the child is eligible for adoption support when it is in the child's best interest and the child:
 1. Is younger than age 18 when the Department of Children, Youth, and Families (DCYF) and adoptive parents sign the adoption support agreement and the adoption is finalized.
 2. Is legally free for adoption or eligible for a customary adoption.
 3. Has a special condition according to [WAC 110-80-0050](#) or federal law that creates a barrier to adoption for one or more of the following reasons:
 1. A diagnosis of a physical, mental, developmental, cognitive or emotional disability;
 2. Race or ethnicity;
 3. Six years of age or older at the time of adoption;
 4. Is a part of a sibling group (three or more); or if a sibling group of two, at least one sibling has a disability or meets the special needs criteria;
 5. Was previously adopted and eligible for Title IV-E reimbursement; or
 6. At risk for a physical, emotional or disabling condition.
 4. Is not the biological child of the adopting family whose rights were previously terminated.
2. Determine if the child meets one of the following Washington state or federal eligibility criterion:
 1. Is in state-funded foster care or child caring institution or likely to be placed in out-of-home care; or

2. Is eligible for federally funded adoption support as defined in Title IV-E of the Social Security Act.
 3. Identify reasonable efforts were made to adopt the child without adoption support. Efforts include, but are not limited to:
 1. Registration with Washington Adoption Resource Exchange (WARE) for 90 days or longer without an appropriate family being identified.
 2. Efforts to find adoptive parents able to adopt without adoption support were made.
 3. Determination of the selected adoptive parent's inability to adopt without assistance.
 4. Determination that it is against the child's best interest to search for another adoptive parent, i.e., relative of specified degree, etc.
 4. Complete the adoption support negotiation and provide a copy of the signed document to the adoption worker for placement in the court's adoptive legal file prior to adoption finalization.
 5. Determine eligibility for adoption support without regard to income.
2. Submitting the Application
- Adoption caseworkers must:
1. Submit separate applications for each child being adopted.
 2. Complete application packets with the following documentation in paper or electronic format. Application materials provided by adoptive parents include:
 1. [Application for the Adoption Support Program and/or Reimbursement of Adoption Finalization Costs DCYF 09-998](#) form
 2. [Adoption Support Worksheet DCYF 09-997](#) form
 3. Federal IRS form 1040
 3. Verify the following documents are in the application packet:
 1. Adoptive Home Study
 2. Child's special need condition
 3. Child's original birth certificate or copy from the Department of Health (DOH) website.
 4. Child's social security number verified from the Social Security Administration or Automated Client Eligibility System (ACES).
 5. Termination of Parental Rights Order

6. [Shared Planning Meeting DCYF 14-474](#) form
 7. Completed [Family Genetic and Medical History DCYF 13-041](#) form.
 8. Signed Family Genetic and Medical History-Adoption DCYF 13-041A form.
3. Reviewing, Negotiating, and Implementing the Initial Adoption Support Agreement
- Adoption support workers must:
1. Contact the family within 14 calendar days of receiving a completed application packet. This must include reminding the family that the adoption support agreement must be finalized before the adoption occurs.
 2. Negotiate with the adoptive parents to:
 1. Determine the adoption support monthly payment through an agreement between the adoptive parents and DCYF, considering the family circumstances and needs of the child.
 2. Finalize the development of the initial adoption support agreement which is a legally binding document that cannot be altered once the family has signed. The adoption support agreement includes:
 1. Medicaid
 2. Non-Recurring costs, reimbursed up to \$1500 for specified adoption related expenses
 3. Pre-Authorized counseling, available upon request of the parents and if the provider meets program requirements.
 4. Monthly payment that is a negotiated amount that may be available to remove barriers to adoption.
 3. Verify the monthly payment does not exceed the statutory cap for the foster care maintenance payment the child would have received if in a foster family home.
 4. Coordinate with the adoption worker to complete an Adoption Request to Exceed Adoption Support Rate Schedule DCYF 15-477 form if the monthly payment request exceeds the statutory cap of the top foster care rate for the child's age. Requests may include, but are not limited to:
 1. Partial Title I-VE eligible child care costs, that must be negotiated annually, until the child no longer needs child care, enters kindergarten, or reaches age six, whichever comes first; or
 2. Care items for a child, who is no longer a Washington resident, but when residing in Washington the items were covered by Washington Title XX.

3. Inform the adoptive parents that a youth adopted:
 1. After reaching age 13 will be considered an independent person when submitting the Free Application for Federal Student Aid (FAFSA).
 2. Between ages 14 and 17 will have continued eligibility for the Washington College Bound Scholarship if the child resides and attends an institution in Washington State.
 3. Between ages 16 and 17 may be eligible for Extended Adoption Support.
 4. Contact the headquarters (HQ) adoption support supervisor if the adoption support worker and the adoptive parents do not agree on the terms of the adoption support agreement. The HQ adoption support supervisor will assist the adoption support worker in setting the level of support.
 5. Make on-going payments, lump sum payments, or both.
 6. Initiate the Medicaid, pre-authorized counseling, non-recurring costs, or monthly payment after receiving the adoption decree, if applicable.
 7. Continue medical coverage, pre-authorized counseling, and monthly payments if the family moves out of state using the Interstate Compact Agreement for Medical Assistance (ICAMA) Request DCYF 15-416 form.
 8. Notify prospective adoptive parents in writing if the adoption support application is denied and include information about the adoptive parent's rights if they disagree with DCYF's decision.
4. Determining On-Going Eligibility for Adoption Support for a Youth age 18 and Older
Adoption support workers must only authorize adoption support beyond a youth's 18th birthday when the adopted youth qualifies for ongoing eligibility. To be eligible:
 1. The adoptive parents must request continued adoption support prior to the youth's 18th birthday and the youth must be attending a full time instructional program leading to a high school diploma, a General Education Development (GED) certificate, or High School Equivalency Certificate (HSEC); or
 2. The youth was adopted at age 16 or 17 and the youth meets one of the following criteria for post adoption support:
 1. Attending high school or working on GED or HSEC.
 2. Enrolled in college or vocational education program.
 3. Employed at least 80 hours per month.
 4. Participating in a program designed to promote or eliminate barriers to employment.
 5. Unable to participate in the above due to a documented medical condition.

5. Reviewing a Request to Change Existing Adoption Support

Adoption support workers must:

1. Review the following information to negotiate a change in the adoption support agreement:
 1. The Adoption Support Agreement Review DCYF 10-082 form.
 2. Most recent IRS Form 1040 or financial statement.
 3. Documentation of any change in the child's diagnosis or treatment recommendations.
 4. Early Periodic Screening, Diagnosis and Treatment (EPSDT) or other medical and treatment recommendations.
 5. Documentation of mental health, educational, or additional supervision supports.
2. Contact adoptive parents no later than 30 calendar days after a request to change the existing agreement is received.
3. Sign a new agreement with the adoptive parents if DCYF and all adoptive parents agree to modify the initial adoption support agreement.
4. Make changes in the terms of the agreement retroactive to the first day of the month in which DCYF received the written request.
5. Inform the adoptive parents that they have a right to an administrative hearing following the review, if there is no agreement to the modification.

6. Determining Eligibility for Adoption Support After Adoption Finalization in Extenuating Circumstances

Adoption support workers must:

1. Conduct the following when adoptive parents request adoption support after the adoption has been finalized:
 1. Identify if the child was adopted prior to the adoption support agreement being negotiated and approved.
 2. Determine if the child's eligibility for federal funding is based on information in the adoption file.
 3. Determine if the child has special needs.
 4. Determine if the child meets Title IV-E eligibility.
2. Deny an adoption support application unless an administrative law judge finds extenuating circumstances. These include:

1. Known information about the child or family was not provided to the family prior to adoption.
2. Adoption support was denied based on a means test.
3. The family was denied adoption support based on wrong information or advice.
4. The parent was not informed of the availability of adoption support.

7. Suspending Adoption Support

Adoption support workers must:

1. Send a notice by certified mail to the adoptive parents when information is received by the adoption support program that the child is no longer supported legally or financially by the adoptive parents. The notice must include:
 1. A request to the parents to provide documentation of legal or financial responsibility for their child.
 2. Notification to the parents that if they are unable to provide documentation of their legal or financial responsibility for their child, the adoption support payment will be suspended on the 30th day. The specific month, day, and year of the 30th day must be included in the notice.
 3. Information to the parents of their right to have an administrative hearing if they are in disagreement with their adoption support payment being suspended.
 4. Information on when and how to request an administrative hearing.
2. Continue the adoption support payment if an administrative hearing is requested by adoptive parents on or before the 30th day until the decision is reached in the hearing.
3. Suspend the adoption support payment if nothing is received from the family on the 30th day. If the adoption support payment is suspended, the child will remain eligible for Title XX Medicaid coverage.

8. One-Time Payments for Catastrophic Events for Adoptive Parents

1. The adoption support worker may provide a one-time payment not to exceed \$1500.
2. The one-time payment must be approved in advance by the HQ adoption support supervisor.
3. Payments are for assistance during a catastrophic family event per [PL 113-183](#), events include but are not limited to:
 1. Death of a child or caregiver;
 2. Damage to a family home caused by a natural disaster or fire; or

3. A medical or mental health crisis resulting in the family traveling out of region for treatment.
9. Closing Adoption Support
- Adoption support workers must terminate adoption support and Medicaid:
1. After the youth reaches age 18, unless they meet eligibility for ongoing support.
 2. Prior to the youth turning age 18 if:
 1. Adoptive parents no longer have legal or financial responsibility for the child.
 2. The child or parent dies.
 3. The child emancipates, or otherwise ceases to need support.
 3. Prior to the youth's 21st birthday.

Forms and Tools

Information for Eligibility

[IV-E Eligibility Determination for an Adoption Support Application DCYF 14-319](#)

Completing the Initial Adoption Support Agreement

[Adoption Support Agreement DCYF 10-228](#)

[Adoption Support Program Application Checklist DCYF 10-477](#)

[Adoption Support Worksheet DCYF 09-997](#)

[Application for the Adoption Support Program and/or Reimbursement of Adoption Finalization Costs DCYF 09-998](#)

[Family Genetic and Medical History DCYF 13-041](#)

Family Genetic and Medical History-Adoption DCYF 13-041A (located in the Forms repository on the DCYF intranet)

[Child's Registration DCYF 10-061](#)

DCYF Provider File Action Request form DCYF 06-097

ICAMA Request form DCYF 15-416

IRS 1040

Request to Exceed Adoption Support Rate Schedule DCYF 15-477

[Shared Planning Meeting \(Noting Adoption as Plan\) DCYF 14-474](#)

Waiver of Right to Receive Written Information on Adoption Support Program Limitation DCYF 09-121.

Ongoing Adoption Support Age 18 years and older

[Disability Verification for Youth Over Age 18 DCYF 15-412](#)

Letter for 18-Year-Old DCYF 15-413

Request to Change Existing Adoption Support

[Adoption Support Agreement Review DCYF 10-082](#)

IRS 1040

Revised Adoption Support Agreement DCYF 10-227

Determining Eligibility After Adoption

See Forms in Completing the Initial Adoption Support Agreement

Initial Adoption Support Agreement DCYF 10-228

Resources

[Post Adoption: Questions and Answers DCYF 22-1211](#)

In FamLink Knowledge Web

Adoption and Foster Care Analysis and Reporting System (AFCARS) Guides

FamLink Quick Help Guides

FamLink User Manual

5800. Approving Client Travel and Transportation Activities

5800. Approving Client Travel and Transportation Activities admin Thu, 09/20/2018 - 08:06

Original Date: September 27, 1995

Revised Date: July 25, 2021

Sunset Review Date: July 31, 2024

Approved by: Jody Becker, Deputy Secretary

Purpose

The purpose of this policy is to provide guidance about approving travel or transportation activities for clients.

Scope

This policy applies to child welfare (CW) employees.

Laws

Policy

1. Caseworkers must complete the following, as soon as they receive travel and transportation activity requests that don't fall within the [Prudent Parenting Standards](#), per the [Prudent Parenting Guide DCYF CWP 0078](#) publication.
 1. Approve requests only if travel or transportation activities for clients are related to preventing, making, or supporting an [out-of-home placement](#) and part of the child or youth's [case plan](#). Clients include:
 1. Children or youth
 2. Parents or guardians of children or youth
 3. Relatives and suitable others
 4. Prospective adoptive placements
 5. Licensed or unlicensed caregivers
 2. If requests are approved:
 1. Attempt to obtain assistance from other resources before committing to or approving requests requiring DCYF funding. Other resources include, but are not limited to:
 1. Parents, guardians, relatives, or suitable others.
 2. Volunteers.
 3. Resources from another state if children or youth are not from Washington State.
 4. Schools for education-related transportation needs
 5. Apple Health for transportation related to accessing Medicaid eligible services and treatment. Pre-approval is not required for emergency transportation such as ambulances.
 2. Follow the approval and documentation requirements, per the Client [Travel Approval Quick Reference Guide DCYF 07-085](#) publication.
 3. Coordinate out-of-country travel, per the [Notification to Foreign Consulate](#) policy, if the child or youth is a citizen of another country.
 4. Follow the [Reimbursing Caregivers for Transportation Expenses](#) policy when reimbursing for travel and transportation expenses
 5. Adhere to the following DCYF Administrative policies when traveling with clients:

1. 7.01 Travel Roles and Responsibilities
2. 7.02 Travel

Procedures

When approving travel or transportation activities for clients, caseworkers must:

1. Document the caregiver's notification of travel in a case note in FamLink prior to travel and no later than 10 calendar days after notification.
2. Verify travel or transportation activities:
 1. Comply with court orders and the following policies:
 1. DCYF Administrative 07.01 Travel Roles and Responsibilities
 2. DCYF Administrative 7.02 Travel
 3. [Office of Financial Management \(OFM\) travel](#)
 2. Are approved according to the [Client Travel Approval Quick Reference Guide DCYF 07-085](#) publication.
 3. Are approved by the regional administrator (RA) for children and youth being placed out-of-state through [Interstate Compact for the Placement of Children \(ICPC\)](#) and approved in writing by the receiving state.
3. Document travel and transportation activities per the [Client Travel Approval Quick Reference Guide DCYF 07-085](#) publication and:
 1. For all children:
 1. Notify, the court, guardian ad litem, and the child or youth's attorney, if applicable, as soon as possible after receiving notification of any travel over 72-hours.
 2. Scan and upload in FamLink:
 1. Travel-related documents
 2. Court orders
 3. Completed Child Welfare Travel Authorization DCYF 03-478 form and attachments, as applicable.
 2. For children who are not legally free:
 1. Notify the parents as soon as possible after receiving notification of any travel over 72-hours. If the parent cannot be located, document the efforts to notify in a case note in FamLink.
 2. Indicate the parent's written approval on the Child Welfare Travel Authorization DCYF 03-478 form, if required and attach the written approval

to the form. Document the parent's approval or refusal in a case note in FamLink.

Forms

Child Welfare Travel Authorization DCYF 03-478 (located in the Forms repository on the DCYF intranet)

Resources

[Child Welfare Policy and Procedures Caregiver Transportation Reimbursement policy](#)

[Child Welfare Policy and Procedures Notification to Foreign Consulate policy](#)

[Client Travel Approval Quick Reference Guide DCYF 07-085 publication](#)

DCYF Administrative 7.01 Travel Roles and Responsibilities policy

DCYF Administrative 7.02 Travel policy

[Prudent Parenting Guide DCYF CWP 0078 publication](#)

[State Administrative and Accounting Manual \(SAAM\) chapter 10](#)

2559C. CPS Investigative Founded Findings Review

2559C. CPS Investigative Founded Findings Review admin Wed, 07/25/2018 - 13:14

Approval: Jennifer Strus, Assistant Secretary

Original Date: September 1976

Revised Date: January 31, 2016

Policy Review: January 1, 2020

Purpose

Inform staff of the process to review CPS investigative findings when a review is requested by a subject with a founded finding of Child Abuse/Neglect (CA/N).

Scope

This policy applies to all Children's Administration staff.

Laws

P.L. 93-247 Child Abuse Prevention and Treatment Act

P.L 111-320 Child Abuse Prevention and Treatment Act Amendment

[RCW 26.44.100](#) Information about Rights and Notification of Investigation, Report and Findings

[RCW 26.44.125](#) Alleged Perpetrators Right to Review and Amendment of Finding Hearing

Policy

1. A request for review of a CPS founded finding must be received **within 30 calendar days** following the subject's receipt of the notification. If the request is not received within the designated timeframe, the subject has no further right to an internal review, administrative hearing or judicial review of the finding.
2. All CA founded findings reviews must be conducted within 30 days by the regional administrator or Division of Licensed Resources administrator or his or her designee who is above the first level of supervision and was not involved in the original decision-making about the finding. At a minimum, the internal review must include:
 1. A review of the case file, to include the intake, case notes, Investigative Assessment, and the findings information; and
 2. A review of any written information provided by the subject of the intake.
 3. When necessary, the review will include an interview with the assigned worker and/or the worker's supervisor.
3. CA staff must notify the subject of the CA founded findings review results within 30 calendar days from the date the department received the request.
 1. Notification must be in writing by certified mail, return receipt requested to the subjects last known address.
 2. If the results remain founded, the hearing notification letter must include the process to request an Administrative Hearing.
4. CA staff must change the findings in the "Findings" page in FamLink within 10 working days of the decision when a review or hearing overturns the founded finding.
5. All findings will remain in effect as originally determined pending any internal review or administrative hearing.

Forms

CPS Review Denied Notification form DSHS 27-136 (on Intranet)

3000. Family Voluntary Services (FVS)

3000. Family Voluntary Services (FVS) admin Wed, 07/25/2018 - 13:16

Original Date: September 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance when providing Family Voluntary Services (FVS) to families, a program which allows parents and guardians to engage voluntarily in services that improve their protective capacities to meet the safety, health, and well-being needs of children and youth.

Scope

This policy applies to child welfare (CW) employees.

Laws

[RCW 13.32A.140](#) Out-of-Home placement-Child in need of services petition by Department-Procedure

[RCW 26.44.030](#) Reports–Duty and authority to make-Duty of receiving agency-Duty to notify-Case planning and consultation-Penalty for unauthorized exchange of information

[RCW 26.44.056](#) Protective detention or custody of abused child-Reasonable cause-Notice-Time limits-Monitoring Plan

[RCW 26.44.195](#) Negligent treatment or maltreatment-Offer of services-Evidence of substance abuse-In-home services-Initiation of dependency proceedings

[RCW 43.185C.315](#) Youth services-HOPE centers-Establishment-Requirements

[RCW 43.185C.320](#) Youth services-HOPE centers-Eligibility-Minors

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[Chapter 74.14C RCW](#) Family Preservation Services

[PL 105-89](#) Adoption and Safe Families Act

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

1. FVS supervisors must assign FVS caseworkers to the following cases:
 1. Non-Child Protective Services (CPS) [intakes](#) when:
 1. Families are requesting services from the department.
 2. Intakes are screened-in on runaway children or youth under age 12 and they are at any of the following:
 1. Crisis Residential Center (CRC)
 2. Hope center

3. Overnight youth shelter
3. Additional considerations exist as outlined in the [CPS Service Delivery](#) policy.
2. CPS investigations or risk-only cases, per the [Case Assignment](#) policy, when the family has agreed to participate in services and any of the following exist:
 1. A moderately high or high risk score on the [Structured Decision Making Risk Assessment \(SDMRA\)](#) tool.
 2. The [Safety Assessment/Safety Plan DCYF 15-258](#) form identified a safety threat that can be managed with a [safety plan](#).
 3. Children or youth are placed in out-of-home care on a [Voluntary Placement Agreement \(VPA\)](#) due to a safety threat that cannot be managed in the home.
2. FVS caseworkers must:
 1. Determine if there is reason to know children are or may be Indian children, per the Indian Child Welfare (ICW) [Reason to Know](#) policy.
 2. If there is reason to know children are or may be Indian children, follow ICW policies:
 1. [Tribal State Memoranda of Agreements](#) if there is a MOA in place with the tribe.
 2. [Active Efforts and Tribal Collaboration](#).
3. FVS supervisors must assign a risk-only intake to a CPS investigation caseworker if the case is co-assigned to FVS and CPS investigations, per the [Child Protective Services Investigation](#) policy.

Procedures

1. FVS supervisors must:
 1. Follow the [case transfer](#) policy.
 2. Consult with the area administrator (AA) when there is a disagreement about an intake screening decision or the transfer of a CPS investigation to FVS.
 3. Conduct [monthly clinical supervision reviews](#) and document in FamLink.
 4. Review and approve cases for case closure if the family:
 1. Has completed or is no longer in need of services and there is no present danger or identified safety threat.
 2. Is requesting case closure and there is no [present danger](#) or identified safety threat.

3. Is unable to be located.
5. Review cases that remain open and:
 1. Verify whether the:
 1. [Case plan](#) has been initiated within 15 days and completed if it has been open beyond 45 calendar days from the date of transfer.
 2. Family is actively participating in services.
 3. Caseworkers are following the monthly [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 4. Safety plan has been developed and monitored if the children or youth remain in the home and a safety threat exists.
 2. Work with caseworkers to resolve any issues or barriers identified in the review.
 3. Continue reviewing cases every 90 calendar days from the FVS case assignment to verify whether continued services are needed.
 4. Request AA approval to keep cases open beyond 180 calendar days from the FVS case assignment and every 90 calendar days thereafter, if services are still needed and [document](#) in a FamLink case note. If the AA does not approve, determine:
 1. Whether the case will be closed.
 2. If a dependency petition will be filed.
 3. If additional information needs to be gathered to decide on closing the case.
2. FVS supervisors may refer to the Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 form as a resource when victims or identified children or youth cannot be located.
3. FVS Cases Transferring from CPS Investigations
When cases transfer from CPS investigations to FVS, FVS caseworkers must:
 1. Upon assignment to the case:
 1. Contact families within seven calendar days.
 2. Follow DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) when working with families with LEP. This includes also following the DCYF Administrative 11.19 Dual

Language Employee Pay policy when caseworkers are dual language employees, as they may provide the language services.

2. 6.03 Access to Services for Individuals with Disabilities policy.
 3. If a safety threat is being monitored through a safety plan, contact:
 1. The family within 72 hours.
 2. All safety plan participants within seven calendar days.
 4. Review the case file, Safety Assessment/Safety Plan DCYF 15-258 in FamLink, and all other case information as it becomes available.
2. Complete the following during the initial contact and subsequent meetings or contact with children or youth and families:
1. Provide the following, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy:
 1. Qualified interpreters to individuals, as needed.
 2. All parents or guardians with the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication.
 2. Assess for present danger.
 3. Take immediate protective action if a child or youth is in present danger.
 4. Identify all individuals living in the home and assess for safety threats and risk.
 5. Document when the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to the parents or guardians in a case note in FamLink, per the DCYF Administrative DCYF 6.03 Access to Services for Individuals with Disabilities policy.
 6. Assess, identify, and refer to appropriate services.
 7. If a safety threat exists and is being monitored through an in-home safety plan, review the safety plan with the family and confirm they have a copy.
 8. Review cases with the supervisor and assess whether to place the child or youth in out-of-home care when there is an identified safety threat that cannot be managed with an in-home safety plan, per the [Safety Assessment](#) policy.
3. Participate in meetings to discuss the case, including the following:
1. Safety, permanency, and well-being needs of the children or youth.
 2. Family's progress in services.

3. Any other identified service needs.
4. Obtain releases of information from parents or guardians or youth age 13 years and older, prior to contacting or sharing any information about a family with collateral contacts and service providers. This includes information being shared about any of the following:
 1. Mental health treatment
 2. Substance abuse treatment
 3. Access to reproductive services
 4. Sexually Transmitted Diseases (STD)
 5. Human Immunodeficiency Virus (HIV)
5. Follow the [Infant Safety Education and Intervention](#) policy for all infants in the household birth to one year and anytime a new infant enters the home.
6. Complete a new Safety Assessment/Safety Plan DCYF 15-258 form when necessary at key decision points, per the [Safety Assessment](#) policy.
7. Conduct routine and universal [domestic violence \(DV\)](#) screenings at key points in a case, i.e., a new intake, [case transfer](#), and reassessment of safety to identify if DV is present.
8. Complete the Commercially Sexually Exploited Child (CSEC) screening tool DCYF 15-476 when there is suspicion, indication, or confirmation that children or youth may be victims of commercial sexual exploitation (CSE).
9. Complete the [Comprehensive Family Evaluation DCYF 10-480](#) form in FamLink within 45 calendar days of the FVS case assignment and every 90 calendar days after the [CFE](#) is approved. If a case is ready for closure prior to the updated CFE completion, input information into a FamLink Transfer/Closing Summary case note.
10. Complete an investigative assessment in FamLink within 60 calendar days when assigned a CPS risk-only intake and follow the [Child Protective Services \(CPS\) Investigation](#) policy.
11. Provide [concrete goods](#) and supports that strengthen the family's ability to safely care for and meet their children's needs, when necessary.
12. Conduct [monthly health and safety visits](#):
 1. For children age five and younger twice a month.
 2. With both parents or guardians, caregivers, and children six and older once a month.
13. Complete the following case planning and service referral activities for children and youth, including those placed out-of-home on a VPA:

1. Conduct a Case Plan Contact involving the parents or guardians, caregivers, children and youth as developmentally appropriate, tribal representatives, if there is reason to know a child is an Indian child, family supports and other applicable providers. This can occur in an FTDM meeting or [Shared Planning Meeting](#) (SPM) if the case plan is initiated as part of that meeting.
 2. Initiate a case plan based on the assessment of the family's needs within:
 1. Fifteen calendar days of assignment.
 2. The CFE in FamLink.
 3. Refer children or youth and families to service providers or community resources, when needed and available. This includes referring children or youth with complex [behavioral health](#) needs for a [Wraparound with Intensive Services \(WiSe\)](#) screen, per the [WiSe](#) policy.
 4. Conduct a [Family Team Decision Meeting \(FTDM\)](#) prior to placement and returning children or youth home, per the [VPA](#) policy.
 5. Develop a [family time and sibling and relative visit plan](#) that includes visits in the least restrictive setting based on risk factors, existing danger, safety threats and protective factors, per the [Family Time and Sibling and Relative Visit](#) policy.
14. Transfer cases to Children and Family Welfare Services (CFWS) Unit when a [dependency petition](#) is filed. If a case is co-assigned and it is within two weeks of case assignment, CPS caseworkers will file the [dependency petition](#).
15. Report to [intake](#) when any child or youth in an open case is believed to be at imminent risk of serious harm or there is a new allegation of child abuse or neglect, per the 2.01 Mandatory Reporting Requirements policy.
16. Submit cases to FVS supervisors for closure when the family:
1. Has completed or is no longer requesting services and there is no present danger or identified safety threats.
 2. Is requesting case closure and there is no present danger or identified safety threat.
 3. Is unable to be located.
4. For non-CPS FVS cases assigned from intakes, caseworkers must:
1. Prior to initial contact with families, review the [intake](#) history and all other case information.
 2. Follow DCYF Administrative policies:

1. 11.19 Dual Language Employee Assignment Pay policy, as they may provide language services.
2. 6.03 Access to Services for Individuals with Disabilities.
3. Complete initial contact with youth or family members within the following timeframes, excluding weekends and holidays:
 1. Seventy-two hours for a request for services.
 2. Twenty-four hours for intakes on runaway youth under age 12 who are currently located at a CRC, Hope Center, or overnight youth shelter.
4. Complete the following during the initial contact with children or youth and families and subsequent meetings, as needed:
 1. Provide the following, per the 6.03 Access to Services for Individuals with Disabilities:
 1. Qualified interpreters to individuals as needed.
 2. All parents or caregivers with the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication.
 2. Assess for present danger. Take immediate protective action if a child or youth is in present danger.
 3. Identify and verify all individuals living in the home and assess for safety threats and risk.
 4. Assess, identify and refer to appropriate services.
 5. Follow the [Infant Safety Education and Intervention](#) policy for all infants in the household birth to one year and anytime a new infant enters the home.
 6. Document when the [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to the parents or guardians in a case note in FamLink, per the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy.
 7. Obtain releases of information from parents or guardians or youth age 13 years and older, prior to contacting or sharing any information about a family with collateral contacts and service providers. This includes information being shared about any of the following:
 1. Mental health treatment
 2. Substance abuse treatment
 3. Access to reproductive services
 4. Sexually Transmitted Diseases (STD)

5. Human Immunodeficiency Virus (HIV)
8. Initiate referrals to service providers or community resources, when needed and available. This includes referring a child or youth with complex behavioral health needs for a [Wraparound with Intensive Services \(WISe\)](#) screen, per the [WISe](#) policy.
9. Complete an [investigative assessment](#) when assigned a CPS risk-only intake and follow the [Child Protective Services \(CPS\) Investigation](#) policy.
10. Complete the CSEC Screening Tool DCYF 15-476 form when there is suspicion, indication, or confirmation that the child or youth may be a victim of [CSEC](#).
11. Provide concrete goods and supports that strengthen the family's ability to safely care for and meet their children or youth's needs, when necessary. Concrete goods must be directly related to the issues of safety and risk identified in the assessment.
12. Complete the CFE in FamLink by 45 calendar days of the intake and update it every 90 calendar days if the case remains open. If a case is ready for closure prior to the updated CFE completion, input information into a FamLink Transfer/Closing Summary case note.
13. Inform the parents or guardians that the following activities will occur and complete the following:
 1. Conduct monthly [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#).
 2. Schedule and participate in a Case Plan Contact involving the parents or guardians, caregivers, and children and youth as developmentally appropriate, representatives of the Indian child's tribe or designee of that tribe, family supports and other applicable providers. This can occur in an FTDM or SPM if the case plan is developed as part of that meeting.
 3. Initiate a case plan, within 15 calendar days of assignment, based on the assessment of the family's needs.
 4. Complete routine and universal [DV](#) screening and re-assessment of safety to identify if [DV](#) is present.
5. Complete the following additional case planning and service referral activities for children or youth placed out-of-home on a VPA:
 1. Conduct a FTDM prior to placement and returning children or youth home, per the [VPA](#) policy.

2. Develop a parent, child, sibling, and relative visit plan, per the [Family Time and Sibling and Relatives Visits](#) policy, that includes visits in the least restrictive setting based on:
 1. Risk factors
 2. Existing danger
 3. Safety threats
 4. Protective factors
6. Submit cases to supervisors for closure when the family:
 1. Has completed or is no longer requesting services and there is no present danger or identified safety threat.
 2. Is requesting case closure and there is no present danger or identified safety threats.
 3. The family declines services upon contact. If this occurs a CFE is not required and the information must be [documented](#) in a case note.
 4. Is unable to be located.

Forms

[Case Plan DCYF 15-259A](#)

Commercially Sexually Exploited Child (CSEC) Screen DCYF 15-476 (located in the Forms repository on the DCYF intranet)

[Comprehensive Family Evaluation DCYF 10-480](#)

[Consent DCYF 14-012](#)

[Indian Identity Request DCYF 09-761](#)

LD/CPS Investigative Assessment DCYF 09-967 (located in the Forms repository on the DCYF intranet)

[Safety Assessment/Safety Plan DCYF 15-258](#)

Voluntary Agreement Plan DCYF 09-004B (located in the Forms repository on the DCYF intranet)

Resources

[Case Assignment policy](#)

[Case Plan policy](#)

[Case Transfers policy](#)

[Child Protective Services \(CPS\) Investigation policy](#)

[CPS Service Delivery policy](#)

[Concrete Goods policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

DCYF Administrative 11.19 Dual Language Employee Assignment Pay policy

DCYF Administrative 2.01 Mandatory Reporting Requirements policy

[Dependency Petition Process policy](#)

[Documentation policy](#)

[Domestic Violence policy](#)

[Family Assessment policy](#)

[Family Team Decision Making Meetings policy](#)

[Family Time and Sibling and Relative Visits](#)

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF Intranet)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Active Efforts and Tribal Collaboration policy](#)

[Reason to Know](#)

[Tribal State Memoranda of Agreements \(MOA\) policy](#)

[Infant Safety Education and Intervention policy](#)

[Intake Process and Response policy](#)

[Monthly Supervisor Case Reviews policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication](#)

[Safety Plan policy](#)

[Shared Planning Meetings policy](#)

[Social Worker's Practice Guide to Domestic Violence DCYF 22-1314](#)

[Structured Decision Making Risk Assessment \(SDMRA\) policy](#)

[Voluntary Placement Agreement \(VPA\) policy](#)

[Wraparound with Intensive Services \(WISe\) policy](#)

3100. Family Reconciliation Services

3100. Family Reconciliation Services admin Wed, 07/25/2018 - 13:18

Applies to: This policy applies to caseworkers.

Policy Number & Title: 3100. Family Reconciliation Services

Effective Date: July 23, 2024

Purpose

The purpose of this policy is to provide guidance to employees on Family Reconciliation Services (FRS). FRS are voluntary services designed to resolve problems related to family conflict, at-risk youth (ARY), or youth in need of services (CHINS). These services are provided to youth age 12 through 17 years old and their families to:

- Resolve the conflict.
- Alleviate personal and family situations which present a serious and imminent threat to the health and stability of the family.
- Maintain the family unit and avoid out-of-home placement when it is safe to do so.
- Accomplish reunification of the family if out-of-home placement occurs.

Authority

[Chapter 13.32A RCW](#) Family Reconciliation Act

[RCW 43.185C.290](#) Youth services-Child admitted to secure facility-Maximum hours of custody-Evaluation for semi-secure facility or release to department of social and health services-Parental right to remove child-Reconciliation effort-Information to parent and child-Written statement of services and rights-Crisis residential center immunity from liability

[RCW 43.185C.315](#) Youth services-HOPE centers-Establishment-Requirements

[RCW 43.330.726](#) Youth supports and housing—Community support teams

Policy

Caseworkers must:

1. For FRS cases:
 1. Contact the youth ages 12 through 17 years old and their parents or legal guardians within 24 hours of being assigned the case, excluding weekends and holidays, to offer FRS services.
 2. Complete a Family Assessment with the involvement of a multidisciplinary team, if applicable, to determine available services to keep the family intact

3. Offer and refer youth and their family to appropriate community and in-home services.
 4. Provide:
 1. The [Public Notice of Nondiscrimination DCYF HR_0012](#) publication to the youth and their family, per the [DCYF Administrative 6.03 Access to Services For Individuals With Disabilities](#) policy.
 2. FRS to the youth and family even if they are already involved in a Community Support Team (CST) and they have agreed to continue working with FRS.
 5. Assist the parents or guardians or youth with filing:
 1. An ARY petition.
 2. A CHINS petition on behalf of the youth when:
 1. A dependency is not being pursued.
 2. The parents or guardians have not filed an ARY petition.
 3. DCYF is asking the court to approve an out-of-home placement.
 6. Follow the:
 1. [Indian Child Welfare \(ICW\) Reason to Know](#) policy to determine if there is reason to know a child is or may be an Indian child.
 2. Applicable ICW policies, if the child is or may be an Indian child, including:
 1. [Tribal/State Memoranda of Agreement](#), if there is one in place.
 2. Active Efforts and Tribal Collaboration.
 3. [Commercially Sexually Exploited Children \(CSEC\)](#) policy to assess whether the youth is a victim of CSE.
 4. Criteria outlined in [RCW 13.32A.140](#) when determining whether to file a child in needs of services (CHINS) petition.
2. For FRS youth who are:
 1. Being sheltered in a crisis residential center, facility, or specialized home without the permission of the parents or guardians:
 1. Contact the youth.
 2. Make a good faith attempt to notify the parent or guardian that a report was received, after contacting the youth.
 2. Seeking or receiving protected health care services, offer to make referrals or provide resources to:

1. Behavioral
2. Reproductive
3. Gender-affirming care

Forms

Family Assessment DCYF 15-279 (Located in the Forms repository on the DCYF intranet)

Resources

[Commercially Sexually Exploited Children \(CSEC\) policy](#)

[DCYF Administrative 6.03 Access to Services For Individuals With Disabilities policy](#)

Family Reconciliation Services Procedures (Located on the DCYF intranet under Policy & Practice, under Policies & Procedures)

[ICW Reason to Know policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012 publication 15-279](#)

Original Date: December 15, 1996

Revised Date: July 23, 2024

Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

4000. Child Welfare Services

4000. Child Welfare Services admin Wed, 07/25/2018 - 13:19

41211. Safety of Newborn Children Act

41211. Safety of Newborn Children Act admin Wed, 07/25/2018 - 13:19

Procedure

1. DCYF child welfare employees must accept an intake of a newborn transferred (abandoned) under the Safety of Newborn Children Act per the [Intake](#) policy.
2. Responsibilities:
 1. CFWS Supervisor assigns intake to a CFWS caseworker
 2. CFWS caseworker:
 1. Has face-to-face contact with the newborn and gathers available information from hospital and other caregivers.

2. Locates and places the newborn in emergency out-of-home, when able to be released from the hospital.
3. Verifies CA custody through a law enforcement transfer of custody.
4. Drafts and files a dependency petition.
5. Completes the child information/placement referral [DCYF 15-300](#) form based on available information and provides information to the caregiver/foster parent.
6. Schedules shared planning meeting to identify permanent plan and placement.
7. Consults with supervisor as necessary.

4122. Case Transfers

4122. Case Transfers admin Wed, 07/25/2018 - 13:21

Original Date: March 1, 2010

Revised Date: June 15, 2024

Sunset Review Date: June 30, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare, and Ruben Reeves, Assistant Secretary of Licensing Division

Purpose

The purpose of this policy is to provide guidance when transferring cases between units, programs, offices, and regions to prioritize safety, permanency, and well-being for children and youth and the families' progress in services.

Scope

This policy applies to child welfare (CW) and Licensing Division (LD) child protective services (CPS) employees.

Policy

1. CW and LD CPS employees must:
 1. Coordinate the transfer of information, documentation, and services to promote safety, permanency, well-being for children and youth, and the family's progress in services when transferring cases.
 2. Verify whether there is [reason to know](#) children are or may be Indian children.
 3. Follow the [Case Assignment](#) policy when determining primary case assignments and emergent responses.

2. Supervisors must complete the following when transferring cases and differing opinions or unresolved issues occur:
 1. Make efforts to resolve differences at the lowest level possible.
 2. Consult with the following if differences are unresolved. For:
 1. CW:
 1. Area administrator
 2. Deputy regional administrator
 2. LD:
 1. Area administrator
 2. Senior administrator

Procedures

1. Case Transfers Between Units or Programs in the Same Office
 1. When cases transfer between units or programs after filing a dependency or change in program:
 1. Sending caseworkers may:
 1. Request to transfer cases.
 2. Follow the Initial Dependency Case Transfer Guide DCYF and document the applicable tasks outlined in the guide when transferring initial dependency cases.
 2. Sending supervisors must discuss cases transferring with receiving supervisors within three calendar days of the request to transfer.
 3. Receiving supervisors must complete the following when there is agreement to transfer the case:
 1. Assign cases to caseworkers, within five calendar days of the request for transfer.
 2. Schedule case transfer staffings with sending and receiving caseworkers.
 4. Sending and receiving supervisors may follow the Initial Dependency Case Transfer Guide to determine what needs to be discussed during transfer staffing's when transferring dependency cases.
 5. Receiving caseworkers must review the case history, including [Child Health and Education Tracking \(CHET\)](#) reports, if applicable, and participate in case transfer staffing's.

2. When a [guardianship](#) has been identified for subsidy:
 1. Caseworkers must provide the required documentation to the GAP gatekeeper, per the [Guardianship Assistance Program \(GAP\) and Extended Guardianship Assistance Program \(EGAP\)](#) policy.
 2. Children and Family Welfare Services (CFWS) supervisors must co-assign the subsidy case with the caseworker and GAP gatekeeper.
 3. GAP gatekeepers must review the subsidy documentation and participate in case staffing, if requested.
3. When children or youth become legally-free and the permanent plan is adoption:
 1. CFWS caseworkers must request to transfer the case.
 2. CFWS supervisors must complete the following within five calendar days of the court order [terminating parental rights](#):
 1. Schedule case transfer staffing's with sending and receiving supervisors and caseworkers.
 2. Transfer cases to adoptions.
 3. Adoption supervisors must assign cases to adoption caseworkers within five calendar days.
 4. Adoption caseworkers must review the case history and participate in case transfer staffing's.
4. When children or youth are legally-free and their permanent plan changes to a plan other than adoption:
 1. Adoption caseworkers may request to transfer a case.
 2. Adoption supervisors may discuss case transferring with receiving CFWS supervisors within three calendar days of the changed court order. If a determination is made to:
 1. Transfer the case to CFWS, they must complete the following within five calendar days of the court ordered change:
 1. Schedule case transfer staffing's with the sending and receiving CFWS and adoption supervisors and caseworkers.
 2. Assign cases to a CFWS supervisor.
 2. Maintain the case in adoptions:
 1. Notify the adoption caseworker.
 2. Follow Policy Section 2 if there are differing opinions or unresolved issues.

3. CFWS supervisors must assign cases to CFWS caseworkers within five calendar days of being assigned the case.
4. CFWS caseworkers must review the case history and participate in case transfer staffing's.

2. Transfers Between CW Offices

1. When cases transfer between CW offices:

1. Sending caseworkers may request a transfer of the primary case assignment between CW offices for non-court involved cases, if any of the following occurs:
 1. Parents or guardians establish residency in a different county and continued assessment or services are needed or requested.
 2. A parent or guardian has been residing in a licensed residential treatment facility (RTF) for inpatient substance use disorder (SUD) treatment with their children for a minimum of 30 calendar days.
2. Sending supervisors must discuss cases transferring with receiving supervisors within three calendar days of the request to transfer.
3. Receiving supervisors must complete the following within five calendar days of the request to transfer the case:
 1. Schedule case transfer staffing's with the sending and receiving caseworkers.
 2. Assign cases to receiving caseworkers.
4. Receiving caseworkers must review the case history and participate in case transfer staffing's.

2. When requesting a transfer of primary case assignment, excluding legally-free cases, between offices for **court-involved** cases:

1. Sending caseworkers must:
 1. Follow the [Legal Jurisdiction and Office Assignment](#) policy.
 2. Request to transfer the case.
2. Sending supervisors must:
 1. Follow the [Legal Jurisdiction and Office Assignment](#) policy.
 2. Verify there is a court order by the receiving county's court accepting legal jurisdiction.
 3. Complete the transfer within five calendar days of receiving the court order to transfer [legal jurisdiction](#).

3. Receiving supervisors must assign the case to a receiving caseworker.
 4. Receiving caseworkers must review the case history, including [CHET](#) reports if applicable, and participate in case transfer staffing's.
3. Transferring [Extended Foster Care \(EFC\)](#) Cases Between Offices
- When EFC cases transfer between offices:
1. Sending caseworkers may request a transfer of the primary case assignment to the office in the county where the youth resides for youth who have:
 1. Established residency in a different county and have lived in that county for at least three months.
 2. Entered into [EFC](#) while in the custody of DCYF Juvenile Rehabilitation Division, Department of Corrections, county detention, or jail and were released to a county outside of the county in which the intake was assigned.
 2. Sending supervisors must:
 1. Follow the [Legal Jurisdiction and Office Assignment](#) policy.
 2. Verify there is a court order by the receiving county's court accepting legal jurisdiction.
 3. Complete the transfer within five calendar days of receiving the court order accepting the transfer of [legal jurisdiction](#).
 3. Receiving supervisors must assign cases to caseworkers:
 1. Within five calendar days of receiving the request for transfer.
 2. Who have experience working with youth, when possible.
 4. Receiving caseworkers must review the case history and refer to the [EFC](#) policy.
4. CW employees must follow the [Legal Jurisdiction and Office Assignment](#) policy when transferring cases to tribes, once tribal jurisdiction has been established.
5. CPS Case Transfers Between LD and CW Offices
- When CPS cases transfer between LD and CW offices:
1. LD CPS supervisors must request a staffing with the CW CPS supervisor to:
 1. Request case co-assignment.
 2. Share information.
 2. LD CPS investigators must:
 1. Share information with caseworkers if transferring a case to begin the dependency process and assist in the dependency writing process.
 2. Complete the CPS and licensing investigations.

3. CW supervisors must assign the case to caseworkers.
4. Caseworkers must review the case and participate in case transfer staffings.
6. Caseworkers must document case transfer summaries into FamLink case notes under “Transfer/Closing Summary” within seven calendar days, per the [Documentation](#) policy.
7. Supervisors must complete the following when case transfer staffing’s occur:
 1. Verify the case documentation is complete.
 2. Summarize and document case transfer staffing’s into FamLink supervisor case notes within seven calendar days.

Resources

[Case Assignment policy](#)

[Child Health and Education Tracking \(CHET\) policy](#)

[Documentation policy](#)

[Guardianships policy](#)

[Guardianship Assistance Program \(GAP\) and Extended Guardianship Assistance Program \(EGAP\) policy](#)

[Indian Child Welfare \(ICW\) Reason to Know policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

Initial Dependency Case Transfer Guide (located on the Child Welfare intranet, under Programs, CFWS, and Guides Tools)

[Legal Jurisdiction and Office Assignment policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

[Termination of Parental Rights \(TPR\)](#)

4201. Emergency Planning for Birth Parents and Legal Guardians

4201. Emergency Planning for Birth Parents and Legal Guardians admin Wed, 07/25/2018 - 13:22

Purpose

To store current birth parents or legal guardians name, address and phone number and emergency contact information for all children in out-of-home care, in case of a disaster or emergency.

Policy

1. The assigned child welfare caseworker is responsible for ensuring birth parents or legal guardians of children placed in out-of-home care have the following information documented in the information management system:
 1. Emergency Contact Name; Recommend One In-State and One Out-of-State Contact
 2. Current Address for Birth Parent/Legal Guardian and Emergency Contact Persons
 3. Current Phone Numbers for Birth Parent/Legal Guardian and Emergency Contact Persons, as applicable.
2. The child welfare caseworker is responsible for reviewing and updating this information as change occurs and at a minimum annually.

4211. Notification to Foreign Consulates

4211. Notification to Foreign Consulates admin Wed, 07/25/2018 - 13:23

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Original Date: June 7, 2012

Revised Date: July 1, 2024

Policy Review: July 31, 2028

Purpose

Verify foreign consulates are notified when a child who is the citizen of another country becomes the focus of a dependency proceeding. This policy is not to be interpreted as a check on immigration status of any member of a family but rather citizenship of a country outside the United States.

Scope

This policy applies to caseworkers.

Laws

[Vienna and United Nations Treaty Collection](#)

Policy

1. Caseworkers must:
 1. Assess the citizenship of a foreign country of a child when the child is placed in out-of-home care in a dependency proceeding.
 2. Provide notice, under federal treaty obligations, to the foreign consulate when obtaining legal custody of a child who is a foreign national.

3. Provide access to interpreters and culturally relevant services to Limited English Proficient (LEP) clients from certified or authorized contracted translators as listed in the provisions of DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy.

Procedures

1. Caseworkers must:
 1. Determine and document the child's citizenship of a foreign country at the time a child is placed in care by asking the parent (or the child, depending on age and development) if the child is a citizen of a foreign country. If the answer is "yes," ask, "What foreign country?"
 2. For children who are in the care and custody of the Department of Children, Youth, and Families (DCYF), as soon as it is known whether they are:
 1. A foreign national, notify the foreign consulate by faxing the [Notice to Foreign Consulate of Child Protection Proceedings DCYF 15-402](#) of the child's or parents' home country. Notification to the consulate must be made as soon as possible but no later than 30 calendar days.
Note: The address of the nearest consular office for a foreign country can be found at [Foreign Consular Offices in the United States](#).
 2. A member of a Canadian First Nation, assess Canadian citizenship and consult with the Office of Attorney General per the [Indian Child Welfare Case Management Services for Children and Families of Non-Federally Recognized Tribes and Canadian First Nations](#) policy.
 3. If requested by the consulate:
 1. Obtain a signed [Consent to release Information DCYF 14-012](#) form from the parents to share information with the consulate; and
 2. Provide identified services to the family.
 4. Document in FamLink any:
 1. Foreign citizenship of the child on the Person Management page.
 2. Notification to a consulate by uploading the [Notice to Foreign Consulate of Child Protection Proceedings DCYF 15-402](#) form into FamLink.

Forms

[Consent to release Information DCYF 14-012](#)

[Notice to Foreign Consulate of Child Protection Proceedings DCYF 15-402](#)

Resources

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

[Indian Child Welfare Case Management Services for Children and Families of Non-Federally Recognized Tribes and Canadian First Nations policy](#)

[United States Department of State Consulate by Country](#)

4250. Out-of-Home Placements

4250. Out-of-Home Placements admin Wed, 07/25/2018 - 13:29

Original Date: October 20, 2013

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance on:

- Using:
 - Active efforts to prevent the children’s removal or promote the timely reunification of Indian families when there is reason to know children are or may be Indian children.
 - Reasonable efforts in determining when to place children or youth in out-of-home care.
- Prioritizing:
 - Parent’s, guardian’s, child’s, or youth’s placement preferences.
 - Relative and suitable person placements.
 - Tribal placement preferences.
- Providing:
 - A placement that meets the children’s and youth’s safety, health, stability, and well-being needs and is in their best interest.
 - The children’s or youth’s health care information at time of placement.
- Monitoring children’s and youth’s safety, health, stability, and well-being.
- Obtaining vital records.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[Chapter 13.38 RCW](#) Indian Child Welfare Act

[Chapter 26.44 RCW](#) Abuse of Children

[RCW 71A.28.010](#) Person-centered service plan-Intent

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[RCW 74.15.020](#) Definitions

[RCW 74.15.090](#) Licenses required for agencies

[PL 103-382](#) Multiethnic Placement Act (MEPA) of 1994

Policy

1. Caseworkers must:
 1. Follow these policies when there are placement decisions:
 1. [Indian Child Welfare \(ICW\) Dependency Cases](#) policy when there is reason to know children are or may be Indian children.
 2. [Family Team Decision Making \(FTDM\) meeting](#).
 3. Relative Search and Notification.
 2. Have legal authority for the placement and care authority (PCA) of children or youth before placing them in out-of-home care.
 3. Prioritize placing with siblings, relatives, and suitable persons.
 4. Obtain and provide the following information to caregivers, the children's or youth's:
 1. Healthcare information.
 2. Birth certificates.
 3. Social security numbers (SSN) and cards.
2. LD workers must notify caseworkers when there is an open case and foster children or youth are placed in a licensed home and the caregiver's biological, adopted, or guardianship children or youth are removed by:
 1. Law enforcement (LE).
 2. Hospital hold.

Procedures

1. Determining Need for Out-of-Home Care

1. Caseworkers must complete the following when considering out-of-home care:
 1. Contact the tribes if there is reason to know children are or may be Indian children, per the [ICW Child Protective Services Investigation and Family Assessment Response](#) policy.
 2. Use the safety framework to identify:
 1. The safety of children and youth, including assessing for [present danger](#) and [impending danger](#).
 2. If an in-home protective action plan or an in-home safety plan is necessary and appropriate to prevent removal.
 3. Provide:
 1. Active efforts to prevent the children's removal or promote the timely reunification of Indian families, per the [ICW Active Efforts and Tribal Collaboration](#) policy if there is reason to know children are or may be Indian children.
 2. [Reasonable efforts](#) to prevent the need for placement in out-of-home care, including, but not limited to:
 1. Offering or providing services.
 2. Removing the individuals or environmental threat from the home rather than the children or youth.
 3. Creating a safety plan to control or manage the safety threat.
 4. Consider whether continued out-of-home placement is necessary if either occur:
 1. LE:
 1. Places a child or youth in protective custody (PC).
 2. Transfers custody to DCYF with a signed Child Custody Transfer DCYF 10-157.
 2. A physician, administrator of a hospital, or similar institution:
 1. Places the child or youth on a hospital hold.
 2. Transfers custody to DCYF with a signed Child Custody Transfer DCYF 10-157. Caseworkers must follow the [Hospital Holds](#) policy.

5. Conduct:
 1. A Safe Child Consultation, per the Safe Child Consultation Guide document.
 2. An FTDM.
 6. Seek removal of children or youth from the home if one of the following apply:
 1. The children or youth are in present danger and the [Protective Action Plan](#) cannot maintain them safely in the home of their parent or legal guardian.
 2. A [safety threat](#) is identified for the children or youth while in the care of their parent or legal guardian, and a safety plan cannot adequately control the safety threat.
 7. Follow the [Dependency Petition Process](#) policy to:
 1. Petition the court for legal authority to remove the children and youth.
 2. Request a shelter care hearing occur within 72-hours of their removal.
 8. If children or youth are in the PCA of DCYF and placed in licensed or unlicensed care, and they are in present danger or there is a safety threat, caseworkers must follow the [Placement Moves](#) policy.
 9. If biological, adopted, or guardianship children or youth of a licensed provider is in present danger or there is a safety threat, and legal authority is needed to remove the children or youth:
 1. Contact LE to assess for PC.
 2. Notify:
 1. Intake per the [Intake Process and Response](#) policy.
 2. The LD worker.
 10. Refer children or youth with a developmental disability to [Developmental Disabilities Administration \(DDA\)](#) when they are being considered for out-of-home-placement and there is no alleged child abuse or neglect (CA/N).
2. LD CPS investigators must complete the following when considering out-of-home placement for biological, adopted, or guardianship children or youth of a licensed provider:
 1. Discuss with their supervisor.

2. Contact:

1. LE to assess for PC when there is imminent physical harm due to CA/N.
2. The tribe if there is reason to know children are or may be Indian children, per the ICW Child Protective Services Investigation and Family Assessment Response policy.
3. Recommend removal of children and youth if one of the following apply:
 1. They are in [present danger](#) or at risk of imminent physical harm and the safety plan cannot maintain them safely in the home of their parent or guardian.
 2. A [safety threat](#) is identified for them while in the care of their parent or guardian, and at least one of the following are met:
 1. Reasonable efforts to prevent placement have failed including, removing the individuals or environmental threat from the home rather than the children or youth. If services are needed LD must:
 1. Notify the caseworker.
 2. Follow the [Safety Plan](#) policy.
 2. A safety plan cannot adequately control or manage the safety threat.
 3. LE has:
 1. Placed them in PC.
 2. Transferred custody to DCYF with a signed Child Custody Transfer DCYF 10-157 form.
3. A physician, administrator of a hospital, or similar institution believes holding the child or youth is necessary to prevent imminent physical harm due to CA/N, including that which results from sexual abuse, sexual exploitation, or a pattern of severe neglect if released to their parent or guardian and has placed the child on a hospital hold, caseworkers must follow the [Hospital Holds](#) policy.
4. They are biological, adopted, or guardianship children or youth of a licensed provider and are in present danger or there is a safety threat and legal authority is needed to remove them, LD employees must contact either:

1. LE
 2. The caseworker or supervisor
 4. Refer children or youth with a developmental disability to [Developmental Disabilities Administration](#) when they are being considered for out-of-home-placement and there is no alleged child abuse or neglect (CA/N).
2. Legal Authority for Out-of-Home Placements
- Caseworkers must:
1. Have legal authority for the PCA of children or youth before placing them in out-of-home care through one of the following, a:
 1. Voluntary Placement Agreement (VPA), following these policies:
 1. [VPA](#).
 2. [ICW Dependency Cases](#), if there is reason to know children are or may be Indian children.
 2. LE officer:
 1. Placed the child or youth in PC.
 2. Signed the Child Custody Transfer DCYF 10-157 form.
 3. Hospital administrator or physician has:
 1. Placed the child or youth on a hospital hold.
 2. Signed the Child Custody Transfer DCYF 10-157 form.
 4. Court entered an order in either a dependency case or Child in Need of Services (CHINS) case that authorized placement of them in the PCA of DCYF.
 5. Court order authorizes DCYF to take custody of them through a Motion for Order to Take Child into Custody.
 2. Seek legal authority for a placement even if parents or guardians have arranged an alternate placement beforehand, and there is:
 1. Impending danger to children or youth.
 2. Their safety cannot be managed in their parent's or guardian's care.
 3. Complete the following if a guardianship of a minor is pursued by the parents:
 1. Continue to assess the children's and youth's [safety](#) and [risk](#).

2. Obtain legal authority for the placement if there is a safety threat to the children and youth that cannot be managed in the parent's or guardian's care.
 3. Not provide legal advice to parents or guardians.
3. Placement in Out-of-Home Care
- Caseworkers must:
1. Complete the following when children and youth are placed in out-of-home care:
 1. By a:
 1. Protective custody or hospital hold:
 1. Obtain a signed Child Custody Transfer DCYF10-157 form.
 2. Upload the signed Child Custody Transfer DCYF 10-157 form in FamLink.
 3. Make [diligent efforts](#) to provide a copy of the signed Child Custody Transfer 10-157 to all parents and guardians.
 4. Follow Procedures Section 1 to determine if DCYF should pursue continued out-of-home placement.
 2. Signed Child Custody Transfer DCYF 10-157:
 1. Make diligent efforts to provide a completed Temporary Custody Notification DCYF 09-731 form to the parents and guardians.
 2. Upload the completed and signed Temporary Custody Notification DCYF 09-731 form into FamLink.
 2. Make reasonable efforts to assess the parent or guardian that was not residing with the children or youth at the time of removal to determine their ability to care for the children or youth.
 2. Follow the [Relative Search and Notification](#) policy and ask parents and guardians, and children and youth at time of removal for their placement preferences.
 3. Notify the:
 1. National Crime Information Center (NCIC) Background Check Unit (BCU) immediately for emergent placements for children or youth being placed with unlicensed relatives and suitable persons by:
 1. Either:
 1. Calling NCIC BCU at 1-800-998-3898.
 2. Emailing [NCIC](#).

2. Following the [Background Checks](#) policy.
2. Fiduciaries by documenting the child's or youth's placement or placement change in the FamLink Child Location within three calendar days of their placement with:
 1. Licensed caregivers for emergent and non-emergent placements.
 2. Relatives or suitable persons non-emergent placements.
4. Follow the Timely & Accurate Placement Entry User Guide document when individuals are conditionally approved.
5. Notify the appropriate foreign consulate and follow the [Notification to Foreign Consulate](#) policy if the children or youth are both:
 1. Citizens of another country.
 2. Placed in out-of-home care.
6. Follow the memorandum of Understanding with Mexico if children or youth are citizens of Mexico.
7. Confirm placement has been documented by either NCIC BCU or fiduciaries, if not contact them immediately, as placement in FamLink initiates the following:
 1. [Relative Search and Notification](#).
 2. [Child Health and Education Tracking \(CHET\)](#) screen.
 3. IV-E determination.
 4. Foster care maintenance payment, if applicable.
 5. Apple Health Core Connections (AHCC) Medicaid coverage.
8. Follow:
 1. The DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) when a parent, guardian, child, or youth has LEP.
 2. [6.04 Supporting LGBTQIA+ Individuals](#) for all children or youth involved in an open child welfare case.
 2. Child welfare policies:
 1. [Notification of Court Hearings and Information Sharing with Out-of-Home Caregivers](#), to inform caregivers about their right to be present and participate in court hearings and share important information about the children and youth.

2. [Placement Moves](#), if children or youth are being moved from one out-of-home placement to another.
3. [Behavioral Rehabilitation Services \(BRS\)](#), if children or youth have behavioral issues and need a higher level of services.
4. [Placement-Intensive Resources](#) and [Interstate Compact on the Placement of Children](#) policies if out-of-state placement is being considered.

4. Placement Setting Decisions

Caseworkers must:

1. Make out-of-home placement decisions based on the best interest of the children and youth and parent, guardian, child, or youth preference, in the following order:
 1. Licensed or unlicensed relatives or suitable persons.
 2. Licensed general foster parents.
 3. Licensed group care facilities.
2. Follow these policies:
 1. [ICW Placement Preferences](#) when there is reason to know children are or may be Indian children.
 2. [Relative Search and Notification](#).
 3. [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) when placing with unlicensed caregivers.
 4. [Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents](#) when placing with licensed caregivers.
3. Place children and youth with:
 1. Relatives, suitable persons or licensed placements that are in their best interest and promotes their safety, health, stability, and well-being needs, including:
 1. The least restrictive placement necessary to meet the children's or youth's needs.
 2. In close proximity to the parent or guardian.
 3. Allowing the children or youth to remain in the same school when it is reasonable and practical. Complete the following when necessary to maintain their enrollment:
 1. Conduct transportation planning.

2. Provide the [School Notification DCYF 27-093](#) form to the school.
 3. Follow the [Educational Services and Planning Early Childhood Development K-12 and Post-Secondary](#) policy.
 4. With [siblings](#), unless one of the exceptions in Procedures Section 5. applies.
 5. Placement settings that provide stability and are least likely to result in placement moves.
 4. Place children and youth with general foster parents or in group care only if an approved [relative or suitable person placement](#) is not available by:
 1. Contact previous caregivers if children or youth return to out-of-home care and:
 2. Considering preferences such as sibling relationships, ethnicity, culture, and religion when matching children and youth to foster homes. Race, color, or national origin of foster parents or children and youth must not be the basis for any delay or denial of placement.
 3. Continuing to make efforts to place children and youth with relatives or suitable persons throughout the life of the case.
 5. Contact previous caregivers if children or youth return to out-of-home care and:
 1. There are no relatives or suitable persons approved or available for placement.
 2. The caregiver is available, willing, and able to meet their needs.
 3. Placement with that caregiver is in their best interest.
 6. Follow the [DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals](#) policy when making placement decisions for children or youth that are exploring or identify as LGTBQIA+.
5. Sibling Placements
Caseworkers must:
 1. Place siblings together, unless one of the following exceptions apply:
 1. Placing siblings together would negatively impact one or both of the children's or youth's health, safety, or well-being. If this occurs after placement, hold an FTDM to determine the sibling that will be moved.
 2. Children or youth are admitted into detention, psychiatric hospital, or a residential treatment facility to meet their needs.

3. A sibling with a physical, emotional, or mental condition requires specialized services to accomplish specific therapeutic goals that cannot be met in the placement with their siblings. If this applies, the sibling is only placed apart from their siblings until the therapeutic goal is accomplished.
 4. An abusive relationship between siblings exists and therapy is not effective.
 5. A suitable relative is available and placement with them is in the children's and youth's best interest.
 6. A court order prohibits DCYF from placing siblings together.
2. Complete the following if siblings are not placed together and an exception is needed:
 1. Document the reason for the sibling exception on the FamLink Sibling Exception tab on the visit plan.
 2. Name the visit plan "Sibling Placement Exception MM/DD/YY.
 3. Obtain area administrator approval.
 3. Arrange sibling visits if siblings are not placed together, per the [Family Time and Siblings and Relatives Visits](#) policy.
 4. Determine communication between children and youth placed in out-of-home care and their parents or guardians, per the [Outside Communication for Children in Out-of-Home Care](#) policy.
 5. Continually assess placing siblings together if they are placed separately, and place together if the conditions requiring separation no longer apply.
6. Health Care and Other Necessary Information
Caseworkers must at the time of placement or as soon as possible:
 1. Follow the [Health Care Services for Children and Youth Placed in Out-of-Home Care](#) policy, including obtaining an initial health screen for children or youth as soon as possible, but no later than five calendar days after the original placement date.
 2. Provide caregivers the following:
 1. Forms:
 1. [Placement Agreement DCYF 15-281](#)
 2. [DCYF Caregiver Authorization DCYF 10-454](#)
 3. [Child Information and Placement Referral \(CHIPR\) DCYF 15-300](#)
 2. Information:
 1. Voucher for Interim Pharmacy and Medial Services for Foster Children.

3. Verify death, marriage, and divorce certificates, if applicable, using either website:
 1. DOH
 2. CDC Vital Records
 4. Not provide information obtained from the [DOH](#) website, e.g., screenshots or printouts, externally as verification of birth, death, marriage, divorce or for school enrollment purposes.
 5. When children or youth request to update their names or genders on their birth certificates follow [DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals](#) policy.
8. Placement Activities
- Caseworkers must:
1. Complete a safety assessment at key points in the case, per the [Safety Assessment](#) policy.
 2. Follow these policies when children are placed:
 1. [Family Time and Sibling and Relative Visits](#) to coordinate visits between children and youth and their parents or guardians, and siblings.
 2. [Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents](#) to monitor the health and safety needs of children and youth.
 3. [Outside Communication for Children in Out-of-Home Care](#) to verify the children and youth are maintaining safe family connections.
 4. [Case Plan](#) to create case plans for children, youth, and families.
 5. [Family Assessment](#) to address changes in behaviors and attitudes related to safety.
 6. [Return Home](#) assess conditions for return home.
9. Documentation
- Caseworkers must:
1. Document the following in FamLink:
 1. Placement by documenting:
 1. The call or email to NCIC for emergent relative or suitable persons placements.
 2. Using the Timely & Accurate Placement Entry User Guide document.
 2. Active efforts, if there is reason to know children are or may be Indian children, per the following:

1. Washington State ICWA placement preferences, per [RCW 13.38.180](#).
2. [ICW Dependency Cases](#) policy.
3. Tribal placement preferences as outlined in the ICW Dependency Cases policy.
3. Reasonable efforts to prevent the removal or to reunify the family, including a description of the services that were offered or provided.
4. Efforts to:
 1. Support the caregivers and children and youth in placement.
 2. Place siblings together, this includes the exceptions in Procedures Section 6. for each child or youth on the Sibling/Incarcerated Parent Visit tab on the Treatment Planning page.
5. Children's and youth's routine and special needs related to the following, including, but not limited to:
 1. Safety
 2. Mental health
 3. Medical
 4. Culture
 5. Education
 6. Religion
2. Upload the following signed forms after providing them to the caregiver, as applicable:
 1. Child Information and Placement Referral DCYF 15-300
 2. Placement Agreement DCYF 15-281
 3. [Home Inspection Checklist \(Kinship\) DCYF 10-453](#)

Forms

[Background Check Authorization DCYF 09-653](#)

Child Custody Transfer DCYF 10-157 (located in the Forms Repository on the DCYF intranet)

[Child Information and Placement Referral DCYF 15-300](#)

Child Welfare Provider and Placement Request DCYF 10-065 (located in the Forms repository on the DCYF intranet)

[Concurrent TANF Benefits/Family Reunification Notice of Removal from TANF Home DCYF 15-362](#)

[Consent DCYF 14-012](#)

[DCYF Caregiver Authorization DCYF 10-454](#)

[Home Inspection Checklist \(Kinship\) DCYF 10-453](#)

Notification to Parents DCYF16-219 (located in the Forms Repository on the DCYF intranet)

[Placement Agreement DCYF 15-281](#)

[Protective Action Plan](#)

[School Notification DCYF 09-093](#)

Temporary Custody Notification DCYF 09-731 (located in the Forms Repository on the DCYF intranet)

Resources

[Active, Diligent, and Reasonable Efforts policy](#)

[Background Checks policy](#)

[Behavioral Rehabilitation Services \(BRS\) policy](#)

[Case Plan policy](#)

[Child Health and Education Tracking \(CHET\) policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

[DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy](#)

[Documentation policy](#)

[Family Assessment policy](#)

[Family Team Decision Making \(FTDM\) Meeting policy](#)

[Family Time and Sibling and Relative Visits policy](#)

[Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents policy](#)

[Health Care Services for Children and Youth Placed in Out-of-Home Care policy](#)

[Hospital Holds policy](#)

[ICW Active Efforts and Tribal Collaboration policy](#)

[ICW Child Protective Investigations Services and Family Assessment Response policy](#)

[ICW Dependency Cases policy](#)

[ICW Placement Preferences policy](#)

[Infant Safety Education and Intervention policy](#)

[Interstate Compact on the Placement of Children policy](#)

Memorandum of Understanding with Mexico (Located on the DCYF intranet, under Policy & Practice and Other)

[National Institute for Health: What Does a Safe Sleep Environment Look Like?](#)

[Notification to Foreign Consulate policy](#)

[Outside Communication for Children in Out-of-Home Care policy](#)

[Placing with and Supporting Unlicensed Relatives and Suitable Persons policy](#)

[Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents policy](#)

[Placement-Intensive Resources policy](#)

[Placement Moves policy](#)

[Present Danger policy](#)

[Relative Search and Notification policy](#)

[Return Home policy](#)

Safe Child Consultation Guide document (Located on the DCYF intranet under Programs, Intake & CPS, Policy & Laws, Child Safety Framework, and Resources)

[Safety Assessment policy](#)

[Safety Plan policy](#)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

[Voluntary Placement Agreement policy](#)

4251. Relative Search and Notification

4251. Relative Search and Notification julie.pettit Wed, 06/26/2024 - 12:58

Original Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

This policy provides guidance on searching for and notifying relatives when children and youth are placed in out-of-home care.

Scope

This policy applies to Child Welfare (CW) employees and the Relative Search Unit (RSU).

Laws

[RCW 13.34.060](#) Shelter care-Placement-Custody-Duties of parties

[RCW 13.34.062](#) Shelter care-Notice of custody and rights

[RCW 13.34.125](#) Voluntary adoption plan-Consideration of preferences for proposed placement

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.38.030](#) Findings and intent

[RCW 74.15.020](#) Definitions

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act

Policy

1. Caseworkers:

1. Must:

1. Search for relatives immediately when:

1. Recommending children or youth to be placed in out-of-home care for:

1. Placement
2. Family connections
3. Support

2. Children or youth are:

1. Entering or re-entering care.
2. Disrupting from placement.

2. Review search results from the RSU to identify and engage relatives for placement, support, and connections for children and youth throughout the life of the case, including those that are legally-free.

2. May discontinue relative searches for the purposes of placement only when children or youth are placed with relative caregivers or the conditions for voluntary adoption plan in [RCW 13.34.125](#) are met.
2. The RSU:
 1. Must:
 1. Complete relative searches for:
 1. Children or youth placed in out-of-home care:
 1. Within 30 calendar days of either:
 1. Being removed from their parents' or guardians' care, even if they are placed with a relative caregiver.
 2. Re-entering care.
 2. All identified adult relatives.
 2. Not complete relative searches if:
 1. Children or youth are returned to their parents or guardians within 30 calendar days of the initial out-of-home placement.
 2. [Indian child's](#) tribe have taken legal jurisdiction.
 2. May complete:
 1. Relative searches that include biological relatives, excluding the biological parents, of adopted children or youth when a signed [Written Authorization DCYF 17-063](#) form is received from either the:
 1. Adoptive parents.
 2. Adopted youth age 12 or older and their attorney.
 2. Subsequent relative searches to identify and locate relatives for the purpose of changing placement to a relative or identifying relative supports when either of the following are met:
 1. They remain in foster care and it has been more than 12 months since a previous search was completed and all identified relatives have been assessed and it has been determined they are not placement options.
 2. They are legally-free and not placed with relatives.

Procedures

1. Searching for Relatives
 1. Caseworkers must complete the following when searching for relatives:

1. Ask:
 1. Parents when their children or youth are removed from their custody and placed in out-of-home care to:
 1. Identify relatives for potential placements.
 2. Provide the identified relative's contact information.
 2. Children or youth at time of removal about their placement preferences.
2. Follow the Placement Entry User Guide document when initiating placement.
3. Confirm paternity with one of the following the:
 1. Birth certificate.
 2. Division of Child Support.
 3. Paternity affidavit entered in court.
4. Upload proof of paternity into FamLink, if applicable.
5. Contact the children's or youths' tribe, when there is reason to know that they are or may be Indian children.
6. Identify relatives by:
 1. Following the [Indian Child Welfare \(ICW\) Placement Preferences](#) policy when there is reason to know a child is or may be an Indian Child and is placed in out-of-home care.
 2. Contacting the following individuals, including, but not limited to:
 1. Parent, child, or youth, and known relatives.
 2. School employees.
 3. Medical providers.
 4. Guardians ad Litem (GALs).
 5. Community members, friends, neighbors, etc.
 3. Accessing the following databases, including, but not limited to:
 1. Automated Client Eligibility System (ACES online).
 2. Client Registry.
 3. Barcode Info & Help.
 4. Washington Health and Life Events (WHALES).

5. Support Enforcement Management System (SEMS).
6. Driver and Plate Search (DAPS).

7. Email the [RSU](#) to:

1. Request:

1. Relative searches:

1. Within:

1. Three calendar days of children or youth who have re-entered out-of-home care.
 2. Five calendar days of being notified paternity was established, when children or youth have been placed in out-of-home care for more than 30 calendar days.

2. Immediately when it is learned either the:

1. A relative search has never been completed.
 2. They were placed more than 30 calendar days ago and remain in out-of-home care and the RSU has not completed the relative search.

2. Subsequent relative searches by following Policy Section 2.b.ii.

2. Notify them to terminate the relative search because the children or youth returned home within 30 calendar days of the initial out-of-home placement.

2. The RSU must:

1. Review new placements in FamLink to identify when children or youth were initially placed in out-of-home care.

2. Contact caseworkers prior to initiating a relative search and ask if:

1. The children or youth have returned home or if an [Indian child's](#) tribe has taken jurisdiction. If so, a relative search will not be completed.
 2. Paternity has been established. If not, complete a relative search of only maternal family.
 3. There is a “No Contact Order” between the children or youth and any adult relative. If confirmed, do not send a relative search letter to that individual.

2. Notifying Relatives

The RSU must:

1. Complete the search using the available databases.
2. Document all identified relatives on the Relative Search Efforts FamLink tab.
3. Send the [Relative Inquiry DCYF 09-134](#) form to all identified relatives within 30 calendar days of the children's or youth's original placement date (OPD).
4. Upload the following forms into FamLink, including, but not limited to:
 1. Relative Inquiry DCYF 09-134
 2. Relative Search Tracking DCYF 10-544
5. Notify caseworkers, CW supervisors, and CW area administrators (AA) of:
 1. Relatives identified as potential placements or supports.
 2. Contact information for identified relatives.
6. Mail information, e.g., cards or photos, received from relatives that responded to the Relative Inquiry DCYF 09-0134 forms to the caseworkers.

3. Reviewing Relative Search Results

1. Caseworkers must:

1. Within seven calendar days of receiving the relative search results from the RSU:
 1. Review the results.
 2. Respond to all interested relatives identified through the RSU relative search.
2. Review the Relative Search Outcomes FamLink tab monthly when children or youth are either:
 1. Not placed with a relative.
 2. Experiencing placement instability.
3. Identify opportunities for ongoing support with relatives, including, but not limited to:
 1. Placement, i.e., current or future.
 2. Respite care.
 3. Supervising or supporting [family time and sibling and relative visits](#).
 4. Providing transportation.

5. Maintaining family connections.
4. Re-contact relatives identified by the RSU, as their circumstances may have changed, when children or youth are not placed with them, at a minimum:
 1. Prior to each permanency planning hearing.
 2. When they become legally-free.
5. Document their reasonable efforts to contact relatives for placement or support by following Procedures Section 4.a.
2. CW supervisors must complete the following during [monthly clinical supervision](#):
 1. Verify a relative search has been conducted by reviewing the FamLink Relative Search Icon and Person Card for each child or youth.
 2. Discuss the FamLink Relative Search Outcomes results and relative engagement with caseworkers.
 3. Confirm interested relatives have been contacted and discuss the status of the approvals for the interested relatives.
 4. Verify caseworkers are following the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
4. Documenting Relative Search Results
 1. Caseworkers must document the following in FamLink case notes using the “Relative Search” category and “Contact-Relative” activity:
 1. Their reasonable efforts to identify relatives:
 1. When children or youth were initially placed in out-of-home care.
 2. Throughout the life of the case if children or youth are not placed with relatives.
 2. Each relative’s decision to be:
 1. A placement option.
 2. Provide support, including but not limited to:
 1. Respite.
 2. Transportation.
 3. [Family time and sibling and relative visits](#).
 3. Additional relatives identified as possible placement or support.
 4. Reasons:
 1. For the decision to place or not to place with interested relatives.

2. Why subsequent relative searches were requested, if applicable.
2. CW supervisors must document the information obtained from their employees during the [monthly clinical supervision case reviews](#) in FamLink case notes.
3. The RSU must document the:
 1. Names of relatives who expressed an interest in placement or being a resource, in:
 1. FamLink case notes using the “Relative Search” category and “Contact-Relative” activity.
 2. Emails sent to caseworkers, CW supervisors, and CW AA.
 3. The Relative Search Outcomes FamLink tab.
 2. Additional relatives identified on the:
 1. Relative Search Efforts FamLink tab.
 2. Relative Search Tracking DCYF 10-544 form.

Forms

[Appendix A: Definitions | Washington State Department of Children, Youth, and Families](#)

[Relative Inquiry DCYF 09-134](#)

Relative Search Tracking DCYF 10-544 (located in the Forms repository on the DCYF intranet)

[Written Authorization DCYF 17-063](#)

Resources

[ICW Definitions](#)

DCYF Alliance Relative Search: Creating and Monitoring Your Relative Requests eLearning

[Family Time and Sibling and Relative Visits policy](#)

[ICW Placement Preferences policy](#)

[Monthly Clinical Supervision Case Reviews policy](#)

[Out-of-Home Placements policy](#)

Placement Entry User Guide (located on the DCYF Child Welfare intranet, under Practice Guides)

Placement Packet (located on the Child Welfare Placement Packet DCYF intranet page)

[Placing with and Supporting Unlicensed Relatives and Suitable Persons policy](#)

4254. Family Time and Sibling and Relative Visits

4254. Family Time and Sibling and Relative Visits admin Wed, 07/25/2018 - 13:31

Original Date: July 26, 2008

Revised Date: May 9, 2022

Sunset Review: May 9, 2026

Approval: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide guidance when children or youth in the placement, care, and authority (PCA) of the Department of Children, Youth, and Families (DCYF) are visiting with parents or guardians or visiting with family members.

- Early, consistent, and frequent visitation is crucial for maintaining parent-child relationships and making it possible for parents and children to safely reunify.
- Visitation is the right of the family, including the child and youth and the parent or guardian, in cases in which visitation is in the best interest of the child.
- Family time and visits must have the proper level of supervision to ensure child safety and to move toward permanency.
- Family time and relative visitation plans should be developed timely and occur in the least restrictive setting based on risk factors, existing danger, safety threats, and protective factors.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.025](#) Child dependency cases, Coordination of services and Remedial services

[RCW 13.34.030](#) Definitions

[RCW 13.34.065](#) Shelter Care Hearing

[RCW 13.34.130](#) Order of Disposition for a Dependent Child, Alternatives

[RCW 13.34.136](#) Permanency Plan of Care

[RCW 13.34.138](#) Review hearings-Findings-Duties of parties involved-In-home placement requirements-Housing assistance.

[RCW 13.34.200](#) Order Terminating Parent and Child Relationship

[RCW 13.38.040](#) Definitions

Policy

1. Family Time

1. Family time provides the parents or guardians and children and youth time to interact. Family time must meet the visit requirements in [chapter 13.34 RCW](#).
2. Family time must be face-to-face, which includes parents or guardians who are incarcerated:
 1. If extenuating circumstances exist, which include but are not limited to threats to child safety, inclement weather affecting safe travel, illness, and distance.
 2. Other forms of approved family time when extenuating circumstances exist or to supplement face-to-face family time includes, but are not limited to:
 1. Telephone contact.
 2. Electronic contact through video chat or email.
3. Family time must be in the least restrictive setting and unsupervised unless the presence of threats and danger to the child requires the constant presence of an adult to ensure the safety of the child.
4. For VPAs for children who are not members of or are not eligible for membership in a federally recognized tribe from Washington state, efforts must be made to hold an initial family time within 72 hours and no later than five calendar days from the VPA being signed.
5. Emergent 72-Hour Initial Visits for Family Time
 1. Emergent 72-hour initial visits must be:
 1. Conducted within 72 hours of the child or youth's placement and care authority in DCYF, including weekends and holidays, unless the court finds that there are extraordinary circumstances that require a delay.
 2. Supervised, unless determined that supervision is unnecessary.
 2. Emergent 72-hour initial visits may be conducted using a contracted provider.
 1. This includes creating a one-time emergent referral in FamLink when a contracted provider is being used.
 2. Visits must not exceed two hours when conducted by a contracted provider.
6. Ongoing Family Time
 1. Develop a family time plan at the first Family Team Decision Making meeting (FTDM), when placement is being considered or a child is in a court-ordered

placement (licensed or unlicensed). The family time plan is effective for up to 60 calendar days from the child's initial placement.

2. Ongoing family time visit plans must be generated in FamLink separately from the emergent 72-hour initial visit.
 3. Family times need to be determined as unsupervised, monitored, or supervised prior to each court hearing.
7. Family time cannot be:
1. Limited due to the parent's lack of compliance with dependency court orders or failure to participate in services.
 2. Denied based on the parent's incarceration.
 3. Limited or denied, unless the court determines that limitations or denial is necessary to protect the child's health, safety and welfare.
8. Family time visit plans will be developed in consultation with all the following:
1. Parent
 2. Youth 14 years and older
 3. Out-of-home caregiver
 4. Court Appointed Special Advocate (CASA) or Guardian Ad Litem (GAL)
 5. The child's attorney, if appointed
 6. Tribal worker, as applicable
 7. Any other people identified by the parent
9. Ongoing assessments of risk and safety and review of family time plans will occur until the child returns home or permanency is achieved.
1. Family time plans will be reviewed at all shared planning meetings and monthly supervisory case reviews.
 2. If the court orders a psychosexual evaluation for a parent and the family time plan is reassessed because of the evaluation, the court must approve the plan as it relates to duration, level of supervision, and location of family time.
 3. Concerted efforts must be made to consult with law enforcement before recommending changes to family time or sibling visits when a parent or sibling has been identified as a suspect in an active criminal investigation for a violent crime that may impact child safety in relation to family time or sibling visits.

4. Consult with the AAG before sharing any information received from law enforcement about the parent or sibling suspect or investigation.
5. The caseworker will observe at least one family time per quarter which will meet that month's health and safety requirement, as long as the other requirements of a health and safety visit are met. Individual conversations between the caseworker and child or parent may occur before or after the family time.
6. If family time needs to be rescheduled, all participants must be notified.

10. Family time will be discontinued if parental rights are terminated or relinquished.

2. Sibling visits

1. Children placed apart from their siblings will have two or more face-to-face visits or contacts per month, unless there is an approved exception, as listed in Procedures Section 4.
2. Additional approved forms of sibling contact are encouraged to support and maintain sibling relationships. Approved forms of contact include, but are not limited to:
 1. Telephone contact.
 2. Electronic contact through video chat or email.
3. Ongoing visitation is encouraged to promote and maintain the continuity of sibling relationships that existed prior to placement. This includes siblings who:
 1. Remained in the home at the time of removal.
 2. Aged out of foster care.
 3. Returned home.
 4. Are placed with a non-custodial parent.
 5. Lived part-time in the home at the time of the sibling's removal.
4. Sibling contact during family time meets the requirement for a sibling visit.
5. Shared planning meetings or court events do not meet the requirement for a sibling visit.
6. The first sibling visit must occur as soon as possible after placement.
7. Sibling visits will continue after a parent's rights are terminated or relinquished unless an approved exception applies.
8. Sibling visits cannot be limited or used as a sanction for a child's behavior or as an incentive to change a child's behavior.

9. Sibling visit plans will be developed within 14 calendar days and in consultation with the out-of-home caregiver and child, when developmentally appropriate, unless an approved exception applies.
3. Other Relative Visits
 1. Determine if any relative is awarded court-ordered visitation with a child in the PCA of DCYF.
 2. If a relative is awarded court-ordered visitation, the caseworker must:
 1. Obtain a copy of the visitation orders by either:
 1. Asking the parent for a copy.
 2. Asking the relative for a copy.
 3. Contacting the county where the court orders were established.
 2. Identify the court ordered visitation participants, frequency, duration, and location of visits.
 3. Consult with the AAG regarding DCYF's responsibility to comply with the court order.
 4. Confirm that visitation participants meet the requirements of the DCYF [background check policy](#). Consult with the AAG to determine options when the participant does not meet background check policy.
 3. If a relative seeks court-ordered visitation after the child is placed in the PCA of DCYF, the caseworker must:
 1. Consult with the AAG to determine options when a relative petitions the court for visitation during out-of-home placement.
 2. Verify the relative meets background check requirements and consult with the AAG when a relative does not pass a background check.
 4. Contracted Family Time
 1. Family time visits may be conducted by a contracted provider. This includes when the request is only to provide transportation.
 2. All contracted family time service referrals are created in Famlink and managed through Sprout.

Procedures

1. Developing Visit Plans for Family Time, Sibling Visits, or Other Relative Visits
 1. After hours supervisors must complete the following when requesting a contracted provider for emergent 72-hour initial visits:

1. Complete the emergent 72-hour initial visit plan/referral in FamLink within three hours of the child's or youth's PCA with DCYF.
 2. Follow the Emergent 72-Hour Initial Visit Plan/Referral Quick Help Guide.
 3. Assign another after hours employee to complete the visit if the provider is unable to accept the referral.
2. Caseworkers must:
1. Create family time visit plans on all children placed in DCY custody, regardless if a contracted provider is being used. For:
 1. Emergent 72-hour initial visits:
 1. Complete the emergent 72-hour initial Visit Plan/Referral in FamLink within three hours of the child's or youth's PCA into DCYF.
 2. Follow the procedures outlined in the Emergent 72-Hour Initial Visit Plan/Referral Quick Help Guide.
 3. If the provider is unable to accept the emergent 72-hour referral, conduct the visit or coordinate with their supervisor to determine if other resources are available.
 2. Ongoing family time visit plans, which are three to six month plans, follow the Visit Plan/Referral Training Material to create a Visit Plan/Referral in FamLink.
 2. Follow the [Safety Assessment](#) policy to determine whether family time will be unsupervised, monitored, or supervised.
 3. Determine if a contracted or non-contracted provider is needed to assist with monitored or supervised family time or transportation. A non-contracted provider includes, but not limited to, one of the following:
 1. Family member
 2. Suitable other
 3. Foster parent
 4. Other caseworkers
 4. Develop a written family time plan that includes the:
 1. Level of supervision as determined by the [Safety Assessment](#) policy.
 2. Location. The location and scheduling of family time must be:
 1. In the least restrictive setting with consideration given to the parent and child's schedules and culture.

2. In the child's community whenever possible.
 3. In an age appropriate setting that supports safety of the child.
 4. At the DCYF office when needed to protect the child's safety or when support before or during family time is needed
3. Frequency
4. Duration
5. Transportation
6. Any other necessary details.
5. Determine who may participate or supervise family time by:
 1. Completing a [background check](#) request and FamLink check for any visit participant 16 years or older, per the [Background Check](#) policy. This includes family supports who are available to monitor, supervise, or transport the child for family time.
 2. Obtaining supervisor approval before allowing contact between the child and a parent who is a perpetrator in serious physical or sexual abuse cases.
6. Verify all non-contracted persons supervising or monitoring family time, or transporting children meet the following criteria:
 1. Approved background and FamLink checks per the [background check](#) policy.
 2. Valid driver's license if transporting. The transportation vehicle must be registered, insured, and equipped with approved child restraints, e.g., car seat, lap, and shoulder belts.
 3. Willing and able to intervene to keep the child safe.
 4. Able to prioritize the safety and well-being of the child.
 5. Willing and able to enforce visit rules, court orders, limitations, and activities.
 6. Maintain confidentiality.
 7. Report observations during visits and transports to the caseworker, e.g., behaviors, interactions, and concerns.
7. Review family time plans at all [shared planning meetings](#) and monthly supervisory case reviews and assess the following:

1. Changes needed in the level of supervision based on risk factors or safety threats and safety planning.
2. Changes in permanency plan or legal status.
3. Changes in the well-being of the child.
4. Progress and compliance with services and any impacts on risk, changes to the family time plan to increase the frequency and move to unsupervised, if not already occurring, within a minimum of 90 calendar days of a proposed trial return home.
5. Recommendations to limit or terminate family time when one or more of the following conditions occur:
 1. Therapist recommends decreasing or suspending family time due to harm to the child.
 2. The child is at risk of physical or emotional harm due to the family time.
 3. The child's educational progress is negatively impacted by the duration and frequency of family time during school hours.
 4. The supervisor or monitor of family time is threatened.
 5. The parent appears to be under the influence of substances. The family time may be stopped immediately but may resume after review of the family time plan.
8. Prior to changing a family time plan:
 1. Review recommended changes with the parent, youth age 14 and older, caregiver, and supervisor.
 2. Inform the AAG of recommended changes.
 3. Inform the court of any changes in the family time plan in dependency cases.
 1. A court hearing is required prior to changing the family time plan, unless the child's safety is jeopardized or the court order allows changes to the plan without a hearing.
 2. If a court has ordered family time to occur and it will not occur as ordered, contact the AAG immediately to determine if an emergency hearing is needed.
9. Document in FamLink:
 1. A visit plan for each child or youth including:

1. Family time by:
 1. Following the [Safety Assessment](#) policy.
 2. Selecting the “parent/child visit” visit type.
2. Sibling visits, as applicable.
2. Family time non-contracted occurrences in a case note and include the following:
 1. Date, time, and location of family time
 2. Participants in the family time
 3. Form of contact, e.g., face-to-face, in-person, video chat, or email
 4. Use one or more of the following types: Date, time, and location of family time:
 1. Visit-Supervised
 2. Visit-Unsupervised
 3. Visit-With Sibling
 4. Visit-Cancelled-No Make Up Required
 5. Visit-Did not occur. No Show
 6. Visit-Monitored
3. When family time includes a sibling, use both family time and sibling visit case note types to record the visit.
4. Non-contracted family time information obtained from approved natural supports in File Upload.

10. Not:

1. Download, print, scan or file upload contract provider visit reports from Sprout into FamLink, unless required for discovery or court requests.
2. Enter case notes referencing visits that are supported by contracted providers.

2. Sibling Visits

To conduct sibling visits, the caseworker must:

1. Develop a written plan that includes the level of supervision, location, frequency, duration, transportation, and any other necessary details.

2. Determine the level of supervision and necessity for sibling visits based on:
 1. Age of the children.
 2. Children's perspective and input for youth 14 and over.
 3. Best interests of the children, including safety, health, and well-being.
 3. Review the sibling visit plan with case participants when there is:
 1. An increase or decrease in safety threats.
 2. A change in circumstances which causes an approved exception to apply and obtain supervisor approval when an exception applies.
 3. A change in circumstances when the reason for the exception no longer exists.
 4. A change in the well-being of the child.
 4. Review the sibling visit plan and any recommended changes:
 1. During all shared planning meetings and monthly supervisory case reviews.
 2. During monthly health and safety and caregiver visits.
 5. Document and maintain in FamLink:
 1. A visit plan for each child.
 2. All sibling visits or contacts in a case note including the following:
 1. Date, time, and location of visit.
 2. Participants in the visit.
 3. Type of contact, e.g., in-person visit, phone call, video chat, or email.
 3. Use the following case note type:
 1. Visit-with siblings
 2. Use both family time and sibling visit case note types when it includes the child's parent and sibling.
 4. Upload family time documentation obtained from approved natural supports, when provided.
3. Exceptions for Sibling Visits
 1. When sibling visits are not occurring, the approved exception or reason must be documented and approved by the caseworker's supervisor. Approved exceptions are:
 1. A court order prevents or limits visits or contacts.

2. DCYF determines visits or contacts are contrary to the child's health, safety, or well-being.
 3. DCYF determines visits or contacts will hinder reunification efforts.
 4. Child or sibling are developmentally able to determine their needs for sibling contact and request that contact occur less than two times per month, or not at all.
 5. Parent of a non-dependent sibling objects to or wishes to limit visits or contacts with the dependent sibling.
 6. The facility where the child or sibling resides prohibits or limits visits or contacts with siblings, e.g., during an intake period at an in-patient facility.
 7. Child is on the run from their placement for a majority of the calendar month.
 8. Child is not complying with visitation arrangements.
2. Document for all exceptions or other reasons siblings are not having visits or contacts in the Sibling or Incarcerated Parent Visit Details tab on the Visit Plan and Referral page and obtain supervisor approval in FamLink.

4. Approvals

1. Caseworkers must:
 1. Send emergent 72-hour initial visit referrals to supervisors for approval within three hours of PCA.
 2. Send visit plans for family time, sibling visits, and other relatives visits to supervisors for approval.
 3. Send requests for exceptions to sibling visits to supervisors for approval.
 4. Review ongoing family time visit plans at least every six months to determine the level of supervision. This includes updating the referral in FamLink and submitting a reauthorization to supervisors for approval if the court approved the extension of monitored or supervised visits per [chapter 13.34 RCW](#).
2. Supervisors must review:
 1. Emergent 72-hour initial visit referrals for approval within one hour from the time the caseworker sent the referral.
 2. Ongoing visit plans and referrals for approval in FamLink for family time, sibling visits, or other relative visits.
 3. All reauthorizations for approval every six months.

4. All requests for exceptions for sibling visits and return to the caseworker if not approved.

Forms

[Child Specific Caregiver Notification DCYF 15-450](#)

[Comprehensive Family Evaluation DCYF 10-480](#)

[Family Time/Sibling Visit Report DCYF 15-448](#)

[Missed and No Show Report Family Time/Sibling Visit DCYF 15-451](#)

[Monitoring Review Report – On-Site Visit DCYF 15-462](#)

[Provider Notification of Family Time/Sibling Visit Transport Schedule Initial Intake Screening Report DCYF 15-363B](#)

[Safety Assessment/Safety Plan DCYF 15-258 form](#)

[Sibling Visit Report DCYF 15-452](#)

Supervision Level Family Time Resource Guide DCYF 10-031 form (Located on the DCYF Forms Repository on the DCYF intranet)

[Unusual Incident Report DCYF 15-454](#)

[Visit Plan DCYF 15-209C](#)

Visit Referral DCYF 15-363 (Located on the DCYF Forms Repository on the DCYF intranet)

[Voluntary Placement Agreement \(VPA\) DCYF 09-004B](#)

Resources

[Caregiver Tip Sheet DCYF 22-1714](#)

[Caseworker Tip Sheet DCYF 22-1716](#)

Child Safety Framework (located on the Child Safety Framework DCYF intranet page)

Emergent 72-Hour Initial Visit Plan/Referral Quick Help Guide (located on the DCYF CA intranet)

[Parent Tip Sheet DCYF 22-1715](#)

Present Danger Guide (located on the Child Safety Framework DCYF intranet page)

Protective Action Guide (located on the Child Safety Framework DCYF intranet page)

[Safety Assessment policy](#)

Safety Plan Analysis Guide (located on the Child Safety Framework DCYF intranet page)

Safety Threats Guide (located on the Child Safety Framework DCYF intranet page)

Safety Threshold Guide (located on the Child Safety Framework DCYF intranet page)

Visit Plan/Referral Training Material (located on the DCYF CA intranet)

4260. Placement Moves

4260. Placement Moves sarah.sanchez Wed, 08/22/2018 - 12:43

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review: July 31, 2024

Approved by: Natalie Green, Assistant Secretary for Child Welfare Division

Purpose

The purpose of this policy is to provide guidance on:

- Identifying when it is necessary for children and youth placed in out-of-home care to move to a different out-of-home placement.
- Notifying current relatives, suitable persons, licensed caregivers, and licensed group care and child placing agencies (CPAs), as applicable about children's and youth's prospective moves.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 13.34.050](#) Court order to take child into custody, when-Hearing

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.34.150](#) Modification of orders

[RCW 26.44.056](#) Protective detention or custody of abused child-Reasonable cause-Notice-Time limits-Monitoring plan-Liability

[RCW 74.13.300](#) Notification of proposed placement changes

[RCW 74.15.030](#) Powers and duties of secretary

[42 U.S.C. 671](#) State plan for foster care and adoption assistance

Policy

1. Caseworkers must:

1. Attempt to minimize placement moves for children or youth in out-of-home care.
 2. Consider the children's and youth's safety, best interest, and stability when determining if they should be moved.
 3. Notify the following when unlicensed caregiver's home studies are not approved and children or youth are placed in their home or are planning to be placed in their home, per the [Placing with and Supporting Unlicensed Relatives or Suitable Person](#) policy:
 1. Assistant attorney general (AAG)
 2. Court
 4. Not move children or youth placed with relatives or suitable persons, unless:
 1. Their health, safety, and well-being cannot be protected adequately in their current placement or they are hindering the child's or youth's return home, per [RCW 13.34.130](#).
 2. The court orders the placement change.
2. LD workers may make placement recommendations for removing children and youth.

Procedures

1. Placement Move Determination
 1. Caseworkers must complete the following when there are safety concerns in an out-of-home placement:
 1. Follow the Safety Threshold document.
 2. Consult with their supervisor to determine if one or more of the following is needed:
 1. Safe Child Consultation.
 2. Placement Support Plan DCYF 10-025 form.
 3. Seek the removal from an out-of-home placement if they determine the children's or youth's placement:
 1. Can't meet the child's or youth's safety or special needs.
 2. Will hinder the efforts to reunite the parents or guardians and the children or youth.
 2. LD CPS investigators must notify their supervisor when any of the following occur, children or youth are in present danger, there is a safety threat, or their safety is in jeopardy, per [RCW 26.44](#).

3. LD CPS supervisors must immediately contact the caseworker's supervisor once they receive notification of the safety concern and are recommending the children or youth to be removed.
 4. Caseworkers and LD workers must follow the Decision Making Matrix document when they disagree about:
 1. Removing children or youth from their current placement.
 2. Leaving victim children or youth in foster homes after a Founded Finding of CA/N.
 3. Children or youth remaining in foster homes with a pending revocation or denial.
2. Prior to Moving Children or Youth
Caseworkers must complete the following for all children and youth:
1. Assess placement concerns in collaboration with the parents, guardians, relatives, and suitable persons.
 2. Offer or provide services to parents, guardians, relatives, and suitable persons, e.g., [respite](#), [Family Preservation Services \(FPS\)](#), evidence based practices (EBP), or [Wraparound with Intensive Services \(WiSe\)](#), to support the children or youth remaining in the home if the placement does not pose a present danger or a safety threat and:
 1. DCYF is considering moving a child or youth.
 2. The caregiver is asking for the children or youth to be moved.
 3. Consult with supervisor and determine if a Safe Child Consultation is needed.
 4. Take an immediate protective action, per the Present Danger policy, if at any time present danger is identified to support child safety.
 5. When allegations of child abuse or neglect are identified in an out-of-home placement make an [intake](#). If the intake does not screen in, caseworkers must work with the caregivers to address any concerns identified.
 6. Conduct a [Family Team Decision Making \(FTDM\)](#) meeting.
 7. Notify the AAG and court if relatives or suitable persons have placement of children or youth and either they are:
 1. Not capable of protecting the health, safety and well-being of the children or youth.
 2. Hindering efforts to return them home.
 8. Request a court hearing seeking court authorization of the placement change.

9. Obtain a court order for the placement change.
3. Moving Children or Youth
Caseworkers must:
 1. Verify a court order provides authority to move children or youth placed with relatives or suitable persons.
 2. Follow these policies:
 1. [Indian Child Welfare \(ICW\) Placement Preferences](#) when there is reason to know children are or may be Indian children.
 2. [Placement Out-of-Home](#) and reconsider placing children and youth with siblings, if applicable.
 3. [Relative Search and Notification](#) and review the relative search results.
 4. [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) for information that needs to be shared with placements.
 5. [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) if children or youth move from a:
 1. Foster home or group care facility to a relative or suitable person placement.
 2. Relative or suitable person to another relative or suitable person.
 6. [Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents](#) if children or youth move to a new licensed placement.
 7. [Interstate Compact on the Placement of Children \(ICPC\)](#) and [Placement-Intensive Resources](#) if children or youth are moving out of state.
 8. [Behavior Rehabilitation Services \(BRS\)](#) if children or youth are receiving BRS and coordinate moving them with the intensive resource program manager.
 3. Notify LD worker if the home study is in process for the caregiver.
 4. Notification to Caregivers
Caseworkers must:
 1. Provide relatives, suitable, persons, and foster parents the [Five Day Notification to Move DCYF 09-082](#) form, unless:
 1. A court order requires an immediate change in placement.
 2. The children or youth are:
 1. Being returned home.

2. Residing in receiving or group care.
 3. The children's or youths' safety is in jeopardy.
 4. LD recommends moving the children or youth from a placement. If so, LD must inform the foster parents of the move as soon as possible.
 2. Notify CPAs and group care facilities of placement changes following their contracts, if applicable.
 5. Documentation
Caseworkers must document:
 1. The children's or youth's moves by following the Timely & Accurate Placement Entry User Guide document.
 2. The following information in a FamLink case note:
 1. Efforts to prevent placement moves and the reasons why the children or youth were moved.
 2. Children's or youth's routine and special needs related to their:
 1. Safety
 2. Physical, behavioral, and mental health
 3. Well-being
 4. Culture
 5. Education
 6. Religious affiliation
 3. Efforts to place siblings together.
 3. ICW case notes, describing efforts taken to find placement consistent with placement preferences when there is reason to know children are or may be Indian children, per [ICW Placement Preferences](#) policy.

Forms

Child Welfare Provider and Placement Request DCYF 10-065 (located in the Forms repository on the DCYF intranet)

[Five Day Notification to Move DCYF 09-082](#)

Placement Support Plan DCYF 10-025 (located in the Forms repository on the DCYF intranet)

Resources

[Behavior Rehabilitation Services \(BRS\) policy](#)

Decision Making Matrix document (Located on the DCYF Intranet, under Policy & Practice, Policy & Procedures, in Appendix C)

[Documentation policy](#)

[Family Team Decision Making Guide for Caseworkers DCYF CWP_0080 publication](#)

[Family Team Decision Making \(FTDM\) Meeting policy](#)

[ICW Placement Preferences policy](#)

[Intensive Family Preservation Services \(IFPS\), Family Preservation Services \(FPS\) policy](#)

[Interstate Compact on the Placement of Children \(ICPC\) policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

[Placement-Intensive Resources policy](#)

[Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents policy](#)

[Placement Out-of-Home policy](#)

[Placing with and Supporting Unlicensed Relatives and Suitable Persons policy](#)

[Relative Search and Notification policy](#)

[Respite for Licensed Foster Parents, Unlicensed Relative Caregivers and Other Suitable Persons policy](#)

Safety Threshold Document (located on the DCYF Intranet, under Policy & Practice, Child Safety Framework, Guides)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

[Wraparound with Intensive Services \(WISe\) policy](#)

4265. Caregiver Support Level and Foster Care Rate Assessment Determination

4265. Caregiver Support Level and Foster Care Rate Assessment Determination sarah.sanchez Wed, 08/22/2018 - 12:44

Original Date: February 15, 1998

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Vickie Ybarra, Assistant Secretary for Partnerships, Prevention, and Services

Purpose

The purpose of this policy is to provide guidance on how to determine the:

- Caregivers' support levels (CSL) for all caregivers
- The foster care maintenance payments (FCMPs) for licensed caregivers of children and youth placed in out-of-home care, up to 21 years old if enrolled in the [Extended Foster Care \(EFC\) Program](#).

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 74.13.031](#) Duties of department - Child welfare services - Children's services advisory committee

[42 USC §672](#) Foster care maintenance payments program

[45 CFR §1356.21](#) Foster care maintenance payments program implementation requirements

Policy

1. The Financial and Business Services Division employees must complete an economic analysis every four years to determine the basic FCMP, per [45 CFR §1356.21](#).
2. The National Crime Information Crime (NCIC) Background Check Unit (BCU) and fiduciaries must document the children's and youth's placement in FamLink.
3. Placement Resource Specialists (PRSs) must determine the:
 1. CSL for unlicensed and licensed caregivers.
 2. Foster care reimbursement level (FCRL) for licensed caregivers for children and youth placed in their home. Levels will be determined by the Caregiver Support Level Tool DCYF 15-007 form and are based on the needs of the children or youth, per [WAC 110-50-0440](#). The rates are the same for licensed:
 1. Relatives
 2. Suitable persons
 3. Foster parents

Procedures

1. Documenting Placement and Basic FCMP
 1. Caseworkers must notify:
 1. The NCIC BCU immediately for emergent placements for children or youth being placed with unlicensed relatives and suitable persons by:
 1. Either:

1. Calling NCIC BCU at 1-800-998-3898.
 2. Emailing [NCIC](#).
2. Following the [Background Checks](#) policy.
2. Fiduciaries by documenting the child's or youth's placement or placement change in the FamLink Child Locator within three calendar days of their placement with:
 1. Licensed caregivers for emergent and non-emergent placements.
 2. Relatives or suitable persons non-emergent placements.
2. NCIC BCU must:
 1. Document emergent placements in FamLink for children and youth placed with unlicensed relatives and suitable persons for the initial license.
 2. Follow the [Background Checks](#) policy.
3. Fiduciaries must document the following in FamLink:
 1. Initial placement or placement changes for children and youth, when placed with:
 1. Licensed caregivers.
 2. Non-emergent relatives or suitable persons placements.
 2. Basic FCMP that is appropriate to the children's or youth's age.
2. Determining the CSL and FCRLs
PRs must complete the following when notified of an out-of-home placement:
 1. For Indian children and youth coordinate with tribal payment only (TPO) workers and the tribes to determine who will complete and document the Caregiver Support Level Tool DCYF 15-007 form in FamLink when tribes have legal jurisdiction, as outlined in the [Indian Child Welfare Payment for Services for Children in Tribal Custody](#) policy.
 2. The FamLink Caregiver Support Level Tool DCYF 15-007 form within seven calendar days of children's or youth's initial placement being documented in FamLink to determine the following for:
 1. Unlicensed caregivers, the CSL.
 2. Licensed caregivers, the CSL and FCRL.
 3. Obtain the FamLink Health Care Authority (HCA) health history report and compare the results to the FamLink Caregiver Support Level Tool DCYF 15-007 form. If the levels:

1. Match on the tool and report, no changes are needed.
2. Do not match on the tool and report:
 1. Assess the information available.
 2. Adjust the level, if needed.
 3. Finalize the level within 14 calendar days from the date the HCA health history report was received.
4. Review the FamLink Caregiver Support Level Tool DCYF 15-007 form:
 1. Every six months after the initial placement.
 2. When requested due to significant changes in circumstances for children or youth.
5. Update the FamLink Caregiver Support Level Tool DCYF 15-007 form when there are changes and contact the caregiver if additional information is needed.
6. Notify:
 1. Licensed caregivers in writing using the Foster Care Rate Assessment Determination DCYF 15-502 form once the CSL and FCMPs have been determined. Letters must include:
 1. The FCRA level.
 2. The payment rates for licensed caregivers.
 3. Notice of caregivers' rights for a review if they do not agree.
 4. Information on how to request a department review.
 2. Child Placing Agencies (CPA) of the FCRL, as applicable.
3. CSLs on Interstate Compact and Placement of Children (ICPC) Cases PRSs must:
 1. Verify CSLs have been completed prior to placing children or youth out-of-state.
 2. Pay the receiving state's foster care rate, unless it is in the best interest of the child or youth to pay Washington State rates. If so, follow the [Administrative Approvals for Child Welfare](#) policy.
4. Adjusting or Terminating the FCRL
 1. When FCRLs need to be adjusted due to a significant change in circumstances for the child or youth that may affect their FCMP rate, as outlined in WAC 110-50-0450:
 1. Caseworkers must notify PRSs when an updated CSL may be needed.

2. PRSs must complete CSLs and determine if a rate adjustment is needed based on the information provided on the changes to the child's or youth's physical, mental health, or behavioral needs. If the rate changes notify the following of the rate change:
 1. Caseworkers
 2. Caregivers
 3. Fiduciary
 4. CPA, as applicable.
2. When FCRLs need to be terminate and the criteria is met in WAC 110-50-0490:
 1. Caseworkers must notify the fiduciaries of a placement closure.
 2. Fiduciaries must terminate placement to close the CSL and end the FCMP.
5. Foster Parents' Requests for Department Review
 1. PRS supervisors receiving requests from foster parents to complete a department review of their FCRL must verify the request was received within 20 calendar days of them receiving notification of their level. If the request is:
 1. Received within the timeframe, send information received from the foster parent to the regional administrator (RA) or designee.
 2. Not received within the timeframe, send the completed Caregiver Support Level Review DCYF 15-503 form to the foster parents notifying them that their foster care level will not be reviewed because it is outside the timeframe.
 2. RAs or designees receiving requests for a department review must:
 1. Follow WAC 110-50-0520 and review the request within 14 calendar days of receipt.
 2. Verify the request includes information the licensed caregiver believes was not known to DCYF when the level was determined.
 3. Consider whether:
 1. The information was correctly documented in the CSL.
 2. Any additional information provided by the licensed caregiver changes the FCRL.
 3. The CSL system was functioning properly in calculating the level.
 4. Notify the:

1. Licensed caregiver of the result of the review, per WAC 110-50-0530 using the Caregiver Support Level Review DCYF 15-503 form.
 2. CPA and caregivers support contractors of any change in levels, as applicable.
6. FCRL Administrative Hearings
- PRSs receiving requests from foster parents or an administrative hearing following a department review of the CSL must complete the following:
1. Maintain the current CSL.
 2. Contact the assistant attorney general (AAG).
 3. Follow:
 1. [Chapter 110-03 WAC](#)
 2. WACs 110-50-0540 and 110-50-0550
 4. Attend administrative hearings, unless directed otherwise by the AAG. If the administrative hearing determines the foster parents have:
 1. Provided additional information for the department review, review the information, and update the CSL.
 2. Not provided additional information, maintain the current CSL.
 5. Document in a FamLink case note the outcome of the administrative hearing.
 6. Upload the administrative review hearing order into FamLink.
 7. Notify the fiduciary of:
 1. Level changes.
 2. The effective date for the level changes.
7. Documentation
- PRSs must document information gathered from the following in the FamLink Caregiver Support Level Tool DCYF 15-007 form:
1. Collateral contacts or information for the initial CSL.
 2. The FamLink HCA report and collateral contacts, for required subsequent FCRLs.

Forms

Administrative Approval Request DCYF 05-210 (located in the Forms repository on the DCYF intranet)

Caregiver Support Level Review DCYF 15-503 (located in the Forms repository on the DCYF intranet)

Caregiver Support Level Tool DCYF 15-007 (located in the Forms repository on the DCYF intranet)

Foster Care Rate Assessment Determination DCYF 15-502 (located in the Forms repository on the DCYF intranet)

Resources

[Administrative Approvals for Child Welfare policy](#)

[Adoption Support policy](#)

[Background Checks policy](#)

[Caregiver Support Level Tool Guide CWP_0038 publication](#)

[Extended Foster Care \(EFC\) Program policy](#)

Foster Care Rate Assessment WACs 110-50-0400 through 110-50-0550

[Foster Parent Guide to Foster Care Rate Assessment CWP_0038 publication](#)

[Guardianship Assistance Program \(GAP\) policy](#)

[Indian Child Welfare Payment for Services for Children in Tribal Custody policy](#)

4270. Department of Corrections Confinement Alternatives

4270. Department of Corrections Confinement Alternatives sarah.sanchez Wed, 08/22/2018 - 12:44

Purpose

Department of Children, Youth, and Families (DCYF) families applying or participating in the Family and Offender Supervision Alternative Programs (FOSA) and the Community Parenting Alternative (CPA) are supported through case coordination and collaboration with Department of Corrections (DOC).

Laws

[RCW 9.94A - Sentencing Reform Act of 1981](#)

Policy

1. DCYF will provide DOC with requested case information to support DOC's assessment of parent's eligibility for the FOSA and CPA programs.
2. DCYF will collaborate with DOC and other programs in case planning on all open shared cases.

Procedures

1. Respond to DOC request within five calendar days for CA related information for an offender when:
 - o The court is considering FOSA or

- DOC is considering CPA
2. Provide ongoing case coordination and collaboration with DOC to prevent service duplication for all parents accepted in the FOSA or CPA programs and have an open CA case including:
 - Invite DOC worker to all shared planning meetings.
 - Participate in a minimum of one monthly face to face contact with DOC worker.
 - Participate in safety staffing for DOC Parenting Program with DOC worker and offender to determine services and case coordination.
 - Until the child is placed, ensure family time occurs per [Family Time and Sibling and Relative Visits](#) policy.
 3. Consider if an incarcerated parent with an open DCYF case should be referred to DOC for eligibility determination in FOSA or CPA. Make any referrals through email or phone to CA headquarters CFWS program manager.

Forms and Tools

- Request for Information - Initial Request Form
- Request for Information - Open Case Request Form

See Also

- [Shared Planning Meetings](#)
- [Family Time and Sibling and Relative Visits](#)

Resources

- DOC Information Request Process Document
- [J-PAY Step-By-Step Guide](#)
- CA-DOC Confinement Alternatives Matrix
- Regional DOC Leads

4300. Case Planning

4300. Case Planning sarah.sanchez Wed, 08/22/2018 - 12:44

43022. Outside Communication for Children in Out-of-Home Care

43022. Outside Communication for Children in Out-of-Home Care sarah.sanchez Wed, 08/22/2018 - 12:45

Purpose

Evaluate child safety and support to caregivers when determining outside communication with parents, relatives and other important people to the child in out of home care.

Laws

[RCW 13.34.136](#)

Policy

1. Children in out-of-home care must have reasonable access to uncensored communication with parents, relatives, and other people important to the child.
2. Communication restrictions must be based on a pending investigation or an identified child safety issue and be addressed in a court order or service plan.
3. Child safety issues must be addressed prior to allowing the child to participate in any communications with parents, relatives or people important to the child.

Procedures

1. Notify and collaborate with the child (if age appropriate), child's out-of-home caregiver, parent(s), relative(s) and important people to the child to develop the child's communication plan. Communication may include:
 1. Private telephone calls;
 2. Mail and gifts;
 3. Electronic communication (*E-mail and other electronic social networking avenues such as Facebook, My Space and Twitter*). Access to electronic communication is based on reasonable caregiver or social worker discretion and on electronic device availability.
2. Note: Family time occurs per [Family Time and Sibling and Relative Visits](#) policy
3. Discuss with caregivers any court orders or service plans that restrict the child's contact with family, relative or important people to the child. Limited or censored communication could include:
 1. Opening and reviewing mail for appropriate child related content.
 2. Opening gifts to determine age appropriateness.
 3. Monitoring of email or phone calls for appropriate child related content.
 4. Determining age appropriate use of social networking sites, including limitations. Note: Allowing children access to electronic communication as described above is based on reasonable caregiver discretion and on electronic device availability.
4. Inform caregivers on social networking websites regarding children in out-of-home care must not include:
 1. Child's name
 2. Identify the child as being a foster child.

3. Discussion about case specific information about the child or the child's family
5. Inform caregivers if there are safety reasons why unidentified photos may not be posted on the caregiver's social networking site(s).
6. Discuss communication planning with the child and caregiver during monthly visits.
7. Conduct when needed, a Shared Planning Meeting if communication needs to be limited or censored due to safety concerns.
8. Document the child's communication plan and any decisions to limit a child's communication in the electronic case file.

See Also

[2440 Service Agreements Policy](#)

[4301 Shared Planning Policy](#)

4302A. Educational Services and Planning: Early Childhood Development, K-12 and Post-Secondary

4302A. Educational Services and Planning: Early Childhood Development, K-12 and Post-Secondary sarah.sanchez Wed, 08/22/2018 - 12:45

Original Date: July 28, 2013

Revised Date: June 9, 2022

Sunset Review Date: June 30, 2026

Approved by: Frank Ordway, Chief of Staff

Purpose

Ongoing educational progress is vital to support early childhood development and school success for all children in the care or custody of the Department of Children, Youth, and Families (DCYF).

Definitions

Home Schooling is when a child is receiving home-based educational instruction from his or her caregiver. The caregiver providing the home-based instruction is responsible for developing the curriculum being taught to the child, ensuring the annual assessment is administered, maintain necessary records, etc.

Alternative Learning Experience (ALE) is a form of public education that provides instruction in an on-line, remote or site-based setting. The curriculum being used by the instructor is developed, approved and monitored by the school district.

Private School is a non-public school which meets a minimum set of state standards of health, safety, and education established and approved by the Washington State Board of Education. Credits obtained at a private school may not transfer directly to public school.

School of Origin means the school in which a child is enrolled at the time of placement. If a child's placement changes, the school of origin must be considered the school in which they are enrolled in when the placement change occurs.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.045](#) Education liaison-Identification

[RCW 28A.150.510](#) Transmittal of education records to department of children, youth, and families- Disclosure of educational records-Data-sharing agreements- Comprehensive needs requirement document-Report

[RCW 28A.225.010](#) Attendance mandatory-Age-Exceptions

[RCW 28A.225.350](#) Students in out-of-home care-Best interest determinations

[RCW 74.13.550](#) Child placement-Policy of educational continuity

[RCW 74.13.560](#) Educational Continuity-Protocol development

[RCW 74.13.631](#) School aged youth-school placement options

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act of 2008

Policy

1. Children who enter out-of-home care or change placements will remain at the school they were attending, whenever it is practical and in the best interest of the child.
2. All school-aged children in out-of-home placement will attend public school, unless they are court approved for home schooling, private school or to participate in an ALE instruction conducted 100% on-line in the child's placement setting. Children placed under a Voluntary Placement Agreement only require DCYF approval.
3. The ongoing educational needs of children in out-of-home care will be addressed with the child and caregiver at each placement. This includes completing and updating the education information on the [Child Information and Placement Referral form 15-300](#) at each placement change.
4. All school-aged children in out-of-home care will have a completed Education Plan in FamLink that is updated at least every six months and attached to the [court report](#).

1. The Education Plan will address the child's physical, emotional, or behavioral needs and any issues that impair his or her learning abilities. The plan should be reviewed at each placement change.
2. The request and receipt of academic records must be documented in the education plan and attached to the [court report](#).
5. DCYF will facilitate post-secondary education planning for children in out-of-home care.
6. All children will be referred for services when a developmental concern is suspected. Refer children:
 1. Birth through two years of age to the appropriate early intervention agency within two working days of the concern being identified.
 2. Three through 17 years of age to the Child Find program or local school district for an assessment.
7. An Educational Liaison will be identified for children and youth grades six through twelve at shelter care and subsequent dependency review hearings if:
 1. Parental rights have been terminated;
 2. Parents are unavailable because of incarceration or other limitations;
 3. The court has restricted contact between the youth and parents; or
 4. The youth is placed in a behavioral rehabilitative setting and the court has limited the educational rights of the parents.

Procedures

The caseworker will:

1. Keep the child enrolled in their school of origin when they enter care or change placement when it is practical and in the best interest of the child while the determination is being made.
2. Determine the child's best interest on school related decisions by gathering input on the child's case plan from relevant and appropriate individuals. This determination should be made prior to placement moves, changing schools, and in coordination with their education team to include, but not limited to, input from the:
 1. Child
 2. Family
 3. Caregivers
 4. School
 5. Guardian Ad Litem

3. Coordinate with the child's school district to:
 1. Discuss the following prior to a placement move:
 1. The best interest of the child and determine either to:
 1. Keep the child enrolled in the school they are currently attending.
 2. Change schools when it is practical and in the best interest of the child.
 2. Continue providing transportation to the school of origin, when applicable, until a best interest determination has been made.
 2. Confirm the child is enrolled and attending school within three days of an initial out-of-home placement.
 3. Request any missing academic or medical records required for school enrollment within ten business days.
 4. Request updated records and education information as needed when there is a change in schools or change in out-of-home placement and at the end of each school year.
 5. Notify the child's previous and new school when an out-of-home placement change occurs and when the child is returned home by providing the completed [School Notification DCYF 09-093](#) to the schools.
 6. Advocate for appropriate services to meet the child's academic, medical, mental health and social-emotional needs. This includes participating in school meetings such as disciplinary or special education reviews.
 7. Pay any unpaid fees or fines owed by the child to the school or school district.
 8. Notify all legal parties to the case when a school disruption occurs (e.g. discipline, hospitalization, juvenile detention, etc.).
4. Obtain approval annually and/or when there is a change in caregivers for a child to:
 1. Be home schooled;
 2. Participate in an ALE instruction that is 100% on-line and in the child's placement setting (excludes group homes with an established school campus); or
 3. Attend a [Washington State Board approved private school](#) that does not use corporal punishment. Caseworkers must verify the private school is on the list of [Approved Private Schools in Washington State](#) and confirm with the private school that corporal punishment is not included in their discipline policies.
 4. Complete the Administrative Approval Request DCYF 05-210 and verify the request:

1. Supports the child's safety and well-being needs (e.g. developmental, physical and social-emotional);
 2. Promotes inclusion in the caregiver's home and other events and activities; and
 3. Is consistent with the child's case plan.
5. If the request is for home schooling, obtain and attach a copy of the approved declaration from the school stating the caregiver has been approved to home school the child.
 6. Regional Education leads must review the Administrative Approval Request DCYF 05-210 to:
 1. Review the reasons for the request.
 2. Consult with the caseworker if there are additional interventions or resources that can be explored.
 7. Obtain regional administrator or designee approval on the Administrative Approval Request DCYF 05-210.
 8. Obtain approval from Director of Field Operations on Administrative Approval Request DCYF 05-210.
 9. For children in shelter care status or dependent, obtain court approval if approved by Director of Field Operations.
 10. Provide a copy of the approved Administrative Approval Request DCYF 05-210 and attachments to the Division of Licensing Resources licenser if the child is approved for home schooling and the caregiver is licensed.
5. If a youth requests to participate in an international study program, obtain:
 1. Parent's approval if the youth is not legally-free.
 2. Approval outlined in the [6100 Travel](#) policy.
 6. Refer a school-aged child to appropriate programs within two working days after a concern has been identified (e.g. Education Advocacy Program, Graduation Success, school counselor, etc).
 7. If a child qualifies for early child intervention services, collaborate with the local service provider and the child's caregiver to enroll the child in the appropriate services and develop the Individual Family Service Plan (IFSP).
 8. Provide the child's out-of-home caregiver with copies of necessary school records including IFSP, Individual Education Plan (IEP) or 504 Plans.
 9. Monitor the child's ongoing academic progress including most current grades, state test scores, attendance and credits, when applicable, to make sure the child is prepared to

progress to the next grade level and is on track to graduate. If the child is home schooled, review the end of year assessment to determine if academic progress is being made.

10. Engage child and caregiver in reviewing the child's progress and planning for academic success.
11. Provide copies of all education records to foster youth age fifteen through eighteen years prior to the youth turning eighteen years old as defined in the Transition Plan policy.
12. Involve youth in post-high school planning including options for post-secondary education and career or vocational training. This includes scholarships, financial aid, Education Training Voucher Program, etc.
13. Document the child's state student identification (SSID) number, education progress and needs in the FamLink Education Pages. This includes completing and updating the FamLink Education page at least every six months.

Forms

[Child Information and Placement DCYF 15-300](#)

Administrative Approval Request 05-210 (located in the Forms repository on the DCYF intranet)

[School Notification DCYF 09-093](#)

Resources

[Best Interest Determination Guidance: Best Practices School Selection for Children and Youth in Foster Care](#)

Caseworker's Guide to Transition Planning (located on the DCYF intranet)

[Early Support for Infants and Toddlers \(ESIT\)](#)

FamLink Education eLearning (located on the DCYF intranet)

[Foster Youth Services](#)

[Guide for Supporting Students in Foster Care](#)

[Office of Superintendent of Public Instruction Foster Care Education Program site](#)

[Treehouse](#)

4304. Active, Diligent, and Reasonable Efforts

4304. Active, Diligent, and Reasonable Efforts sarah.sanchez Wed, 08/22/2018 - 12:47

Original Date: November 19, 1997

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance on the required use of:

- [Active efforts](#) when there is reason to know children are or may be Indian children to:
 - Prevent their removal.
 - Promote timely reunification of Indian families.
- Diligent efforts when serving parents or guardians.
- Reasonable efforts to:
 - Prevent children's or youth's removal from parents or guardians, even:
 - When they were not residing with the children or youth at the time of removal.
 - In emergent circumstances.
 - Achieve timely permanency.

Scope

This policy applies to caseworkers.

Laws

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[Chapter 13.38 RCW](#) Indian Child Welfare Act

[Chapter 26.44 RCW](#) Abuse of Children

[25 USC](#) Federal Indian Child Welfare Act (ICWA)

[PL 105-89](#) Adoption and Safe Families Act (ASFA) of 1997

Policy

Caseworkers must:

1. Make:
 1. Active efforts when there is reason to know children are or may be Indian children to prevent the children's removal and promote timely reunification of Indian families, per [ICW Child Protective Services Investigation and Family Assessment Response](#) policy.
 2. Diligent efforts to serve and notify parents or guardians, per the [Dependency Petition Process](#) policy.

3. Reasonable efforts to:
 1. Prevent placement of children and youth in out-of-home care.
 2. Assess the parent or guardian the children or youth do not primarily reside with before the initial removal and prior to the shelter care hearing.
2. Offer services to families to promote reunification, unless a court made a finding of [aggravated circumstances](#).
3. Return children and youth home when safety threats have been managed or have been mitigated, per the [Safety Assessment](#) policy.
4. Maintain stability for children and youth.
5. Achieve timely permanency when children and youth are placed in out-of-home care.

Procedures

1. Serving and Notifying Parents and Guardians
Caseworker must make diligent efforts to:
 1. Serve the parents or guardians the petition and supporting documents, including the Temporary Custody Notification 09-731 form.
 2. Provide the shelter care hearing information.
 3. Notify the parents and guardians as soon as possible when their children or youth have been removed from their custody by following the [Dependency Petition Process](#) policy.
2. Placement Prevention
Caseworkers must make reasonable efforts to prevent out-of-home placement by:
 1. Providing [concrete goods](#) and services, as applicable.
 2. Completing one of the following with the family to determine what available services would address the identified safety threats:
 1. [Investigative Assessment](#) for CPS cases.
 2. [Family Assessment Response Family Assessment \(FARFA\)](#) for FAR cases.
 3. [Comprehensive Family Evaluation \(CFE\)](#) for:
 1. Family Voluntary Services (FVS) cases.
 2. Child and Family Welfare Services (CFWS) cases.
 3. Developing written [case plans](#) when required, to improve the capacity of families to provide safe and stable homes for their children or youth, including services that are:
 1. Accessible

2. Available
 3. Culturally appropriate
3. Placement Out-of-Home
Caseworkers must:
1. Make reasonable efforts to locate and place children and youth with relatives and suitable persons, per the [Relative Search and Notification](#) policy.
 2. Follow the:
 1. [ICW Placement Preferences](#) policy when there is reason to know that children are or may be Indian children.
 2. [Out-of-Home Placements](#) policy when placing children or youth in out-of-home placement.
4. Stability or Permanency
Caseworkers must provide reasonable efforts to achieve stability or timely permanency for children or youth, placed in out-of-home care by:
1. Following the [Relative Search and Notification](#) policy to locate relatives.
 2. Identifying relatives or suitable persons who:
 1. Meet the health, safety, and well-being of the children or youth.
 2. Maintain stability for children and youth.
 3. May be a permanent placement resource.
 3. Providing concrete goods, as applicable.
 4. Following [Permanent and Concurrent Planning](#) policy.
5. Returning Children and Youth Home
Caseworkers must make reasonable efforts when children or youth are placed in out-of-home care to return them home by:
1. Offering services to the parents or guardians to address the [safety threats](#), unless [aggravated circumstances](#) exist. Services must:
 1. Focus on the identified safety threats and help families eliminate the need for placement.
 2. Be culturally appropriate.
 3. Be accessible.
 2. Following the [Return Home](#) policy.
6. Documentation

1. Caseworkers must follow the [Documentation](#) policy and document all active, diligent, and reasonable efforts.

Forms

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

Temporary Custody Notification 09-731 (located in the Forms repository on the DCYF intranet)

Resources

[Case Plan policy](#)

Caseworker Efforts' Guide document (located on the DCYF Intranet page, Policy and Practice, Policy Guides)

[Concrete Goods policy](#)

[Documentation policy](#)

[Family Assessment policy](#)

[ICW Active Efforts and Tribal Collaboration](#)

[ICW Child Protective Services Investigation and Family Assessment Response policy](#)

[ICW Placement Preferences policy](#)

[Out-of-Home Placements policy](#)

[Permanent and Concurrent Planning policy](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Relative Search and Notification policy](#)

[Return Home policy](#)

[Safety Assessment policy](#)

[Shared Planning Meetings policy](#)

[Termination of Parental Rights \(TPR\) policy](#)

4305. Permanent and Concurrent Planning

4305. Permanent and Concurrent Planning sarah.sanchez Wed, 08/22/2018 - 12:48

Original Date: 2000

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose

Permanency planning starts at first contact with the family and continues until a permanency goal is achieved.

Concurrent planning provides for timely reunification services while anticipating and preparing for an alternate permanent plan.

Scope

This policy applies to child welfare employees.

Laws

[Chapter 11.130 RCW](#) Uniform Guardianship, Conservatorship, and Other Protective Arrangements Act

[Chapter 13.34 RCW](#) Juvenile court act-Dependency and termination of parent-child relationship

[Chapter 13.36 RCW](#) Guardianship

[Chapter 26.33 RCW](#) Adoption

[RCW 74.15.020](#) Definitions

[PL 105-89](#) Adoption and Safe Families Act of 1997

Policy

1. A permanency planning goal must be identified for all children in out-of-home care no later than 60 days from the Original Placement Date (OPD).
2. Permanent plan options must be discussed in [shared planning meetings \(SPM\)](#). This includes discussing both the [chapter 13.36 RCW](#) guardianship and the [chapter 11.130 RCW](#) guardianship of a minor using the [Permanency Planning Matrix DCYF CWP_0088 publication](#) with the child's or youth's parents and caregivers, as an alternative to [termination of parental rights \(TPR\)](#) and [adoption](#), per the [Guardianships](#) policy.
3. A written report to the court must identify concurrent plans. A permanent plan includes how the department is working towards securing a safe, stable and permanent home for the child. The court report must address the following:
 1. Primary and alternate permanent plans being pursued concurrently. Permanent and alternate permanent plan options only include:
 1. Return of home to the child's parent, guardian or legal custodian
 2. [Guardianship](#)
 3. [Guardianship of a minor](#)
 4. [Adoption](#)

2. Reasonable efforts to return the child to their birth or adoptive parents.
 3. How the permanency plan is in the best interest of the child.
 4. How the agency has worked toward securing a safe, stable and permanent home for the child as early as possible.
4. Long-term foster or relative care is not a permanent plan. It is only considered when other permanent plans are determined not to be in the best interest of a child age 16 and older as the results of a shared planning decision making process. Continued efforts must be made to achieve legal permanency, unless determined to not be in the child's best interest.
5. Caseworkers must:
1. If there is reason to know children are or may be Indian children, follow Indian Child Welfare (ICW) policies:
 1. [Active Efforts and Tribal Collaboration](#)
 2. [Placement Preferences](#)
 2. Consider a permanent plan that allows the parent to maintain a relationship with the child when a parent meets the following criteria:
 1. Is sentenced to long-term incarceration
 2. Has maintained a meaningful role in the child's life
 3. There is no court order limiting or prohibiting contact
 4. It is in the child's best interest.
6. Citizenship and immigration status of the child should be determined early in the case and should be re-confirmed prior to establishing a permanent plan per [Notification to Foreign Consulate](#) policy.

Procedures

1. Plan:
 1. Utilize the shared planning process when making permanency planning decisions for children in out-of-home care according to the timelines in the [SPM](#) policy. Any changes in a permanent plan require a new SPM. Staff permanent plans with your supervisor.
 2. Determine the best interest of the child by consider the following:
 1. The child's wishes and long-term goals
 2. Medical issues
 3. Age of the child

4. The child's connections to their identity, affiliations to their community, tribe, church, school, religious/spiritual beliefs, relatives and friends
5. The long-term needs of the child
6. The emotional ties and development needs and how these can be met through the identified permanent plan

2. Document:

1. The primary and alternate permanent plan on both the [Shared Planning Meeting DCYF 14-474](#) form and the Permanency Planning tab in FamLink.
2. The discussion about both types of guardianship with the children's parents and caregivers as an alternative to TPR and adoption on the [Shared Planning Meeting DCYF 14-474](#) form in FamLink during the SPM.
3. The reasons the identified permanent plan is in the best interest of the child in the case plan.
4. When siblings are not placed together:
 1. Document exceptions or other reasons siblings are being placed apart as it applies to each child on the Sibling Visit Details tab in the FamLink Visit Plan Page.
 2. Print a copy of the Sibling Visit Details tab in the FamLink Visit Page; obtain approval signatures from supervisor and Area Administrator.
 3. Upload approved Sibling Visit Details document into FamLink.

3. Permanent Plans:

4. Identify a primary and alternate plan from the following options:
 1. Always consider Return Home as the primary permanent plan for a child when all the following conditions are met:
 1. Aggravated circumstances do not exist.
 2. It is likely the child will return home per the [Return Home](#) policy.
 3. The plan of returning home is in the best interests of the child.
 4. The child (as age and developmentally appropriate) has been consulted regarding the potential benefits and risks of the return home.
 5. Safety threats are eliminated or can be managed in the family home.
 2. Consider [chapter 13.36 RCW](#) guardianship, per the [Guardianships](#) policy when the following conditions are met:

1. The child was removed from the parents through a Voluntary Placement Agreement (VPA) or the child is a dependent of DCYF.
 2. A determination is made through the SPM that it is not in the best interests of the child to pursue reunification or adoption.
 3. The plan of guardianship is in the best interest of the child.
 4. The proposed caregiver has the ability to meet the child's special needs without DCYF case management and caseworker support and the caregiver:
 1. Can make a commitment to parent the child until adulthood.
 2. Has a significant relationship with the child.
 3. Has an approved family home study, per the [Completing Home Studies](#) policy or the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 5. The [Permanency Planning Matrix DCYF CWP_0088 publication](#) has been reviewed with the proposed caregiver.
 6. The child and a sibling are in the same placement, the permanent plan is [chapter 13.36 RCW](#) guardianship for that sibling and guardianship is also in the best interests of this child.
 7. There is reason to know children are or may be Indian children and the tribes are involved and requesting a guardianship. If a guardianship subsidy is being requested the child and the prospective guardian must meet GAP eligibility requirements.
 8. The child (as age and developmentally appropriate) has been consulted regarding the potential benefits and risks of the permanency plan and the child has stated preference for the identified plan.
3. Consider [chapter 11.130 RCW](#) guardianship of a minor when the following conditions are met:
1. The child was removed from the parent(s) through a VPA or the child is a dependent of DCYF.
 2. A determination is made through the shared planning process that it is not in the best interests of the child to pursue reunification, [chapter 13.36 RCW](#) guardianship, or adoption.
 3. The plan is in the best interest of the child.
 4. The proposed caregiver has the ability to meet the child's special needs without DCYF case management and caseworker support and:

1. Can make a commitment to parent the child until adulthood.
 2. Has a significant relationship with the child.
5. If placement has been made with the proposed caregiver, the caregiver must have an approved family home study, per the [Completing Home Studies](#) or [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 6. The [Permanency Planning Matrix DCYF CWP_0088 publication](#) has been reviewed with the proposed caregiver.
 7. The child and sibling are in the same placement, the permanent plan is guardianship of a minor for that sibling and guardianship of a minor is also in the best interests of this child.
 8. If there is reason to know children are or may be Indian children and the tribes are involved and requesting guardianship of a minor.
4. Guardianship of a minor actions may be initiated by the any person believing the child or youth should have a guardian in Superior Court and for the matter to be heard by Superior Court the Juvenile Court must waive its exclusive jurisdiction.
 5. Consider adoption, per the [Identifying Adoptive Families](#) policy, when a child is unable to return home and when all the following conditions are met:
 1. The child was removed from parents and is dependent.
 2. Parental rights will likely be terminated by the court or relinquishment has been or will be accepted by both DCYF and the court.
 3. Reasonable efforts were provided to the parent(s) to safely reunify the child to their care. The parent(s) have not made sufficient and timely progress in addressing the parental deficiencies that brought the child into care and this is documented in the case file.
 4. The plan is in the best interests of the child.
 5. Aggravated circumstances may exist. Refer to the [Permanency Planning Hearings-Timelines](#) policy.
 6. The child or youth, as age and developmentally appropriate, has been provided education about the impacts of adoption. Youth over the age of 14 must sign consent for the adoption, per [RCW 26.33.160](#).
 7. The child and sibling are in the same placement, the permanent plan is adoption for that sibling and also in the best interest of this child.
 8. The prospective adoptive parent has an approved adoptive home study, per the [Completing Home Studies](#) policy.

5. Long-Term Foster or Relative Care Agreements must only be considered when children are age 16 and over and all the following conditions are met:
 1. The child was removed from the parents and is dependent.
 2. A determination is made through the shared planning process that it is not in the best interest of the child to pursue legal permanency options: reunification, guardianship, guardianship of a minor, or adoption.
 3. The plan is in the best interest of the child and the child needs the stability offered by this living arrangement.
 4. [Termination of parental rights \(TPR\)](#) must be reviewed at every court hearing and the court must find that the compelling reasons still exist and are documented in FamLink.
 5. The child has made a significant connection to the caregiver and has resided with the caregiver for over six months.
 6. The [Permanency Planning Matrix DCYF CWP_0088 publication](#) has been reviewed with the proposed caregiver.
 7. The youth (age 16 and over) has been consulted regarding the potential benefits and risks of the permanency plan and the youth has indicated a preference for the identified plan and is willing to sign the agreement.
 8. The youth over the age of 16 and capable of giving consent has agreed to sign consent for the long-term foster care agreement and is aware of the potential benefits and risks of other permanency plans.
 9. The caregiver:
 1. Makes a commitment to care for the child until the age of 18 or 21 if applicable.
 2. Shows an ability to meet child's special needs.
 3. Demonstrates an understanding that the child remains in the custody of DCYF and under DCYF's control and further demonstrates an ability to cooperate with DCYF in shared planning for the child.
 4. Agrees to enter into a long-term foster care or relative care agreement approved by the court.
 5. Signs a [Long Term Care Agreement for Foster Parents or Relative Caregivers DCYF 15-322](#) form.
 6. Regional Administrators signs both forms:
 1. [Long Term Care Agreement for Foster Parents or Relative Caregivers DCYF 15-322](#)

2. Checklist for Approval Long Term Agreement for Foster Parents or Relative Caregivers DCYF 15-323 (located in the Forms repository on the DCYF intranet)
7. Demonstrates an understanding of permanency as a long-term, life-long connection and has agreed to support the youth in their transition to adulthood.

Forms

Checklist for Approval Long Term Agreement for Foster Parents or Relative Caregivers DCYF 15-323 (located in the Forms repository on the DCYF intranet)

[Long Term Care Agreement for Foster Parents or Relative Caregivers DCYF 15-322](#)

[Shared Planning Meeting DCYF 14-474](#)

[Voluntary Placement Agreement DCYF 15-281](#)

Resources

[Completing Home Studies policy](#)

[Guardianships policy](#)

[Indian Child Welfare Active Efforts and Tribal Collaboration policy](#)

[Indian Child Welfare Placement Preferences policy](#)

[Identifying Adoptive Families policy](#)

[Permanency Planning Hearings-Timelines policy](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Placing with and Supporting Unlicensed Relatives and Suitable Persons policy](#)

[Return Home policy](#)

[Shared Planning Meetings policy](#)

[Termination of Parental Rights \(TPR\)](#)

43051A. Return Home

43051A. Return Home sarah.sanchez Wed, 08/22/2018 - 12:48

Original Date: 2007

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to:

- Identify what conditions must change for children and youth to return home.
- Provide reasonable efforts for timely reunification.
- Support dependent children and youth to achieve:
 - A safe and successful transition home.
 - Permanent reunification with their parents or guardians.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, qualified residential treatment program, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.34.136](#) Permanency Plan of Care

[RCW 13.34.138](#) Review hearings - Findings - Duties of parties involved - In-home placement requirements - Housing assistance

Policy

Caseworkers must complete the following:

1. Prior to returning dependent children or youth to their parents or guardians or when the court orders them to return home immediately:
 1. Identify and assess parents or guardians and all adults in the home who may act as a caregiver for the child or youth.
 2. Determine whether they need services to address the safety of the child or youth, regardless of whether they are a party to the dependency.
2. After returning dependent children or youth to parents or guardians:
 1. Monitor the safety, permanency, and well-being of each child or youth before closing the case.
 2. Assess any new adults in the home who are acting as a caregiver for the child or youth.

3. Determine whether the new adults need services to address the safety of the child or youth, regardless of whether they are a party to the dependency.
3. Obtain court approval for any trial return home (TRH) case to remain open beyond six months.

Procedures

1. Prior to Return Home

Caseworkers must complete the following prior to children's or youth's return home on a TRH or when the court orders them to return home immediately, assess their safety, permanency, and well-being and fully assess their parents or guardians and any adult residing in the home acting as a caregiver for services by completing the following:

1. Follow the [Active, Diligent, and Reasonable Efforts](#) policy.
2. Complete:
 1. A [Safety Assessment DCYF 15-258A](#) form in FamLink, per the [Safety Assessment](#) policy.
 2. Background checks for all adults residing in the home. This includes adult parents or guardians residing in the home, per the [Background Checks](#) policy, as early as possible prior to the TRH.
3. Offer referrals for any needed services.
4. Collaborate with tribes if there is reason to know children are or may be Indian children, per the [Indian Child Welfare \(ICW\) Dependency Cases](#) policy.

2. After Children or Youth are Returned Home

1. Caseworkers must complete the following after children or youth are returned home:
 1. On a TRH:
 1. Follow the Timely & Accurate Placement Entry User Guide document and verify fiduciaries are notified of the return home.
 2. Monitor their safety, permanency, and well-being and assess their parents or guardians and any adult residing in the home and acting as a caregiver for services by:
 1. Completing:
 1. A Safety Assessment DCYF 15-258A form and updating the [Safety Plan DCYF 15-258B](#) form if safety threats are identified, per the [Safety Assessment](#) policy.

2. Monthly health and safety visits and monthly visits with parents, per the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 3. Background checks on all adults who move into the home that did not previously receive a background check, per the [Background Checks](#) policy.
 2. Offering referrals to services, as applicable, and notify the court:
 1. Of any referrals made during a regular court review hearing.
 2. If the child or youth or any parent or guardian or adult fail to engage in or follow through with the services as soon as the information is known.
 3. Update the [Comprehensive Family Evaluation DCYF 10-480](#) and the Court Report DCYF 09-095 forms in FamLink with the parent's or guardian's progress and child's or youth's safety, permanency, and well-being using information gathered from:
 1. [Health and safety visits with children and youth and monthly visits with parents and caregivers](#)
 2. [Shared planning meetings](#)
 3. Service providers
 4. Recommend dismissal of the dependency when the parents or guardians have completed the TRH requirements and demonstrated their ability to safely resume parenting and have custody of their children or youth.
 5. Consult with the assistant attorney general prior to court hearings if it is in the child's or youth's best interest to request an extension of the TRH beyond six months.
3. Documentation
Caseworkers must document the following:
 1. Conditions for return home and reasonable efforts to reunify the family in the FamLink Safety Assessment DCYF 15-258A form or case notes for the parents or guardians.
 2. Completed return home activities or services by the parents or guardians in the following forms as applicable:
 1. Comprehensive Family Evaluation DCYF 10-480

2. Court Report DCYF 09-095
3. Services completed by adults residing in the home who are acting as a caregiver, in a case note.

Forms

[Comprehensive Family Evaluation DCYF 10-480](#)

Court Report DCYF 09-095 (located on the DCYF Forms Repository on the DCYF intranet)

[Safety Plan DCYF 15-258B](#)

[Safety Assessment DCYF 15-258A](#)

Resources

[Active, Diligent, and Reasonable Efforts policy](#)

[Background Check policy](#)

[Caregiver Support Level and Foster Care Assessment Determination policy](#)

[Case Plan policy](#)

[Child Health and Education Tracking \(CHET\) Screening policy](#)

[Court Report policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[ICW Dependency Cases policy](#)

[Safety Assessment policy](#)

[Shared Planning Meetings policy](#)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

43055. Permanency Planning Hearings-Timelines

43055. Permanency Planning Hearings-Timelines sarah.sanchez Wed, 08/22/2018 - 12:49

Permanency planning hearings must occur:

1. By the 12th month of placement for all children in out-of-home care even if reunification with parents is the primary plan and the parents are making significant progress.
2. Within one year of each previous permanency planning hearing as long as the child remains in out-of-home care without a permanency plan being achieved. A child in a long-term care agreement is not considered to have permanency achieved, therefore, permanency planning hearings continue.

3. If, following 90 days of service delivery after disposition, the parents have failed to make progress or engage in services in resolving the issues that brought the child into care. This may coincide with the initial review hearing which is to be scheduled for in-court review six months from OPD or 90 days from the entry of the dispositional order, whichever comes first.
4. Within 30 days after the court has determined that reunification services for the family are no longer required in a case with a finding of aggravated circumstances. In those cases, the social worker must identify a primary or alternate permanency planning goal other than reunification with the legal parent(s).

4306. Termination of Parental Rights (TPR)

4306. Termination of Parental Rights (TPR) sarah.sanchez Wed, 08/22/2018 - 12:49

Applies To: This policy applies to caseworkers.

Policy Number & Title: 4306. Termination of Parental Rights (TPR)

Effective Date: November 15, 2024

Purpose

The purpose of this policy is to provide guidance on TPR including:

- Determining whether to file TPR petitions.
- Filing petitions for TPR.
- Supporting or opposing relinquishments of parental rights.
- Dismissing petitions for TPR.

Authority

[Title 29 USC § 701](#) Rehabilitation Act of 1973

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[Chapter 26.33 RCW](#) Adoption

[PL 105-89](#) Adoption and Safe Families (ASFA) Act of 1997

Policy

Caseworkers:

1. Must:
 1. Follow these policies when considering termination or relinquishment of parental rights:
 1. [Permanent and Concurrent Planning](#) when making permanency planning decisions.

2. [Indian Child Welfare \(ICW\) Reason to Know](#) when there is reason to know children or youth are or may be Indian. If they are, follow these additional ICW policies:
 1. [Guardianships](#).
 2. [Termination of Parental Rights](#).
 3. [Voluntary Relinquishment of Parental Rights](#).
 4. [Indian Child Welfare Act \(ICWA\) Notice](#), when applicable.
 3. [Relative Search and Notification](#) to engage all identified relatives throughout the life of the case.
 4. DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy to verify whether modifications are needed or have been provided to parents with a disability, prior to filing a TPR.
2. Refer cases to the assistant attorney general (AAG) to file a TPR petition when it's in the children's or youth's best interest and either apply:
 1. Court ordered:
 1. At review hearing.
 2. A finding of aggravated circumstances outlined in [RCW 13.34.132](#).
 2. Children or youth have been in out of home care for 12 of the last 19 months using a cumulative calculation and the requirements for involuntary TPR outlined in [RCW 13.34.180](#) are met, unless the court makes a good cause finding.
 3. Follow the parent's or guardian's preference for the proposed adoptive placement of children or youth when both of the following apply:
 1. They request to relinquish their parental rights prior to filing a TPR petition.
 2. The prospective adoptive parents chosen by the parents meet the qualifications to adopt as outlined in chapters:
 1. [13.34 RCW](#)
 2. [26.33 RCW](#)
 4. Consider:
 1. Filing a TPR petition prior to 12 months of children or youth being in an out-of-home placement when both of the following apply:
 1. In the children's or youth's best interests.

2. Requirements for involuntary TPR outlined in [RCW 13.34.180](#) are met.
 2. The parents' or guardians' preference for the proposed adoptive placement when they request to relinquish their parental rights after a TPR petition has been filed.
 5. Determine if it's in the best interest of the child or youth to file a TPR when a parent or guardian requests a relinquishment of their parental rights.
 6. Follow the [Open Adoption Agreements \(OAA\) and Letters of Intent](#) policy to determine if an OAA or letter of intent is appropriate for children or youth.
2. May:
1. Determine not to file a TPR petition when courts make a good cause finding.
 2. Withdraw a TPR petition if circumstances change, and the original petition no longer meets the requirements in [RCW 13.34.180](#) for filing a TPR.
 3. Oppose a voluntary relinquishment of parental rights when it is in the best interest of the children or youth including, but not limited to, when they:
 1. Do not have prospects for adoption.
 2. Are 14 years or older and do not consent to adoption.

Resources

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

[Guardianships policy](#)

[ICW Guardianships policy](#)

[ICW Reason to Know policy](#)

[ICW Termination of Parental Rights policy](#)

[ICW Voluntary Relinquishment of Parental Rights policy](#)

[Open Adoption Agreement and Letters of Intent policy](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Permanent and Concurrent Planning policy](#)

[Shared Planning Meetings policy](#)

Termination of Parental Rights (TPR) Procedures (Located on the DCYF intranet under Child Welfare, Policy & Practice, under Policies & Procedures)

Original Date: September 27, 1995

Revised Date: November 15, 2024

Review Date: November 30, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

43060. Open Adoption Agreements and Letters of Intent

43060. Open Adoption Agreements and Letters of Intent admin Wed, 06/07/2023 - 09:00

Original Date: July 1, 1991

Revised Date: July 1, 2023

Sunset Review Date: July 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of the policy is to provide guidance on the use of Open Adoption Agreements (OAA) and Letters of Intent. OAA and Letters of Intent are used when its determined in a [shared planning meeting \(SPM\)](#) that continued contact and/or communication with birth parents is in the best interest of dependent children or youth. This includes using:

- OAAs when they are placed in a prospective adoptive placement.
- Letters of Intent when they are not placed in a prospective adoptive placement.

Scope

This policy applies to child welfare employees.

Laws

[RCW 26.33.160](#) Consent to adoption-When revocable-Procedure

[RCW 26.33.295](#) Open adoption agreements-Agreed orders-Enforcement

Policy

1. Child and Family Welfare Services (CFWS) caseworkers must:
 1. Only consider using OAAs or Letters of Intent with dependent children or youth when it is:
 1. Determined to be in their best interest.
 2. Recommended by participants at [adoption planning reviews \(APR\)](#) or other [SPMs](#).
 2. Consult with an adoption caseworker when considering and finalizing OAAs or Letters of Intent.

3. Create OAAs or Letters of Intent prior to:
 1. [Termination of parental rights \(TPR\)](#).
 2. Accepting a relinquishment of parental rights.
 4. Not use OAAs or Letters of Intent as tools to coerce parents into relinquishing their parental rights. Parents should only enter into OAAs or Letters of Intent freely, voluntarily, and with full knowledge of the consequences.
2. DCYF may reimburse the costs and services related to negotiating OAAs as a non-recurring expense for the prospective adoptive parents through the [adoption support](#) program.

Procedures

1. Considering an OAA
CFWS caseworkers must complete the following when they assess an OAA is in the best interest of children or youth:
 1. Verify:
 1. With their current caregiver they would like to be identified as the prospective adoptive placement and they have an approved adoption [home study](#).
 2. Continued contact and/or communication with the birth parents will not interfere with the physical safety, health, or well-being of the child or youth and their adoptive parents.
 3. The court has not made a determination that the birth parents do not have the capacity to understand the terms of the OAA.
 2. Consider how the contact may impact or delay achieving permanency for the child or youth.
 3. Determine in collaboration with the Guardian ad Litem (GAL) that post-adoption contact and/or communication is in the child's or youth's best interest now and in the future. Best interest includes, but is not limited to, continued contact and/or communication that supports the child's or youth's:
 1. Well-being and security.
 2. Continued connections with biological family members.
 3. Stability in the adoptive placement.
 4. Desire to maintain contact.
 4. Consult with an adoption caseworker to discuss the terms of the OAA when they and the GAL support the consideration of the OAA.

5. Discuss with youth age 12 and older, their interest in maintaining contact with their birth parents and known siblings. The discussion must include:
 1. Information about the OAA process.
 2. The type and amount of contact the youth feels would be beneficial.
2. OAA Determination

CFWS caseworkers must complete the following when an OAA may be appropriate for children or youth:

 1. Schedule an [APR](#) or other [SPM](#):
 1. Within 30 calendar days prior to any of the following:
 1. Court changing the permanent plan to adoption.
 2. Sending the [TPR](#) referral to the assistant attorney general (AAG).
 3. Accepting the relinquishment of parental rights.
 2. Invite the individuals listed on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication for [APRs](#).
 3. Conduct [SPMs](#) following the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication to:
 1. Determine if the:
 1. Child or youth is in an adoptive placement.
 2. OAA:
 1. With the birth parent is in the best interest of the child or youth.
 2. Should include sibling visits, phone calls, etc.
 2. Allow birth parents and prospective adoptive family to express their wishes in terms of contact and/or communication that they feel is in the child's or youth's best interest.
 3. Obtain approval from youth age 14 years or older on the agreement and terms. If the youth does not agree, end the OAA process.
 4. Document on the FamLink [Shared Planning Meeting DCYF 14-474](#) form:
 1. The recommendation of the SPM, including:
 1. If the OAA is recommended.
 2. The benefits or concerns to the child's or youth's well-being to maintain contact and/or communicate with their birth parents and siblings.

2. Youth age:
 1. 12 years and older were provided information about the OAA process.
 2. 14 years and older, if they agree to participate in the OAA.
4. Conduct settlement conferences as needed, if available, when a decision on the terms of the OAA was not reached at the [SPM](#) and further discussions are needed to negotiate the terms. An AAG must be present at the settlement conference.
5. Notify the AAG regarding the position of DCYF on the OAA following the [SPM](#).
3. [SPM](#) Process Does Not Support OAA
CFWS caseworkers must proceed with [TPR](#) petitions or accept a relinquishment of parental rights without OAAs when the decision from the [SPM](#) does not support an OAA.
4. OAA Finalization when Supported by the [SPM](#) Process
 1. CFWS caseworkers must complete the following when a decision from the [SPM](#) recommends an OAA with birth parents:
 1. Consult with the adoption representative, e.g., adoption caseworker, adoption supervisor, or adoption unit designee, on the terms of the OAA.
 2. Review the Open Adoption Agreement Practice Tips for Caseworkers document.
 3. Not advise birth parents or adoptive parents on legal matters.
 4. Advise birth parents and prospective adoptive parents to consult their attorney, prior to signing an OAA.
 5. Notify birth parents and prospective adoptive parents that:
 1. They must create the terms of the OAA in consultation with their attorneys, if applicable. Caseworkers must be available for support in this process, and may consult with the AAG.
 2. OAAs are not legally enforceable, unless the terms of the agreement are in a court order.
 3. The effective date of the OAA is the adoption finalization date.
 6. Provide the following to the birth parents, prospective adoptive parents, and their attorneys to use when creating the OAA:
 1. Open Adoption Agreement Sample Template DCYF 09-006 form.
 2. Open Adoption Agreement Practice Tips for Biological and Prospective Adoptive Parents document.
 7. Verify:

1. Separate OAAs are completed for each birth parent participating.
2. OAAs include all of the following:
 1. Frequency of contact and/or communication.
 2. Types of contact and/or communication that is agreed to and most appropriate for the child or youth, now and in the future. Contact and/or communication must include at minimum, a letter sent one time per year. It may also include, but is not limited to:
 1. Additional letters
 2. Limited visitation
 3. Phone contact
 4. Electronic correspondence
 5. Photographs
 3. Physical, mailing, and/or email address for each legal party.
 4. Notification:
 1. That contact and/or communication prior to the effective date of the OAA is at the discretion of the prospective adoptive family, if approved by DCYF and the court.
 2. To all parties that if the prospective adoptive parents do not adopt, the OAA is not legally binding for future adoptive parents.
3. OAA language regarding contact and/or communication between the biological parent and the child or youth does not violate the child's or youth's right to confidentiality. Consult with the AAG as needed.
8. Discuss the OAAs with their supervisor and area administrator (AA) or designee. If they:
 1. Agree with the terms of the OAA, caseworkers must send the OAA to the AA or designee for approval.
 2. Do not agree with the terms of the OAA, they must provide the reason for their decision to the caseworker and supervisor, and caseworkers must:
 1. Notify all parties of the AA's or designee's decision.

2. Document the decision and notification in a FamLink case note.
 2. AAs or designees receiving OAAs must review them for approval, if:
 1. In agreement with the terms:
 1. Review and sign the OAA indicating DCYF is:
 1. In agreement with the terms.
 2. Not a legal party to the OAA.
 2. Send the completed OAA to caseworkers.
 2. Not in agreement, provide a reason for their decision to the caseworker and supervisor.
3. CFWS caseworkers receiving signed OAAs from the AAs or designees must:
 1. Verify they are signed by the following individuals prior to filing it in court:
 1. Prospective adoptive family.
 2. Birth parent, if their parental rights have not been terminated.
 3. Child's or youth's attorney and GAL, if applicable.
 2. Submit the signed OAAs to the:
 1. Juvenile court at the termination hearing.
 2. Superior court at the adoption hearing.
 3. Provide a copy of signed OAAs to the birth parents and prospective adoptive parents.
 4. Upload a copy of the OAA in the child's or youth's FamLink legally-free file and title it OAA.
 5. Maintain original OAA in the case file for transfer to adoptions.
5. Considering Letters of Intent

CFWS caseworkers must complete the following when they believe a Letter of Intent is in best interest of children or youth and they are not placed in an adoptive home prior to [TPR](#) or accepting the relinquishment of parental rights:

 1. Verify:
 1. Continued contact and/or communication with the birth parents will not interfere with the physical safety, health, well-being, or permanency options for the child or youth.

2. The court has not made a determination that the birth parents do not have the capacity to understand the terms of the Letters of Intent.
 2. Determine in collaboration with the GAL that the Letter of Intent is in the child's or youth's best interest, per Procedures Section 1.c.
 3. Consult with an adoption caseworker when they and the GAL support the consideration of a Letter of Intent.
 4. Discuss with youth age 12 and older, their interest in maintaining contact with their birth parents. The discussion must include:
 1. Information about the Letter of Intent process.
 2. The type and amount of contact the youth feels would be beneficial.
6. Letters of Intent Determination

CFWS caseworkers must complete the following when a Letter of Intent may be appropriate for children or youth:

 1. Schedule an [APR](#) or other a [SPM](#) within 30 calendar days prior to any of the following:
 1. Court changing the permanent plan to adoption.
 2. Sending the [TPR](#) referral to the AAG.
 3. Accepting the relinquishment of parental rights.
 2. Invite the individuals listed on the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication for [APRs](#).
 3. Conduct [SPMs](#) and follow the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication to determine if a Letter of Intent is in the best interest of the child or youth and:
 1. Allow birth parents to express their wishes in terms of contact and/or communication that they feel is in the child's or youth's best interest.
 2. Notify birth parents Letters of Intent:
 1. Are not legally binding agreements with DCYF.
 2. Will not delay permanency for a child or youth.
 3. Obtain approval from youth 14 years or older on the terms of the Letter of Intent. If the youth does not agree, end the Letter of Intent process.
 4. Document on the FamLink [Shared Planning Meeting DCYF 14-474](#) form:
 1. The recommendation of the SPM process, including:
 1. If the Letter of Intent is recommended.

2. The benefits or concerns to the child's or youth's well-being to maintain and/or communicate with their birth parents.
 2. Youth age:
 1. 12 years and older, were provided information about the Letter of Intent process.
 2. 14 years and older, if they agree to participate in the Letter of Intent.
 4. Notify the AAG regarding the position of DCYF on the Letter of Intent following the [SPM](#).
 5. If the Letter of Intent is not recommended, proceed with the [TPR](#) petition or accept a relinquishment of parental rights without a Letter of Intent.
7. Letters of Intent Finalization when Supported by the [SPM](#) Process
CFWS caseworkers must complete the following when a decision from the SPM recommends a Letter of Intent:
 1. Consult with the adoption caseworker on the terms of the Letter of Intent.
 2. Complete the Letter of Intent Sample Template DCYF 09-005 form separately for each birth parent participating by:
 1. Including a statement:
 1. Indicating that DCYF and the GAL believe that it is in the child's or youth's best interest. If there is not an agreement between DCYF and the GAL, DCYF may still proceed with a Letter of Intent.
 2. That DCYF must make reasonable efforts to locate an adoptive family that will agree to the terms.
 2. Identify the type of contact and/or communication with the birth parent that is most appropriate for the child or youth, now and in the future while an adoptive home is being identified. Contact and/or communication must include at a minimum, a letter sent one time per year. It may also include, but is not limited to:
 1. Additional letters
 2. Limited visitation
 3. Phone contact
 4. Electronic correspondence
 5. Photographs

3. Obtain physical, mailing, and/or email address for each birth parent and DCYF.
 4. Document the type of contact and/or communication with the birth parent in the Letter of Intent.
3. Verify Letters of Intent language regarding the contact and/or communication between biological parents and the child or youth does not violate the child's or youth's right to confidentiality. This includes consulting with the AAG when needed.
 4. Discuss Letters of Intent with their supervisor and AA or designee, and if they:
 1. Approve:
 1. Provide a copy of the Letter of Intent to birth parents.
 2. Upload the Letter of Intent to the child's or youth's FamLink legally-free file and title it "Letter of Intent".
 3. Maintain the original Letter of Intent in the case file for transfer to adoptions.
 2. Deny the Letter of Intent, they must provide the reason for the denial and caseworkers must:
 1. Notify all parties of the AA's or designee's decision not to approve the Letter of Intent.
 2. Document the decision and notification in a FamLink case note.
8. Obtaining Copies of OAA or Letters of Intent after Adoption Finalization
Caseworkers must forward requests for copies of OAAs or Letters of Intent after adoption finalization to the [Public Disclosure Unit](#) within two business days, per the DCYF Administrative 13.05 Public Records Requests and Disclosure policy.

Forms

Letter of Intent Sample Template DCYF 09-005 (located in the Forms repository on the DCYF intranet)

Open Adoption Agreement Sample Template DCYF 09-006 (located in the Forms repository on the DCYF intranet)

[Shared Planning Meeting DCYF 14-474](#)

Resources

[Adoption Planning Reviews \(APR\) policy](#)

[Adoption Support policy](#)

DCYF Administrative 13.05 Public Records Requests and Disclosure policy

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Open Adoption Agreement Practice Tips for Biological and Prospective Adoptive Parents](#) document (located on the Child and Family Welfare Services DCYF intranet page)

[Open Adoption Agreement Practice Tips for Caseworkers](#) document (located on the Child and Family Welfare Services DCYF intranet page)

[Shared Planning Meetings policy](#)

[Termination of Parental Rights \(TPR\) policy](#)

4307. Voluntary Placement Agreement

4307. Voluntary Placement Agreement sarah.sanchez Wed, 08/22/2018 - 12:52

Applies to: This policy applies to caseworkers.

Policy Number & Title: 4307. Voluntary Placement Agreements

Effective Date: July 23, 2024

Purpose

The purpose of this policy is to provide guidance when Voluntary Placement Agreements (VPA) are needed to place children or youth in out-of-home care VPAs are:

- To be collaboratively used with families and their supports.
- Time-limited.
- The least restrictive plan in efforts to prevent a dependency action.

Authority

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.34.245](#) Voluntary consent to foster care placement for Indian child-Validation-Withdrawal of consent-Termination

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.15.020](#) Definitions

[WAC 110-50-0060](#) What must a parent do to place the child in foster care with the department?

[WAC 110-50-0070](#) Under what circumstances may a parent sign a consent for voluntary placement of a child in foster care with the department.

[WAC 110-50-0080](#) How long may a voluntary placement last with the department?

[WAC 110-50-0090](#) May the department grant an exception to the length of stay in a voluntary placement?

Policy

Caseworkers:

1. Must follow these policies:
 1. [Indian Child Welfare \(ICW\) Voluntary Placement Agreements](#) when there is [reason to know](#) children are or may be Indian children.
 2. [Out-of-Home Placements](#) when making placement decisions.
2. Must not use VPAs when children or youth are placed:
 1. Outside of Washington State.
 2. In out-of-home care when the youth is 18 years or older, unless they are entering or re-entering the [Extended Foster Care \(EFC\) program](#).
3. May use VPAs for up to 90 days when:
 1. A [safety threat](#) or [present danger](#) exists that cannot be managed in the home and services provided during a 90-calendar day period may eliminate the need for court intervention.
 2. Parents or guardians need temporary care for their children or youth while undergoing medical care or treatment and there are no alternative placement resources.
 3. The children's or youths' other parent or guardian is not immediately available to provide care.

Forms

[Consent to Foster Care Placement by Indian Child's Parent or Indian Custodian JU 03.0920](#)

Voluntary Placement Agreement DCYF 9-004B (located in the Forms repository on the DCYF Intranet)

Resources

[ICW Voluntary Placement Agreements policy](#)

[ICW Reason to Know policy](#)

[Out-of-Home Placements policy](#)

[Extended Foster Care \(EFC\) Program policy](#)

[Safety Plan policy](#)

[Present Danger policy](#)

Original Date: February 10, 1995

Revised Date: July 23, 2024

Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

4308. Dependency Petition Process

4308. Dependency Petition Process sarah.sanchez Wed, 08/22/2018 - 12:53

Original Date: March 2018

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

This policy provides guidance when considering court intervention, providing discovery, filing dependency petitions, and when children or youth are in shelter care status.

Scope

This policy applies to child welfare employees.

Laws

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[RCW 26.44.050](#) Abuse or neglect of child-Duty of law enforcement agency or department of children, youth, and families-Taking child into custody without court order, when

[RCW 26.44.056](#) Protective detention or custody of abused child-Reasonable cause-Notice-Time limits-Monitoring Plan-Liability

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

Policy

Caseworkers must:

1. File dependency petitions when court intervention is needed to prevent harm to a child's or youth's health, safety, or well-being and when one of the following is met, the children or youth:
 1. Have been abandoned.
 2. Have been abused or neglected as defined in [chapter 26.44 RCW](#) by an individual legally responsible for their care.
 3. Has no parent or guardian that can care for them, and that they are in circumstances which constitute a danger of substantial damage to either their:
 1. Psychological health.
 2. Physical health.
2. Are receiving extended foster care services, as authorized by [RCW 74.13.031](#).
3. Recommend in the dependency petition an:
 1. In-home placement when there is no imminent physical harm identified for the children or youth.
 2. Out-of-home placement when it has been determined necessary to prevent imminent physical harm to them due to child abuse or neglect (CA/N), including that which results from sexual abuse, sexual exploitation, a high-potency synthetic opioid, or a pattern of severe neglect.
4. Make [diligent efforts](#) to notify parents and guardians as soon as possible, in an understandable manner in their primary language:
 1. When their children or youth may be or have been removed from their custody.
 2. Reasons why their children or youth may be or have been removed.
 3. Their legal rights.
 4. Date, time, and location of the shelter care hearing.

Procedures

1. Considering or Filing a Dependency Petition
Caseworkers must follow these policies when considering or filing dependency petitions:
 1. DCYF Administrative:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy when working with parents, guardians, children or youth that are LEP. This includes providing qualified interpreters as needed or requested.
 2. 6.03 Access to Services for Individuals with Disabilities when working with all individuals.

2. Child welfare:

1. [Safety Assessment](#).
2. [Family Team Decision Making \(FTDM\) Meetings](#) when making placement decisions.
3. [Relative Search and Notification](#) when searching for relative placements.
4. [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) regarding initial licenses for relatives and suitable persons.
5. [Family Time and Sibling and Relative Visits](#) when determining visitation.
6. [Shelter Care Case Conference](#) for children or youth in shelter care status.
7. [Documentation](#) when documenting case related information.

2. Determining Court Intervention

Caseworkers must:

1. Consult with their supervisor to determine if court intervention is needed when one or more of the criteria is met in Policy Section 1.
2. If recommending:
 1. In-home placement, show evidence of how the dependency standard in Policy Section 1.a. has been met.
 2. Out-of-home placement, show evidence of imminent physical harm to children or youth due to child abuse or neglect (CA/N), including that resulting from sexual abuse, sexual exploitation, a high-potency synthetic opioid, or a pattern of severe neglect.
3. Use the dependency petition template and guide.
4. Collaborate with the Assistant Attorney General (AAG) to assess legal sufficiency. Imminent physical harm is only used prior to establishing dependency. If there is a disagreement with the AAG on legal sufficiency, caseworkers must consult with their supervisor and area administrator (AA). If, they determine to:
 1. File the dependency petition the petition must include:
 1. Whether there is reason to know that children are or may be Indian children, per [RCW 13.38.040](#).
 2. Finding whether Indian child welfare (ICW) applies. If ICW applies, the petition must also include verification the notices have been sent to the tribes.
 3. Statements:

1. That are clear and specific to the harm that will occur if the children or youth remain in the care of their parent or guardian.
 2. Supporting the need for the dependency.
4. Facts showing:
1. Causal relationship between conditions in the home and imminent physical harm to the child.
 2. Whether participation by the parent or guardian in agreed prevention services would prevent or eliminate the need for removal of the child or youth.
 3. Identify the harm of removal specific to the children or youth if recommending removal and the steps taken or proposing to take to mitigate any harm that might be caused by removal. If this information is unavailable when writing the petition, be prepared to testify to this at the shelter care hearing.
 4. If seeking a pickup order reasonable grounds to believe that removal is necessary to prevent imminent physical harm to the child or youth, including that which results from sexual abuse, sexual exploitation, or a pattern of severe neglect if the children or youth are not removed from their parents or guardians.
 5. There was insufficient to serve the parents or guardians with the dependency petition and hold a shelter care hearing prior to removing the children or youth and the reasons why they were unable to serve them.
5. Names, addresses, and contact information for the:
1. Caseworkers
 2. Parents or guardians, unless there is a protection order to protect their whereabouts. If so, consult with AAG.
2. Not file the dependency petition, they must complete one of the following:
1. Transfer the case to:
 1. [Family Voluntary Services \(FVS\)](#)
 2. [Family Reconciliation Services \(FRS\)](#)
 2. Monitor the case in [Family Assessment Response \(FAR\)](#)

3. Close the case
5. Draft the dependency petition recommending one of the following:
 1. In-home placement when both of these are met:
 1. A [safety plan](#) when children or youth are unsafe and the safety threat can be managed by the safety plan.
 2. The recommended court ordered services to address the risk of future abuse or neglect.
 2. Out-of-home placement:
 1. With a Motion to Take Child into Custody, e.g., pick up order.
 2. Without a Motion to Take Child into Custody, e.g., they are in protective custody, on a [Voluntary Placement Agreement \(VPA\)](#), or [hospital hold](#).
6. Finalize the dependency petition with the AAG.
3. Filing the Dependency Petition, Providing Notice, and Service to Parents and Guardians
 1. Caseworkers must complete the following when filing a dependency petition, when:
 1. There is reason to know children are or may be Indian children, follow ICW policies:
 1. [Tribal Inquiry](#) to identify if children are Indian children.
 2. [Dependency Cases](#) for legal notification requirements.
 3. [Child Protection Services Investigation and Family Assessment Response](#) for discovery requirements.
 2. Recommending an:
 1. In-home placement:
 1. Make [diligent efforts](#) to notify the parents and guardians of the following if a shelter care hearing occurs, the hearing's:
 1. Date
 2. Time
 3. Location
 2. Provide a copy of the dependency petition and summons to the parents or guardians that is in an understandable manner, taking in into considerations the parents' or guardians':

1. Primary language
 2. Level of education
 3. Culture
3. Attend and present testimony at court hearings, if applicable.
4. Monitor conditions for the children or youth to remain in the home, if applicable. If the parents or guardians do not meet the conditions, consult with their:
 1. Supervisor
 2. AAG
2. Out-of-home placement and DCYF has legal authority of the children or youth with an order to take them into custody, protective custody, or an administrative hold:
 1. Schedule a shelter care hearing within 72-hours of the children or youth being placed into DCYF custody, excluding weekends and holidays. When this occurs, a shelter care hearing must be held within 72-hours, or the children or youth are returned to their parent's or guardian's care.
 2. Search for relatives by following [Relative Search and Notification](#) and suitable person placements and notify the placement desk concurrently that a potential foster care placement may be needed.
 3. Provide the placement desk the:
 1. [Child Information and Placement Referral DCYF 15-300](#) form.
 2. The date of the shelter care hearing.
 4. Make [diligent efforts](#) to provide parents or guardians the following at the time of the children's or youth's removal:
 1. Notification they have been taken into custody.
 2. General information about their placement.
 3. The Temporary Custody Notification DCYF 09-731 form to inform them of their rights and the shelter care hearing.
 4. A copy of the dependency petition that is in an understandable manner, taking into considerations the parents' or guardians':

1. Primary language
2. Level of education
3. Culture.
5. Summons
6. Court order authorizing them to be placed into DCYF custody.
5. If, after diligent efforts, the parents or guardians are not served at the time of removal, caseworkers must continue making diligent efforts to personally serve them.
6. If parents or guardians cannot be located:
 1. Continue efforts to locate them using the Guidelines for Locating Children and/or Parents DCYF 02-607 form.
 2. Consult with the AAG and provide information needed for the publication process, per [RCW 13.34.080](#).
7. If children or youth cannot be located and are not taken into DCYF custody:
 1. Consult with your:
 1. Supervisor
 2. AAG
 2. Continue efforts to locate them using the Guidelines for Locating Children and/or Parents DCYF 02-607 form.
8. Notify the AAG of the placement information prior to the hearing. If a placement has not been confirmed, the caseworker must notify the court of efforts made.
9. Request an update on potential placements from the placement desk prior to the shelter care hearing.
10. Attend and present testimony at court hearings, if applicable, and:
 1. Provide the court the following information:

1. Efforts made to locate a placement and if the children or youth have been placed with a relative or suitable person.
2. General location of the licensed foster placement, if applicable.
2. Be prepared to inform the court:
 1. How the placement is the least restrictive.
 2. If the child or youth will be:
 1. Able to remain in the same school and whether orders of the court are necessary for educational stability.
 2. Placed with siblings and whether court ordered contact would promote their well-being.
 3. Whether the foster parents will be able to meet the special needs of the child or youth.
 4. If the placement of the foster home will impede [family time](#).

11. Follow these policies when placing children or youth:

1. [Out-of-Home Placements](#)
2. [Interstate Compact on the Placement of Children \(ICPC\)](#) when they are placed out-of-state.

2. Placement desk must:

1. Contact foster parents to identify potential placements if relatives and suitable persons are unavailable.
2. Provide the potential foster parents with general information to allow them to determine if they can adequately meet the child's or youth's needs. The information provided cannot have child or family identifying information.
3. Provide caseworkers with an update on locating a placement prior to the shelter care hearing.

4. Providing Discovery

Caseworkers must provide:

1. Redacted copies of their discovery records prior to the shelter care hearing, to the:
 1. Parents and guardians when not represented by attorneys.

2. Parents' and guardians' attorneys, when represented.
 3. Youth age 12 or older, when not represented.
 4. Youth's attorney, when represented.
 5. Assistant Attorney General (AAG).
 6. Indian custodians and tribes, if applicable
 7. Guardian ad Litem (GAL), if appointed.
2. A copy of children's or youth's forensic audio or video recordings, if court ordered, per the [Audio Recording](#) policy.
5. After Shelter Care Hearings
Caseworkers must follow these policies when courts place children or youth into shelter care:
 1. [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home](#) to notify parents, guardians, and caregivers of all court proceedings.
 2. [Court Report](#) when completing the initial court report for the dependency disposition hearing.
6. Documentation
Caseworkers must:
 1. Follow the [Documentation](#) policy.
 2. Document the following in FamLink case notes:
 1. Active efforts to locate and notify tribes, if applicable.
 2. Diligent efforts to locate and notify parents or guardians.
 3. Notification to all parents or guardians, and [caregivers](#) of the times and location for all court hearings.
 4. Discovery provided to the parents, guardians, GALs, attorneys for parents and children or youth, youth age 12 or older, and Indian custodians and tribes, if applicable.
 5. Efforts to comply with court orders.

Forms

Child Custody Transfer DCYF 10-157 (located in the Forms repository on the DCYF intranet)

[Child Information and Placement Referral DCYF 15-300](#)

Guidelines for Locating Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

Temporary Custody Notification DCYF 09-731 (located in the Forms repository on the DCYF intranet)

Resources

[Audio Recording policy](#)

Child Safety Framework (located on the DCYF intranet under Programs, Intake & CPS, and Policy & Laws)

[Court Report policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

Dependency Petition Template (located on the Divisional SharePoint Hubs, under Office of Transformation, under Child Welfare Integration Portfolio Site, and under Foundations of Practice)

Dependency Petition Template Guide (located on the Divisional SharePoint Hubs, under Office of Transformation, under Child Welfare Integration Portfolio Site, and under Foundations of Practice)

[Documentation policy](#)

[Family Team Decision Making \(FTDM\) Meeting policy](#)

[Family Time and Sibling and Relative Visits policy](#)

FamLink User Manuals (located on the DCYF intranet)

[Hospital Holds policy](#)

[ICW Dependency Cases policy](#)

[ICW Child Protective Investigation Services and Family Assessment Response policy](#)

[ICW Tribal Inquiry policy](#)

[Interstate Compact on the Placement of Children \(ICPC\) policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home policy](#)

[Out-of-Home Placements policy](#)

Placement Packet (located on the DCYF intranet, under Programs, CFWS, and Forms)

[Relative Search and Notification policy](#)

[Shelter Care Case Conference policy](#)

Support Enforcement Management System (SEMS) (located on the DCYF intranet, under Computer Help and Applications)

[Understanding the Dependency Court Process DCYF CWP_0044 publication](#)

[Voluntary Placement Agreement policy](#)

43091. Court Report

43091. Court Report sarah.sanchez Wed, 08/22/2018 - 13:51

Original Date: October 20, 2013

Revised Date: July 25, 2021

Sunset Review: July 25, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

The purpose of this policy is to provide guidance to child welfare employees on the requirements for completing and filing court reports. Caseworks must provide the court and legal parties with objective, factual information about the circumstances leading to Department of Children, Youth, and Families (DCYF) and court involvement in a family's life. The court report also provides:

- A description of the case plan with documented parental input.
- A summary on the parent's progress in services.
- The court with information about the case plan recommendations.
- The court, parents, and caregivers with information about the status of the child's safety, well-being, and permanency, and any services provided to the child.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.120](#) Social study and reports made available at disposition hearing - Contents - Notice to parents.

[RCW 13.34.136](#) Permanency plan of care.

[RCW 13.34.138](#) Review hearings - Findings - Duties of parties involved - In-home placement requirements - Housing assistance.

[RCW 13.34.145](#) Permanency planning hearing - Purpose - Time limits - Goals - Review hearing - Petition for termination of parental rights - Guardianship petition - Agency responsibility to provide services to parents - Due process rights

[RCW 13.34.400](#) Child welfare proceedings - Placement - Documentation

[RCW 13.38.040](#) Definitions

[RCW 74.13.280](#) Client information.

[42 U.S.C. § 675](#) Definitions.

Policy

1. Caseworkers must:
 1. Develop the court report in consultation and in person whenever possible, with:
 1. Parents or legal guardians
 2. Children 12 years and older
 3. [Indian child's](#) tribe
 4. Youth, 14 years or older, may identify up to two members of their case planning team, other than the caregiver or caseworker, to be part of the development of their court report. Participants identified by the child or youth may be excluded if there is reason to believe the identified individuals would not act in the child or youth's best interest.
 2. Include information outlined in the Court Report Mapping and Guidance Tool when completing the court report.
 3. Verify the following information is included in the court report when a child or youth's parents or legal guardians are incarcerated:
 1. How the incarcerated parent or guardian will participate in case planning.
 2. The treatment services and resources available in the Department of Corrections (DOC) facility to meet the parent or legal guardian's individual needs.
 3. A family time schedule or the reasons why family time is not in the best interest of the child.
 4. Obtain supervisor approval of the court report prior to distribution.
 5. Translate the court report into the primary language of the child and the child's parent or legal guardian prior to distribution, when necessary.
 6. After redacting parent or legal guardian information from the court report, provide a copy to the child's caregiver.
2. For dependency cases, caseworkers must:
 1. File the approved court report in court and share with caregivers and legal parties to the case, including but not limited to:
 1. The parents or legal guardians
 2. The parent or legal guardian's attorneys

3. A child 12 years of age and older
4. The child's attorney
5. The child's guardian ad litem (GAL) or Court Appointed Special Advocate (CASA)
6. The [Indian child's](#) tribe

2. Timeframes

1. Submit:

1. The initial court report no later than 10 business days before the dependency disposition hearing or by the 60th calendar day of the placement episode of a child, whichever date occurs first.
 2. The second court report six months from the beginning date of the placement episode or no more than 90 business days from the entry of the disposition order, whichever comes first.
 3. All subsequent court reports at six-month intervals throughout the life of a case to align with regularly scheduled review and permanency planning hearings.
 4. A court report at least 10 business days before a court hearing when a child or youth will be or has been placed in a [Behavior Rehabilitation Services \(BRS\)](#) Qualified Residential Treatment Program (QRTP).
2. If the court report is submitted to the parties and their attorneys earlier than required, the next report is due no later than 10 business days prior to the next review or permanency planning hearing, or six months from the date of the last report completed, whichever date occurs first.
3. Include in the court report copies of supporting documents regarding the child or family when a significant change occurs relevant to the case or when a child or youth is placed in a BRS QRTP. Documents include but are not limited to:
 1. Substance abuse treatment
 2. Mental health treatment
 3. Medical and behavioral health services updates
 4. Anger management classes
 5. Domestic violence classes
 6. Family time with a parent/child and sibling visits
 7. Psychological status of child and parent or legal guardian

8. Physician report documenting injuries to a child
 9. School progress reports, including Individual Education Plans (IEP)
 10. Home study
 11. Licensing action
 12. Background check summaries
 13. [BRS](#) QRTP assessment
 14. Other evidence obtained to support DCYF recommendations when family time or sibling visits will continue as or change to be supervised or monitored, per the [Family Time and Sibling and Relative Visits](#) policy.
4. Consult with the assigned assistant attorney general to determine whether a court report or caseworker declaration is appropriate when changes to the court order are requested by the department, other party, or for interim hearings.
3. For children in out-of-home care on a [Voluntary Placement Agreement \(VPA\)](#):
 1. Caseworkers must provide the approved court report by the 60th calendar day of out-of-home placement to:
 1. The parents or legal guardians
 2. A youth 12 years of age and older
 3. The caregivers
 4. The [Indian child's](#) tribe
 2. Court reports are not distributed to the court.
 4. Supervisors must approve and sign each completed court report.

Resources

Court Report Mapping and Guidance Tool (located on the DCYF CA Intranet)

[Family Time and Sibling and Relative Visits policy](#)

43092. Child Health and Education Tracking (CHET)

43092. Child Health and Education Tracking (CHET) sarah.sanchez Wed, 08/22/2018 - 13:51

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: January 8, 2007

Revised Date: July 1, 2018

Policy Review: July 1, 2023

Purpose

The Child Health and Education Tracking (CHET) program is responsible for identifying each child's long-term needs at initial out-of-home placement by evaluating his or her well-being. The results of the evaluation are used to develop an appropriate case plan and assist in placement decisions.

Scope

This policy applies to Children's Administration (CA) CHET screeners.

Laws

PL 110-351 Fostering Connections to Success and Increasing Adoptions Act of 2008

[RCW 74.14A.050](#) Identification of Children in a State-assisted Support System

Policy

CHET screeners must:

1. Evaluate all children in the care and custody of CA and who are expected to remain in care 30 days or more, **within 30 days of the child's original placement date**. This evaluation includes:
 1. Meeting with each child in-person to complete the CHET screen, unless the child is unavailable for an in-person meeting and the supervisor approves an exception to the in-person meeting. The reason for the exception must be documented in a case note.
 2. Assessing each child in the developmentally appropriate domain in accordance with the CHET Handbook.
 3. Obtaining information from sources such as parents, caregivers and teachers, when available.
 4. Documenting the long-term well-being needs of the child in the [CHET Screening Report DCYF 14-444](#).
2. Follow the caseworker notification process in the CHET Handbook when a concern is identified during the screening process.
3. Make the following referrals to:
 1. Early Support for Infants and Toddlers (ESIT) for children younger than three years old within two working days after a concern about the child's developmental delay is identified during the screening process. Referrals will be made in accordance with each region's ESIT protocol.

2. Fostering Well-Being Care Coordination Unit (FWBCCU) to confirm Apple Health Core Connections eligibility and identify children who meet the medically fragile criteria.
4. Provide and discuss the [CHET Screening Report DCYF 14-444](#) to caregivers and the assigned caseworker within five days of completion.
5. Document screening results and information gathered during the CHET screening process in the electronic documentation systems.
6. Upload the [CHET Screening Report DCYF 14-444](#) and all supporting documents into file upload in FamLink.
7. Participate in shared planning meetings, when invited.

Forms

[CHET Screening Report DCYF 14-444](#)

Resources

CHET Handbook

CHET Screening Report Instructions

4310. Transitioning Youth for Successful Adulthood

4310. Transitioning Youth for Successful Adulthood sarah.sanchez Wed, 08/22/2018 - 13:51

Original Date: October 31, 2019

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

[Policy Update Memo Effective June 6, 2024](#)

Purpose

The purpose of this policy is to provide direction and guidance to Department of Children, Youth, and Families (DCYF) child welfare employees on how to effectively engage, support, and prepare youth who are age 12 and older so that youth become successful in their transition to adulthood by:

- Continuing to develop their life skills.
- Having permanent connections.
- Having a voice and can advocating for their needs.
- Being able to seek out community resources.

- Having access to continuing education and job readiness.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.100](#) Appointment of guardian ad litem-Background information-Rights-Notification and inquiry-Appointment of attorney for child-Review and removal

[Chapter 71A RCW](#) Developmental Disabilities

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.341](#) Transition plan-Qualification for developmental disability services

[RCW 74.13.540](#) Independent living services

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[42 U.S.C. § 677](#) John H. Chafee Foster Care Program for Successful Transition to Adulthood

[PL 106-169](#) Foster Care Independence Act of 1999

[PL 112-34](#) Child and Family Services Improvement and Innovation Act

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

Caseworkers must:

1. Throughout the life of a case:
 1. Encourage youth engagement by:
 1. Including them in discussions when assessing their physical and behavioral health, dental care, safety, and well-being during monthly visits. Refer to the Caseworker Health and Safety Visits with Child Guide for additional information.
 2. Involving them in case planning and decision making, and encouraging them to voice their opinions.
 3. Providing services and resources to address life skills, education, health, and employment.
 4. Verifying whether there is reason to know the youth is or may be an Indian child as outlined in the [Indian Child Welfare Reason to Know](#) policy.

5. Providing culturally responsive resources and supports which address their needs per the DCYF 6.04 Supporting LGBTQIA+ Individuals policy. Needs may include:
 1. Race
 2. Ethnicity
 3. Sexual orientation
 4. Gender identity
 5. Gender expression
 6. Ability
2. Follow the [Educational Services and Planning: Early Childhood Development, K-12 and Post-Secondary](#) policy to support school success by reviewing education progress, available supports, as needed, and possible scholarships.
3. When a youth is dependent:
 1. Complete a [family assessment](#) and [case plan](#) in partnership with the youth, family, community partners, and the tribe, if applicable.
 2. [Court report](#) development
 1. Complete the Comprehensive Family Evaluation (CFE) using the Court Report Mapping and Guidance document.
 2. Gather information and input from:
 1. [Health and Safety Visits](#)
 2. [Shared Planning Meeting \(SPM\)](#)
 3. The youth and individuals known to them, to include but not limited to:
 1. Two identified supports
 2. Caregivers
 3. Parents and other family members, when appropriate
 4. Independent Living Services (ILS) providers or other providers working with the youth
 5. Tribal representative, if applicable
 6. Education professionals and advocates
 7. Missing from care locators

4. Include the following information about the:
 1. Caregiver's use of [prudent parenting](#).
 2. Youth's perspective on their permanent plan.
 3. Youth's activities, to include, but not limited to:
 1. Normal childhood activities
 2. Cultural activities
 3. Progress in services
 4. Transitional and permanency goals
 5. Identified activities to promote [independence](#), etc.
3. Verify that:
 1. Permanency planning efforts are occurring.
 1. For youth up to age 18, efforts include:
 1. Reunification
 2. Guardianship
 3. Guardianship of a minor
 4. Adoption
 5. Permanent Connections
 2. For youth ages 18 through 20, this includes the ongoing review of their [Transition Plan](#) and identifying permanent connections.
 2. SPMs are held at the required timeframes per the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
4. Long Term Foster or Relative Care Agreements are not a permanent plan. If these are the proposed plans, follow the [Permanent and Concurrent Planning](#) policy.
5. Refer youth to the following service providers or community resources:
 1. [Developmental Disability Administration \(DDA\)](#) when a youth may be eligible for developmental disability (DD) services. Services for the youth may extend beyond the age of 18.

2. [Designated mental health provider](#) for a Wraparound Intensive Screen (WISe) screen when a youth has complex behavioral health needs, per the [Wraparound with Intensive Services \(WISe\)](#) policy.
 3. [Apple Health Core Connections \(AHCC\)](#) care coordinator to access all Medicaid covered benefits, e.g., [substance abuse disorder](#), counseling, primary health care services, and reproductive health services.
 6. If youth have complex or high-level service needs, coordinate with the Regional BRS program manager to see if BRS Services are appropriate, per [Behavior Rehabilitation Services](#) policy.
 7. Follow the [Youth Missing from Care](#) policy when dependent youth run from their out-of-home placement to quickly locate them, address their reasons for leaving, and develop a run prevention plan.
 8. Verify the Commercially Sexually Exploited Child (CSEC) Screening DCYF 15-476 form is completed when required, per the [Commercially Sexually Exploited Children \(CSEC\)](#) policy.
 9. Verify the unique needs of a pregnant or parenting youth are addressed per the [Pregnant and Parenting](#) policy.
2. Complete the following activities for youth:
1. Ages 12 through 18 years
If a parent whose parental rights are terminated contacts DCYF, the Guardian ad Litem (GAL), or attorney about reinstating their parental rights, notify the dependent youth of their right to petition the court per the [Reinstatement of Parental Rights](#) policy.
 2. Ages 12 through 20 years
 1. Discuss youth's right to an attorney if one is not already assigned. If the youth declines, continue to ask them if they want an attorney whenever a motion or petition is filed that affects their placement, services, or familial relationships.
 2. Document youth's decision to request or decline an attorney in case notes and the court report.
 3. Provide a hard or electronic copy of the [Your Rights, Your Life: A Resource for Youth in Foster Care DCYF CWP_0030](#) publication annually to youth and discuss with them in an age appropriate manner.
 4. Review the [Rights of Children Foster Care DCYF 09-127](#) form annually with the youth and request for them to sign. Provide a copy to them and upload a copy into FamLink.

3. Ages 14 through 20 years

1. Credit Reports

1. Assist youth in obtaining and reviewing their consumer credit report annually through www.annualcreditreport.com.
2. Review the credit report with the youth and identify any discrepancies. If discrepancies are identified, assist the youth in contacting the nationwide consumer credit reporting company that provided the credit report. Follow dispute instructions at each of the following websites:
 1. Equifax - www.investigate.equifax.com
 2. Experian - www.experian.com
 3. TransUnion - www.transunion.com
3. Document these discussions with the youth in FamLink and in the court report.

2. Follow the [Shared Planning Meetings](#) policy. During the SPM:

1. In addition to inviting other SPM participants identified in the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication, ask the youth to identify at least two support persons to attend the meeting who are not the caseworker or caregiver.
 1. One of the support persons selected may be designated to be the youth's advocate when discussing normal childhood activities under the reasonable prudent parenting standard.
 2. Any support person identified by the youth must be able to act in the youth's best interest. If the caseworker or tribal agency has good cause to believe the youth's identified support person is not acting in the best interest, that person may be asked to leave the meeting.
2. Discuss services and activities needed to support the youth and their transition to adulthood. Topics must include:
 1. Education
 2. Employment
 3. Housing
 4. Health insurance
 5. Mentors and continuing supports

6. Independent living (IL) goals
 3. Document the services and activities in the [Shared Planning DCYF 14-474](#) form and include in the development of the court report.
 4. Provide a copy of the [Shared Planning DCYF 14-474](#) form to the shared planning participants.
4. Ages 15 through 20 years
 1. Casey Life Skills Assessment (CLSA)
 1. Assist the youth annually to complete the CLSA located on the [Casey Life Skills Toolkit](#) website. ILS providers may be available to also assist the youth in completing the form. Contact your local office IL coordinator to see if this service is available.
 2. Enter the CLSA completion date on the assessment tab of the IL page.
 3. Upload the completed CLSA in FamLink.
 4. Review and discuss the CLSA during the SPM and the development of the youth's court report and transition plan.
 2. ILS
 1. Discuss ILS with dependent youth placed out-of-home for a minimum of 30 days and their caregiver.
 2. If the youth is interested in participating in ILS services, email a completed Independent Living Services Referral form in FamLink to the local provider or to the regional transition services lead depending on the region's protocol.
 3. If the youth declines ILS or the IL contracted provider is at capacity:
 1. Provide community resources, activities, and supports to help them increase their IL skills.
 2. Continue to offer ILS.
 3. Document any National Youth in Transition Database (NYTD) elements provided to the youth including discussions and activities relating to ILS and transitional needs of the youth in the NYTD section of the IL page in FamLink.
 4. Follow the [Washington State Identicard, Instruction Permit and Personal Driver License for Foster Youth](#) policy for youth to obtain a state issued photo identification card, Instruction Permit, and Personal Driver License.
5. Ages 16 through 20 years

1. Coordinate with the local school district in the development of the Special Education Transition Plan for any youth receiving special education services per the [Education Services and Planning: Early Childhood Development, K-12 and Post-Secondary](#) policy.
2. Discuss the youth's interest in reconnecting with their biological family. This includes discussing skills and strategies to safely reconnect with any identified family member and provide guidance and services to assist the youth. These can occur during SPM, health and safety visits, etc.
3. Discuss and provide written information about the [Extended foster Care \(EFC\) Program](#) during health or safety visits, SPM, etc.
4. Conduct a Developmental Disability Services Planning meeting, for youth who may be eligible for services administered by the [DDA](#) who are age 16 through 16.5, per the [Shared Planning Meetings](#) policy.
6. Ages 17 through 20 years:
 1. Follow [The Transition Plan \(for Dependent Youth 17 through 20 Years\)](#) policy.
 2. Verify the [Transition Plan for Youth Exiting Care DCYF 15-417](#) form is completed 90 calendar days before they exit either:
 1. Foster care and turns age 18.
 2. The [EFC Program](#).
3. Prior to the youth's 18th birthday or throughout the life of the case as needed, provide the following items and information to the youth:
 1. Certified or original birth certificate.
 2. Social Security card.
 3. State issued photo identification.
 4. Copies of all medical and education records.
 5. Health insurance card.
 6. A copy of the [Dependent / Ward of the Court Verification Letter DCYF 09-056](#) form to prove they were previously in foster care.
 7. Verify youth have a state issued photo identification card.

Forms

Commercially Sexually Exploited Child (CSEC) Screening DCYF 15-476 form (located in Forms repository on the DCYF intranet)

[Dependent / Ward of the Court Verification DCYF 09-056](#)

Independent Living Services Referral DCYF 15-353 (located in the Forms repository on the DCYF intranet)

[Rights of Children and Youth in Foster Care DCYF 09-127](#)

[Shared Planning Meeting DCYF 14-474](#)

[Transition Plan for Youth Exiting Foster Care DCYF 15-417](#)

Resources

[Annual Credit Report.com](#)

[Apple Health Core Connections \(AHCC\)](#)

[Behavior Rehabilitation Services policy](#)

[Caseworker Guide to Transition Planning for Youth](#)

Caseworker Health & Safety Visits with Child Guide (located on the DCYF intranet)

[Casey Life Skills Toolkit](#)

[Commercially Sexually Exploited Child \(CSEC\) policy](#)

[DCYF 6.04 Supporting LGBTQIA+ Individuals](#)

[Developmental Disability Administration \(DDA\)](#)

[Driver's Assistance](#)

[Educational Services and Planning: Early Childhood Development, K-12 and Post-Secondary policy](#)

[Equifax](#)

[Experian](#)

[Extended Foster Care \(EFC\) Program](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Independent Living Program](#)

Independent Living Services Referral E-Learning (located on the IT Services Child Welfare FamLink Training page on the DCYF intranet)

[Indian Child Welfare Reason to Know policy](#)

[Permanent and Concurrent Planning policy](#)

[Pregnant and Parenting policy](#)

[Prudent Parenting Guide DCYF CWP 0078 publication](#)

[Reinstatement of Parental Rights policy](#)

[Shared Planning Meetings policy](#)

[The Transition Plan \(for Dependent Youth 17 through 20 Years\) policy](#)

[Transitional Living Program](#)

[TransUnion](#)

[Washington State Identicard, Instruction Permit and Personal Driver License for Foster Youth policy](#)

[Washington State's Programs for Foster Youth: Independent Living, Transitional Living, and Education and Training Voucher](#)

[Washington State Identicard, Instruction Permit, and Personal Driver's License for Foster Youth](#)

[Wraparound with Intensive Services \(WISe\) policy](#)

[Your Rights, Your Life: A Resource for Youth in Foster Car DCYF CWP_0030 publication](#)

[Youth Missing from Care policy](#)

43103. Washington State Identicard, Instruction Permit, and Personal Driver's License for Foster Youth

43103. Washington State Identicard, Instruction Permit, and Personal Driver's License for Foster Youth sarah.sanchez Wed, 08/22/2018 - 13:57

Original Date: June 12, 2008

Revised Date: December 19, 2022

Sunset Review Date: December 19, 2026

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to assist youth in obtaining a Washington State issued photo identification card prior to their 18th birthday. State issued photo identification helps youth with:

- Participating in normal adolescent activities.
- Preparing for adulthood.
- Opening a bank account.
- Applying for a job.
- Obtaining housing.
- Receiving a driving instruction permit or personal driver license.

Scope

This policy applies to caseworkers.

Laws

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[RCW 46.20.117](#) Identicards

[RCW 74.13.283](#) Washington state identicards-Foster youth

[RCW 74.13.710](#) Out-of-home care-Childhood activities-Prudent parent standard

[P.L. 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

Caseworkers must assist:

1. Youth with:
 1. Receiving a Washington State issued photo identification card prior to their 18th birthday if the youth is:
 1. Non-tribal.
 2. Tribal, but does not have a tribal enrollment identification card issued by a federally recognized tribe.
 2. Obtaining their Washington State identification card, instruction permit, personal driver license, enhanced from [Department of Licensing \(DOL\)](#) upon their request.
 3. Submitting required forms and documentation to [DOL](#) for approval.
 4. Physically obtaining their identicard once it's available.
2. Youth, caregivers, or Independent Living (IL) case managers by providing and explaining the [DOL](#) instructions for obtaining an identicard, instruction permit, or personal driver license.

Procedures

1. Washington State Identicards
 1. When requesting Washington State Identicards from [DOL](#), caseworkers must:
 1. Complete the Washington State Identicard DCYF 11-077 form. This is a standardized form approved by [DOL](#) and cannot be altered.
 2. Obtain and attach a 2.5 in. by 3 in. color photograph of the youth, to the Request for Washington State Identicard DCYF 11-077 form, based on the following [DOL](#) photo standards:
 1. A full-face view of the youth directly facing the camera.

2. The youth's head from the top of the head to the tip of the chin and side. Ears are not required to show.
 3. No hair, including bangs, across the eyes.
 4. No hats, glasses, hoodies or other items that obscure the face.
 3. Submit the original completed Washington State Identicard DCYF 11-077 form, which must include the color photograph of the youth, to [DOL](#):
 1. Scanning and emailing the form as an attached word document or Adobe PDF only, to: DCYFLETTER@DOL.WA.GOV.
 2. Including in the subject line of the email the youths':
 1. Last name
 2. First name
 3. Middle initial
 4. Date of birth
 3. Not leaving any spaces between each section. For example, John L. Doe born 01/01/1988 would be DoeJohnL010188.
 4. Provide youth and caregivers with a copy of the completed Washington State Identicard DCYF 11-077 form and upload the completed form into FamLink.
2. When assisting youth in obtaining their Washington State identicard from DOL, caseworkers must:
 1. Accompany them to their local office to obtain the identicard or coordinate with any of following individuals to go with the youth:
 1. Caregiver
 2. Contracted IL case manager
 3. Other adult designated by the caseworker, caregiver, or IL case manager
 2. Provide DCYF identification when accompanying the youth and inform the caregiver, contracted IL case manager, or other adult to bring valid identification.
 3. Explain to them and the person accompanying them, if applicable, the steps required for obtaining a Washington State identicard at the local [DOL](#) office. This includes the following:
 1. Informing them to review the information on the [DOL](#) website.

2. Bringing a copy of the completed Request for Washington State Identicard DCYF 11-077 form.
 4. Inform them when they can obtain their Washington State Identicard from their local [DOL](#) office in the timeframes listed below:
 1. After three business days from the date the form was submitted.
 2. Up to 60 calendar days from the date the form was submitted.
 5. Submit a new request if they have not received their identicard after 60 calendar days.
 3. When a Washington State identicard is lost or stolen the caseworker must, in coordination with the youth, complete the following:
 1. The Request for Identicard DCYF 16-029 form.
 2. Submit the Request for Identicard DCYF 16-029 form to the local [DOL](#) office.
 3. Accompany them to their local [DOL](#) office to obtain the identicard or coordinate with any of following individuals:
 1. Caregiver
 2. Contracted IL case manager
 3. Other adults designated by the caseworker, caregiver, or IL case manager
2. Instruction Permits and Personal Driver Licenses

When youth request an instruction permit or personal driver license, caseworkers must:

1. Verify they have a current and valid Washington State identicard or tribal enrollment identification card issued by a federally recognized tribe. If they do not have either card:
 1. Complete the following applicable forms. Forms must be fully completed and cannot be altered:
 1. Washington State Identicard DCYF 11-077, as outlined in Procedure Section 1.
 2. Request for Washington State Instruction Permit or Personal Driver License DCYF 02-636.
 2. Send completed forms to [DOL](#) by:
 1. Scanning and emailing the forms as an attached word document or Adobe PDF only to DCYFLETTER@DOL.WA.GOV.
 2. Including in the subject line youths':

1. Last name
 2. First name
 3. Middle initial
 4. Date of birth
3. Not leaving any spaces between each section. For example, John L. Doe born 01/01/1988 would be DoeJohnL010188.
 4. Combining the forms into one attachment if the identicard request is being submitted electronically at the same time as the instruction permit or personal driver license request.
2. Inform them when they can obtain their instruction permit or personal driver license from their local [DOL](#) office in the timeframes listed below:
 1. After three business days from when the form was electronically submitted.
 2. Up to 60 calendar days from when the form was submitted.
 3. Submit a new request if they haven't received their permit or personal driver license after 60 calendar days.
 4. Provide them and caregivers with a copy of the completed Request for Washington State Instruction Permit or Personal Driver License DCYF 02-636 form and upload the completed form into FamLink.
 5. Retain signed copies in the youth's case file by uploading the form into FamLink.
3. Enhanced ID Cards and Personal Driver Licenses
When youth request an [enhanced ID card \(EID\) or enhanced driver license \(EDL\)](#), caseworkers must:
 1. Verify they have a current and valid Washington State identification or tribal enrollment identification issued by a federally recognized tribe. If not, complete the Washington State Identicard DCYF 11-077 form, as outlined in Procedure Section 1.
 2. Obtain a court order that includes the following:
 1. Authorizes the issuance of an EID or EDL.
 2. Identifies the name of the authorized caregiver.
 3. Assist them and caregivers in planning and preparing for the [EID](#) or [EDL](#), this includes, but is not limited to:
 1. Reviewing and discussing the requirements outlined on the [DOL](#) website. Youth and caregivers must follow [DOL](#) instructions when obtaining an [EID](#) or [EDL](#).
 2. Obtaining required documents for the youth, per DOL website.

3. Locating enhanced [DOL](#) offices, as not all [DOL](#) offices process [EID](#) or [EDL](#).
4. Inform authorized caregivers that they must provide valid identification of themselves, if they choose to accompany youth to the local [DOL](#) office.

Forms

Request for Washington State Identocard DCYF 11-077 (located in the Forms repository on the DCYF Intranet)

Request for Identocard DCYF 16-029 (located in the Forms repository on the DCYF intranet)

Request for Washington State Instruction Permit or Personal Driver License DCYF 02-636 (located in the Forms repository on the DCYF intranet)

Resources

[Prudent Parenting GuideCWP 0078](#)

[Washington State Department of Licensing \(DOL\)](#)

43104. The Transition Plan (for Dependent Youth 17 through 20 Years)

43104. The Transition Plan (for Dependent Youth 17 through 20 Years) sarah.sanchez Wed, 08/22/2018 - 14:00

Original Date: October 4, 2010

Revised Date: October 31, 2019

Sunset Review Date: October 31, 2023

Approved by: Jody Becker, Deputy Secretary of Children and Families

[Policy Update Memo Effective June 6, 2024](#)

Purpose

To provide direction to Department of Children, Youth, and Families (DCYF) child welfare employees in supporting youth in the development of a transition plan that prepares them for a successful transition into adulthood. This policy applies to dependent youth ages 17 through 20 years and who are placed in out-of-home care more than 30 calendar days.

Scope

This policy applies to DCYF child welfare employees.

Laws

[RCW 74.13.031](#) Provide Independent Living Services to Youth

[RCW 74.13.341](#) Transition plan - Qualification for developmental disability services

[RCW 74.13.540](#) Independent Living Skills

[42 U.S.C. 677](#) John H. Chafee Foster Care Independent Living Act

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

Caseworkers must:

1. Begin transition planning for youth age 14 and older and follow [Transitioning Youth for Successful Adulthood](#) policy to effectively engage, support, and prepare youth for adulthood.
2. Follow the [Shared Planning Meeting \(SPM\)](#) policy, even when youth are missing from care. For youth between the ages 17 and 17.5, invite participants at least five calendar days prior to the SPM, when possible. Participants must include:
 1. Individuals identified in the [Guide to Shared Planning Meetings DCYF 22-1688](#) publication.
 2. Youth's two support persons.
 3. Representatives from the:
 1. Behavioral Health Administration
 2. Developmental Disabilities Administration (DDA)
 3. Economic Services Administration
 4. Rehabilitation Division
 5. Independent Living (IL) Program
3. Completing The Transition Plan
 1. Conduct a Multidisciplinary Meeting (17.5 Staffing) when the youth is between ages 17 and 17.5 per the SMP policy. During this meeting:
 1. Complete the [Transition Plan for Youth Exiting Care DCYF 15-417](#) in the IL pages in FamLink and include all of the following information:
 1. Education
 2. Employment
 3. Housing
 4. Health Insurance
 5. Local opportunities for mentors and continuing support
 6. Work force supports and employment services

2. Discuss and provide written information about the [EFC Program](#).
 3. Discuss the importance of obtaining a [Durable Power of Attorney for Health Care](#).
 4. Explain to the youth how to access their case record after exiting care.
 5. Obtain the youth's signature on the [Transition Plan for Youth Exiting Care DCYF 15-417](#) form and provide a copy to the youth and upload a copy in FamLink. If a child is missing from care, share the plan with the youth when they return and update it with their input.
 6. Attach the form to the court report:
 1. When submitting a request to dismiss the youth's dependency at age 18.
 2. At each youth's court review hearing if participating in the [Extended Foster Care \(EFC\)](#).
 3. When submitting a request to dismiss the youth's dependency from the [EFC program](#).
 7. Assist the youth in applying for developmental disability (DD) services from DDA if they are eligible for DD services beyond age 18.
2. Review the Transition Plan during the monthly [health and safety visits](#) and [SPMs](#) with the youth up until they exit foster care at age 18 or the EFC program. Follow-up on any uncompleted tasks identified in the transition plan and update if needed.
 3. Documentation in FamLink
 1. Document a [SPM](#) was held using the [Shared Planning DCYF 14-474](#) form.
 2. Document the [Transition Plan for Youth Exiting Care DCYF 15-417](#) in the Independent Living page was provided to the youth, including all the information and documents.
 3. Upload the signed [Transition Plan for Youth Exiting Care DCYF 15-417](#) form.

Forms

[Request for DCYF Records DCYF 17-041A](#)

[Request for DDA Eligibility Determination DSHS 14-151](#)

[Shared Planning DCYF 14-474](#)

[Transition Plan for Youth Exiting Care DCYF 15-417](#)

Resources

[Guide to Shared Planning Meetings DCYF 22-1688](#)

Independent Living Quick Help Guide (located on the DCYF CA intranet)

Monthly Health & Safety Visits Child Checklist (located on the DCYF CA intranet)

17.5 Transition Staffing Q & A (located on the DCYF CA intranet)

[Caseworker Guide to Transition Planning for Youth DCYF 22-1313](#)

[US Registry](#)

43105. Extended Foster Care (EFC) Program

43105. Extended Foster Care (EFC) Program sarah.sanchez Wed, 08/22/2018 - 14:01

Original Date: June 22, 2011

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

[Policy memo effective June 6, 2024](#)

Purpose

The Extended Foster Care (EFC) Program is a voluntary program established to support eligible youth ages 18 through 20 in a successful transition to independence.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.267](#) Extended Foster Care Services, Maintenance of Dependency Proceedings, Placement Care of Youth, Appointment of Counsel, Case Plan

[RCW 13.34.268](#) Extended Foster Care Services, Voluntary Placement Agreement, Decline, Petition for Dependency

[RCW 74.13.020](#) Definitions

[RCW 74.13.031](#) Duties of Department, Child Welfare Services, Children's Services Advisory Committee

[RCW 74.13.336](#) Extended Foster Care Services

[RCW 74.15.020](#) Definitions

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act 2008

Policy

1. Eligibility

1. EFC services, including placement resources, must be provided to eligible dependent youth. To be eligible for the EFC program, legally dependent youth, on their 18th birthday, must meet one of the following eligibility criteria:
 1. Enrolled in high school or a high school equivalency program;
 2. Enrolled, has applied for, or can show intent to timely enroll in a post-secondary academic or post-secondary vocational certification program;
 3. Participating in a program or activity designed to promote or remove barriers to employment, including part-time employment;
 4. Employed 80 hours or more a month; or
 5. Unable to engage in any of the above activities due to a documented medical condition.
2. The following youth may be eligible if they meet the eligibility criteria above in 1.a. and are:
 1. In the custody of Juvenile Rehabilitation (JR), Department of Corrections (DOC), county detention, or jail.
 2. A tribal dependent youth, if the tribe's code defines "child" up the age of 21.
 3. A dependent youth living out of state.
3. Caseworkers must verify and document the youth meet the eligibility criteria on the FamLink EFC Eligibility page, prior to enrollment and for every subsequent court review.
 1. If a youth has a documented medical condition, including a diagnosed developmental disability, preventing them from participating in any of the EFC eligibility criteria listed in policy section 1(a.) (i.-iv.), document and upload the medical condition documentation received from the licensed medical providers in the following pages in FamLink:
 1. Health/Mental health,
 2. Court Report
 3. EFC Eligibility
 2. If the youth has a temporary medical condition:
 1. Document the medical condition in FamLink and verify the youth's continued EFC eligibility during [monthly health and safety visits](#).

2. Review the medical documentation from the licensed health care providers to determine if additional or updated information is needed.
3. Update documentation to reflect participation in one of the activities identified in policy section 1(a.) (i.-iv.), when temporary medical conditions are resolved.
4. Youth can transition between eligibility categories, but it must be documented in a case note in FamLink.

2. EFC Enrollment

1. Eligible youth must elect to participate in the EFC program:
 1. Starting on their 18th birthday; or
 2. Prior to their 21st birthday.
2. Caseworkers must:
 1. Follow Department of Children, Youth, and Families (DCYF) policies for conducting [shared planning meetings](#) and a [Multidisciplinary Meeting \(17.5 staffing\)](#) to engage youth, and any supports identified by the youth, in their decision to enroll in EFC.
 2. Coordinate with the Developmental Disabilities Administration (DDA), Court Appointed Special Advocate (CASA) or Guardian Ad Litem (GAL), attorneys, and the court to assist DDA eligible youth with the decision to enroll in the EFC program.
 3. Coordinate with JR when enrolling JR youth in EFC.
 4. Document the youth's decision to participate in the EFC within the FamLink Eligibility page.
 5. Complete the [Extended Foster Care Participation Agreement DCYF 10-432](#) form, with youth electing to participate on their 18th birthday. This includes:
 1. Obtaining the youth's signature.
 2. Providing the signed [Extended Foster Care Participation Agreement DCYF 10-432](#) form to all parties involved and to the court.
 3. Uploading the signed [Extended Foster Care Participation Agreement DCYF 10-432](#) form into FamLink.
 6. Request the court dismiss the youth's dependency on their 18th birthday, if they elect not to participate in the EFC program. Once the case has been dismissed, end the placement episode in FamLink.

3. EFC Enrollment or Re-enrollment Prior to the Youth's 21st Birthday

1. Any youth requesting to enroll in EFC for the first time or re-enter the EFC program after having their dependency dismissed, must:
 1. Have been dependent on their 18th birthday.
 2. Meet one of the eligibility criteria in policy section 1(a) (i.-v.).
 3. Sign an [Extended Foster Care Services Voluntary Placement Agreement \(VPA\) DCYF form 15-431](#) form and agree to entry of a dependency order within 179 days.
 4. Sign an [Extended Foster Care Participation Agreement form DCYF 10-432](#) form.
2. Eligible youth, including youth in the custody of juvenile rehabilitation, department of corrections, county detention, or jail, may enroll and exit the EFC program an unlimited number of times prior to their 21st birthday.
3. If the youth's dependency was dismissed and the youth is requesting EFC enrollment for the first time or re-enrollment, the caseworker must:
 1. Connect youth to an intake worker so they may request EFC services or verify an intake has been created on their behalf. The intake must be assigned to the local office in the nearest area where the youth currently resides.
 2. Contact the youth requesting EFC within 10 calendar days of the date of intake. Determine and document program eligibility on the EFC Eligibility page in FamLink.
 3. If youth are determined eligible for EFC:
 1. Obtain the youth's signature on the [Extended Foster Care Services Voluntary Placement Agreement \(VPA\) DCYF form 15-431](#). Upload the signed VPA in FamLink.
 2. Obtain the youth's signature on the [Extended Foster Care Participation Agreement DCYF 10-432](#) form.
 3. Notify the assistant attorney general within 90 days of the youth returning to care, once the VPA is signed.
 4. File and establish a non-minor dependency action within 179 days from date the VPA was signed. VPAs cannot exceed 179 days.
 5. Update the existing or create a new transition and case plan with the youth prior to the first court review hearing.
 4. If youth are determined not eligible for EFC:

1. A youth is only denied access to the EFC program when they:
 1. Were not dependent on their 18th birthday.
 2. Do not meet any of the eligibility criteria, in policy section 1(a.)(i.-v.), at the time of their request;
 3. Are 21 years old or older.
 2. Staff the case with the EFC regional lead prior to sending the [EFC Denial Letter DCYF 06-165](#) form.
 3. Send the youth an [EFC Denial Letter DCYF 06-165](#) form within 10 calendar days of DCYF's denial decision.
4. Case Planning and Service Provision
- Caseworkers must:
1. Provide written information about the EFC program to youth between the ages of 17 and 17.5, at the 17.5 year-old shared planning meeting.
 2. Document in a case note in FamLink and in the court report that the youth has been provided information about the EFC program prior to their 18th birthday.
 3. Obtain a signed [Consent for Release of Information DCYF 14-012](#) form from the youth prior to tribal collaboration if there is [reason to know](#) they are or may be an Indian child and:
 1. Under DCYF placement and care authority.
 2. Agree to the caseworker collaborating with the tribe.
 4. Provide youth, including youth who are in the custody of JR, DOC, county detention, or jail the following:
 1. [Monthly health and safety visits](#), whether placed in-state or out-of-state.
 2. Regular court hearing reviews.
 3. Case planning activities, including [shared planning meetings](#), which must cover:
 1. A current [Transition Plan for Youth Exiting Care DCYF 15-417](#) form, that is updated and attached to the court report.
 2. A case plan focusing solely on the youth, because, as a legal adult, the youth becomes the only party to the case.
 3. A case plan that assesses the following:
 1. The youth is safe in their placement;
 2. The youth continues to be eligible for EFC;

3. The current placement is developmentally appropriate;
 4. The youth is developing independent living skills; and
 5. The youth is making progress towards transitioning to full independence within their ability.
4. The case plan must also include the youths progress in the following areas:
 1. Education
 2. Employment
 3. Workforce supports and employment services
 4. Local opportunities for mentors and continuing support
 5. Health insurance (Apple Health Core Connections)
 6. Housing
 7. Identification and support of permanent connections
 8. If DDA eligible, the transition plan to adult DDA services once the youth exits EFC
4. Services tailored to meet their transition needs while participating in the program. This includes participating in discharge or release planning and identification of post release supports for youth who are in the custody of JR, DOC, county detention, or jail.
 5. Referrals to community services within the youth's community.
 6. Referrals for a Wraparound Intensive Services (WISe) screen when youth have complex behavioral health needs per [Wraparound with Intensive Services \(WISe\)](#) policy.
 7. Assistance obtaining and reviewing a copy of their consumer credit report annually per the [Transitioning Youth to a Successful Adulthood](#) policy.
 8. Assistance when the youth's foster care placement or Supervised Independent Living (SIL) setting disrupts. This includes:
 1. Assisting youth in locating another foster home or SIL placement, and
 2. Referring youth to other resources and supports.
 9. Develop or update the transition plan to include all of the case plan elements no more than 90 days prior to the dismissal of the EFC case. The plan must be attached to the court report.

5. Request court dismissal of the dependency when youth:
 1. Are not eligible on their 18th birthday.
 2. Are eligible but choose not to participate in the program on their 18th birthday.
 3. Are enrolled in EFC but no longer meet eligibility criteria.
 4. Turn 21 years old or chooses to leave the program.
 5. Are not complying with the dependency court order, case plan, or placement rules.
 6. Has left their approved placement for more than 72 hours without approval.
 7. Are no longer living in a DCYF or court-approved placement and refuses to accept all other identified placement or housing options.
6. Document in FamLink their placement has ended once the court dismisses the dependency.

5. Placement Types

EFC youth may be placed in the following settings:

1. Licensed foster care, such as, but not limited to, licensed foster homes or kinship care or group care facilities. EFC youth placed in these settings, will:
 1. Continue in their current placement setting as long as they are eligible, it is age appropriate, and the caregiver agrees to continue to serve the youth.
 2. Have their EFC payments assessed and adjusted as needed, using the foster care rate assessment or rate determination process for therapeutic placements.
2. Supervised Independent Living (SIL) settings
 1. A SIL setting is any placement that is not a licensed foster care placement and may include, but not limited to:
 1. Apartments
 2. Room and board arrangements
 3. College or university residence halls or dormitories
 4. AmeriCorps or Job Corps
 5. Shared roommate
 6. Renting a room
 7. Parents or guardians

8. Relative or other suitable adults
 9. A licensed foster home with a room and board arrangement. When this occurs, the foster care reimbursement stops and SIL payments are made directly to the youth.
2. If youth request to reside in a SIL setting, caseworkers must:
1. Assess the youth's ability to live independently.
 2. Visit the proposed SIL setting to assess for safety or request courtesy supervision for out-of-state placements.
 3. Approve the setting and document in a case note in FamLink.
 4. Obtain court approval, if the caseworker denied the setting.
 5. EFC youth in the following circumstances are not prohibited from living in an approved SIL setting:
 1. Enlisted in the military
 2. An EFC youth in an approved SIL setting, who is in basic training or has completed basic training and is serving part-time in the National Guard or in the reserves.
 3. If an EFC youth is in an approved SIL setting and is or becomes married, their spouse is not eligible for services or funding unless they have their own EFC case.
 4. Parenting
 5. Adopted as an adult
 6. In a voluntary or involuntary substance use or behavioral health treatment facility.
3. SIL payments for EFC youth are:
1. Provided when the youth is in a SIL setting approved by DCYF or the court.
 2. Paid directly to the youth, for room and board and basic necessities.
 3. Fixed at the current basic foster care reimbursement rate, and must continue unless:
 1. The youth is no longer in a DCYF approved placement setting; and
 2. A court hearing was held and the court did not approve the SIL setting or

3. The court dismisses the dependency.
4. Not paid when:
 1. Other foster care placement payments are being paid including payments made for dependency guardianships.
 2. A youth in the custody of JR, DOC, county detention, or jail at the time they turn 18 years old and remain in custody.
5. Discontinued when youth:
 1. Complete the armed services basic training and are on full-time active duty status.
 2. Are in the custody of JR, DOC, county detention, or jail for more than 30 days.
 3. Choose to stop participating in EFC, and the case is dismissed.
3. For Interstate Compact Placement of Children (ICPC) cases when:
 1. Washington (WA) state:
 1. The caseworker must contact the ICPC Unit to determine if the receiving state will provide courtesy supervision to EFC youth.
 2. If the receiving state does not provide courtesy supervision, caseworkers must conduct [health and safety visits](#), per the policy and review the documentation of these visits to verify the youth's needs are met.
 2. Another state:
 1. WA provides EFC services to ICPC youth who were placed in WA prior to their 18th birthday when the sending state has an EFC program and requests WA to continue to provide this service.
 2. EFC funding must be provided from the sending state.
 3. WA does not provide courtesy supervision to youth residing in WA who have an EFC case in another state and who were not residing in WA prior to their 18th birthday.
6. Normal Youth Activities
EFC youth may:
 1. Leave a placement setting to participate in normal youth activities for up to 72 hours. Youth in licensed placements must comply with the requirements of the placement regarding offsite activities.

2. Be gone for longer than 72 hours with assigned caseworker or other designated DCYF employee approval. For in-state, or out-of-country travel requests exceeding 72 hours, the caseworker must follow the [Approving Client Travel and Transportation Activities](#) policy.

Forms

[Consent DCYF 14-012](#)

[EFC Denial Letter DCYF 06-165](#)

[Extended Foster Care Participation Agreement DCYF 10-432](#)

[Transition Plan for Youth Exiting Care DCYF 15-417](#)

[Voluntary Placement Agreement for Extended Foster Care Services DCYF 15-431](#)

Resources

[Apple Health Core Connections](#)

[Approving Client Travel and Transportation Activities policy](#)

[Court Report policy](#)

[Courtesy Supervision policy](#)

[Extended Foster Care brochure](#)

[Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents policy](#)

[Indian Child Welfare Reason to Know policy](#)

[JR Policy 4.80 Serving Youth in Partnership with Children's Administration](#)

[Wraparound with Intensive Services \(WISe\) policy](#)

4311. Pregnant and Parenting Youth

4311. Pregnant and Parenting Youth admin Mon, 08/26/2019 - 10:10

Revised Date: July 28, 2019

Sunset Review Date: July 31, 2023

Approved by: Ross Hunter, Secretary

Purpose

This purpose of this policy is to provide guidance to child welfare employees working with dependent youth who are pregnant or parenting so that their unique needs are met and their efforts to transition to adulthood are successful.

Laws

[RCW 9.02.100](#) Reproductive privacy - Public policy

[RCW 26.44.030](#) Reports

[RCW 74.13.280](#) Client Information

PL 110-351 Fostering Connections to Success and Increasing Adoptions Act 2008

Policy

1. The unique needs of dependent youth who are pregnant or parenting must be identified and referred to services when necessary.
2. All dependent pregnant and parenting youth must be provided with information about their rights and the duties and responsibilities of Department of Children, Youth, and Families (DCYF) during shared planning meetings.
3. A dependency action on a dependent youth's child is only sought if a safety threat exists that cannot be controlled.
4. When a dependent youth and their child live in the same placement and there is no need to file a dependency on that child, DCYF considers the child's home to be that of the dependent youth.

Procedures

Assigned caseworkers must:

1. Dependent Pregnant Youth
 1. Conduct a shared planning meeting within 10 calendar days of the youth's disclosure of the pregnancy. The purpose of the meeting is to:
 1. Identify needed services, i.e., prenatal care, nutrition, education, etc.
 2. Create a plan for how support will be provided to the expectant parent.
 3. Discuss and provide tribal enrollment information, if they wish to explore tribal enrollment eligibility for their child, when applicable.
 2. Follow the health and safety visit requirements and discuss:
 1. Needed pregnancy services.
 2. Referral to community resources as needed, e.g. First Steps, Safe Babies Safe Moms, Parent Child Assistance Program (PCAP), Public Health Department, Women, Infant and Children (WIC), etc.
 3. The needs of the unborn child after the 28th week of pregnancy, e.g. child care, list of emergency contacts, services discussed above, etc.

4. Placement options if the youth is unable to remain in the current placement after delivery.
5. The youth's educational needs.
6. The Independent Living Program (ILP) and if the youth is interested, submit a completed Independent Living Services Referral DCYF 13-353 form.

2. Dependent Parenting Youth

1. Follow the Infant Safety policy when the youth's child is age birth to one year.
2. Discuss tribal enrollment information with the youth for their child, if they wish to explore eligibility, when applicable.
3. Follow health and safety visit requirements and discuss:
 1. Any needed medical services and applying for Apple Health medical insurance for the youth's child. To apply, contact the Foster Care Medical Team at the Health Care Authority. Hospitals may also assist with obtaining medical coverage for newborns.
 2. The youth's role as a parent, including successes, challenges, and resources needed.
 3. Referral to community resources as needed for the parenting youth.
 4. Importance of ongoing engagement of the parent who is not providing primary care of the child.
 5. The youth's educational needs.
 6. The ILP and if the youth is interested, submit a completed Independent Living Services Referral DCYF 13-353 form.
4. Seek a court hearing to appoint an attorney or Guardian ad Litem (GAL) for the youth if one is not already appointed.
5. If the youth wishes to voluntarily relinquish their parental rights, contact the Assistant Attorney General.

3. Dependent Parent's Child

1. Complete a Plan of Safe Care DCYF 15-491 when the child is born.
 2. Take immediate protective action if present danger exists. A decision to remove a child that is not dependent requires legal authorization per Placement Out-of-Home and Conditions for Return Home policy.
 3. Report any allegations of child abuse or neglect to intake.
4. At the first opportunity, provide information about the dependent or parenting youth's rights and responsibilities using the Tools to Support Pregnant and Parenting Youth in Care

Guidebook DCYF 22-1536. Opportunities include during the health and safety visit, shared planning meeting, court hearings, school meetings, etc.

5. Documentation

1. Document in FamLink all medical examinations and hospitalizations, or if a pregnant or parenting youth refuses pre-natal care, and other medical services.
2. Document in the FamLink Person Management page, under Additional Tab/Child Information section, the youth is a teen parent and whether their child resides with them.
3. Close the current foster care placement and re-open placement from "basic foster care" to "basic foster care with a non-dependent child" when the child is born, determined to be safe in the parent's care, and the parent is in licensed foster care.

Forms

[ICW Family Ancestry Chart](#)

Independent Living Services Referral DCYF 13-353

Indian Identity Request DCYF 07-761

Resources

[Apple Health Coverage for Children](#)

[CA Worker Tip Sheet for Pregnant and Parenting Youth DCYF 22-1539](#)

[Department of Health Child Profiles - development and health information as your child grows](#)

[DSHS: Division of Child Support Caregiver Tip Sheet for Pregnant & Parenting Youth - DCYF 22-1537](#)

[First Steps](#)

[Guidebook for Pregnant & Parenting Teens in Foster Care DCYF 22-1538](#)

[Your Rights, Your Life: A Resource for Youth in Foster Care](#)

[OSPI GRADS Program for Pregnant teens or Young Parents](#)

[TANF Benefits](#)

[Teen Fathers Tip Sheet for Youth in Foster Care DCYF 22-1540](#)

[Teen Mothers Tip Sheet for Youth in Foster Care DCYF 22-1541](#)

[WA Health Plan Finder](#)

[Washington State Teen Help](#)

[Women Infant and Children](#)

4313. Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers

4313. Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers sarah.sanchez Wed, 08/22/2018 - 14:02

Original Date: July 31, 2010

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Vickie Ybarra, Assistant Secretary for Partnerships, Prevention, and Services Division

Purpose

The purpose of this policy is to provide guidance on the information that must be shared with caregivers, including information on:

- Their right to be present and participate in court hearings.
- The children or youth placed in their home that is necessary to support the caregiver in meeting the individual needs of the children or youth.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 13.34.096](#) Right to be heard notice

[RCW 13.34.260](#) Foster Home Placement - Parental Preferences

[RCW 13.34.820](#) Permanency for Dependent Children Annual Report

[RCW 74.13.280](#) Client Information

Policy

Caseworkers must:

1. Notify caregivers of all court hearing and their right to attend and be heard.
2. Share information with the caregivers about the children or youth being placed or that have been placed in their home.

Procedures

Caseworkers must:

1. Follow the [Dependency Petition Process](#) policy for the placement information that must be provided to the court at the shelter care hearing.

2. Notify caregivers of:
 1. All court hearings via telephone, writing or in-person.
 2. Their right to attend and be heard at all court hearings:
 1. At the same time parties to the case are required to be notified.
 2. At the time of placement or as soon as possible if the child or youth changes placement.
3. Provide caregivers with the [Caregiver's Report to the Court DCYF 15-313](#) form and inform them that:
 1. They are able to complete and submit the Caregiver's Report to the Court DCYF 15-313 form to the guardian ad litem (GAL) or caseworker and it will be provided to the court before each hearing.
 2. The report only includes information about the child or youth and not information about their parent unless it is directly related to the child's or youth's well-being.
4. Inform the court of the dates and method by which the caregiver was informed of the court hearing.
5. Share information with caregivers about the child or youth, including, but not limited to:
 1. Child-specific safety concerns and safety planning if applicable, including:
 1. Information on all youth identified as Sexually Aggressive Youth (SAY), Physically Assaultive and Aggressive Youth (PAAAY), high risk, or sexually reactive, per [RCW 74.13.280](#) and the [SAY](#), and [PAAAY](#) policies.
 2. The Youth Supervision Plan DCYF 15-352.
 2. The [Child Information and Placement Referral \(CIPR\) DCYF 15-300](#) form. Provide this form:
 1. No later than:
 1. Seventy-two hours after initial placement.
 2. Twenty-four hours after an urgent change in placement. Urgent is defined as one of the following:
 1. A court order has been entered requiring an immediate change in placement.
 2. The child or youth is unsafe.
 3. At or before a planned change in placement.
 3. Health care information including immunization history, behavioral health and education. Youth must provide informed consent for information about:

1. Mental health when the youth is age 13 and older.
 2. A sexually transmitted disease, including Human Immunodeficiency Virus (HIV) when the youth is age 14 and older.
 3. A substance use disorder and the child or youth is of any age.
 4. Abortion and reproductive rights. Consult with the attorney general or attorney if the child is age twelve or younger.
 5. [Child Health and Education Tracking \(CHET\) Screening Report DCYF 14-444](#) form within the first 60 days of initial placement, if completed.
 4. Resources and supports for children and youth that are exploring or identify as LGBTQIA+ following the DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy.
 5. The child's or youth's:
 1. Court report.
 2. Birth certificate.
 3. Social security number to assist caregivers in filing their taxes or for other planning for the child or youth. They must not provide tax advice, but refer caregivers with questions to:
 1. Their tax preparer.
 2. The [DCYF tax desk](#).
 3. [IRS Publication 501 Dependents, Standard Deduction, and Filing Information](#).
 6. [On-Going Mental Health \(OMH\) Screening Report DCYF 15-434](#) form if completed within the previous six months.
 7. Reports and recommendations resulting from all child or youth assessments and screenings within five days of receipt by DCYF.
 8. [Shared planning meeting](#) notices.
6. Documentation
- Document:
1. The date the caregiver was notified of court hearings in the Caregiver Notification page in FamLink.
 2. When and what information has been shared with the caregiver in a case note.
 3. That the completed [Child Information and Placement Referral \(CIPR\) DCYF 15-300](#) form was provided to the caregiver by uploading into FamLink either the:

1. Signed and dated copy of the form.
2. Copy of the email sending the completed form to the caregiver.

Forms

[Caregiver's Report to the Court DCYF 15-313](#)

[Child Health and Education Tracking Screening Report DCYF 14-444](#)

[Child Information and Placement Referral \(CIPR\) DCYF 15-300](#)

[On-Going Mental Health \(OMH\) Screening Report DCYF 15-434](#)

Youth Supervision Plan DCYF 15-352 (located in the Forms repository on the DCYF intranet)

Resources

[DCYF Tax Desk](#)

[Dependency Petition Process policy](#)

[IRS Publication 501 Dependents, Standard Deduction, and Filing Information](#)

[Shared Planning Meeting policy](#)

4315. Using Audio or Video to Electronically Monitor Children

4315. Using Audio or Video to Electronically Monitor Children admin Thu, 12/26/2019 - 08:43

Original Date: 2003

Revised Date: March 24, 2020

Sunset Review Date: March 31, 2023

Approved by: Jody Becker, Deputy Secretary of Children and Families

Purpose

To purpose of this policy is to provide direction on the requirements for the use of electronic monitoring of children and youth placed in out-of-home care. This includes children or youth placed in:

- Licensed foster care
- Unlicensed kinship care
- Out-of-State group care facilities

Electronic monitoring does not include the use of audio or video monitoring for any of the following:

- Infants or children through four years of age.

- Medically fragile or sick children, when it relates to their health.
- Actions of a child or youth as directed in writing by the child or youth's physician.
- Special events such as birthday parties or vacations.
- Use of door or window alarms or motion detectors.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) child welfare employees and Licensing Division (LD) foster home licensors and relative and adoption home study workers.

Laws

[RCW 9.73.030](#) Intercepting, recording or divulging private communication - Consent required - Exceptions

Policy

1. DCYF will only use electronic monitoring when it is necessary to monitor the health, safety, or well-being of children and youth in out-of-home care.
2. DCYF allows the use of electronic monitoring of children or youth in:
 1. Washington State unlicensed placements or out-of-state group care facilities when recommended as a result of a [shared planning meeting \(SPM\)](#) and approval is received from both the:
 1. Assistant secretary of field operations or designee
 2. Courts
 2. Licensed foster homes or group care facilities in Washington State when recommended as a result of a [SPM](#) and approval is received from the:
 1. LD senior administrator or designee
 2. Courts

Procedures

1. Caseworkers must assess the need for electronic monitoring in the home of a specific child or youth by consulting with their supervisor.
2. Supervisors must approve the consideration for the use of electronic monitoring by:
 1. Reviewing the information provided by the caseworker and determining if the child or youth's behaviors are a potential harm to their health, safety, or well-being.
 2. Notifying the caseworker of their decision.
3. If supervisors approve the consideration for the use of electronic monitoring, caseworkers must:

1. Notify the Guardian ad Litem (GAL) or Court Appointed Special Advocate (CASA), service providers, child or youth's parents, and caregivers that electronic monitoring is being recommended.
2. Conduct a [SPM](#) to discuss the need for electronic monitoring.
 1. If it is determined that electronic monitoring is not needed, caseworkers must complete the following:
 1. Discuss and document on the [Shared Planning Meeting DCYF 14-474](#) form how the child or youth's behaviors will be mitigated.
 2. Provide copies of the recommendations to meeting participants that:
 1. Attended.
 2. Were invited, but did not attend and are part of the child or youth's supervision plan.
 3. Add the recommendations to the Youth Supervision Plan DCYF 15-352 form.
 2. If electronic monitoring is recommended, caseworkers must:
 1. Determine the best method of electronic monitoring to meet the child or youth's behavioral needs.
 2. Document all of the following on the [Shared Planning Meeting DCYF 14-474](#) form:
 1. Type of monitoring equipment that will be used.
 2. Locations in the home where the equipment will be used.
 3. Individuals responsible for monitoring the child or youth with the equipment.
 4. Potential impact of electronic monitoring on other children or youth in the licensed or unlicensed home.
 5. Length of time the use of equipment is approved, or how often the equipment must be reviewed for continued use.
4. If during the [SPM](#) it is recommended to use electronic monitoring in:
 1. Washington State unlicensed placements or out-of-state group care facilities, caseworkers must:
 1. Complete the [Administrative Approval Request DCYF 05-210](#) form and attach any supporting documentation, e.g., doctor's note or therapist's recommendation.

2. Send the completed [Administrative Approval Request DCYF 05-210](#) and [Shared Planning Meeting DCYF 14-474](#) forms to the assistant secretary of field operations or designee.
2. Licensed placements (foster homes or group care facilities) in Washington State:
 1. Caseworkers must send the [Shared Planning Meeting DCYF 14-474](#) to the LD licensor.
 2. LD licensors must:
 1. Respond in writing to the caseworker about the suitability of using electronic monitoring and identify any concerns about implementing the proposed plan in the foster home or group care facility.
 2. Send the [Licensing Waiver/Administrative Approval DCYF 15-411](#) form to the LD senior administrator for review.
 3. Notify the caseworker when the [Licensing Waiver/Administrative Approval DCYF 15-411](#) form is approved or denied by the LD senior administrator.
 4. Upload the approved or denied [Licensing Waiver/Administrative Approval DCYF 15-411](#) form in FamLink.
 3. If the assistant secretary of field operations or designee or the LD senior administrator/designee approves the use of electronic monitoring, caseworkers must:
 1. Update the child or youth's [case plan](#) with all of the following:
 1. Reasons for the use of electronic monitoring.
 2. Type of equipment and how it will be used.
 3. Timeframes for review or removal of the electronic monitoring equipment.
 2. Obtain court approval for the use of electronic monitoring. If the next court hearing is scheduled beyond 30 calendar days, contact the assigned assistant attorney general to request a court hearing.
 3. Coordinate with the caregivers or facility employees to implement the electronic monitoring after the [case plan](#) is approved by the court.
 4. Document changes in the child or youth's behavior in monthly [health and safety visit](#) case notes.
 5. Review the use of electronic monitoring at least prior to each court hearing.
5. Changing Out-of-Home Placements
Caseworkers must reassess and complete the approval process in this policy with the new

caregivers, when children or youth move to a different out-of-home placement and electronic monitoring is still needed.

Forms

[Administrative Approval Request DCYF 05-210](#)

[Licensing Waiver/Administrative Approval DCYF 15-411](#)

[Shared Planning Meeting DCYF 14-474](#)

Youth Supervision Plan DCYF 15-352

Definitions

Electronic Monitoring means video or audio monitoring or recording inside a home or facility, used to watch or listen to children or youth as a way to monitor their behavior. This includes common areas, e.g. living room or recreational room, in the home or facility.

Resources

Guide to Shared Planning Meetings (located on the Child and Family Welfare Services CA DCYF intranet page)

[WAC 110-145-1625 What are the requirements for the use of electronic monitors to monitor children?](#)

[WAC 110-148-1540 What privacy must I provide for children in my care?](#)

4320. Identifying Adoptive Families

4320. Identifying Adoptive Families sarah.sanchez Wed, 08/22/2018 - 14:03

Original Date: September 27, 1995

Revised Date: July 1 2023

Sunset Review Date: July 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide direction on:

- Identifying permanent adoptive homes for children and youth.
- Providing information to adoptive families about prospective adoptive children or youth that allows them to make an informed decision on whether they want to be considered as an adoptive family.
- Recruitment services and activities for children and youth in need of a permanent home.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.040](#) Petition to court to deal with dependent child-Application of federal Indian child welfare act

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.34.200](#) Order terminating parent and child relationship-Rights of parties when granted

[RCW 13.34.210](#) Order terminating parent and child relationship-Custody where no one has parental rights

[RCW 13.34.260](#) Foster home placement-Parental preferences-Foster parent contact with birth parents encouraged

[Chapter 13.50 RCW](#) Keeping and release of records by juvenile justice or care agencies

[Chapter 26.33 RCW](#) Adoption

[Chapter 70.02 RCW](#) Medical records and health care information access and disclosure

[RCW 70.24.110](#) Minors-Treatment, consent, liability for payment for care

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.290](#) Fewest possible placements for children-Preferred placements

[RCW 74.13.300](#) Notification of proposed placement changes

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[PL 103-382](#) Multiethnic Placement Act (MEPA) of 1994

[PL 105-89](#) Adoption and Safe Families Act (ASFA) of 1997

Policy

1. Child and Family Welfare Services (CFWS) caseworkers and adoption caseworkers:
 1. Must:
 1. Follow the [Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons](#) policy throughout the life of the case when children or youth are not placed with relatives.

2. Continue [relative searches](#) when legally-free children or youth are not placed with relatives.
3. Provide reasonable efforts to identify prospective adoptive families willing to agree to the terms of the [Letters of Intent](#), as applicable.
4. Assess prospective adoptive families for children and youth with a permanent plan of adoption.
5. Identify prospective adoptive families through:
 1. [Adoption planning reviews \(APR\)](#) for children or youth prior to termination of parental rights (TPR) or accepting a relinquishment of parental rights.
 2. [Shared planning meetings \(SPM\)](#) for children or youth after termination of parental rights (TPR) or accepting a relinquishment of parental rights.
6. Assess the child's or youth's best interest when making placement decisions. [Best interest](#) is determined on a case-by-case basis. The determination is made by considering their:
 1. Physical safety.
 2. Well-being, including physical, emotional, and mental health needs.
 3. Relationship or bond with current caregivers, if applicable.
 4. Capacity of the caregiver to meet their physical and well-being needs.
7. Involve youth 12 years and older in case planning decisions.
8. Assess and give preference to:
 1. Placement considerations from the following:
 1. Parents
 2. Guardians
 3. Children
 4. Youth
 2. Both of the following, per the [Placement Out-of-Home and Conditions for Return Home](#) policy:
 1. [Relatives and suitable persons](#) instead of a foster home that is unrelated and unknown to the family when determining a placement for a child or youth, when:

1. They are safe and able to meet the child's or youth's needs.
 2. The placement is in the child's or youth's best interests.
2. Placing siblings together when it is in the child's or youth's best interest.
9. Maintain children's or youth's existing relationships with relatives of a specified degree that are not placement options when:
 1. Children or youth are dependent and legally-free. The rights of the relative of specified degree do not extend beyond adoption.
 2. A relationship with the relatives is determined to be in the child's or youth's best interest.
 3. Relatives of specified degree want to maintain a relationship with the child or youth.
 4. A [SPM](#) process recommends this contact.
10. Follow [Indian Child Welfare \(ICW\) Chapter 8. Adoption](#) policy when there is reason to know that the child or youth is or may be an Indian child.
11. Verify the health, mental health, and education information on the child or youth is provided to prospective adoptive families prior to adoption finalization.
2. Must not deny:
 1. Adoptions or out-of-home placements based on the race, or national origin of the prospective adoptive parents or the child or youth involved, per [MEPA](#). This provision does not apply to nor affect [Indian Child Welfare Act \(ICWA\)](#).
 2. Any individual above the age of 18 the opportunity to become an adoptive parent based on race or national origin.
 3. Adoptive placements with an approved family residing outside the jurisdiction or office providing case management for the child's or youth's case.
2. CFWS caseworkers must follow the [Case Transfer](#) policy after relinquishment or [TPR](#) hearings to initiate the [case transfer](#) to adoptions.
3. Adoption supervisors must follow the [Case Transfer](#) policy when assigning new cases to adoption caseworkers.

4. Adoption caseworkers must provide information and guidance to prospective adoptive families, adoptees, and employees about the adoption process and available services when requested.

Procedures

1. Identifying the Adoptive Family

1. CFWS caseworkers must complete the following when [relative searches](#) have been completed and no relatives have been identified or approved for placement and there is at least one family that wants to be identified as their prospective adoptive home:

1. Provide adoptive families information about the prospective adoptive children or youth that may impact their ability to parent successfully to assist the family in determining if they want to be considered as an adoptive home. This includes:

1. Coordinating with adoption caseworkers to redact information needing to be provided.

2. Providing the following information, that may include, but is not limited to the child's or youth's:

1. Individualized Education Plan (IEP) or 504 plan.
2. Psychological or other mental health assessments.
3. Medical information.
4. [Foster Care Assessment Program \(FCAP\)](#) report.

2. When there:

1. Is a single adoptive family identified:

1. Schedule an [APR SPM](#).
2. Obtain a [Consent DCYF 14-012](#) form, to share the home study, e.g., youth if developmentally appropriate, Guardian ad Litem (GAL), and tribes.
3. Follow the:
 1. [APR](#) policy.
 2. [Home Study Review and Placement Considerations CWP_0064](#) publication.

2. Are two or more prospective adoptive families identified:

1. Schedule an [APR SPM](#).

2. Obtain a [Consent DCYF 14-012](#) form, to share the home study, e.g., youth if developmentally appropriate, GALs, and tribes.
 3. Follow the [APR](#) policy.
 4. Utilize the:
 1. Selection Committee.
 2. [Home Study Review and Placement Considerations CWP_0064](#) publication.
2. Adoption caseworkers must:
 1. Follow the [Home Study Review and Placement Considerations CWP_0064](#) publication when children or youth have one or more adoptive families identified.
 2. Utilize the Selection Committee process when there are two or more prospective adoptive placements and children or youth are:
 1. Legally-free.
 2. Not in a prospective adoptive placement.
3. CFWS caseworkers or adoption caseworkers must:
 1. Hold Selection Committees with prospective adoptive placements that have approved homes studies and are:
 1. Relatives or suitable persons, licensed or unlicensed.
 2. Foster parents with an existing relationship.
 3. Other licensed foster parents approved for adoption.
 2. Email requests for Selection Committees to the Regional Adoption Program Manager (RAPM) or designee and include the following:
 1. [Consent DCYF 14-012](#) form, to share the home studies with all parties invited to the Selection Committee, e.g., GAL, tribes, and external partners.
 2. Child's or youth's name, date of birth (DOB), and FamLink case number.
 3. Contact information of the individuals being invited.
 4. Copies of home studies of the selected prospective adoptive placements.
4. RAPMs or designees must:

1. Schedule Selection Committees and invite the following:
 1. CFWS or adoption caseworker and their supervisor.
 2. Adoption Unit representative for CFWS cases.
 3. GAL.
 4. Child's or youth's attorney, if appointed.
 5. Youth, if developmentally appropriate.
 6. Tribal representative, if tribe is involved in the case.
 7. Others involved in the child's or youth's case plan, as determined by the caseworker, e.g. therapists, child placing agencies (CPA), caregivers.
 2. Facilitate the Selection Committee by following the [Recruitment Strategies and Placement Considerations Flowchart CWP_0076](#) publication.
 3. Provide the [Home Study Review and Placement Considerations CWP_0064](#) publication to the Selection Committee members to use during the selection committee process.
 4. Complete the [Shared Planning Meeting DCYF 14-474](#) form to document reasons for selecting the prospective adoptive family instead of the other families being considered.
2. Selecting a Different Family than Recommended by the Selection Committee
 1. CFWS caseworkers or adoption caseworkers must complete the following if they choose a different prospective adoptive family than the Selection Committee recommended:
 1. Document the reasons for not following the Selection Committee's recommendation in a FamLink case note, that includes:
 1. The child's or youth's attachment with the caseworker's selected prospective adoptive family.
 2. The prospective adoptive family's:
 1. Ability to:
 1. To meet the:
 1. Cultural and ethnic needs of the child or youth.
 2. Special needs of the child or youth, including but not limited to, medical, behavioral, and mental health.

2. Protect the child or youth from risk of harm from their birth parents or guardians, while not portraying them in a negative manner.
 2. Willingness to provide long-term contact with siblings, relatives, former foster families, or other individuals important to the child or youth when the contact is in their best interest.
 3. For prospective adoptive families that are relatives to the child or youth, they must also include the relatives' relationship with the child or youth.
 3. Other factors influencing their decision.
 2. Provide the following to the area administrator (AA) for review:
 1. Selection Committee's recommendation.
 2. Documentation to override the Selection Committee's recommendation.
 2. AAs receiving the request to override the Selection Committee's recommendations must review the records provided. If:
 1. Approved, send the following to the deputy regional administrator (DRA):
 1. Selection Committee's recommendation.
 2. Documentation to override the Selection Committee's recommendation.
 2. Denied, return the request to the caseworker with the reason for the denial.
 3. DRAs receiving the request to override the Selection Committee's recommendations must review the records provided. If:
 1. Approved, send the confirmation email to the AA and requestor.
 2. Denied, notify the AA and caseworker of the reason for the denial.
 4. CFWS caseworkers or adoption caseworkers must document the DRAs decision in a FamLink case note.
3. Notifications After Selecting the Adoptive Home

CFWS or adoption caseworkers must notify the following and document in the Adoption Referral section under the Potential Matches tab in FamLink, within ten calendar days after the adoptive family has been selected:

 1. All families who were considered for placement.

2. [Northwest Adoptions Exchange \(NWAEE\)](#) and all other exchanges the child or youth is on, to place their profile on hold, until the adoption is finalized.
4. Prospective Adoptive Families Residing in Washington State and Out-of-State
 1. CFWS or adoption caseworkers must complete the following when the selected prospective adoptive family resides in Washington State or out-of-state:
 1. Develop a [transition](#) and visitation plan to initiate contact and start developing a relationship between the child or youth and prospective adoptive family. The plan must be developed in collaboration with the:
 1. Child or youth, if developmentally appropriate.
 2. GAL.
 3. Prospective adoptive family.
 4. Tribe, as applicable.
 2. Facilitate visitation between the prospective adoptive family and child or youth by:
 1. Selecting the location of the visits.
 2. Attending or designating an individual to accompany the child or youth on the initial visit with whom they feel comfortable.
 3. Discussing separately after each visit with the child or youth and the prospective adoptive family to determine whether continued transition and placement remains in the child's or youth's best interest. This includes documenting the conversations in a FamLink case note.
 4. Coordinating open contact between the prospective adoptive family and the child's or youth's current caregiver, if appropriate.
 3. Schedule a [Family Team Decision Making \(FTDM\)](#) meeting prior to placing the child or youth in a new home. If the FTDM recommends placement with the prospective adoptive family, follow the [Placement Out-of-Home and Conditions for Return Home](#) policy.
 2. CFWS and adoption caseworkers must complete the following when the selected prospective adoptive family resides out-of-state:
 1. Follow the [Interstate Compact on the Placement of Children \(ICPC\) Placed-Out-of-State](#) policy.
 2. Receive the [ICPC Placement Request 100A DCYF 15-092](#) form from the sending state that is approved for adoption, prior to placing the child or youth out-of-state.

3. CFWS caseworkers or adoption caseworkers must request an Adoption Purchase of Services (POS) contract by emailing the statewide adoption program manager the following information when the prospective adoptive family's out-of-state agency requires payments for services such as monthly health and safety visits, adoption services, or adoption finalization:
 1. Child's or youth's name, DOB, and FamLink case number.
 2. Agency name, contact information, and email.
 3. [SPM](#) or Selection Committee documentation identifying the family as the selected prospective adoptive family.
 4. Copy of the prospective adoptive family's home study.
 5. Child's or youth's [transition plan](#).
 6. Additional services for the prospective adoptive family and child or youth, if needed.
 4. The statewide adoption program manager must complete the following when they receive POS information from caseworkers:
 1. Facilitate a contract with the receiving out-of-state agency for the payment of the required out-of-state costs.
 2. Notify caseworkers when contracts are approved.
 5. CFWS or adoption caseworkers must follow the [ICPC](#) process for placing children or youth out-of-state after receiving notification from the statewide adoption program manager that the POS is completed with the receiving out-of-state agency.
5. Prospective Adoptive Families Not Supported by DCYF
CFWS or adoption caseworkers must:
1. Follow the [Placement Moves](#) policy when notifying the caregiver of the child's or youth's change in placement, if appropriate.
 2. Request a placement change with the court when DCYF does not support adoption with the child's or youth's current placement. If the court continues placement:
 1. File a copy of the denied home study in Superior Court under the adoption petition cause number following the local court procedures, if applicable.
 2. Provide the prospective adoptive family:
 1. Disclosure.
 2. Contact information for [adoption support](#).
 3. Notify the prospective adoptive family that they are responsible for completing and submitting the required adoption support and adoption finalization documentation.

4. Document the notification to the family in a FamLink case note.
5. Follow requirements for ongoing case management, including but not limited to:
 1. [Court reports](#)
 2. [Health and safety visits](#)
 3. Service referrals
 4. [Sibling visits](#)
 5. [SPMs](#)
6. Adoption Recruitment Activities
 1. CFWS or adoption caseworkers must complete the following when there are children or youth without an identified adoptive placement:
 1. Contact individuals from the original relatives search and request another relative search from the [Relative Search Unit](#).
 2. Follow the [Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons](#) policy.
 3. Participate in efforts following the [Child-Specific Recruitment Services in Washington State CWP_0054](#) publication to recruit families who want to adopt children or youth in the placement care and authority of DCYF.
 4. Create a [WA Access](#) account through [NWAE](#) to view children or youth to assist in finding permanent homes for children or youth.
 5. Inform families of [WA Access](#) registration and how to create an account to:
 1. View children or youth available for adoption.
 2. Allow caseworkers to view their family profile when seeking adoptive homes for children or youth.
 2. Adoption caseworkers must provide adoption information and resources to prospective adoptive families and caseworkers as applicable, including, but not limited to:
 1. The court process.
 2. Children's or youth's development, including bonding and attachment, and separation and loss issues.
 3. Interaction with the child's or youth's family that may include visitation and an [OAA or Letter of Intent](#).
 4. Confidentiality of information.
 5. Impact of placement on the foster-adoptive or adoptive family.

6. Adoption as a lifelong process and commitment.
7. The significance of adoption in permanency planning for children or youth in foster care and that the primary focus of adoption services is the child or youth.
8. Adoption process requirements and procedures, and the differences between foster, adoptive, and foster-adoptive placements.
9. Available resources for children or youth with special needs.
10. The legal risks involved in:
 1. Foster-adoptive placements prior to [TPR](#).
 2. Placement of legally-free children or youth under an appeal for the [TPR](#).
11. [Adoption support](#) by providing the link to the [Adoption Support for Caregivers E-Learning](#) or contact information for the adoption support consultants.

Forms

[Consent DCYF 14-012](#)

[ICPC Placement Request 100A DCYF 15-092](#)

[Shared Planning Meeting DCYF 14-474](#)

Resources

[42 CFR 671a State Plan for Foster Care and Adoption Assistance](#)

[42 CFR 5106a Grants to States for Child Abuse or Neglect Prevention and Treatment Programs](#)

[Adoption Support policy](#)

AFCARS Guides (located on the FamLink Knowledge Web, under Guides, User Manuals, and Workflows)

[Alliance for Child Welfare Adoption Support E-Learning for Caregivers](#)

[Background Checks policy](#)

[Case Transfer policy](#)

[Children's Bureau Determining the Best Interests of the Child](#)

[Children's Bureau Helping Your Child Transition from Foster Care to Adoption](#)

[Child-Specific Recruitment Services in Washington State CWP_0054 publication](#)

[DCYF Adoption Internet Webpage](#)

[Family Team Decision Making \(FTDM\) policy](#)

[Foster Care Assessment Program policy](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Home Study Review and Placement Considerations CWP_0064 publication](#)

ICPC Packet Checklist (located on the ICPC intranet page)

[ICPC Placed Out-of-State policy](#)

[Indian Child Welfare \(ICW\) Chapter 8. Adoption policy](#)

[Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons policy](#)

[Northwest Adoptions Exchange \(NWAE\)](#)

[Open Adoption Agreements and Letters of Intent policy](#)

[Placement Out-of-Home and Conditions for Return Home policy](#)

[Post Adoption Support Services](#)

[Recruitment Strategies and Placement Considerations Flowchart CWP_0076 publication](#)

[Termination of Parental Rights policy](#)

[Undertaking Planned Transitions for Children in Out-of-Home Care](#)

[WAC 110-60-0170 What must the department, private practitioner, or child placing agency do to locate records and information relating to the birth parents and the child?](#)

[WAC 110-60-0180 What information must the department or child placing agency provide to prospective adoptive parents about the child that is being considered for adoption?](#)

[WAC 110-60-0190 What information must the department or child placing agency provide to prospective adoptive parents about the birth parent\(s\) of a child being considered for adoption?](#)

4325. Electronic Legally-Free Case Files and Pre-Adoption Disclosure (PAD) Folders

4325. Electronic Legally-Free Case Files and Pre-Adoption Disclosure (PAD)
Folders sarah.sanchez Wed, 08/22/2018 - 14:20

Original Date: September 30, 2017

Revised Date: July 1, 2023

Sunset Review Date: July 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide direction on:

- Creating and managing legally-free case files in FamLink.
- Transferring legally-free cases.
- Creating pre-adoption disclosure (PAD) folders.
- Adoption pre-finalization checks.

Scope

This policy applies to Department of Children, Youth, and Families employees.

Laws

[RCW 13.34.200](#) Order terminating parent and child relationship-Rights of parties when granted

[RCW 13.34.210](#) Order terminating parent and child relationship-Custody where no one has parental rights

[Chapter 26.33 RCW](#) Adoption

[Chapter 70.02 RCW](#) Medical records health care information access and disclosure

Policy

1. Supervisors or designees must deactivate children's or youth's cases from their FamLink family case within seven calendar days of becoming legally-free.
2. Electronic file specialists (EFSs) must create PAD folders for each legally-free child or youth within 30 calendar days of the complete file being imaged to FamLink.
3. Child and Family Welfare Services (CFWS) caseworkers must use the date the relinquishment or [termination of parental rights \(TPR\)](#) orders are entered in court to create children's or youth's legally-free case in FamLink.
4. Adoption caseworkers must:
 1. Follow the [Pre-Adoption Services and Adoption Finalization](#) policy when:
 1. Adding new PAD records into the PAD folder until the children or youth are adopted.
 2. Providing newly redacted information to the prospective adoptive parents.
 3. Archiving adoption records.
 2. Complete the adoption pre-finalization check.

Procedures

1. Creating FamLink Legally-Free Case Files and PAD Folder

1. CFWS caseworkers must complete or verify the following has been completed within seven calendar days of relinquishment or [TPR](#) hearings:
 1. Set aside hard-file copies of the child's or youth's:
 1. Birth certificate, per the [Pre-Adoption Services and Adoption Finalization](#) policy.
 2. Original photos and keepsakes.
 3. Social security card, if available, per the [Pre-Adoption Services and Adoption Finalization](#) policy.
 4. Passport, if available.
 5. Other important hard-file records.
 2. Rubber-band all family case file volumes and number each volume in chronological order.
 3. Send family case file volumes, including all records related to the child or youth becoming legally-free and their parents, to the [Records Imaging Unit \(RIU\)](#).
 4. For family cases that will remain open after relinquishments or [TPR](#) hearings, create a new volume using the hearing date as the new volume start date, per the DCYF Administrative 13.06 Records Management and Retention policy.
 5. Document in the family case File Location tab in FamLink the:
 1. Number of volumes.
 2. Date the family case file volumes were sent to the ASD RIU.
 3. New volume number and date created for family cases remaining open after the relinquishment or [TPR](#).
 6. Verify legally-free cases have been created in FamLink.
 7. Participate in [case transfer staffings](#) with supervisor, newly assigned adoption caseworker, and adoption supervisor, if applicable, and provide the hard-file copies identified in Procedure Section 1.a.i. to the adoption caseworker.
2. Adoption supervisors or designees must email the following within seven calendar days of relinquishments or [TPR](#) hearings:
 1. Deactivate the child or youth from their parent's case to launch the legally-free case using the Create Legally-Free Case Quick Help Guide document.
 2. Email the following to the ASD [PDU](#) to initiate PAD folders:

1. Title subject line as “New Legally-Free Case”.
 2. Parent’s or guardian’s:
 1. Name.
 2. Case number.
 3. Child’s or youth’s:
 1. Name.
 2. Legally-free case number.
 3. Date they became legally-free.
 4. Region where they became legally-free.
 4. Whether the child or youth is in their identified permanent placement.
 5. Date of the next review hearing.
 6. Adoption caseworker’s name and official duty station.
3. The PDU must complete the following after receiving the PAD folder information from adoption supervisors or designees:
1. Document the information received in the appropriate DCYF electronic database.
 2. Assign EFS supervisor to the case.
4. The EFS supervisor must assign the case to an ASD EFS.
5. EFSs must complete the following after receiving case assignments and PAD folder information:
1. Track case volumes arriving to the EFS Unit.
 2. Add the required information to the FamLink legally-free case file by uploading the:
 1. Information identified on the Legally-Free File, Pre-Adoption Disclosure and Redaction document.
 2. Files related to the child or youth in the parent FamLink file upload, that did not copy or batch to the FamLink legally-free case file. This includes all hard-file volumes scanned by the RIU that contain information from the point DCYF became involved with the child or youth and family.
 3. Create:

1. A clean copy of the [Family Genetic and Medical History DCYF 13-041](#) form for the child or youth that includes any information that was not included on any prior [Family Genetic and Medical History DCYF 13-041](#) forms completed by prior caseworkers.
2. The [PAD](#) folder by:
 1. Copying the identified information on the Legally-Free File, Pre-Adoption Disclosure and Redaction document for each legally-free child or youth from the FamLink legally-free case.
 2. Including additional information that is not required for disclosure, but that is useful for adoption caseworkers, e.g., paternity orders, law enforcement reports, licensing investigations, or parent volumes with information for child's or youth's siblings.
4. Save [PAD](#) folders in the CA Redaction share drive folder, per the DCYF Administrative 13.06 Records Management and Retention policy.
5. Email adoption caseworkers immediately to notify them:
 1. The FamLink legally-free case files and PAD folders are completed.
 2. Of any missing information from the FamLink legally-free case file or PAD folder, e.g., birth records, educational or medical records, or court orders.
 3. Of additional information that was added to the PAD folder that is not required for disclosure by following the Legally-Free File, Pre-Adoption Disclosure and Redaction document.
6. Adoption caseworkers must complete the following when they receive an email from the EFS notifying them PAD folders are complete:
 1. Verify the following documents are included in the FamLink legally-free case and the PAD folder:
 1. The child's or youth's social security number (SSN), when available. SSNs are not required to complete an adoption.
 2. Relative search and ICW inquiries, if applicable. If the relative search or ICW inquiries were not completed email the [Relative Search Unit](#).
 3. All birth parents' or guardians' assessments and evaluations.
 4. The completed [Family Genetic and Medical History DCYF 13-041](#) form that includes:
 1. Inheritable medical or psychological conditions of the birth family and siblings.

2. Youth's signature when they are 13 years or older.
 2. Make reasonable efforts, that include at least two attempts, to locate records not already in the child's or youth's FamLink legally-free case file:
 1. For all known:
 1. Education.
 2. Family and social background history of the child or youth and birth family.
 3. Medical, e.g., contacting Coordinated Care or Fostering Well-Being Unit.
 4. Mental health.
 2. Reasonable efforts may include the following when applicable:
 1. Conducting interviews with children or youth, birth parents or guardians, and other known relatives.
 2. Contacting physicians, treatment agencies, schools, and other sources from whom the child or youth and birth parents or guardians received professional examinations, evaluations, or treatment.
 3. Contacting tribal representatives if [ICWA](#) applies.
 3. Document reasonable efforts, that includes at least two attempts, to locate missing records in a FamLink case note, if applicable.
 4. Upload any newly located records to the FamLink legally-free case file.
 5. Redact identifying information in PAD folders, per the Adoption Disclosure Redaction Instructions using the [Adoption Redaction Request DCYF 15-425](#) form.
 7. Adoption caseworkers must follow the [Pre-Adoption Services and Adoption Finalization](#) policy when releasing the information in PAD folders to the prospective adoptive families.
2. Adoption Pre-Finalization Process
 1. Adoption caseworkers must begin working from the FamLink legally-free case file within 14 calendar days of the date the relinquishment or [TPR](#) orders are entered into court and complete the following:
 1. Follow the procedures in the Electronic File Guide for Workers.
 2. Copy additional required information into the legally-free PAD folder.

3. Email the EFS supervisor to request the creation of a PAD folder for legally-free cases created prior to electronic files.
 4. Maintain the adoption redaction records in the CA Redaction share drive with the information that must be either:
 1. Uploaded or scanned to FamLink legally-free case files.
 2. Copied to the PAD folders.
 5. Send hard-file records that were not part of the original records sent in Procedures Section 1. d. to the RIU using ApplicationXtender (AX) Adoptive Case File Barcode Sheet or upload the information to the FamLink legally-free case file combining similar records in the appropriate categories, including, but not limited to:
 1. Correspondence
 2. Educational records
 3. Intake records
 4. Legal records
 5. Medical records
 6. Mental health records
 6. Email the adoption support packet to the [adoption support program consultants](#) with the EFS supervisor in “cc” to initiate the pre-finalization check, per the [Pre-Adoption Services and Adoption Finalization](#) policy.
2. The EFS supervisor must:
 1. Review requests from the adoption caseworkers for the pre-finalization check.
 2. Assign requests to an EFS.
 3. EFSs must complete the following for the pre-finalization check when assigned by:
 1. Identifying new information or intakes involving the legally-free child or youth that have been uploaded to the parent file since the creation of the FamLink legally-free case file, per the EFS Guide.
 2. Uploading new information that pertains to the legally-free child or youth in the FamLink legally-free case file.
 3. Notifying adoption caseworkers of any new uploaded information to the FamLink legally-free case file and attaching those records to the email.
 4. Adoption caseworkers must:

1. Review the pre-finalization check emails from the EFS Unit when received to determine if the uploaded information needs to be copied to the PAD folder.
2. Verify all documents have been disclosed using the Legally-Free File, Pre-Adoption Disclosure and Redaction document to the prospective adoptive family. If there are documents that need to be disclosed, follow the [Pre-Adoption Services and Adoption Finalization](#) policy each time that new redacted information is provided to the prospective adoptive family.
3. Delete the records after the adoption has been finalized from the temporary child or youth specific PAD after confirming the information has been uploaded and copied into the child's or youth's FamLink legally-free file.

Forms

[Adoption Redaction Request DCYF 15-425](#)

[Family Genetic and Medical History DCYF 13-041](#)

Post Placement Report DCYF 09-107 (located in the Forms repository on the DCYF intranet)

Resources

AX Barcode Sheets (located on the Adoption SharePoint)

[Case Transfer policy](#)

Create Legally-Free Case Quick Help Guide document (located on the CA intranet, Computer Help, FamLink Knowledge Web, Training, and Supervisory Quick Help Guides)

DCYF Administrative 13.06 Records Management and Retention policy

EFS Guide (located on the Adoptions SharePoint, under EFS Help Documents in the EFS Folder)

Electronic File Guide for Workers (located on the Adoption SharePoint, under EFS Help Documents, under Field Staff)

[Extended Foster Care \(EFC\) Program policy](#)

Legally-Free File, Pre-Adoption Disclosure and Redaction document (located on the Intranet, under CFWS, under Permanency)

LF Document Tracking List Spreadsheet (located on the Adoptions SharePoint)

[Pre-Adoption Services and Adoption Finalization](#)

[Termination of Parental Rights \(TPR\) policy](#)

4330. Pre-Adoption Services and Adoption Finalization

4330. Pre-Adoption Services and Adoption Finalization sarah.sanchez Wed, 08/22/2018 - 14:21

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide direction on:

- Providing necessary information to prospective adoptive families about prospective adoptive children or youth for the adoption finalization process.
- Preparing and releasing pre-adoption disclosure (PAD) folders.
- Identifying available services for prospective adoptive families.
- Archiving sealed adoption records for legally-free children and youth.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[Chapter 13.50 RCW](#) Keeping and release of records by juvenile justice or care agencies

[Chapter 26.33 RCW](#) Adoption

[Chapter 70.02 RCW](#) Medical records and health care information access and disclosure

[RCW 70.24.110](#) Minors-Treatment, consent, liability for payment for care

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.290](#) Fewest possible placements for children-Preferred placements

[RCW 74.13.300](#) Notification of proposed placement changes

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[PL 103-382](#) Multiethnic Placement Act (MEPA) of 1994

Policy

Adoption caseworkers:

1. Must:
 1. Provide pre-adoption services to prospective adoptive families identified in a [shared planning meeting \(SPM\)](#).

2. Assess children's or youth's best interest when making placement decisions. [Best interest](#) is determined on a case-by-case basis. The determination is made by considering the child's or youth's:
 1. Physical safety.
 2. Well-being, including physical, emotional, and mental health needs.
 3. Relationship or bond with current caregivers, if applicable.
 4. Capacity of the caregiver to meet their physical and well-being needs.
3. Involve youth age 12 and older in their case decisions.
4. Maintain children's or youth's existing relationships with relatives of a specified degree that are not placement options when:
 1. Children or youth are dependent and legally-free. The rights of the relative of specified degree do not extend beyond adoption.
 2. A relationship with the relatives is determined to be in the child's or youth's best interest.
 3. Relatives of specified degree want to maintain a relationship with the child or youth.
 4. A [SPM](#) recommends the relationship continue.
5. Follow these policies:
 1. [Identifying Adoptive Families](#).
 2. [Indian Child Welfare \(ICW\) Reason to Know](#) when there is reason to know children or youth are or may be an Indian child.
 3. DCYF Administrative 13.04 Protecting Privacy and Confidential Information to safeguard and protect confidential information.
6. Provide:
 1. Information and guidance to prospective adoptive parents, adoptees, and employees about the adoption process and available services, when requested.
 2. The following to assist children or youth and prospective adoptive families in preparation for adoption finalization on an ongoing basis:
 1. Assessments for services.
 2. Services to support their safety, stability, permanency, and well-being.
 3. Other needed supports.

7. Verify the health, mental health, and education information for the children or youth is provided to prospective adoptive parents prior to adoption finalization.
 8. Facilitate and finalize adoptions for children or youth in the placement and care authority of DCYF.
2. Must not deny:
1. An adoption or out-of-home placement based on the race or national origin of the prospective adoptive parents or the child or youth involved, per [MEPA](#). This provision does not apply to nor affect [Indian Child Welfare Act \(ICWA\)](#).
 2. Any individual above the age of 18 the opportunity to become an adoptive parent based on race or national origin.
 3. Adoption services to kinship applicants based on their decision to complete an adoption home study rather than a foster care licensing home study.
 4. An adoptive placement with an approved family residing outside the jurisdiction or office providing case management for the child's or youth's case.

Procedures

1. Pre-Adoption Services and Preparing and Releasing PAD Folders
 1. Adoption supervisors must follow Procedures Section 1.b. in the [Electronic Legally-Free Files](#) policy within seven calendar days of the relinquishment or [TPR](#) hearings when a child or youth is legally-free.
 2. EFSs must:
 1. Follow the [Electronic Legally-Free Files](#) policy.
 2. Create PAD folders when notified children or youth are legally-free.
 3. Email adoption caseworkers when PAD folders are completed.
 3. Adoption caseworkers:
 1. Must:
 1. Follow the:
 1. [Electronic Legally-Free Files](#) policy when:
 1. Receiving the email from EFS to verify PAD folders are complete.
 2. Making [reasonable efforts](#) to locate records that are not already in the children's or youth's FamLink legally-free case file.

2. [Consent Decision Tree DCYF CWP_0006](#) publication to obtain the youth's consent on the Family Genetic and Medical History-Adoption DCYF 13-041A form for DCYF to release their information to the prospective adoptive family. If youth do not provide consent:
 1. Inform adoptive parents that information exists, but DCYF cannot release it because the youth did not provide consent.
 2. Document in a FamLink case note the:
 1. Youth's refusal to provide consent.
 2. Notification provided to the prospective adoptive parents that the information will not be released.
 3. Determine in collaboration with their supervisor and the prospective adoptive parents whether placement should be maintained or occur if the youth has not been placed, despite the lack of disclosure.
 4. Consult with the AAG if the decision has been made to either:
 1. Change placement.
 2. Proceed with the placement without full disclosure.
2. Adhere to the following policies when releasing health care information from PAD folders:
 1. DCYF Administrative 13.04 Protecting Privacy and Confidential Information for bloodborne pathogens or other potentially infectious materials information.
 2. [Psychotropic Medication Management](#) for psychotropic medication information.
 3. [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) for health care information.
3. Provide disclosure from PAD folders:
 1. That protects the identity of birth families or guardians to the selected prospective adoptive parents about a prospective adoptive child or youth, as required by the:

1. [Confidentiality laws](#).
2. [WACs 110-60-0180](#) and [110-60-0190](#).
2. Following the [Consent Decision Tree DCYF CWP_0006](#) publication.
3. Using the Legally-Free File, Pre-Adoption Disclosure, and Redaction document.
4. Review the following with prospective adoptive families and provide them a copy of the:
 1. PAD information, per the Legally-Free File, Pre-Adoption Disclosure, and Redaction document.
 2. Following forms:
 1. [Family Genetic and Medical History DCYF 13-041](#) form.
 2. Family Genetic and Medical History-Adoption DCYF 13-041A and obtain their signature.
5. Obtain their signatures on the [Acknowledgement of Child's Adoptive File Provided to Adoptive Family DCYF 10-500](#) form.
6. Upload:
 1. The signed [Acknowledgement of Child's Adoptive File Provided to Adoptive Family DCYF 10-500](#) form in the FamLink legally-free case file.
 2. Exact copies of the disclosure information provided to the prospective adoptive families:
 1. Into the FamLink legally-free case file.
 2. Under the File Upload tab.
 3. Selecting "Adoption Specific".
 4. Document as "Pre-Adoption Disclosure".
7. Continue to provide new redacted FamLink case notes and other records to prospective adoptive families after the initial PAD is provided. If this occurs, new information received must be:
 1. Provided within 30 calendar days of receipt.
 2. Uploaded to the FamLink legally-free case file.

8. Complete the following each time new redacted information is provided to the prospective adoptive parents:
 1. Obtain their signatures on the [Acknowledgement of Child's Adoptive File Provided to Adoptive Family DCYF 10-500](#) form.
 2. Upload the:
 1. Exact copies of the disclosure information provided to the prospective adoptive families in Procedures Section 1.c.i.F.II.
 2. [Acknowledgement of Child's Adoptive File Provided to Adoptive Family DCYF 10-500](#) form in the FamLink legally-free case file.
2. May also provide redacted adoption disclosure by following the Legally-Free File, Pre-Adoption Disclosure, and Redaction document to:
 1. Guardian ad litem
 2. Child Placing Agency employees
 3. Group care facilities employees
 4. Tribes

2. Adoption Finalization

1. Adoption caseworkers must complete the following after a [permanent home has been identified](#) for children or youth and DCYF supports the adoption:
 1. Continue pre-adoption services and assessments that supports their well-being and the placement in the prospective adoptive home.
 2. Refer children or youth:
 1. With complex health needs for a Wraparound Intensive Services (WISe) screen, per the [WISe](#) policy.
 2. To the following if there is reason to believe the child or youth may be eligible for the benefits or services:
 1. Supplemental Security Income (SSI).
 2. Developmental Disabilities Administration (DDA).
3. Place them in pre-adoptive placements when the:
 1. Prospective adoptive family has an approved adoptive home study.
 2. [APR](#) process recommends them as the prospective adoptive family.
 3. Prospective adoptive family are either:

1. A relative placement or suitable person with a court order approving placement.
 2. Foster licensed.
4. When they are in the selected prospective adoptive home:
 1. Verify the following are in the case file, their:
 1. Birth certificate. If the birth certificate is not in the file, request a new birth certificate within seven calendar days of case assignment or identification that it is missing.
 2. Social security number. If the social security card is not in the file, apply for a social security card if the adoption is not expected to occur within the next six months.
 2. Follow these requirements, including, but not limited to:
 1. [Court reports](#)
 2. [Health and safety visits](#)
 3. Service referrals
 4. [Sibling visits](#)
 5. [SPMs](#)
 3. Document in FamLink, their:
 1. Significant physical or mental health information, including diagnoses and treatments that may be necessary to meet their needs under their Health or Mental Health tab.
 2. Education information under their Education tab.
 4. Continue to gather information on them and upload into the FamLink legally-free case file using the following categories:
 1. Correspondence
 2. Educational records
 3. Intake records
 4. Legal records
 5. Medical records
 6. Mental health records
 5. Complete the:

1. Final review of the electronic case for physical, mental health, education, and family background information to verify all the information is included in the file. If information is missing, request the information and:
 1. Document the date of the request in a FamLink case note.
 2. Send a second request, if a response is not received from the provider within 30 calendar days.
 3. Document in a FamLink case note when there is no response from a provider 30 calendar days after the second request. Include the:
 1. Lack of response from the provider.
 2. Attempts made to collect the information from the providers on the [Family Genetic and Medical History DCYF 13-041](#) form.
2. [Family Genetic and Medical History-Adoption DCYF 13-041A](#) form.
6. Discuss early implementation of [adoption support](#) with non-licensed relatives that are the prospective adoptive parents.
7. Advise prospective adoptive parents of [adoption support](#) benefits and limitations within 30 calendar days of being selected as the prospective adoptive family by:
 1. Providing the:
 1. Contact information for [adoption support](#).
 2. [Adoption Support for Caregivers E-Learning](#) link.
 3. [Waiver of Right to Receive Written Information on Adoption Support Limitation Program DCYF 09-121](#) form.
 4. [Adoption Support Limitations Letter DCYF 10-547](#) form.
 5. Link to the [Post Adoption Questions and Answers](#) or a printed copy, if requested.
 2. Discussing the similarities and differences between foster care maintenance and [adoption support program](#), e.g. child care payments.

8. Upload the signed copies of the following forms in FamLink:
 1. [Waiver of Right to Receive Written Information on Adoption Support Limitation Program DCYF 09-121](#).
 2. [Adoption Support Limitations Letter DCYF 10-547](#).
9. Prepare the Adoption Support Packet by completing the [Adoption Support Program Application Checklist DCYF 10-477](#) form with attachments.
10. Email the adoption support packet to the adoption support worker with the EFS supervisor in "cc".
11. Compile a Lifestory Book using the Lifestory Book Instructions document with the child or youth, or provide information to the selected prospective adoptive family, so they can complete the book with the child or youth.
12. Complete the following forms:
 1. Post Placement Report DCYF 09-107. For children who are or may be Indian children follow the [ICW Adoption](#) policy.
 2. [Waiver of Notice of Further Hearing DCYF 09-054](#) if they are not intending to appear at the adoption hearing.
 3. [Declaration of Adoption Facilitator-Indian Child DCYF 09-765](#).
13. Consent to Adoption DCYF 09-015 form when DCYF supports adoption with the selected prospective adoptive family and the parent or guardian has not appealed the termination order. If they have appealed, consult with the AAG.
14. Obtain written consent from the prospective adoptive youth age 14 years and older through the prospective adoptive family's attorney.
15. Request the [Interstate Compact on the Placement of Children \(ICPC\)](#) concurrence, if child or youth is placed out-of-state, from the ICPC Unit to allow the finalization of the adoption.
16. Inform the prospective adoptive families if [Supplemental Security Income \(SSI\)](#) or [Social Security trust funds](#) is available for the child or youth and:
 1. Inform families to apply at the agency providing benefits, if they wish to receive the trust.
 2. Notify families that their confidentiality cannot be guaranteed if they apply for these funds.

3. Confirm in writing from families if they do not want to apply for either type of benefit.
17. Notify [Northwest Adoptions Exchange \(NWAEE\)](#) and all other exchanges the child or youth is on, to remove their profile from their websites.
18. Provide the completed adoption finalization packet to the supervisor, that includes the:
 1. Consent to Adoption DCYF 09-015 form.
 2. Copy of the selected prospective adoptive family's home study.
 3. Original Post Placement Report DCYF 09-107 form.
 4. New [Background Clearance Notification DCYF 23-037](#) form, per the [Background Checks](#) policy, if the home study was completed more than one year ago.
2. Adoption supervisors receiving the adoption finalization packets must review the packet for approval and verify all documents are complete. If:
 1. Approved, send the Consent to Adoption DCYF 09-015 form and other supporting documents to the adoption AA or designee.
 2. Denied, return the packet to the adoption caseworker with the reason for the denial.
3. Adoption AAs or designees receiving the adoption finalization packets must review the packet for approval. If:
 1. Approved, sign the Consent to Adoption DCYF 09-015 form and send the form and supporting documents to the adoption caseworker.
 2. Denied, return the packet to the supervisor with the reason for the denial.
4. Adoption caseworkers must:
 1. Provide prospective adoptive families' attorneys with the following documents after adoption AA or designee approval to allow attorneys to file the adoption petition:
 1. A request for a certified copy of the adoption decree.
 2. A certified copy of the:
 1. Legal orders terminating parental rights of all birth parents or guardians.
 2. Death certificate if a birth parent or guardian is deceased.

3. The original signed:
 1. [Post Placement Report DCYF 09-107](#) form.
 2. Home study on the prospective adoptive family.
 3. Consent to Adoption DCYF 09-015 form.
 4. [Open Adoption Agreement \(OAA\) or Letter of Intent](#), if one was agreed upon with the birth parents.
4. A copy of the:
 1. Child's or youth's birth certificate.
 2. Final signed adoption support agreement and agreement for non-recurring costs reimbursement. For the child or youth to be eligible for [adoption support](#), the adoption support agreement must be signed by all parties before the adoption decree is entered.
 3. Signed [Declaration of Adoption Facilitator-Indian Child DCYF 09-765](#) form.
 4. Prior adoption home studies if the family has previously adopted.

3. Archiving Sealed Adoption Records

1. Adoption caseworkers or designees must complete the following within 30 calendar days following adoption finalization:
 1. Email the:
 1. Fiduciary to close out all payments and services effective the day before the adoption is finalized.
 2. IV-E specialist to send the IV-E file to the RIU, unless the child or youth was not receiving IV-E funds.
 3. Safety and monitoring licensor to notify them of the adoption finalization for possible licensing capacity changes.
 2. Close placement in FamLink using the day the adoption is finalized as the end date.
 3. Obtain a certified copy of the adoption decree from the adoptive families' attorneys.
 4. Upload the adoption decree to the legally-free case file.
 5. Submit a copy of the adoption decree and receipt for payment to the assigned adoption support worker.

6. For children or youth placed out-of-state, send the following to the ICPC worker for [ICPC](#) case closure:
 1. [ICPC Report on Placement Status of Child 100B DCYF 15-093](#) form.
 2. A copy of the adoption decree.
 7. Request dismissal of the dependency from the AAG.
 8. Obtain the dependency dismissal order from the AAG.
 9. Document the dependency dismissal in the FamLink Legal section with legal action as “Adoption Finalization” and close the Legal section.
 10. Upload the following in the FamLink legally-free case using Type “Adoption Specific” and title “Archive”, the:
 1. Forms:
 1. [Family Genetic and Medical History DCYF 13-041](#)
 2. Signed:
 1. Family Genetic and Medical History-Adoption DCYF 13-041A.
 2. Post Placement Report DCYF 09-107.
 2. Certified adoption decree.
 3. Dependency dismissal court order.
 11. Verify PADs were provided to adoptive families are uploaded to the FamLink legally-free case file. If not, must upload.
 12. Complete Adoption and Foster Care Analysis and Reporting System (AFCARS) elements in FamLink, per the AFCARS Guides.
 13. Notify their supervisor the adoption support case is ready to be created.
2. Adoption supervisors must complete the following when the adoption caseworkers notify them the adoption support case needs to be created:
 1. Create adoption support cases in FamLink using the Adoption Support Case Quick Help Guide.
 2. Assign adoption support cases to adoption support workers in FamLink.
 3. Notify adoption workers when this is completed.
 3. Adoption caseworkers must email the EFS supervisor to initiate case closure and include the:
 1. Case name.

2. FamLink legally-free case number.
 4. EFS supervisors must:
 1. Review requests from caseworkers for archiving FamLink legally-free case files.
 2. Assign requests to EFSs.
 5. EFSs must complete the archive preparation for the FamLink legally-free cases when assigned by:
 1. Reviewing the files for archiving, per the EFS Guide.
 2. Requesting any required records from caseworkers that were not provided within seven calendar days.
 3. Emailing caseworkers once all the required records are received to notify them that archiving is complete and the case is ready for closure.
 6. Adoption caseworkers must close legally-free cases in FamLink after receiving the email from the EFS stating the case is approved for archiving.
4. Archiving Cases for Youth at Age 18
Adoption caseworkers must archive records for legally-free youth not adopted at age 18 and not participating in the [Extended Foster Care Program](#) by:
1. Closing the case in FamLink within seven calendar days.
 2. Sending hard-file records to the [RIU](#), per the DCYF Administrative 13.06 Records Management and Retention policy.
5. Archiving Hard-File Legally-Free Cases
Adoption caseworkers must complete the following for hard-file legally-free cases created prior to the use of electronic legally-free files or before January 2019:
1. Number each volume using the ApplicationXtender (AX) Adoptive Case File Barcode Sheet.
 2. Rubber-band each volume.
 3. Place all volumes in an envelope or box.
 4. Label envelope or box as an open legally-free case.
 5. Send to the RIU.
 6. Update the File Location Tab in FamLink with the following:
 1. Type: Adoption
 2. Volume: Number of volumes
 3. Location: Imaged AX

4. Office: HQ
 5. Worker: Workers name
 6. Comments: Enter “Prior electronic legally-free case scanned to AX”
6. Caseworkers must follow the DCYF Administrative 13.06 Records Management and Retention policy to access sealed adoption records.

Forms

[Acknowledgement of Child’s Adoptive File Provided to Adoptive Family DCYF 10-500](#)

[Adoption Support Limitations Letter DCYF 10-547](#)

[Adoption Support Program Application Checklist DCYF 10-477](#)

Background Clearance Notification DCYF 23-037 (located in the Forms repository on the DCYF intranet)

[Family Genetic and Family History DCYF 13-041](#)

Family Genetic and Family History-Adoption DCYF 13-041A (located in the Forms repository on the DCYF intranet)

[Consent DCYF 14-012](#)

Consent to Adoption DCYF 09-015 (located in the Forms repository on the DCYF intranet)

[Declaration of Adoption Facilitator-Indian Child DCYF 09-765](#)

[ICPC Report on Placement Status of Child 100B DCYF 15-093](#)

Post Placement Report DCYF 09-107 (located in the Forms repository on the DCYF intranet)

[Waiver of Notice of Further Hearing DCYF 09-054](#)

[Waiver of Right to Receive Written Information on Adoption Support Limitation Program DCYF 09-121](#)

Resources

[Adoption Planning Reviews \(APR\) policy](#)

[42 CFR 671a State Plan for Foster Care and Adoption Assistance](#)

[42 CFR 5106a Grants to States for Child Abuse or Neglect Prevention and Treatment Programs](#)

[Adoption Recruitment Services Graph CWP 0054 publication](#)

Adoption Support Case Quick Help Guide (located on the CA intranet, Computer Help, FamLink Knowledge Web, Training, and Supervisory Quick Help Guides)

[Adoption Support](#)

[Adoption Support policy](#)

[Alliance for Child Welfare Adoption Support E-Learning for Caregivers](#)

[Background Checks policy](#)

[Case Transfer policy](#)

[Children's Bureau Determining the Best Interests of the Child](#)

[Children's Bureau Helping Your Child Transition from Foster Care to Adoption](#)

[Consent Decision Tree DCYF CWP_0006 publication](#)

DCYF Administrative 12.04 Acceptable Use of Information Technology Resources and the Internet policy

[DCYF Administrative 13.04 Protecting Privacy and Confidential Information policy](#)

DCYF Administrative 13.06 Records Management and Retention policy

[DCYF Adoption Internet Webpage](#)

[DCYF Risk, Litigation, and Records Management Intranet Webpage](#)

Electronic File Guide for Workers (located on the Adoption Program SharePoint and under EFS)

[Electronic Legally-Free Files policy](#)

[Extended Foster Care \(EFC\) Program policy](#)

[Family Team Decision Making \(FTDM\) policy](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

ICPC Packet Checklist (located on the ICPC intranet page)

[Interstate Compact on the Placement of Children Placed Out-of-State policy](#)

[Indian Child Welfare Adoption policy](#)

[Indian Child Welfare Reason to Know policy](#)

[Identifying Adoptive Families policy](#)

[Interstate Compact on the Placement of Children \(ICPC\) policy](#)

Legally-Free File, Pre-Adoption Disclosure, and Redaction document (located on the Intranet, under CFWS, under Permanency)

Lifestory Book Instructions document (located on the Adoptions Forms page on the DCYF intranet)

[Out-of-Home Placements policy](#)

Statewide Adoption Process Checklist (located on the Adoption Program SharePoint)

[Supplemental Security Income \(SSI\) and Retirement, Survivors, and Disability Insurance \(RSDI\) Benefits for Children in Out-of-Home Placements policy](#)

[Termination of Parental Rights \(TPR\) policy](#)

[Trust Funds for Children in Out-of-Home Placement policy](#)

[Undertaking Planned Transitions for Children in Out-of-Home Care](#)

[WAC 110-60-0160 Under what conditions may the department reveal identifying information about the birth parent?](#)

[WAC 110-60-0170 What must the department, private practitioner, or child placing agency do to locate records and information relating to the birth parents and the child?](#)

[WAC 110-60-0180 What information must the department or child placing agency provide to prospective adoptive parents about the child that is being considered for adoption?](#)

[WAC 110-60-0190 What information must the department or child placing agency provide to prospective adoptive parents about the birth parent\(s\) of a child being considered for adoption?](#)

4340. Guardianships

4340. Guardianships sarah.sanchez Wed, 08/22/2018 - 14:23

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Revised Date: June 15, 2024

Sunset Review Date: June 30, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose

The purpose of this policy is to provide guidance on the use of subsidized and unsubsidized guardianships as a permanent plan for dependent children or youth.

Scope

This policy applies to child welfare employees.

Laws

[Chapter 11.130](#) RCW Uniform Guardianship, Conservatorship, and Other Protective Arrangements Act

[RCW 11.130.010](#) Definitions

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care

facility, qualified residential treatment program, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with sibling

[RCW 13.34.145](#) Permanency planning hearing-Purpose-Time limits-Goals-Review hearing-Petition for termination of parental rights-Guardianship petition-Agency responsibility to provide services to parents-Due process rights

[RCW 13.34.232](#) Guardianship for Dependent Child

[RCW 13.34.234](#) Guardianship for Dependent Child and Dependency Guardianship Subsidies

[Chapter 13.36 RCW](#) Guardianship

[RCW 74.13.031](#) Duties of the Department

[RCW 74.13.280](#) Client information

Policy

1. Caseworkers must:
 1. Hold [shared planning meetings \(SPM\)](#) before permanent plans of guardianship are considered for dependent children or youth. This includes discussing both the [chapter 13.36 RCW](#) guardianship and the [chapter 11.130 RCW](#) guardianship of a minor using the [Permanency Planning Matrix DCYF CWP_0088](#) publication with the child's or youth's parents and caregivers, as an alternative to [termination of parental rights \(TPR\)](#) and [adoption](#).
 2. Follow the [Placement Moves](#) policy when considering moving children or youth placed with relatives or suitable others.
 3. Not vacate guardianships or accept [Voluntary Placement Agreements \(VPA\)](#) for the purpose of making children or youth eligible for foster care or [Extended Foster Care \(EFC\)](#).
2. DCYF may subsidize guardianships based upon eligibility requirements.

Procedures

1. Considering Guardianships

Caseworkers must complete the following when considering a guardianship for dependent children or youth as their permanent plan:

 1. Conduct a [SPM](#) prior to making permanency planning recommendations.
 2. During the [SPM](#):
 1. Follow the steps in the [Guide to Shared Planning Meetings DCYF CWP_0070](#) publication.
 2. Discuss and consider the following permanent plan options using the [Permanency Planning Matrix DCYF CWP_0088](#) publication:

1. Return home
 2. [Chapter 13.36 RCW](#) guardianship
 3. [Chapter 11.130 RCW](#) guardianship of a minor
 4. [Chapter 26.33 RCW](#) adoption
3. Consider the following factors when determining whether guardianship should be selected as the child or youth's permanent plan:
1. Reunification is not likely within the next three months.
 2. Guardianship rather than adoption is in the child or youth's best interest.
 3. The continued relationship between the parent and child or youth is beneficial to the child or youth and would not disrupt the stability of the guardianship.
 4. The child or youth will have been placed in the proposed guardian's home at least six consecutive months prior to the guardianship being established.
 5. Proposed guardians:
 1. Are available to make a commitment to the child or youth until adulthood with the intention of a lifelong commitment.
 2. Have a completed home study recommending placement. If a home study has not been referred follow the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 6. Youth age 12 or older have been:
 1. Consulted regarding the guardianship.
 2. Notified of potential benefits and limitations using the [Permanency Planning Matrix DCYF CWP_0088](#) publication.
 7. Youth age 14 or older have provided consent to the guardianship by completing the Consent to Guardianship DCYF 09-021 form.
 8. A sibling is in the same placement and the permanent plan for the sibling is guardianship.
 9. A parent is incarcerated.
4. Document on the [Shared Planning Meeting DCYF 14-474](#) form in FamLink the:

1. Discussion about both types of guardianship with the children's and youth's parents and caregivers as an alternative to [TPR](#) and adoption.
 2. Reasons why a guardianship is in the child or youth's best interest.
 3. Proposed guardian's:
 1. Commitment to be a permanent home for the child or youth.
 2. Ability to maintain the child or youth's existing connections to family, friends, and community.
 3. Agreement with the plan of guardianship with the child or youth.
 4. [Permanency Planning Matrix DCYF CWP_0088](#) publication was provided and discussed with the proposed guardian, the parents, and youth if appropriate.
 5. Notification was provided to the proposed guardians of the requirements to receive guardianship subsidy per the [Guardianship Assistance Program \(GAP\) and Extended Guardianship Assistance Program \(EGAP\)](#) policy.
3. If the child is an [Indian child](#) consult with the tribe or [Indian Child Welfare Local Indian Child Welfare Advisory Committee \(LICWAC\)](#)
2. Obtaining the Proposed Guardian's Agreement with the Plan of Guardianship
After the [SPM](#) process recommends guardianship as the permanent plan for the child or youth, caseworkers must complete the following either at the [SPM](#) or within seven calendar days after the meeting:
 1. Discuss and document the following was explained to the proposed guardian on the [Shared Planning Meeting DCYF 14-474](#) form or in a case note in FamLink:
 1. The differences between:
 1. [Chapter 13.36 RCW](#) guardianship, [Chapter 11.130 RCW](#) guardianship of a minor, and adoption using the [Permanency Planning Matrix DCYF CWP_0088](#) publication.
 2. Subsidized and unsubsidized guardianships. For proposed guardians:
 1. Eligible for subsidy, provide eligibility and information outlined in the [GAP and EGAP](#) policy.
 2. Not eligible for subsidy, e.g. unlicensed relatives or unlicensed suitable persons, provide them with information on potential benefits and the process to request benefits

through the [Economic Services Administration Community Service Office](#).

2. The following services are not available under a guardianship, including but not limited to:
 1. Mileage reimbursement
 2. Travel reimbursement
 3. Respite care
 4. Clothing vouchers
 5. Child care
 6. Case aid services
 7. Tutoring
 8. Case management services
 9. Educational support
 10. Parent-child visitation support
 3. Once the guardianship is established, the child or youth is no longer in foster care and all DCYF-funded services, including case management and [EFC](#), are no longer available.
 4. They may request additional services through community resources, [Family Voluntary Services](#), [Family Reconciliation Services](#), or referrals to other DCYF services. Available services are dependent on program eligibility criteria.
2. Obtain verbal agreement that the proposed guardian supports the plan of guardianship and document in FamLink in either the:
 1. [Shared Planning Meeting DCYF 14-474](#) form.
 2. Case note.
 3. Notify the Assistant Attorney General (AAG) when guardianship is determined to be the permanent plan for children or youth and which one of the following types of guardianship was chosen:
 1. [Chapter 13.36 RCW](#) through the dependency court.
 2. [Chapter 11.130 RCW](#) where the family will consult with their attorney or [superior court](#) for requirements in the county where the guardianship will filed.
3. Finalizing Guardianship as the Permanent Plan

1. Caseworkers must complete the following after the [SPM](#) process recommends the plan of guardianship, and the proposed guardian is in agreement:
 1. For subsidized guardianships, follow the [GAP and EGAP](#) policy for proposed guardians who are relatives.
 2. Collaborate with the proposed guardian and the child or youth's parents to establish a visitation plan.
 3. Follow the [Consent Decision Tree DCYF CWP 0006](#) publication to determine when youth consent is required.
 4. Provide guardianship disclosure to the proposed guardian, including but not limited to:
 1. Medical and dental records
 2. Court reports
 3. Educational records
 4. Evaluations and assessments
 5. ICW information
 5. Complete section one of the Acknowledgement of Children's or Youth's Guardianship Disclosure DCYF 09-027 form and:
 1. Request guardians sign acknowledging they received disclosure for the guardianship child or youth.
 2. Provide disclosure through one of the following:
 1. Encrypted USB and password to be documented on the Acknowledgement of Children's or Youth's Guardianship Disclosure DCYF 09-027 form.
 2. Hard copy either:
 1. Picked up at DCYF office.
 2. Hand delivered to the proposed guardian.
 3. Certified mail.
 6. If the proposed guardians request information beyond the scope of routine disclosure authorized by [RCW 74.13.280](#), as outlined in Procedures Section 3.a.iii. and iv. caseworkers must attempt to obtain parent or guardian consent using [Consent for Release of Information DCYF 14-012](#) form. If parent or guardian consent is not obtained, caseworkers must:

1. Request a court order to release the disclosure not authorized by Procedures Section 3.a.iii. and iv. If the court does not authorize the release of the additional disclosure by court order.
 1. Complete section two Acknowledgement of Children's or Youth's Guardianship Disclosure DCYF 09-027 form.
 2. Obtain proposed guardian's signature to verify they want to proceed with the guardianship without the additional requested disclosure. If they:
 1. Don't sign the form, do not proceed with the guardianship and contact the supervisor and AAG.
 2. Sign the form:
 1. Provide the proposed guardian a USB with the routine disclosure, as authorized by [RCW 74.13.280](#) and outlined in Procedures Section 3.a.iii. and iv.
 2. Document the password on the Acknowledgement of Children's or Youth's Guardianship Disclosure DCYF 09-027 form.
7. Document the following in a FamLink case note:
 1. The date disclosure was provided to the proposed guardian.
 2. How the disclosure was provided to the proposed guardian, e.g., USB or hand delivered.
8. Provide supervisors with the guardianship packet that includes the:
 1. [Guardianship Approval Checklist DCYF 15-324](#) form.
 2. Signed Declaration of Proposed Guardian court document.
9. Discuss with supervisor if proposed guardian no longer agrees with the permanent plan of guardianship.
2. Supervisors receiving the guardianship packet must complete the following:
 1. Review the packet for approval.
 2. Complete the [Guardianship Approval Checklist DCYF 15-324](#) form. If:
 1. Approved, send the form and attachments to the area administrator (AA).
 2. Denied, return the form to the caseworker with the reason for the denial.

3. AAs receiving the guardianship packets must:
 1. Review the packet for approval.
 2. Complete the [Guardianship Approval Checklist DCYF 15-324](#) form. If:
 1. Approved, send the form and attachments to the regional administrator (RA).
 2. Denied, return the form to the supervisor with the reason for the denial.
4. RAs or designees receiving the guardianship packets must:
 1. Review the packet for approval.
 2. Complete the [Guardianship Approval Checklist DCYF 15-324](#) form. If:
 1. Approved, send the form and attachments to the caseworker.
 2. Denied, return the form to the AA with the reason for the denial.
5. Caseworkers must complete the following after obtaining approval from the supervisor, AA, and RA or designees on the [Guardianship Approval Checklist DCYF 15-324](#) form:
 1. Submit requests to file a guardianship petition to the AAG that includes the:
 1. Signed Declaration of Proposed Guardian court document.
 2. Proposed visitation plan.
 2. Contact the AAG to request the court dismiss the dependency after the guardianship order is filed in court.
4. GAP and EGAP Subsidized Guardianships
Caseworkers must follow the [GAP and EGAP](#) policy when a guardianship subsidized through GAP or EGAP is established.
5. Unsubsidized Guardianships
Caseworkers must complete the following when an unsubsidized guardianship is established:
 1. Terminate the following in FamLink on the date the guardianship is finalized:
 1. All services, DCYF case management, placement, and payment.
 2. Child placing agency (CPA) case management and borrowed foster home services for families licensed by CPAs.
 2. Update the following in FamLink within seven calendar days of receipt of the dependency dismissal from the court:
 1. Legal using the Legal FamLink Training Guide.

2. Placement.
3. Close the case using the How to Close a Case in FamLink Guide.
4. Send closed hard-files to the Records Imaging Unit per the DCYF Administrative 13.06 Records Management and Retention policy.
6. Dependency Guardianships Established Prior to June 10, 2010
Caseworkers assigned to [RCW 13.34.232](#) dependency guardianship cases established prior to June 10, 2010:
 1. Must allow youth ordered into dependency guardianships to request to participate in the [EFC Program](#).
 2. Must allow dependency guardianships to remain open for subsidy or services payments, but must close the guardianship when the youth reaches 18 years of age.
 3. May convert [RCW 13.34.232](#) dependency guardianships to [Chapter 13.36 RCW](#) guardianships, when the guardian and DCYF agree.
 4. Must not provide additional services on converted [Chapter 13.36 RCW](#) guardianships.
7. Notices to Terminate Guardianships
Caseworkers receiving notices to terminate guardianships must consult with the AAG and headquarters guardianship program manager within seven calendar days of receiving notice of a petition to terminate the guardianship.

Forms

Acknowledgement of Children's and Youth's Guardianship Disclosure DCYF 09-027 (located in the Forms repository on the DCYF intranet)

[Consent for Release of Information DCYF 14-012](#)

Consent to Guardianship DCYF 09-021 (located in the Forms repository on the DCYF intranet)

[Guardianship Approval Checklist DCYF 15-324](#)

[Shared Planning Meeting DCYF 14-474](#)

Resources

[DCYF Administrative 13.06 Records Management and Retention policy](#)

How to Close a Case in FamLink Guide (located on the DCYF intranet under Computer Help, IT Services, DCYF Applications & Software, Application Training, Child Welfare, AFCARS & Case Closure, How to Close a Case in FamLink)

[Extended Foster Care \(EFC\) Program policy](#)

[Family Reconciliation Services policy](#)

[Family Voluntary Services policy](#)

[Guardianship Assistance Program \(GAP\) and Extended Guardianship Assistance Program \(EGAP\) policy](#)

[Guide to Shared Planning Meetings DCYF CWP_0070 publication](#)

[Indian Child Welfare Casework Activities for Court Proceedings policy](#)

[Indian Child Welfare Local Indian Child Welfare Advisory Committee \(LICWAC\) policy](#)

[Legal FamLink Training Guide](#) (located on the DCYF intranet under Computer Help, IT Services, DCYF Applications & Software, Application Training, Child Welfare, Legal, Legal Training)

[Permanency Planning Hearings-Timelines policy](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Placement Moves policy](#)

[Placing with and Supporting Unlicensed Relatives and Suitable Persons policy](#)

[Pre-Adoption Services and Adoption Finalization policy](#)

[Shared Planning Meetings policy](#)

[Termination of Parental Rights \(TPR\) policy](#)

[Voluntary Placement Agreements \(VPA\) policy](#)

[Washington State Superior Courts \(use Google Chrome browser\)](#)

43401. Guardianship Assistance Program (GAP) and Extended Guardianship Assistance Program (EGAP)

43401. Guardianship Assistance Program (GAP) and Extended Guardianship Assistance Program (EGAP) sarah.sanchez Wed, 08/22/2018 - 14:23

Original Date: June 10, 2010

Revised Date: June 15, 2024

Sunset Review Date: June 30, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of the policy is to provide guidance on the use of the Guardianship Assistance Program (GAP) and Extended Guardianship Assistance Program (EGAP). GAP and EGAP include a monthly subsidy and Medicaid eligibility for children and youth and is available to support their care with licensed caregivers.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[Chapter 11.130 RCW](#) Uniform Guardianship, Conservatorship, and Other Protective Arrangements Act

[Chapter 13.36 RCW](#) Guardianship

[RCW 13.38.040](#) Definitions

[RCW 74.13.031](#) Duties of the Department, Child Welfare Services, Children's Services Advisory Committee

[RCW 74.13A.047](#) Adoption Assistance Payments, expenditure limits

[RCW 74.15.020](#) Definitions

[42 U.S.C. 671](#) State plan for foster care and adoption assistance

[42 U.S.C. 673](#) Adoption and guardianship assistance program

[42 U.S.C. 675](#) Definitions

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act of 2008

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

Policy

1. Caseworkers must:
 1. Assess children or youth and potential guardians for GAP eligibility, per [WAC 110-85-0050](#), as part of the [concurrent planning](#) process when guardianship has been determined to be in their best interest.
 2. Refer potential eligible licensed caregiver to the GAP gatekeeper.
2. GAP gatekeepers must:
 1. Verify eligibility, develop, negotiate, and renegotiate with eligible caregivers for GAP and EGAP.
 2. Determine and document the GAP funding source for each child or youth.
 3. Manage and follow executed GAP and EGAP agreements to assist caregivers in caring for children and youth.
 4. Suspend or terminate GAP and EGAP agreements, if applicable.
 5. End GAP service payments at age 18 unless they qualify for EGAP.

3. Regional administrators (RA) or designees must approve or deny GAP and EGAP agreements.

Procedures

1. Notifying Potential Guardians of the GAP

Caseworkers must:

1. Provide all caregivers with an explanation of GAP eligibility criteria and subsidy benefits using the [Permanency Planning Matrix DCYF CWP_0088](#) publication and review with them the following requirements:
 1. They must be fully [licensed foster parents](#) in order to receive the GAP subsidy.
 2. Youth who achieve permanency through guardianship do not qualify for [Extended Foster Care](#).
 3. The child or youth must be placed with them for at least six consecutive months after they are fully licensed foster parents, before the court will establish the guardianship.
 4. The GAP Agreement DCYF 15-391 form must be signed prior to the court establishing the guardianship.
 5. Those who reside outside of Washington State must meet both of the following:
 1. Have placement of a child or youth through an [Interstate Compact on the Placement of Children \(ICPC\)](#).
 2. The GAP eligibility requirements. Rate will be based on either the Washington State guardianship subsidy rate or their states subsidy rate, whichever is higher.
 2. Document this discussion in a FamLink case note.
2. Initiating the GAP Process
 1. Caseworkers must complete the following when considering [guardianships](#) subsidized through GAP as the child's or youth's permanent plan:
 1. Follow the:
 1. [Guardianships](#) policy.
 2. [Indian Child Welfare Dependency Cases](#) policy when there is [reason to know](#) children are or may be Indian children.
 2. Verify the caregivers meet the eligibility criteria in both the:

1. [Permanency Planning Matrix DCYF CWP_0088](#) publication
 2. [WAC 110-85-0050](#)
 3. Complete the [Guardianship Approval Checklist DCYF 15-324](#) form.
 4. Provide proposed guardians the following forms:
 1. Application for GAP and/or Reimbursement of Guardianship Finalization Costs DCYF 15-392
 2. Guardian Assistance Program Worksheet DCYF 15-390
 5. Obtain the complete forms in Procedures Section 1.a.iv. from the proposed guardians.
 6. Provide supervisors with completed GAP subsidy packets, that include:
 1. The following forms:
 1. Application for GAP and/or Reimbursement of Guardianship Finalization Costs DCYF 15-392
 2. Guardian Assistance Program Worksheet DCYF 15-390
 3. [Guardianship Approval Checklist DCYF 15-324](#)
 4. [Declaration of Proposed Guardian JU 14.0250](#)
 2. A copy of the proposed guardians' foster care license and home study if they are not in FamLink.
2. Supervisors receiving the GAP subsidy packets must:
 1. Review the packets for approval and complete the [Guardianship Approval Checklist DCYF 15-324](#) form.
 2. If:
 1. Approved, send the form and attachments to the area administrator (AA) or designee.
 2. Denied, return the form to caseworkers with the reason for the denial.
 3. AAs or designee receiving the guardianship packets must:
 1. Review the packets for approval and complete the [Guardianship Approval Checklist DCYF 15-324](#) form.
 2. If:
 1. Approved, send the form and attachments to the RA or designee.
 2. Denied, return the form to supervisors with the reason for the denial.

4. RAs or designees receiving the guardianship packets must:
 1. Review the packets for approval and complete the [Guardianship Approval Checklist DCYF 15-324](#) form.
 2. If:
 1. Approved, send the form and attachments to caseworkers.
 2. Denied, return the form to AAs or designee with the reason for the denial.
5. Caseworkers receiving:
 1. Approved guardianship packets must send them to GAP gatekeepers.
 2. Denied guardianship packets must:
 1. Discuss the reasons for denial with their supervisor to determine how to resolve any barriers or issues related to the denial.
 2. Contact the proposed guardians requesting information to remedy any barriers or issues.
 3. Resubmit the guardianship packet following Procedures Section 2. a.vi.
3. Determining the Funding Source, Negotiating the Subsidy Amount, and Completing the GAP Agreement
 1. GAP gatekeepers must complete the following when they receive approved GAP applications:
 1. Review the completed GAP application packet.
 2. Obtain a letter from the tribe for children determined to be an Indian child, that verifies the proposed guardians are considered their relative based on tribal code or custom, per the [ICW Dependency Cases](#) policy, if applicable.
 3. Follow the GAP Funding Source Flow Chart document when determining GAP funding source, either:
 1. Federal funded GAP
 2. State funded GAP
 4. Initiate the GAP IV-E Eligibility tab in FamLink for children and youth.
 5. Notify IV-E specialists to complete the IV-E Federal Funding Eligibility Determination for GAP in FamLink.

6. Document the information from the Guardian Assistance Program Worksheet DCYF 15-390 form into the FamLink GAP Agreement DCYF 15-391 form.
 7. Verify the foster care rate has been determined per the [Caregiver Support Level and Foster Care Rate Assessment Determination](#) policy.
 8. Negotiate the monthly subsidy amount with proposed guardians and approve any non-recurring expenses for the finalization of the guardianship. The GAP monthly subsidy amount cannot exceed the following statutory caps for foster care maintenance payments for that child or youth if they had remained in foster care during the same period:
 1. Infants and children birth through age four, may receive up to 80 percent of the foster care maintenance payment.
 2. Children age five through nine, may receive up to 90 percent of the foster care maintenance payment.
 3. Children or youth age 10 to 18, may receive up to 95 percent of the foster care maintenance payment.
 9. Not consider the following when calculating the GAP subsidy amount:
 1. Child care expenses.
 2. Medical related expenses, per [WAC 110-85-0100](#).
 3. Exceptional costs foster care described in the Administrative Approval Request 05-210 form, per [Administrative Approvals](#) policy.
 10. Inform the proposed guardians and caseworkers that GAP agreements must be signed prior to the guardianship hearing and order.
 11. Launch the FamLink GAP Agreement DCYF 15-391 form, but do not complete the agreement in FamLink.
 12. Complete and send the hard or electronic copy of the GAP Agreement DCYF 15-391 forms to proposed guardians for signature.
 13. Submit signed GAP Agreement DCYF 15-391 forms to the RA or designee for approval.
2. RAs or designees receiving GAP Agreement DCYF 15-391 forms must:
 1. Review the GAP Agreement DCYF 15-391 forms for approval.
 2. If:
 1. Approved, send the GAP Agreement DCYF 15-391 forms to the GAP gatekeepers.

2. Denied, return form to the GAP gatekeepers with the reason for the denial.
 3. GAP gatekeepers must complete the following when they receive:
 1. Approved GAP Agreement DCYF 15-391 forms from RAs:
 1. Notify caseworkers the GAP Agreement DCYF 15-391 form has been signed by all parties and the guardianship hearing can take place.
 2. Provide signed copies of the GAP Agreement DCYF 15-391 form to proposed guardians.
 3. Upload the following into FamLink:
 1. Signed GAP Agreement DCYF 15-391 form.
 2. Application for the Guardianship Assistance Program (GAP) Subsidy and/or Reimbursement of Guardianship Finalization Costs DCYF 15-392 form.
 3. Guardian Assistance Program Worksheet DCYF 15-390 form.
 4. [Guardianship Approval Checklist DCYF 15-324](#) form.
 5. Receipt for one-time costs related to legal assistance, if applicable.
 2. Denied GAP Agreement DCYF 15-391 forms from RAs:
 1. Notify proposed guardians using the GAP Denial Notice DCYF 07-004 form.
 2. Document in FamLink the GAP Denial Notice DCYF 07-004 form was provided to the proposed guardians.
 3. Upload GAP Denial Notice DCYF 07-004 form in FamLink.
4. After Subsidized GAPs are Established
 1. Caseworkers:
 1. Must complete the following when subsidized guardianships are established:
 1. Notify their GAP gatekeeper on the date guardianships are established.
 2. Close all services and payments in FamLink using the day prior to the date the guardianship was established.

3. Update and close legal and placement in FamLink using the Legal FamLink Training Guide within seven calendar days of receipt of dependency dismissals from the court.
 4. Request to transfer subsidized guardianship cases to the GAP gatekeeper in FamLink, per the [Case Transfers](#) policy.
 2. May make a One-Time Payment for catastrophic events for the guardians, per the [Adoption Support](#) policy.
 2. GAP gatekeepers must complete the following when they are notified that subsidized guardianships have been established:
 1. Review cases in FamLink to verify placement, legal, services, and payments are closed.
 2. Authorize appropriate GAP services in FamLink for the agreed on:
 1. Monthly subsidy.
 2. Non-recurring expenses.
 3. Notify fiduciaries of the:
 1. GAP Agreement subsidy amounts.
 2. Source of payments, e.g., federal or state funded GAP.
 4. Complete and submit the Request to Foster Care Medical & Adoption Support Team (ASP) DCYF 15-401 form.
 5. Notify the LD worker of the:
 1. Established GAP.
 2. Change in status of the child or youth.
5. Modifying GAP Agreements
 1. GAP gatekeepers must:
 1. Consider a modification to a GAP agreement when receiving a written request by the guardians to modify their existing GAP agreement if one of these criteria are met:
 1. Increase or decrease in the special needs of a child or youth.
 2. A change in:
 1. Circumstances of the guardianship family.
 2. The maximum allowable cash payment based on the age of the child or youth.

2. Send the guardian the Guardian Assistance Program Worksheet DCYF 15-390 form to complete and submit.
3. Review the Guardian Assistance Program Worksheet DCYF 15-390 form and reasons for modification.
4. Determine if the modifications meet the requirements in [WAC 110-85-0140](#). If the modification to the GAP Agreement is:
 1. Allowed:
 1. Complete the [Caregiver Support Level and Foster Care Rate Assessment Determination](#) and renegotiate the foster care maintenance level using the percentages in Procedures Section 3.a.viii. based on the child's or youth's age when being modified.
 2. Contact the headquarters placement stability program manager for complex cases, as applicable.
 3. Update the GAP Agreement DCYF 15-391 form with the new rate and send to the guardian for signature.
 4. Send the signed modified GAP Agreement DCYF 15-391 form to the RA for approval.
 2. Not allowed, notify the:
 1. AA of the reason and decision to deny the modification.
 2. Guardians using the Notice of Denial of Modification to GAP Agreement DCYF 07-011 form and send certified mail, and if they:
 1. Do not request an administrative hearing, maintain the current GAP agreement.
 2. Request an administrative hearing:
 1. Maintain their current GAP agreement.
 2. Attend administrative hearings, unless directed otherwise by the Assistant Attorney General (AAG). If the court determines the caregiver is:
 1. Eligible for their modification request, follow the administrative hearing order.

2. Not eligible for their modification request, maintain the current GAP Agreement.
 3. Document in FamLink the outcome of the administrative hearing.
 4. Upload the administrative review hearing into FamLink.
 5. Transfer subsidies to successor guardians when they request to be named the new GAP or EGAP guardian, if they were named in the original or modified GAP Agreement DCYF 15-391 form prior to the death or incapacity of the guardians, per [WAC 110-85-0220](#).
2. RAs or designees receiving modified GAP Agreement 15-391 forms must:
 1. Review the modified GAP Agreement DCYF 15-391 forms for approval.
 2. Send approved modified GAP Agreement DCYF 15-391 forms to the GAP gatekeepers or provide a reason for the denial.
3. GAP gatekeepers must complete the following if the RA:
 1. Approved requests:
 1. Notify fiduciaries of the modified GAP Agreement subsidy amounts.
 2. Upload the signed modified GAP Agreement DCYF 15-391 forms in FamLink.
 2. Denied requests:
 1. Provide the Notice of Denial of Modification to GAP Agreement DCYF 07-011 forms to the guardians and follow Procedures Section 5.a.iv.B.II.
 2. Upload the:
 1. Notice of Denial of Modification to GAP Agreement DCYF 07-011 forms in FamLink.
 2. Administrative hearing orders, as applicable.
6. Administrative Hearings for Extenuating Circumstances
GAP gatekeepers must complete the following when guardians obtain an administrative hearing order of extenuating circumstances for a GAP, after guardianships were established in court:
 1. Consult with the statewide GAP program manager.
 2. Follow [WAC 110-85-0250](#).

3. Obtain the administrative review hearing order establishing extenuating circumstances.
4. Open a “payment only” file in FamLink, if the family case has been closed.
5. Follow Procedures Sections 2.a.iii-2.e.
6. Notify the fiduciaries of the GAP Agreement subsidy amounts.
7. Upload the following to the “payment only” file in FamLink, the:
 1. Signed GAP Agreement DCYF 15-391 form.
 2. Administrative review hearing order for the extenuating circumstance.
 3. [IV-E Eligibility Determination for Federal Funds for GAP, Guardianship Assistance Program DCYF 14-319A](#) form, as applicable.
 4. Application for GAP and/or Reimbursement of Guardianship Finalization Costs DCYF 15-392 form.
 5. Guardian Assistance Program Worksheet DCYF 15-390 form.
 6. [Guardianship Approval Checklist DCYF 15-324](#) form.
 7. Receipt for one-time costs related to legal assistance, if applicable.
7. Determining Initial and Ongoing Eligibility for EGAP
 1. GAP gatekeepers must:
 1. Send the EGAP 1st Notification Letter DCYF 07-014 form to caregivers prior to the youth turning 18 years of age.
 2. Send the EGAP 2nd Notification Letter DCYF 07-015 form to caregivers when both are met:
 1. The youth has turned 18 years of age.
 2. No response has been received from the EGAP 1st Notification Letter DCYF 07-014.
 3. Authorize EGAP for youth between the ages of 18 up to their 21st birthday, when they qualify for ongoing eligibility.
 4. Review EGAP Application DCYF 07-017 when they are received:
 1. Within two months prior to the youth’s 18th birthday to prevent payment disruption.
 2. After the youth’s 18th birthday, and the guardian and youth have both signed the application.
 5. Approve EGAP for youth who have completed the following:

1. Achieved permanency through a guardianship.
 2. Had a prior guardianship subsidy.
 3. Completed the EGAP Application DCYF 07-017.
 4. Resides with a guardian or in an approved [supervised independent living \(SIL\) setting](#).
 5. Meets and have provided verification for one of the following criteria:
 1. Attending high school or working on GED or HSEC.
 2. Enrolled in college or vocational education program.
 3. Employed at least 80 hours per month.
 4. Participating in a program designed to promote or eliminate barriers to employment.
 5. Unable to participate in the above due to a documented medical condition.
 6. Has a mental or physical handicap which warrants the continuation of assistance.
 6. Terminate the previous FamLink GAP Agreement DCYF 15-391 form.
 7. Launch the FamLink GAP Agreement tab, but do not print from FamLink.
 8. Complete and send the hard or electronic copy of the Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 form to proposed guardians for signature.
 9. Submit signed Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 forms to the RA or designee for approval.
2. RAs or designees receiving Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 forms must:
1. Review the Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 form for approval.
 2. If:
 1. Approved, send the Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 form to the GAP gatekeepers.
 2. Denied, return form to the GAP gatekeepers with the reason for the denial.
3. GAP gatekeepers must:
1. Notify the fiduciary when the EGAP are approved.

2. Verify the youth meets the criteria in Procedures Section 7.a.v. at minimum every six months while the youth remains in the EGAP.
3. Follow the suspension process in Procedures Section 8, if unable to verify eligible criteria in Procedures Section 7.a.v.
4. Create amendments to transfer EGAP to successor guardians if they were named in the original or amended GAP Agreement DCYF 15-391 form prior to the death or incapacity of the guardians, per [WAC 110-85-0220](#).
5. Upload the EGAP Application DCYF 07-017 and supporting documents to the FamLink provider.

8. Suspending Executed GAP Agreements

GAP gatekeepers must complete the following when they receive information that may be a reason to suspend the GAP agreement and review [WAC 110-85-0150](#). If circumstances meet WAC requirements for suspending the GAP agreement, they must:

1. Complete the Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010 form and:
 1. Send certified mail to the guardians.
 2. Document the form was sent in FamLink.
2. Wait 30 calendar days, from the date the Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010 was sent. If, guardians:
 1. Provide the documentation requested in the letter by the date specified on the notice to resolve the suspension request, do not suspend their payment.
 2. Do not provide adequate documentation, complete the following:
 1. Complete the Notice of Suspension of GAP Agreement and Subsidy DCYF 07-009 form and:
 1. Send certified mail to the guardians.
 2. Document the form was sent in FamLink.
 2. Upload the following completed forms in FamLink:
 1. Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010.
 2. Notice of Suspension of GAP Agreement and Subsidy DCYF 07-009.
 3. Notify fiduciaries to suspend GAP payments to the guardians.

3. Request an administrative hearing following the receipt of the Notice of Suspension of GAP Agreement and Subsidy DCYF 07-009 form:
 1. Maintain the open case in FamLink.
 2. Attend the administrative hearings, unless directed otherwise by the AAG. If the court determines the caregivers are:
 1. Still eligible for GAP, the GAP agreement remains in effect and the payment must be reinstated from the date the suspension of payment occurred.
 2. Not eligible for GAP, the suspension remains in effect, and it may move to a termination.
 3. Document in FamLink the:
 1. Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010 form was provided to the proposed guardians.
 2. Outcome of the administrative hearing.
 4. Upload the following in FamLink:
 1. Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010.
 2. The administrative review hearing order.
9. Terminating Executed GAP Agreements

GAP gatekeepers must complete the following when they receive information that may be a reason to terminate GAP agreements. If the circumstances meet [WAC 110-85-0160](#) for terminating the GAP agreement, they must:

 1. Notify the statewide GAP program manager when [WAC 110-85-0160](#) (3)-(6) occur.
 2. Complete the Notice of Termination of GAP Agreement DCYF 07-003 forms and:
 1. Send certified mail to the guardians.
 2. Document the form was sent in FamLink.
 3. Wait 90 calendar days, from the date the Notice of Termination of the GAP Agreement DCYF 07-003 form was sent. If guardians:
 1. Do not request an administrative hearing:
 1. Request IV-E specialists close the IV-E eligibility in FamLink.
 2. Close the child's or youth's case in FamLink after IV-E is closed and the GAP agreement is terminated.
 3. Notify fiduciaries to terminate GAP payments to the guardians.

2. Request an administrative hearing:
 1. Maintain the open case.
 2. Attend administrative hearings, unless directed otherwise by the AAG. If the court determines the caregivers are:
 1. Still eligible, their GAP agreement remains in effect.
 2. Not eligible for GAP:
 1. Request IV-E specialists close the IV-E eligibility in FamLink.
 2. Close the child's or youth's case in FamLink after IV-E is closed and the GAP agreement is terminated.
 3. Notify fiduciaries to terminate GAP payments to the guardians.
 3. Document in FamLink the outcome of the administrative hearing.
 4. Complete and submit the Request to Foster Care Medical & Adoption Support Team (ASP) DCYF 15-401 form.
 5. Upload the administrative review hearing order into FamLink.

Forms

[IV-E Eligibility Determination for Federal Funds for GAP, Guardianship Assistance Program DCYF 14-319A](#)

Administrative Approval Request 05-210 form (located in the Forms repository on the DCYF intranet)

Application for Guardianship Assistance Program (GAP) Subsidy and/or Reimbursement of Guardianship Finalization Costs DCYF 15-392 (located in the Forms repository on the DCYF intranet)

EGAP 1st Notification Letter DCYF 07-014 (located in the Forms repository on the DCYF intranet)

EGAP 2nd Notification Letter DCYF 07-015 (located in the Forms repository on the DCYF intranet)

Extended Guardianship Assistance Program (EGAP) Agreement DCYF 07-016 (located in the Forms repository on the DCYF intranet)

Extended Guardianship Assistance Program (EGAP) Application DCYF 07-017 (located in the Forms repository on the DCYF intranet)

GAP Denial Notice DCYF 07-004 (located in the Forms repository on the DCYF intranet)

Guardian Assistance Program (GAP) Agreement DCYF 15-391 (located in the Forms repository on the DCYF intranet)

Guardian Assistance Program Worksheet DCYF 15-390 (located in the Forms repository on the DCYF intranet)

[Guardianship Approval Checklist DCYF 15-324](#)

Notice of Denial of Modification to GAP Agreement DCYF 07-011 (located in the Forms repository on the DCYF intranet)

Notice of Intent to Suspend GAP Agreement and Subsidy DCYF 07-010 (located in the Forms repository on the DCYF intranet)

Notice of Suspension of GAP Agreement and Subsidy DCYF 07-009 (located in the Forms repository on the DCYF intranet)

Notice of Termination of GAP Agreement DCYF 07-003 (located in the Forms repository on the DCYF intranet)

Request to Foster Care Medical & Adoption Support Team (ASP) DCYF 15-401 (located in the Forms repository on the DCYF intranet)

Resources

[Caregiver Support Level and Foster Care Rate Assessment Determination policy](#)

[Case Transfers policy](#)

[Extended Foster Care \(EFC\) Program policy](#)

Flow Chart to Determine Extended Guardianship Assistance Program (EGAP) Funding: Federal or State Funds (located on the Child Welfare intranet under Programs, CFWS, Permanency, and Guardianship)

Flow Chart to Determine Guardianship Assistance Program (GAP) Funding: Federal or State Funds (located on the Child Welfare intranet under Programs, CFWS, Permanency, and Guardianship)

GAP Funding Source Flow Chart document (located on the Child Welfare intranet under Programs, CFWS, Permanency, and Guardianship)

Guide for Determining Tribal Guardianship Assistance Program (TGAP) and Extended Tribal Guardianship Assistance Program (ETGAP) Subsidies for Children under Tribal Court Jurisdiction (located on the Child Welfare intranet under Programs, CFWS, Permanency, and Guardianship)

[Indian Child Welfare Dependency Cases policy](#)

[Indian Child Welfare Reason to Know policy](#)

Legal FamLink Training Guide (located on the DCYF intranet under Computer Help, IT Services, DCYF Applications & Software, Application Training, Child Welfare, Legal, Legal Training)

[Medicaid to 26 Q&A](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Permanent and Concurrent Planning policy](#)

Tribal Guardianship Assistance Program (TGAP) and Extended (ETGAP) Contact List (located on the Child Welfare intranet under Programs, CFWS, Permanency, and Guardianship)

[WAC 110-85-0010 through WAC 110-85-0250](#)

4355. Youth Petition for Reinstatement of Parental Rights

4355. Youth Petition for Reinstatement of Parental Rights admin Wed, 06/14/2023 - 11:39

Original Date: July 1, 1997

Revised Date: July 1, 2023

Sunset Review Date: July 31, 2027

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide direction on the eligibility and notification requirements for the reinstatement of parental rights.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) caseworkers.

Laws

[RCW 13.34.215](#) Petition reinstating terminated parental rights-Notice-Achievement of permanency plan-Effect of granting the petition-Hearing-Child support liability-Retroactive application-Limitation on liability

Policy

Caseworkers must:

1. Notify dependent youth of their right to petition the court for reinstatement of parental rights if their parent, whose rights have been terminated, contacts DCYF or the Guardian ad Litem (GAL) regarding the reinstatement of parental rights and the following criteria is met, the youth:
 1. Was previously dependent and parental rights were terminated in a proceeding under [Chapter 13.34 RCW](#).
 2. Is age 12 or older, unless the court finds good cause to hear a petition from a youth under age 12.

3. Has been legally-free for three or more years since their biological parent's final termination order was entered.
 4. Has not or will not achieve a permanent plan in the next three months, or the permanent plan was achieved, but has not been sustained.
2. Participate in the:
1. Threshold hearing to determine if the reinstatement of parental rights petitions will move forward.
 2. Hearing on the merits of the petition, where caseworkers must inform the court on the parents' efforts to achieve permanency and whether they support the petition for reinstatement.
 3. Final review hearing after six months to determine whether the court will reinstatement parental rights and dismiss the dependency.
3. Not vacate the original termination of parental rights order when an order to reinstate parental rights is entered.

Procedures

1. Requesting Reinstatement of Parental Rights
Caseworkers must complete the following when parents request a reinstatement of parental rights:
 1. Review the request.
 2. Verify, in collaboration with their supervisor, area administrator, and Assistant Attorney General (AAG), that the request meets the criteria in Policy Section 1. If it is determined the request:
 1. Meets the criteria:
 1. Notify the parent, youth, and GAL that their request for reinstatement of parental rights meets the criteria, per [RCW 13.34.215](#).
 2. Discuss the process and requirements for reinstating parental rights with the youth, youth's attorney if appointed, and GAL.
 3. Document the discussion with and notification to the youth, youth's attorney if appointed, and GAL in a FamLink case note.
 4. End the reinstatement of parental rights process if the youth does not agree.
 5. Assist youth in obtaining an attorney, if they agree to participate and request to petition the court for their parent's reinstatement of parental rights, by either:

1. Contacting the attorney assigned to the youth in the dependency case.
 2. Requesting an attorney at the next review hearing, but if no hearing is scheduled within 30 calendar days, request an early review.
 2. Does not meet the criteria:
 1. Notify the parent, youth, and GAL that their request to reinstate parental rights does not meet the criteria, per [RCW 13.34.215](#).
 2. Document in a FamLink case note the:
 1. Youth's or parent's request to reinstate parental rights.
 2. Notification to the youth, parent, and GAL of the denial.
2. Youth Petition to Reinstate Parental Rights

Caseworkers must complete the following after youth file petitions to reinstate parental rights:

 1. Contact the parent that the youth named in their petition to verify they want to participate in the reinstatement of parental rights.
 2. When parents:
 1. Agree to participate, complete:
 1. The [Safety Assessment/Safety Plan DCYF 15-258](#) form.
 2. [Background checks](#), per the [Background Checks](#) policy on:
 1. The parent whose rights were previously terminated and seeking reinstatement of their parental rights.
 2. All other individuals living in the home and those living on the premises.
 2. Do not agree to participate:
 1. Notify the court at the threshold hearing that the parent does not want their parental rights reinstated.
 2. Document their response in a FamLink case note.
 3. Participate in the threshold court hearing to determine if the court will proceed and schedule a hearing on the merits of the petition to review the petition of reinstatement of parental rights.
3. Conditional Order for Reinstatement of Parental Rights

Caseworkers must complete the following when courts schedule hearings on the merits of the petitions to review the petition of reinstatement of parental rights:

1. An assessment on whether it is in the youth's best interest to reinstate their parent's parental rights by considering the following:
 1. Whether reinstatement will present a risk to the health, safety, or well-being of the youth.
 2. Whether the parent whose rights have been terminated has addressed their parental deficiencies and is now fit to parent the youth.
 3. The youth's age, maturity, and ability to express their preference.
 4. Other changes in circumstances to warrant granting reinstatement of parental rights.
2. A [Court Report DCYF 09-095](#) form in FamLink, per the [Court Report](#) policy, that also includes:
 1. The efforts DCYF has made throughout the life of the case to achieve a permanent plan of adoption or guardianship for the youth.
 2. The assessment and recommendation of DCYF on a conditional return home and whether it is in the youth's best interest.
3. Provide the following for the hearing on the merits of the petition:
 1. Notice of the hearing to:
 1. Youth
 2. The youth's:
 1. Parent whose parental rights are the subject of the reinstatement petition.
 2. Attorney.
 3. Current caregiver.
 4. Tribe, if applicable.
 3. Any parent whose rights have not been terminated.
 2. The [Court Report DCYF 09-095](#) form to all legal parties.
4. Participate in the hearing on the merits of the petition to determine whether the conditional order for the reinstatement of parental rights will be entered.
5. If courts:
 1. Do not conditionally grant the petition to reinstate parental rights, proceed with identifying a permanent home, per the Identifying the Adoptive Families policy.
 2. Conditionally grant the petition to reinstate parental rights:

1. Conduct a [Family Team Decision Making Meeting \(FTDM\)](#) prior to returning the youth home.
 2. Begin visitation following the FTDM recommendations and the [Family Time and Sibling and Relative Visits](#) policy.
 3. Supervise placement for six months, per the [Trial Return Home](#) policy.
 4. Assess and make referrals to services to the family to stabilize and maintain placement, if needed.
 5. Conduct monthly health and safety visits in the home, per the [Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents](#) policy.
 6. Follow the [Shared Planning Meeting](#) and [The Transition Plan](#) policies, as applicable.
4. Final Order for Reinstatement of Parental Rights
Caseworkers must:
1. Provide the court and legal parties a completed FamLink [Court Report DCYF 09-095](#) form for the final review hearing that reviews the conditional order of reinstatement.
 2. Participate in the final review court hearing to determine whether the final order for the reinstatement of parental rights will be entered.
 3. Complete the following if the court:
 1. Enters the final order of reinstatement of parental rights and dismisses the dependency:
 1. Document the court's decision to dismiss the dependency within seven calendar days in FamLink.
 2. Follow the How to Merge Legally Free Child back into Family Case document to merge the child or youth back into the parent's FamLink case and notify the:
 1. Financial and Business Services Division fiduciary.
 2. Title IV-E specialist.
 3. Close all services and the case in FamLink, per the [Documentation](#) policy.
 2. Does not grant the final order to reinstate parental rights and orders removal from the parental home:

1. Follow the [Placement Out-of-Home and Conditions for Return Home](#) policy.
2. Proceed with identifying a permanent home, per the [Identifying Adoptive Families](#) policy.

Forms

[Court Report DCYF 09-095](#)

[Safety Assessment/Safety Plan DCYF 15-258](#)

Resources

[Background Checks policy](#)

Court Report Mapping and Guidance (located on the DCYF Child and Family Welfare Services intranet page)

[Court Report policy](#)

[Documentation policy](#)

[Family Team Decision Making Meetings policy](#)

[Family Time and Sibling and Relative Visits policy](#)

[Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents policy](#)

[Identifying Adoptive Families policy](#)

How to Merge Legally Free Child back into Family Case document (located on the DCYF intranet, under Computer Help, DCYF Applications and Software, Application Training, Child Welfare, and Case Merge)

[Placement Out-of-Home and Conditions for Return Home policy](#)

[Shared Planning Meetings policy](#)

[Transition plan policy](#)

[Trial Return Home policy](#)

[Washington Courts Reinstatement of Parental Rights](#)

4400. Concurrent TANF Benefits

4400. Concurrent TANF Benefits sarah.sanchez Wed, 08/22/2018 - 14:24

Approval: Jennifer Strus, Assistant Secretary

Effective Date:

Revised Date: July 31, 2015

Purpose

Family(s) receiving TANF benefits prior to child(ren) entering out-of-home care may be eligible for 180 calendar days of ongoing benefits to support the goal of reunification. TANF benefits support families by maintaining housing and access to services or community supports.

Scope

This policy applies to all Children's Administration caseworkers and supervisors.

Laws

[WAC 388-454-0015](#)

Policy

1. CA will notify Economic Services Administration (ESA) when a child is removed from a parent receiving TANF benefits.
2. CA will coordinate efforts with ESA to continue the parent's eligibility for 180 calendar days of ongoing TANF benefits when the primary permanency plan is reunification within 180 calendar days of Original Placement Date (OPD).

Procedures

The assigned caseworker will:

1. Notify ESA by completing and emailing the [Concurrent TANF Benefits/Family Reunification Notice of Removal from TANF Home DSHS 15-362](#) within 7 calendar days of the child's removal from the parent's home.
2. Provide ESA with demographic information and permanency planning information to determine the parent's ongoing eligibility for TANF benefits while their child(ren) are in out-of-home care.
3. Update [DSHS 15-362](#) and email ESA a request for an extension of benefits beyond 180 calendar days if the child(ren) continues in out-of-home care beyond 180 calendar days and the primary plan remains reunification.
4. Provide ESA with case updates and family progress, including the information outlined below:
 1. On open TANF Cases:
 1. Case and service plan updates:
 1. Prior to the 6 month dependency review hearing.

2. Prior to the first permanency review hearing if an exception to rule (ETR) has been granted.
2. Notification:
 1. When reunification of the child(ren) is imminent.
 2. When the permanent plan changes.
 3. When the assigned caseworker changes.
2. On Closed TANF Cases:
 1. Refer parent(s) for new TANF application 30 calendar days prior to the child(ren) returning home if they were previously receiving TANF benefits.
 2. Notify ESA that the parent has been referred.
5. Document communication with ESA and decisions in FamLink.

Forms and Tools

[Concurrent TANF Benefits/Family Reunification Notice of Removal from TANF Home DSHS 15-362](#)

Resources

Interagency Concurrent Benefits On-Line Training in the WA State Learning Center

4420. Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers

4420. Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers sarah.sanchez Wed, 08/22/2018 - 14:26

Original Date: April 30, 2017

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance to child welfare (CW) employees on face-to-face visits with children and youth and regular visits with parents or guardians who have an open case with Department of Children, Youth, and Families (DCYF) and out-of-home caregivers. Visits with:

- Children and youth help in identifying and assessing their safety, stability, permanency, and well-being.
- Parents or guardians can provide reassuring information about how their children or youth are doing, provide caseworkers with information to help monitor parental progress with

services and case goals, shorten children or youth's length-of-stay, and help achieve permanency more quickly.

- Out-of-home caregivers provide opportunities to monitor children or youth's safety and well-being, identify support and training needs to encourage placement stability, promote permanency, and provide caseworkers with information they can share with parents or guardians.

Scope

This policy applies to CW employees.

Laws

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.710](#) Out-of-home care-Childhood activities-Prudent parent standard

[42 USC § 624](#) Payments to States

Policy

1. Caseworkers must conduct:
 1. Private individual face-to-face health and safety visits at a minimum of every calendar month for children and youth in:
 1. Receiving in-home services or out-of-home care, including when a dependency petition is filed or dependency is established and the:
 1. Court has ordered children or youth to reside in out-of-home placement.
 2. Dependent adjudicated youth is in a Juvenile Rehabilitation Division (JRD) facility.
 2. In-home dependencies, including dependent children or youth who return home on a trial [return home](#) or remain home under the jurisdiction of the court and until dismissal of the dependency.
 3. In-home pre-fact findings, when the court ordered the children or youth to reside in the home prior to the establishment of a dependency with a shelter care order and ask the court for authority to access the children or youth in in-home pre-fact finding status, if access was not granted at the shelter care hearing, to conduct at minimum:
 1. Two in-home health and safety visits, per calendar month for all children ages five years or younger.
 2. One in-home health and safety visit, per calendar month, for all children and youth ages six and older.

4. [Extended Foster Care \(EFC\)](#).
 5. [Voluntary placement](#), when the children or youth are placed under a [Voluntary Placement Agreement \(VPA\)](#).
 6. [Courtesy supervision](#).
 7. Voluntary Services, including [FVS](#) and [FRS](#).
 8. Child Protective Services or FRS cases when the family agrees to services or open beyond 60 calendar days.
 9. An [Interstate Compact on Placement of Children \(ICPC\)](#).
2. The first health and safety visit within seven calendar days of a child or youth's initial placement or any change of placement. Placement of children or youth is not considered a health and safety visit.
 3. At minimum two in-home health and safety visits every calendar month for children that are age five or younger that reside in the home for:
 1. FVS cases.
 2. Child Protective Services (CPS) when the family agrees to services or cases are open beyond 60 calendar days.
 3. In-home pre-fact finding, in-home dependency, or trial [return home](#) for the first 120 calendar days.
 4. Private and individual face-to-face monthly visits with parents or guardians and caregivers.
 5. Monthly contact in-person, whenever possible, with all known parents or guardians.
 6. Individual face-to-face monthly visits to all known parents or guardians involved in a Voluntary Placement Agreement (VPA), shelter care, dependency proceedings, or voluntary services including FVS, CPS open beyond 60 calendar days, or FRS, unless the parents are deceased or their rights have been terminated.
2. Other qualified DCYF employees may, in place of the caseworker, conduct health and safety visits and monthly visits with parents or guardians and caregivers, but must not conduct more than four visits per year, with no two visits occurring consecutively. This does not apply to youth in a JRD facility.
 3. CW employees must follow DCYF Administrative policies when applicable:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP)
 2. 6.03 Access to Services for Individuals with Disabilities

Procedures

1. Requirements for Health and Safety Visits with Children and Youth
Caseworkers must complete the following activities during health and safety visits with children and youth:
 1. Assess for present danger, per the [Child Safety](#) policy.
 2. Observe and document all the following:
 1. How children or youth appear developmentally, physically, and emotionally.
 2. How parents or guardians and caregivers and children or youth respond to each other.
 3. Children's or youth's attachment to their parents or guardians and caregivers.
 4. The home environment, when the visit occurs in the home where children or youth live. This includes notifying the Licensing Division workers if there are any changes to licensed foster homes, such as new family members.
 5. Infants' sleeping environment to verify it meets the safe sleep guidelines, per the [Infant Safety Education and Intervention](#) policy, as applicable.
 3. Meet with verbal children or youth in private, separate from other children and youth, parents or guardians, or out-of-home caregivers, either in the home or another location where they are comfortable. For children or youth who:
 1. Speak a language other than English, follow the DCYF Administrative 6.02 Access to Services for Clients who are Limited English Proficient policy.
 2. Have a disability and are able to communicate, but are non-verbal, follow the DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy.
 4. Discuss and document the following with verbal children and youth:
 1. Whether they feel safe in their home or placement.
 2. Their needs, wants, and progress.
 3. How [family time and visits with siblings](#) are going.
 4. Their connection with siblings and other relatives. For youth 16 and above, this includes discussing skills and strategies to:
 1. Safely reconnect with any identified family members.
 2. Provide guidance and services to assist the youth.
 3. Maintain community and cultural connections.
 5. Their participation and interest in normal childhood activities.

6. Case activities and planning such as visits and permanent plan.
 7. Services and activities needed to support transitioning youth for successful adulthood.
 8. Their interest in participating in EFC and provide written information about the program.
5. Confirm that each child or youth capable of reading, writing, and using the telephone has a business card with their caseworker's name, office address, and phone number.
 6. Discuss specific objectives outlined in the [Pregnant and Parenting Youth](#) policy with dependent youth who are pregnant or parenting.
 7. For children or youth who are placed in out-of-home care, conduct the majority of health and safety visits in the home where they reside. If caseworkers must visit children or youth in another location, document in a case note the reason and benefit gained.
2. Requirements for Visits with Out-of-Home Caregivers
Caseworkers must:
 1. Conduct individual face-to-face monthly visits with out-of-home caregivers.
 1. Visits with children or youth and caregivers may occur during the same monthly visit.
 2. Location of monthly visits may vary.
 2. Conduct an unannounced monthly visit with caregivers in randomly selected homes.
 1. DCYF must randomly select no less than 10 percent of the caregivers currently providing care to receive one unannounced face-to-face visit in the caregiver's home per year. The unannounced visits are randomly selected in FamLink.
 2. Caregivers who receive an unannounced visit through the random selection process one year will not receive an unannounced visit the following year.
 3. Caseworkers must conduct the unannounced visit within 30 calendar days of receiving the automated notification from FamLink.
 4. When the unannounced visit occurs within the monthly visit timeline, this visit meets the monthly caregiver visit requirement, in addition to the unannounced monthly visit requirement.
 3. Complete the following activities during both scheduled and unannounced visits:

1. Assess the children and youth in the household for imminent physical harm and follow the [Safety Assessment](#) policy when safety threats are identified.
2. Discuss the children or youth's:
 1. Well-being, stability, and permanency goals.
 2. Health needs, including, but not limited to:
 1. Physical health
 2. Mental health
 3. Medications, if applicable
3. Observe the children or youth's and caregiver's relationship and home environment when a visit occurs in the caregiver's home. This does not apply to EFC youth in Supervised Independent Living (SIL) settings.
4. Assess the caregiver's ability to provide adequate care and maintain placement stability. This does not apply to EFC youth in SIL settings.
5. Identify goods or services to assist in supporting and maintaining placement, per the [Concrete Goods](#) policy.
6. Provide training information through the [Alliance for Child Welfare](#), as needed.
7. Inquire about family time and the child's or youth's visits with siblings and how the child or youth is responding.
8. Discuss any:
 1. Normal childhood activities children or youth are participating, or are interested, in and how they maintain their community or cultural connections.
 2. Requests to significantly change the children's or youth's appearance. This does not apply to youth in EFC. Significant changes include, but are not limited to:
 1. Body piercings
 2. Haircuts
 3. Changes in hairstyles.
9. Notify children, youth, and caregivers when requests are made to significantly change the children's or youth's appearance that prior approval must be obtained from one of the following, the:
 1. Parent or guardian.

2. Tribe if the child or youth is legally-free.
3. Court.

10. Share the parent's or guardian's interest in children's or youth's care and requests for their participation in normal childhood activities.

3. Requirements for Monthly Visits with Known Parents or Guardians
Caseworkers must:

1. Conduct most visits in the homes of parents or guardians.
2. Conduct monthly visits that include:
 1. A location for the visits that is conducive to open and honest conversations.
 2. Sufficient time to address a needs assessment and visitation.
 3. A quality discussion that focuses and addresses issues related to case planning including conditions for return home, appropriate services, and goal achievement.
3. Discuss and document all of the following during visits with parents or guardians, except for youth in [EFC](#):
 1. Case planning, service delivery, and goal achievement.
 2. Progress made to eliminate or manage the identified children or youth safety threats.
 3. Barriers to needed services and consideration of additional or different services.
 4. Discuss housing stability, such as where the parents or guardians are living and how long they can remain in their current home.
 5. Permanency planning for children or youth.
 6. Family time and sibling visits, if applicable.
 7. Review of children's or youth's interest and participation in normal childhood activities.
 8. Requests to significantly change a child's or youth's appearance. Significant changes include, but are not limited to, body piercings, haircuts, and changes in hairstyles. Prior approval must be obtained from parents or guardians, the tribe if children or youth are legally free, or court.
4. Continue requesting visits with parents or guardians when they decline or refuse to participate. If parents or guardians:
 1. Actively refuse requests by verbally or submitting in writing that they are not interested in having monthly visits:

1. Verify with them that they still decline.
 2. Continue to attempt monthly contact until parental rights have been terminated or another permanent plan is achieved.
2. Passively refuse requests through their actions or inactions, make at least one attempt monthly to contact them either face-to-face, by phone, or through correspondence until parental rights have been terminated or another permanent plan is achieved.
4. Youth Residing in a JRD Facility
Caseworkers must:
 1. Contact the JR counselor monthly by phone or in-person and address the following:
 1. Treatment progress
 2. Case planning
 3. Discharge planning
 4. Coordinate schedules with the JR counselor and youth at a time most appropriate to the youth's treatment program and school schedule, when possible.
5. Tribal Coordination
Caseworkers must collaborate with tribes per the [Indian Child Welfare \(ICW\) Active Efforts and Tribal Collaboration](#) policy and follow the other ICW policies as applicable throughout the life of the case when there is reason to know children are or may be Indian children.
6. Requirements for Interstate Compact on Placement of Children (ICPC) Cases
Caseworkers must complete the following:
 1. When children or youth are placed into a Washington State approved ICPC home:
 1. Complete the monthly face-to-face visits following this policy.
 2. Submit a written quarterly report to headquarters ICPC every third month within 10 calendar days of the third health and safety visit.
 3. Include the following in the quarterly report.
 1. The dates and location of the health and safety visits.
 2. A summary of the observed activities during the visit and following Procedures Section 1.a.-1.d.
 2. When children or youth are placed outside of Washington State in an approved ICPC home:

1. Request health and safety visits within seven calendar days of placement by submitting the ICPC Report on Childs Placement Date or Change Placement 100B DCYF 15-093 form to the headquarters ICPC Unit.
2. Confirm the dates the health and safety visits were completed by contacting the receiving state's ICPC courtesy worker by telephone or email at the following times:
 1. Within 30 calendar days of submitting the ICPC Report on Childs Placement Date or Change Placement 100B DCYF 15-093 form.
 2. Monthly for the ongoing health and safety visits.
3. Document the date of their health and safety visit in a FamLink case note.
4. Complete the following when the quarterly report is received from headquarters ICPC that summarizes the health and safety visits:
 1. Review the written quarterly report.
 2. Document the dates of the health and safety visit conducted by the receiving state courtesy worker.
 3. Summarize the report in a FamLink case note.
3. Respond to receiving state courtesy workers' concerns by addressing unmet needs and eliminating barriers to stability and permanency, which may include additional services and support.
4. If health and safety visits are contracted by DCYF through a private agency:
 1. Contact the courtesy worker monthly to get the date of the health and safety visit.
 2. Follow the case note documentation requirements in Procedures Section 6.b.
5. When children or youth are placed in an out-of-state facility-based program:
 1. Request courtesy supervision if they are placed into a bordering state program with an on-going BRS contract.
 2. Follow the [Placement Intensive Resources](#) policy if they are placed in an out-of-state program under an Out-of-State Intensive Residential Child Specific Contract (OSIRCSC).
7. Cases Requiring Two Monthly Health and Safety Visits
Caseworkers:
 1. Must conduct two in-home health and safety visits every calendar month for:

1. CPS FAR cases open beyond 60 calendar days when children age five or younger are residing in the home.
2. FVS cases with children age five or younger and residing in the home. Contracted providers may conduct one of the two monthly visits.
3. In-home pre-fact finding when court ordered, in-home dependency, or trial [return home](#) cases with children age five or younger, every calendar month for the first 120 calendar days from the date established and:
 1. These visits must occur in the home where the child resides.
 2. This requirement does not prevent additional visits outside the home.

2. May have contracted providers conduct one of the two monthly visits.

8. Visit Documentation in FamLink

Caseworkers or other qualified DCYF employees who conduct visits must document the information obtained, observed, or discussed during health and safety visits with children and youth and monthly visits with parents or guardians and caregivers in FamLink case notes within three calendar days of each visit and:

1. For children and youth:

1. Select the following FamLink codes for visits and attempted visits for each child and youth:
 1. "Health and Safety Monitoring Visit (Social Worker)."
 2. "Health and Safety Visit with Child (Attempted)." Use to document efforts to conduct the health and safety visit. An actual visit must take place for compliance with policy.
2. When health and safety visits are conducted by another child placing agency (CPA). Visits by a CPA worker does not relieve caseworkers from completing their monthly visits. Both visits must be documented in FamLink. This includes:
 1. FVS cases where a contracted provider conducted the visit.
 2. Out-of-state ICPC cases where another agency conducts the visits.

2. For tribes, include:

1. All contact involving visits.
2. Plans to involve tribes in monthly visits.

3. For visits with out-of-home caregivers, select the following FamLink codes, as applicable:

1. “Monthly Caregiver Contact (In-Person)” for each child and youth on a case who requires a visit.
2. “Unannounced Assigned Caseworker Monthly Visit” for randomly selected visits or one of the following:
 1. “Unannounced Health and Safety Visit”
 2. “Unannounced Health and Safety Visit-Attempted”
4. For each parent or guardian for each child or youth on a case who requires a visit:
 1. Select the following visit and attempted visit activity codes, as applicable:
 1. “Parent/Guardian Contact”
 2. “Parent/Guardian Contact (Household Member/Paramour)”
 3. “Parent/Guardian Contact (Attempted)”
 2. Include how contact was made in the dropdown list under the location tab, e.g. in-person, phone, mail, video, text, social media, or other means of contact when the following circumstances apply:
 1. Parent or guardian is out-of-state
 2. Parent or guardian is incarcerated
 3. Select “Parent/Guardian Contact (Attempted)” when parent’s or guardian’s whereabouts are unknown, despite concerted efforts to locate them using the Guidelines for Locating Children, Youth, or Parents DCYF 02-607 form.
 4. Document parent’s or guardian’s active and passive refusal as described in Procedure Section 3.d. in a FamLink case note and include the following:
 1. Dates and efforts to contact parents or guardians.
 2. Methods of interaction between caseworkers and parents or guardians, e.g. in person, phone, mail, video, text, or social media.
 3. The dates parents or guardians requested refusal in monthly contact or case involvement, and the way that request was communicated, e.g. in-person, phone, mail, video, text, or social media.

Forms

Guidelines for Locating Children, Youth, or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

[ICPC Report on Childs Placement Date or Change Placement 100B DCYF 15-093](#)

Resources

Caseworker Monthly Visits with Out-of-Home Caregivers (located on the DCYF intranet)

Caseworker Health & Safety Visits with Child Tip Sheet (located on the DCYF intranet)

[Child Protective Services Family Assessment Response policy](#)

[Child Safety policy](#)

[Courtesy Supervision policy](#)

DCYF Administrative 6.02 Access to Services for Clients who are Limited English Proficient policy

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy

[Extended Foster Care \(EFC\) Program policy](#)

[Family Time and Sibling and Relative Visits policy](#)

[Family Reconciliation Services policy](#)

[Family Voluntary Services policy](#)

[ICW Active Efforts and Tribal Collaboration policy](#)

[Infant Safety Education and Intervention policy](#)

[Interstate Compact on Placement of Children \(ICPC\) policy](#)

[Monthly Supervisor Case Reviews policy](#)

[Placement Intensive Resources policy](#)

[Pregnant and Parenting Youth policy](#)

[Prudent Parenting Guide DCYF CWP 0078 publication](#)

[Return Home policy](#)

[Voluntary Placement Agreement policy](#)

4422. Guidelines for Client Referrals to Contractors

4422. Guidelines for Client Referrals to Contractors sarah.sanchez Wed, 08/22/2018 - 14:28

1. Social Workers must provide contractors with written information regarding referred cases. The release of information to contracting agencies is permitted under RCW 13.50.100. The social worker provides the following information in the initial referral, when available and applicable:
 1. Date and time of referral.
 2. Inclusive dates of service authorization.
 3. Purpose of the referral. Provide a clear statement to the contractor regarding type of case; e.g., crisis intervention, child abuse, reunification, etc., and the services to be performed.

4. Clear, written expectations to the contractor; e.g., "This is a CPS case. Please provide unannounced visits, document your observations, and report them to the assigned social worker."
 5. Description of family strengths and extended family networks (if known).
 6. Family members' responses to current and past services.
 7. Known or suspected past or current mental health, developmental, or other health related disabilities and conditions.
 8. Known or suspected past or current involvement with drugs, alcohol, or illegal activities.
 9. Copy of current report to the court.
2. The social worker complies with the following procedures for ongoing case management:
 1. Keep the contractor informed of new developments/concerns regarding referred case.
 2. Keep a written record of required reports, noting date due, date received, acceptable, non-acceptable, etc.

4430. Courtesy Supervision

4430. Courtesy Supervision sarah.sanchez Wed, 08/22/2018 - 14:29

Original Date: February 15, 1998

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose

The purpose of this policy is to provide guidance to child welfare (CW) employees on courtesy supervision cases for children and youth in the placement and care authority of the Department of Children, Youth, and Families (DCYF).

Scope

This policy applies to CW employees.

Laws

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

Policy

1. Primary caseworkers:
 1. May request courtesy supervision from a caseworker in another office through their supervisor and regional gatekeeper when children or youth are placed or moved outside of their office coverage area.
 2. Must:
 1. Maintain primary assignment for cases with courtesy supervision.
 2. Notify the courtesy supervision worker if there is [reason to know](#) children are or may be Indian children.
2. Regional gatekeepers must:
 1. Request courtesy supervision from regional gatekeepers in another region when they receive courtesy supervision requests from supervisors in their region.
 2. Assign courtesy supervision cases to supervisors in their region when they receive completed courtesy supervision requests from regional gatekeepers in another region.
3. Primary and courtesy supervision caseworkers must:
 1. Work together at the lowest level possible to resolve concerns related to the safety, well-being, or permanency of children or youth on courtesy supervision.
 2. Follow the [Indian Child Welfare Active Efforts and Tribal Collaboration](#) policy if there is reason to believe children are or may be Indian children.

Regional administrators (RAs) of the sending offices will make the final determination, in consultation with the RAs of the receiving offices, when there are differing opinions or unresolved issues related to courtesy supervision cases.

Procedures

1. Requesting Courtesy Supervision
 1. Primary caseworkers requesting courtesy supervision must complete and send the [Courtesy Supervision Referral DCYF 10-459](#) form to their supervisor for approval, within 72 hours of children or youth have moved or will be moving outside their office coverage area.
 2. Supervisors receiving courtesy supervision referral requests must review and verify that the information on the [Courtesy Supervision Referral DCYF 10-459](#) form and in FamLink is complete, within 72 hours from receipt. If the information is:
 1. Incomplete, they must notify the primary caseworker to complete and make any necessary corrections and resend the [Courtesy Supervision Referral DCYF 10-459](#) form.

2. Complete, they must email the approved [Courtesy Supervision Referral DCYF 10-459](#) form to their regional gatekeeper.
 3. Regional gatekeepers receiving courtesy supervision referral requests from supervisors must review and verify that the information on the forms and in FamLink is complete, within 72 hours from receipt. If the information is:
 1. Incomplete, they must notify the primary caseworker and the supervisor to complete and make any necessary corrections and resend the [Courtesy Supervision Referral DCYF 10-459](#) form.
 2. Complete, they must send the completed [Courtesy Supervision Referral DCYF 10-459](#) form to the receiving regional gatekeeper.
 4. Receiving regional gatekeepers receiving courtesy supervision referral requests from sending regional gatekeepers must complete the following, within 72 hours from receipt:
 1. Review the [Courtesy Supervision Referral DCYF 10-459](#) form.
 2. Assign cases to supervisors for courtesy supervision in FamLink.
 5. Courtesy supervision supervisors must assign courtesy supervision cases to caseworkers in FamLink, within 72 hours of case assignment from the receiving regional gatekeeper.
2. Courtesy Supervision

Once courtesy supervision cases have been assigned:

 1. Courtesy supervision caseworkers must assist the primary caseworker with the child or youth's [placement](#), when requested by the primary caseworker. This includes:
 1. Completing the [Home Inspection Checklist \(Kinship\) DCYF 10-453](#) form for unlicensed caregivers, documenting the inspection in a case note, and uploading the form in FamLink.
 2. Identifying and verifying individuals living in the home or on the premises and completing the following when there are additional members:
 1. Assessing for safety threats.
 2. Notifying the Licensing Division licensur, for licensed homes, per the [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy.
 3. Completing background checks, per the [Background Check](#) policy.
 3. Completing and obtaining caregiver's signatures on the [Placement Agreement DCYF 15-281](#) form and uploading the form in FamLink.

2. Courtesy supervision caseworkers must:
 1. Conduct:
 1. [Health and safety visits](#) with children or youth, per the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 2. [Monthly visits](#) with caregivers, per the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 3. Document visits in a case note in FamLink, per the [Documentation](#) policy.
 2. Follow:
 1. The relevant policy and contact the primary caseworker to discuss placement alternatives, for the following situations:
 1. [Present Danger](#) policy, if children or youth are determined to be in present danger.
 2. [Placement Moves](#) policy, if children or youth must be moved from placement.
 3. DCYF Administrative 2.01 [Mandated Reporting Requirements](#) policy, if there is reasonable cause to believe a crime has been committed against a child or youth.
 4. [Intake Process and Response](#) policy, if there are new allegations of abuse or neglect.
 2. Collaborate with the primary caseworker on case planning and decision making.
 3. Notify the primary caseworker, if any referrals were made or if there is a need for services for the child or youth or caregiver.
 4. Attend [shared planning meetings \(SPMs\)](#) and [family team decision making meetings \(FTDMs\)](#), including those in group care or [behavior rehabilitation services](#), unless otherwise arranged with the primary caseworker.
 5. When a placement is at risk of disruption or a placement move is planned, notify the primary caseworker to schedule a FTDM.
3. Courtesy supervision supervisors must only review health and safety visit requirements with courtesy supervision caseworkers for cases open 30 calendar days or more during the [monthly clinical supervision case reviews](#).

3. Case Support from Sending Office

After a courtesy supervision case has been assigned:

1. Primary caseworkers must:

1. Maintain primary assignment of the case and continue to conduct primary assignment case duties, including but not limited to:
 1. Referrals.
 2. Decision making.
 3. Reviewing current month health and safety visit documentation.
 4. Court reports.
 5. Case plans.
 6. Payment authorizations.
 7. SPMs, per the [Shared Planning Meetings](#) policy.
 8. FTDMs, per the [Family Team Decision Making Meetings](#) policy.
2. Verify the following information is in FamLink and up-to-date:
 1. Placement, within 72 hours of a placement move, per the [Placement Moves](#) policy.
 2. Legal Page, including the most current court order.
 3. Health and Mental Health Pages.
 4. Child Health and Education Tracking (CHET), per the [CHET](#) policy
 5. [Child Information and Placement Referral DCYF 15-300](#) form is signed by the current caregiver or verified by email receipt, per the [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) policy.
 6. [Placement Agreement DCYF 15-281](#) form, per the [Out-of-Home Placements](#) policy.
 7. Home Study or Reassessment Application DCYF 10-354 form is located in the provider file, per the [Completing Home Studies](#) policy.
 8. Information for completed background checks for all household members age 16 and older, per the [Background Checks](#) policy.
 9. [Extended Foster Care Participation Agreement DCYF 10-432](#), if applicable, per the [Extended Foster Care \(EFC\) Program](#) policy.
 10. [Voluntary Placement Agreement DCYF 15-431](#) form, if applicable, per the [Voluntary Placement Agreement](#) policy.

11. [Independent Living Services](#) information, if applicable, per the [Transitioning Youth for Successful Adulthood](#) policy.
 3. Notify the courtesy supervision caseworker and their supervisor of:
 1. Upcoming non-emergent placement moves.
 2. Emergent placement moves, within 24 hours of the move.
 4. Coordinate with the courtesy supervision caseworkers, if assistance is needed for the child or youth's placement move.
 5. Initiate appropriate service referrals, when notified of an identified service need for the child or youth.
 6. Update the courtesy supervision caseworker about:
 1. Any progress or changes in the case plan.
 2. Court dates.
 7. Invite courtesy supervision caseworkers to all:
 1. SPMs.
 2. FTDMs.
2. Supervisors from the sending office must conduct monthly clinical supervision case reviews with primary caseworkers on courtesy supervision cases.

Forms

[Child Information and Placement Referral DCYF 15-300](#)

[Courtesy Supervision Referral DCYF 10-459](#)

[Extended Foster Care Participation Agreement DCYF 10-432](#)

[Home Inspection Checklist \(Kinship\) DCYF 10-453](#)

[Placement Agreement DCYF 15-281](#)

[Voluntary Placement Agreement DCYF 15-431](#)

Resources

[Background Checks policy](#)

[Clinical Supervision Case Reviews policy](#)

[Completing Home Studies policy](#)

[Documentation policy](#)

[Extended Foster Care \(EFC\) Program policy](#)

[Family Team Decision Making Meeting policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Indian Child Welfare Reason to Know policy](#)

[Intake Process and Response policy](#)

[DCYF Administrative 2.01 Mandated Reporting Requirements policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

[Placement Moves policy](#)

[Out-of-Home Placements policy](#)

[Present Danger policy](#)

[Shared Planning Meetings policy](#)

[Transitioning Youth for Successful Adulthood policy](#)

[Voluntary Placement Agreement policy](#)

4500. SPECIFIC SERVICES

4500. SPECIFIC SERVICES sarah.sanchez Tue, 08/28/2018 - 11:30

4502. Intensive Family Preservation Services (IFPS), Family Preservation Services (FPS)

4502. Intensive Family Preservation Services (IFPS), Family Preservation Services (FPS) sarah.sanchez Tue, 08/28/2018 - 11:30

Service Definition

IFPS, authorized and described in RCW 74.14C.040, and FPS, authorized and described in RCW 74.14C.050, are family-focused, behavior-oriented, in-home counseling, and support programs available in most counties. The services of both programs may be utilized when youth are, for IFPS, at imminent, or for FPS at substantial, risk of placement or for children returning to the home from out-of-home care. See section 45023, below, for procedures to access IFPS and FPS.

1. For IFPS, services begin within 24 hours of referral, are available 24 hours a day, are short-term, limited to a maximum of 40 days, unless paraprofessionals are used, in which case service is limited to a maximum of 90 days. The service can be up to 80 hours in a 30-40 day intervention or up to 100 hours in a 90 day intervention. Services include both clinical assistance (counseling, case management, parent education) and concrete help (See examples in [Concrete Goods Guide](#)). IFPS services are provided by contracted vendors and are available statewide.
2. FPS begin within 48 hours of referral, are available 24 hours a day, and can be up to six months in duration. FPS is designed to be less intensive than IFPS, and interventions are

focused on improving family functioning and assisting families with getting connected to local community resources. FPS are provided by contracted vendors and are available statewide.

Eligibility

1. Families and children are eligible for IFPS and/or FPS when a child is in out-of-home placement and can be reunited within 30 days or the social worker has determined that, without intervention, the child, for IFPS, is at imminent risk of out-of-home placement or, for FPS, at substantial likelihood of being placed out-of-home due to at least one of the following:
 1. Child abuse or neglect.
 2. A serious threat of substantial harm to the child's health, safety, or welfare.
 3. Family conflict.
2. The social worker need not refer otherwise eligible families and family preservation services need not be provided if at least one of the following conditions is met:
 1. The services are not available in the community in which the family resides.
 2. The services cannot be provided because the program is filled to capacity.
 3. The family refuses services. or
 4. The social worker or the service provider determines that the safety of a child, a family member, or persons providing the services would be unduly threatened.
3. IFPS/FPS may not be used for families in need of an in-home crisis resolution or therapeutic service to avoid possible family disruption or foster care placement at some unspecified time in the future and is not to be used as an interim measure until a planned placement resource is secured.
4. The family has a case open for service with CPS, FVS, FRS, or CFWS. The child must be either residing in the family home or be able to go home immediately, within 30 days, with IFPS.
5. The child, for IFPS, has been assessed by the assigned social worker as needing immediate placement or, for FPS, will need placement in the future if family dynamics do not change or is already in placement but could return home immediately with IFPS.
6. F. For IFPS, immediate placement means that the social worker is planning to file a petition with the juvenile court to remove the child from the family home within 72 hours or is planning to obtain a voluntary placement authorization from the child's parents (per [4307 Voluntary Placement Agreement \(VPA\) policy](#)) within 72 hours.
7. For FPS, substantial likelihood of placement means the assigned social worker has determined, through assessment, that there is a strong possibility that another injury or

crisis will occur in the near future, resulting in the placement of the child, or the child is already in placement but could return home sooner with FPS.

8. The Regional Administrator may limit the provision of IFPS or FPS to families where children would be receiving paid DCFS placement services.
9. The social worker has determined that there are no less intensive services available that can meet the family need.
10. An immediate opening with the contracted IFPS and/or FPS agency is available.

Procedures for Access

1. Referrals for IFPS or FPS must come through DCFS. Contractors shall not accept referrals directly from families or other sources.
2. The Regional Administrator or designee:
 1. Appoints a Gatekeeper for each office served by an IFPS or FPS provider. The IFPS/FPS Gatekeeper:
 1. Participates in a review or reviews all IFPS/FPS referrals to ensure conformance with eligibility requirements and the best use of the resource.
 2. Makes final department determinations of family eligibility for IFPS/FPS prior to referral to and intake by the service provider, rejecting all families for whom placement is not imminent or substantially likely.
 3. Facilitates the departmental review of all families entering placement for possible eligibility and referral to IFPS.
 2. Develops a written protocol with IFPS and FPS contractors governing the assessment of client eligibility, procedures for service referrals, approval of service extensions, and utilization of IFPS - Assessment and Aftercare Services.
 3. Distributes copies of the written protocol to IFPS/FPS Gatekeepers, Area Managers, supervisors, and all case carrying DCFS social workers.
 4. Works to ensure that IFPS and FPS eligibility determination and case referral practices in local offices are consistent with statutory and protocol requirements.
 5. Reports to the Assistant Secretary quarterly on the provision of IFPS and FPS in the region.
 6. Monitors payments against allotment and contract dollar limits.
 7. Monitors performance of contractors against standards set by the statement of work.
 8. Notifies contractors when there is a rate change and amend contracts as needed.
3. The DCFS social worker:

1. Identifies families who may be eligible for the service in accordance with regional procedures, including consultation with an internal or external team, a supervisor, or a designated IFPS/FPS Gatekeeper.
2. Following referral, orally or in writing, per contract and regional procedure, supplies the contractor with referral information, release of which is permitted under RCW 13.50.100(3), that is as complete as possible and includes:
 1. Name and case numbers of family caretaker(s).
 2. Names, birth dates, Social Security numbers, and case numbers (if different) for all children at imminent risk of placement;
3. File a written report with his/her supervisor stating the names of families referred and reasons for which the client was referred. The social worker's supervisor verifies in writing his/her belief that the family referred meets the eligibility criteria in section 45022(A), above. The supervisor reports monthly, through the Area Manager, to the Regional Administrator on the provision of these services. The Regional Administrator reports to the Assistant Secretary quarterly on the provision of these services for the entire region.
4. Immediately opens payment on the Social Service Authorization, DSHS 14-154(A), utilizing SSPS codes at the time of authorization and sends a copy of the service authorization to the provider. The service termination date will not be entered until receipt of the service termination summary from the contractor.
5. For FPS, receives a monthly statement from the provider and immediately processes the statement to generate a payment for services provided that month.
6. During the delivery of contracted service, regularly consults with the IFPS or FPS contractor regarding the progress of the family.
7. Immediately notifies the contractor if CPS referrals are received on the family.
8. Participates in exit interviews with the IFPS/FPS therapist.
9. Enters the service termination date on the Social Service Authorization upon receipt of the contractor's termination report, using the last date of client contact as the termination date. The authorization is immediately processed to generate a payment for services provided by the IFPS or FPS contractor.

Other Sources

Created on: Aug 25 2014

Components of DCFS funded IFPS/FPS exist in other service delivery systems in some communities, including the Regional Support Network (RSN) and DDD.

4509. Respite For Parents

4509. Respite For Parents sarah.sanchez Tue, 08/28/2018 - 11:31

Respite care offers time limited relief for substitute parenting or care giving of a child. For the purposes of this section, respite care is available for parents whose children are dependent and who are in the custody and control of CA.

1. Respite care to prevent out of home placement or re-entry into out of home care is:
 1. Based on the child's special needs.
 2. Available on an emergent basis to prevent placement disruption; or,
 3. A planned event as part of the child's safety plan to remain in the home or the child's safety and transition plan during a trial return home.
2. The respite provider must have experience and/or training to deal with the particular special needs of the child in care.
3. Social worker responsibilities:
 1. Explore other available resources to assist in providing respite including:
 1. Family resources
 2. Other DSHS divisions, for example, the Division of Developmental Disabilities (DDD)
 3. The Regional Support Networks (RSN) for emergency respite care for mental health clients to prevent hospitalization. Multi-disciplinary "wrap-around" service planning groups may also occasionally authorize respite care in the context of a plan that prevents a child from entering out-of-home care.
 2. Complete the [background check](#) process prior to approval of the services, if not previously completed,
 3. Authorize payment for respite only when utilizing a licensed out-of-home provider or approved provider in home where the child resides.

4510. Respite for Licensed Foster Parents, Unlicensed Relative Caregivers and Other Suitable Persons

4510. Respite for Licensed Foster Parents, Unlicensed Relative Caregivers and Other Suitable Persons sarah.sanchez Tue, 08/28/2018 - 11:31

Respite services can play an important role in preventing placement disruption. These services are available for licensed foster parents, unlicensed relative caregivers and other suitable persons with placement of children in CA or Tribal custody. Caregivers should be encouraged to access respite care services in emergent situations and to prevent disruption of the child from their home.

Service Definition

1. Respite care service pursuant to this section (4510) is the temporary, time limited relief for substitute parenting or caregiving of a child. Respite care can be arranged in advance or on an emergency basis.

2. Respite care services for licensed caregivers, are intended to meet the following needs:
 1. To offer relief from parenting and caregiving responsibilities;
 2. To allow the caregiver personal time away from home;
 3. To provide substitute care in the absence of the caregiver;
 4. To provide opportunities to attend overnight training.
 5. To allow caregivers access to substitute caregiving to meet emergent situations for the caregiver;
 6. To prevent placement disruption.
3. Respite care services for unlicensed relative caregivers or other suitable persons (See Practices and Procedures Guide Section 4261) are intended to meet the needs of children and families in emergency situations and when the placement is at risk of disruption.
4. Payment for respite services is not available to individuals who reside or live in the caregiver's residence. Respite services may be provided by a relative of the child or caregiver, only when the respite care provider resides outside the child's current placement.
5. Respite care that is provided outside the child's caregiver's home must be provided by individuals who are licensed foster parents or licensed child care providers.
6. Unlicensed respite providers can provide paid respite services only in the child's caregiver's home. Unlicensed respite providers must (1) successfully complete a FamLink background clearance and Washington State Criminal check and (2) meet the standards identified in WAC 388-148-1320. Background checks for unlicensed respite providers providing respite in licensed foster homes will be completed by Division of Licensed Resources (DLR) staff, or in the case of respite services for unlicensed relative caregivers, background checks will be completed by the assigned CA social worker.
7. The social worker or licensor will verify that the respite provider has experience and/or training to deal with the particular special needs of the child in care such as dealing with children who are medically fragile, children who have been sexually and/or physically aggressive or assaultive.
8. Licensed child care providers may be used to provide respite care services for respite that is less than 24-hour duration. Respite payment to licensed child care providers is paid at the regional child care rates using the appropriate SSPS respite payment code. SSPS child care codes in the 2800 series are not used to authorize respite payment.
9. Licensed providers for respite service must not exceed their licensed capacity and must meet Minimum Licensing Requirements (MLRs) while providing respite.
10. Licensed caregivers using paid respite services, may not provide respite to other children (paid or exchange), during the period of paid respite.

11. Child-specific respite care plans are an element of the child's case plan. As appropriate, the need for continued respite service is reviewed at service re-authorization and/or during multidisciplinary staffings.
12. Respite care payments remain the fiscal responsibility of the originating region and office during courtesy supervision activities.

Respite Care Category Descriptions

1. **Retention Respite** provides licensed CA caregivers, licensed Tribal foster parents, and licensed Private Child-Placing Agency foster parents providing care for CA-placed children, with regular "time off" from the demands of caregiving responsibilities. Retention Respite guidelines are:
 1. Retention respite is intended to provide regular, monthly breaks from the demands of foster parenting and can also be used to meet emergent needs of licensed caregivers.
 2. Retention respite is awarded on a monthly basis per CA, Tribal, or Private Agency foster home caring for CA children.
 3. Retention respite is earned by eligible licensed caregivers at a rate of two (2) days per month.
 4. Retention respite is authorized in daily units only.
 5. The licensed caregiver home may accumulate or 'bank' a maximum of fourteen (14) days of retention respite days to be used at one time. Licensed caregivers should be encouraged to use retention respite as it is earned.
 6. Newly licensed caregivers will have a 30-day waiting period from the first eligible child placement before accruing retention respite.
 7. A licensed caregiver must provide foster care to one or more children at least twenty (20) days in a month to earn retention respite for that month.
 8. When a day of retention respite is authorized, respite is normally paid for each eligible foster child in the home, regardless of how long the child has been in placement in the home. However, a licensed caregiver can elect to use retention respite for only one child, even though more than one child is in the placement. Whether retention respite is used to meet the needs of one or more children, the time used will be deducted from accrued retention respite days.
 9. Licensed caregivers and social workers should be aware of pending respite plans in the caregiver's home when a child is placed. Efforts should be made to avoid changes in caretakers for a child shortly after placement.
 10. The respite provider must have experience and/or training to deal with the particular special needs of the child in care such as dealing with children who are medically fragile or children who have been sexually and/or physically aggressive or assaultive.

11. Regions will develop a process to authorize and monitor retention respite eligibility and utilization for CA foster homes.
 12. Tribal and Private Agencies shall monitor retention respite eligibility and utilization for their licensed homes, and will coordinate with CA regional management to develop a process to access and report retention respite usage.
2. **Child-Specific Respite (CSR)** provides unlicensed relative caregivers, other suitable persons, licensed CA caregivers, licensed Tribal foster parents, and licensed Private Child-Placing Agency foster parents providing care for children placed by CA, with the opportunity for relief from the caregiving responsibilities that are linked to the medical, behavioral or special needs of an individual child. The CSR guidelines are:
1. CSR is authorized on a case-by-case basis consistent with the written service plan for the child.
 2. CSR is authorized in half-day or daily increments. Half-day will be authorized for respite services 0 - 5 hours and daily respite will be authorized for respite services greater than 5 hours.
 3. CSR is part of a child's unique service plan. The need for continued service is reviewed at service re-authorization and during multidisciplinary staffing.
 4. CSR for more than 1 week must have Area Administrator approval.
 5. CSR may be discontinued based on an updated assessment of the needs of the child.
 6. In calculating CSR, the worker should consider the availability of relief from caregiving responsibilities provided through retention respite, school, other relatives, family time and sibling and relative visitation schedules, etc.
3. **Exchange Respite** is the relief from parenting responsibilities, which is negotiated and arranged between licensed caregivers and does not include payment of CA funds. Exchange respite guidelines are:
1. Licensed caregivers must remain within their licensing requirements (i.e. capacity, age, gender, etc.).
 2. Licensed caregivers must notify the child's social worker(s) of exchange respite services prior to the respite occurring.
 3. The social worker will verify that there are no licensing complaints pending which would preclude the respite provider from caring for the child.
 4. The social worker will inform the respite provider of any special needs of the child, supervision requirements and safety issues prior to initiating respite.

Procedures for Access

1. Retention Respite is authorized through SSPS by the regional designee responsible for monitoring the accrual and utilization of retention respite for foster families.
2. The assigned social worker for each child in a licensed home shall be notified that retention respite is being authorized.
3. Child-Specific Respite (CSR) is authorized through SSPS by the assigned social worker for the child.
4. For unlicensed relative caregivers and other suitable persons, the assigned social worker shall explore other family support options prior to requesting respite services.

Respite Care Payment

1. Child-Specific Respite (CSR) services, from 0 - 5 hours will be reimbursed at the half-day rate posted in the SSPS Manual.
2. CSR services more than 5 hours will be reimbursed at the daily rate posted in the SSPS Manual.
3. Retention respite is authorized in daily units only and reimbursed at the daily rate posted in the SSPS Manual.

Respite Care Rates

1. Respite rates for licensed CA relative and foster homes, licensed Tribal foster homes, and licensed Private Child-Placing Agency foster homes providing care for CA-placed children are determined by the child's assessed foster care rate level and are listed in the SSPS manual. Exceptions to the maximum respite care rate may be authorized only with administrative approval.
2. Respite rates for unlicensed relative caregivers or other suitable persons would be authorized at the Basic Respite rate listed in the SSPS manual for children in level 1 or 2 foster care.
3. For unlicensed relative caregivers or other suitable persons, respite rates above the respite rate for a child in level 1 or 2 foster care requires the completion of an Exception request (DSHS form 05-210). The exception request should include an assessment of the supervision needs of the child, behavioral, medical, developmental and social needs of the child, and any special needs that would indicate a higher rate, The exception request will require supervisory and area administrator approval.
4. Respite for unlicensed relative caregivers or other suitable persons may be authorized for up to 7 days per month. Any respite beyond the 7 days will require area administrator approval.
5. Payment for respite provided by licensed child care facilities is paid at the Region's established child care rate, using SSPS 3220 or 3221 payment codes. SSPS chapter 2800 Child Care payment codes are not used to authorize respite payment.

6. Regional management may establish payment rates below the maximum rate listed in the SSPS Manual.

4517. Health Care Services for Children Placed in Out-of-Home Care

4517. Health Care Services for Children Placed in Out-of-Home Care sarah.sanchez Tue, 08/28/2018 - 11:34

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Vickie Ybarra, Assistant Secretary of Partnership, Prevention, and Services Division

Purpose

This policy provides guidance on verifying children and youth in out-of-home placement receive routine and necessary health care to meet their health and well-being needs, including, but not limited to:

- Initial Health Screens to identify and address emergent medical needs at the time of placement.
- Required Early and Periodic Screening, Diagnosis and Treatment (EPSDT) visits.
- Immunizations.
- Mental health services.
- Substance Use Disorder (SUD) services.
- Dental examinations.

Scope

This policy applies to DCYF child welfare employees.

Laws

[RCW 9.02.110](#) Right to have and provide

[Chapter 13.34 RCW](#) Juvenile Court Act-Dependency and Termination of Parent-Child Relationship

[RCW 13.34.060](#) Shelter care-Placement-Custody-Duties of parties

[RCW 13.34.069](#) Shelter care-Order and authorizations of health care and education records

[RCW 13.34.315](#) Health care-Evaluation and treatment

[RCW 74.14A.050](#) Identification of children in a state-assisted support system-Program development for long-term care-Foster care caseload-Emancipation of minors study

[42 CRR Part 441\(B\)](#) Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) of Individuals Under Age 21

Policy

1. Caseworkers must:
 1. Prior to the shelter care hearing:
 1. Inform parents or guardians, before authorizing evaluations and treatment for children's and youth's routine and necessary health care appointments, i.e., Initial Health Screens, physical or emotional health, emergency care, and dental, unless they cannot be reached.
 2. Provide parents and guardians the opportunity to attend any health care appointments, unless prohibited by a court order.
 2. Throughout the life of the case:
 1. Make reasonable efforts to allow parents and guardians an opportunity to attend health care appointments, unless prohibited by a court order.
 2. Identify and address the children's and youth's health care needs and appointments, including, but not limited to their:
 1. Physical health.
 2. Mental health. Youth age 13 and older:
 1. May obtain mental health treatment on their own.
 2. Must provide consent for DCYF to access their mental health records.
 3. Substance use disorder (SUD) treatment:
 1. Youth 13 and older may obtain SUD treatment on their own.
 2. Children and youth of any age must provide consent for DCYF to access their SUD records.
 4. Dental care
 5. Treatment recommendations
2. Child health and education tracking (CHET) screeners must follow, the:
 1. CHET handbook for notification to caseworkers of the child's or youth's scheduled health appointments
 2. [CHET](#) policy for the required EPSDT visits for children and youth when they are placed in out-of-home care.

Procedures

1. Caseworkers must complete the following for children and youth when they are placed in out-of-home care:
 1. Inform parents and guardians:
 1. At the time of removal, they:
 1. Will be notified of health care appointments scheduled for their children or youth prior to the shelter care hearing.
 2. May attend appointments until the shelter care hearing, unless prohibited by a court order.
 2. How they may attend and participate in health care appointments throughout the life of the case, unless it is prohibited by a court order or law enforcement investigation, or it is unsafe.
 3. Of the dates, times, and locations of health care appointments, by:
 1. Phone
 2. Email
 3. Mail, when they cannot be reached through phone or email.
 2. Consult with the assistant attorney general (AAG) if there are safety concerns related to the parent or guardian attending health care appointments.
 3. Obtain physical health, mental health, dental, and immunization history from their:
 1. Parents or guardians using the [Family Genetic and Medical History DCYF 13-041](#) form.
 2. Health care providers and document following Procedures Section 5.
 4. Follow the DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy when children and youth are seeking gender-affirming medical services.
 5. Identify health care needs. If they have:
 1. An emergent health care need, verify they are taken to urgent care or the emergency department immediately to be evaluated.
 2. A non-emergent illness, chronic health issue, injury, or health concern verify they are taken to their health care provider for an Initial Health Screen to be evaluated, no later than five calendar days of entering out-of-home care. These children and youth must still have their required EPSDT within 30 days to complete the CHET requirement.
 3. No known medical needs, coordinate with CHET screeners to schedule the required EPSDT as soon as possible.
 6. Obtain consent from:

1. Parents or guardians using the [Consent DCYF 14-012](#) form for children or youth that are not legally-free and under age:
 1. 13, for [psychotropic medications](#).
 2. 18, for:
 1. Medical treatment requiring surgery, except for surgeries related to abortions as no consent is required.
 2. Anesthesia.
 2. Court order if the parents or guardians are not:
 1. Available to provide consent.
 2. In agreement with the health care provider's recommendation and unwilling to provide consent.
 7. Follow the [Consent Decision Tree DCYF CWP_0006](#) publication to obtain or release children's and youth's protected health information.
 8. Collaborate with health care providers, parents or guardians, and caregivers to verify health care needs are followed up on and met.
 9. Provide caregivers with their known health care information, per the [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) policy.
 10. Verify they are current on their immunizations. If they are not, caseworkers must:
 1. Coordinate with the children's or youth's caregiver and health care provider to get current with their vaccinations.
 2. Complete the following if the parents or guardians do not want them immunized:
 1. Refer them to [RCW 28A.210.090](#).
 2. Contact the AAG to discuss whether a court order is needed.
2. General Medical Appointments
- Caseworkers must:
1. Follow the [Out-of-Home Placements](#) policy for documentation requirements for emergent and non-emergent placements of children and youth to initiate:
 1. The CHET process.
 2. Apple Health Core Connections (AHCC) or Fee-For-Service (FFS) Medicaid coverage.

2. Collaborate with CHET to verify the required EPSDT visit is completed within 30 calendar days of being placed in out-of-home care, per the CHET policy.
 3. Verify children or youth:
 1. Participate in their ongoing EPSDT visits, per the [EPSDT schedule](#).
 2. Obtain medical treatment as needed and that all recommended treatments and medical appointments occur.
 4. Obtain medical records or visit summaries.
 5. Provide parents, guardians, and caregivers the medical records or visit summaries.
 6. Assist parents, guardians, and caregivers with:
 1. Obtaining recommended services for the children and youth.
 2. Utilizing the Medicaid managed care plan for children and youth as needed to:
 1. Locate providers.
 2. Receive care coordination related to physical or behavioral health needs.
 7. Follow the recommendations from the [Ongoing Mental Health \(OMH\) Screening Report DCYF 15-434](#) form. OMH is a follow up screening to the CHET that occurs for eligible children and youth that have been in out-of-home care for at least six months.
3. Dental Examinations
- Caseworkers must complete the following for children and youth in out-of-home care:
1. Coordinate with CHET screeners to verify dental appointments are scheduled within the first 30 calendar days of out-of-home care. The initial exam must occur no later than their 60th day of placement, unless CHET screeners obtain dental records showing they had their routine dental exam within six months of their out-of-home placement, then their next dental appointment may be scheduled six months from their last dental exam.
 2. Verify they receive dental visits every six months beginning at one year of age or at the eruption of their first tooth, whichever comes first.
 3. Obtain dental exam results following each appointment and follow recommended treatments.
 4. Provide parents, guardians, and caregivers dental examination results and assist them in obtaining recommended services for the children and youth.
 5. Follow the Meeting Dental Treatment Needs for Children and Youth in Out-of-Home Placement document.

4. Consent for other than Routine or Necessary Medical Treatment

Caseworkers must complete the following for children and youth that are not legally-free:

1. Assist health care providers in obtaining a signed consent from the parents or guardians for medical needs other than routine or necessary emergency care. Including, but not limited to:
 1. Surgery, except for surgeries related to abortions.
 2. Anesthesia.
 3. Medical procedures.
2. When parents or guardians are not available or unwilling to provide consent:
 1. Obtain a statement from the health care provider detailing the risks and benefits of the procedure or anesthesia.
 2. Request a court hearing.
 3. Provide the court the health care provider's statement, for the court to determine whether the procedure or anesthesia will occur.

5. Documentation

1. Caseworkers must:
 1. Follow the [Documentation](#) policy for documentation timeframe requirements.
 2. Document:
 1. Efforts made to inform the parents or guardians of health care appointments in case notes.
 2. The following for children and youth on the Health/Mental Health Pages in FamLink and in the [court report](#):
 1. Dates of all physical health, mental health, and dental appointments
 2. Physical health, mental health, and dental conditions or diagnoses.
 3. Results of EPSDT visits and other physical health, mental health, and dental appointments.
 3. Verify the CHET and EPSDT information is documented in a [Shared Planning Meeting](#).
 4. Upload received physical health, mental health, and dental records into FamLink.

2. CHET screeners must:

1. Document the EPSDT visit that occurs within the first 30 days of out-of-home placement on the Health/Mental Health Pages in FamLink.
2. Upload the EPSDT visit summary into FamLink.

Forms

[Consent DCYF 14-012](#)

[Family Genetic and Medical History DCYF 13-041](#)

Foster Care Initial Health Screen DCYF 13-843 (located on the DCYF forms repository)

[Ongoing Mental Health \(OMH\) Screening Report DCYF 15-434](#)

Resources

[Access to Baby and Child Dentistry \(ABCD\)](#)

Apple Health Core Connections (AHCC) will help you connect with appropriate providers to meet the child or youth's physical and behavioral health care needs:

- Phone: 1.844.354.9876, then press 1 and enter extension 6102194 (8am-5pm M-F) or
- Email AHCCTeam@coordinatedcarehealth.com (anytime)
- AHCC 24 hour Nurse Line 1.844.354.9876, dial 2 for Member Services and listen for the Nurse Advice option

CHET handbook (located on the DCYF intranet under Programs and CHET)

[Child Health and Education tracking \(CHET\) policy](#)

[Consent Decision Tree DCYF CWP_0006 publication](#)

[Court Report policy](#)

DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy

[Documentation policy](#)

Health Care Authority (HCA) Foster Care Medical Team (FCMT) 1.800.562.3022 or

Fostering Well-Being Unit 360.725.2626 or fwb@dshs.wa.gov

Meeting Dental Treatment Needs for Children and Youth in Out-of-Home Placement (located on the DCYF intranet under Programs and Health Care Services & Programs)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

Ongoing of Mental Health

[Out-of-Home Placements policy](#)

[Psychotropic Medication Management policy](#)

[Shared Planning Meeting policy](#)

[WAC 182-534-0100 EPSDT](#)

45171. Medically Fragile Children

45171. Medically Fragile Children sarah.sanchez Tue, 08/28/2018 - 11:35

Purpose

Children in out-of-home care who meet the definition of medically fragile will be identified. Develop plans with caregivers of medically fragile children to identify necessary supports to meet the day-to-day needs of the child (including respite and emergency situations).

Policy

1. Children who meet the following criteria are identified as medically fragile:
 1. Child has medical conditions that require the availability of 24-hour skilled care from a health care professional or specially trained family or foster family member.
 2. These conditions may be present all the time or frequently occurring.
 3. If the technology, support, and services provided to a medically fragile child are interrupted or denied, the child may, without immediate health care intervention, experience death.
2. When there is an indication that a child is medically fragile, refer the child to the ADSA Fostering Well-Being Care Coordination Unit for consultation and determination of the child's need for services.
3. All children identified as medically fragile and in out-of-home care must have an identified Primary Health Care Provider.
4. Out-of-home caregivers must be provided a [Caregiver Support Plan](#) that addresses training and support needs related to caring for a medically fragile child.
5. All children identified as medically fragile must be documented in the FamLink Special Needs page.

Procedures

1. Complete a referral by emailing the Fostering Well-Being Care Coordination Unit at: fwb@dshs.wa.gov.
2. When a medically fragile child is discharged from a hospital:
 1. Participate in a discharge planning meeting with the identified caregiver

2. Coordinate with hospital or Primary Health Care Provider about the discharge plan to:
 1. Assess appropriate placement,
 2. Identify resources and training to support the care of the child,
 3. Obtain a copy of the child's treatment plan or identify the on-going plan for treatment and examinations, and
 4. Refer the medically fragile child to the Fostering Well-Being Care Coordination Unit.
3. When the assigned social worker has received confirmation from the Fostering Well-Being Care Coordination Unit that the child meets the medically fragile criteria:
 1. Ensure any recommendations made by medical providers and in the Care Coordination Summary are followed-up on to address the ongoing medical needs of the child.
 2. Document the child as "medically fragile" in the Special Needs page in FamLink.
4. Develop a [Caregiver Support Plan](#) for initial and any subsequent placements with a caregiver. At a minimum, the plan must address:
 1. Caregiver training specific to the child's needs,
 2. Additional supports to meet the child's needs, e.g. Medicaid Personal Care,
 3. Support for the caregiver to have alternate care for the child if needed, e.g. planned and emergency respite care, and
 4. Steps to take in an emergency situation when a caregiver is unable to care for the child.
5. NOTE: Children placed in Behavioral Rehabilitation Services group or foster homes, skilled nursing facilities, on a trial return home, or who receive case management services from a Child Placing Agency do not require Caregiver Support Plans.
6. Determine any additional support and training needs during the initial [Social Worker Monthly Health and Safety Visit](#) within the first 7 days of placement.
7. Review the Caregiver Support Plan with the caregiver at each [Social Worker Monthly Health and Safety Visit](#) to determine if any changes to the plan are needed.
8. Upload the Caregiver Support Plan signed by the caregiver into FamLink. Document the following in FamLink within 10 calendar days of receiving information:
 1. Child's medically fragile status on the FamLink Special Needs page per [Medically Fragile Documentation](#), and

2. Child's medical conditions/information in the Health/Mental Health page per [Health Care Services for Children in Out-of-Home Care policy](#)

See Also

- [Health Care Services for Children in Out-of-Home Care](#)
- Social Worker Monthly Health and Safety Visit

Resources

- [Medically Fragile Documentation](#)
- Fostering Well-Being Care Coordinator Referral Form (located in the Forms repository on the DCYF intranet)

45172. End-of-Life Care

45172. End-of-Life Care sarah.sanchez Tue, 08/28/2018 - 11:35

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Original Date: October 31, 2016

Revised Date: July 1, 2024

Policy Review: July 31, 2028

Purpose

To provide guidance when a child's medical provider makes a recommendation to begin making end-of-life decisions for a dependent child in out-of-home care. This policy does not apply to a child in tribal custody or youth in Extended Foster Care.

Definitions

Do-not-resuscitate (DNR) order is a medical order written by a doctor. It instructs health care providers not to perform cardiopulmonary resuscitation (CPR) if a patient's breathing stops or if the patient's heart stops beating. A DNR order is created or set up before an emergency occurs and allows an individual to choose whether they want CPR in an emergency.

Hospice care is supportive care provided to people in the final stage of a terminal illness focusing on comfort, quality of life and being free of pain rather than a cure.

Scope

This policy applies to child welfare employees.

Laws

[RCW 74.13.031](#) Duties of the department, child welfare services and children's services advisory committee

Policy

1. When a child's medical provider makes a recommendation to begin making end-of-life decisions for hospice or the issuance of a DNR order caseworkers must:
 1. Immediately notify their supervisor and the regional medical consultant (RMC). The supervisor may notify the area administrator, as applicable. Notify the following individuals of the medical provider's recommendations:
 1. Child's parents and parent's attorney, if the child is not legally-free
 2. Assistant attorney general (AAG)
 3. Child's out-of-home caregiver
 4. Guardian Ad Litem (GAL)
 5. Child's attorney, if assigned
 2. Document efforts made to locate the parent in FamLink if the parent of the child cannot be located.
 3. Contact the child's tribe if there is [reason to know](#) a child is or may be an Indian child to determine their role in making end-of-life decisions.
 4. Conduct a [shared planning meeting](#) if any party to the case disagrees with the medical provider's recommendations
 5. Assist the child's family and caregivers to identify community-based services and supports that address grief and loss.
2. AAG consultation is required if organ donation is proposed.

Procedures

1. When conducting a shared planning meeting, the discussion must include what is in the best interest of the child and whether court approval is necessary to implement the recommendations.
 1. Invitees must include the following:
 1. Child's parents and parent's attorneys, if the child is not legally-free
 2. AAG
 3. GAL
 4. RMC
 5. Child's attorney, if assigned
 6. Out-of-home caregivers; even though they are not parties to the child's case.

2. Consult with the medical provider regarding how to involve the child and verify the child's wishes are represented at the shared planning meeting. This includes determining whether it is in the child's best interest and if they are physically able to participate in the meeting.
 3. If the medical provider determines the child is developmentally appropriate and physically able to participate, work with the child's medical provider to determine if the child wants to attend the meeting.
 4. If the child chooses to attend the meeting, decide to accommodate their needs as appropriate.
2. When court action is pursued to obtain approval of the medical provider's recommendations regarding the child's end-of-life care, the caseworker must:
1. Consult with AAG to determine appropriate steps for seeking court approval of the recommendations.
 2. Work with the RMC to obtain the following documentation and attach to the motion:
 1. A written statement from the medical provider who is recommending hospice care or the issuance of a DNR order. The statement from the provider must include statements from two additional medical providers qualified to assess the patient's condition indicating with reasonable medical judgment that the patient is an advanced stage of a terminal and incurable illness and is suffering severe permanent mental and physical deterioration;
 2. The child's medical history including the child's current condition, diagnosis and prognosis;
 3. Any supporting documentation provided by the medical provider to support their recommendation including that the recommendation is in compliance with the hospital's ethics protocol, if applicable;
 4. Parent's recommendation or concerns, if applicable (if child is not legally-free); and
 5. Child's opinion about their desire to enter into a DNR order if the child expressed an opinion. Include when, where and how the child made their wishes known. The child's wishes must also be documented in a case note.
 3. Provide the date and time of the court hearing to the:
 1. Child's parents and parent's attorney, if the child is not legally-free.
 2. Child if developmentally appropriate and physically able to participate.
 3. Child's attorney, if assigned
 4. Out-of-home caregivers

5. GAL

4. If the parent of the child cannot be located, document efforts made to locate the parent in FamLink.
3. When a child's medical professional recommends end-of-life care, the supervisor must:
 1. Inform their area administrator of the medical provider's recommendation;
 2. Confirm that the caseworker is consulting with the RMC;
 3. Verify with the caseworker that all parties to the case have been notified; and
 4. Verify the caseworker has identified and referred the family and caregivers to any needed support services addressing grief and loss.

Resources

Guidelines for Reasonable Efforts to Locate Children and/or Parents (located on DCYF intranet page)

http://kidshealth.org/parent/system/ill/bfs_hospice_care.html

[End of Life Care Notification and Shared Planning Meeting Table](#)

[Indian Child Welfare Reason to Know policy](#)

[Shared Planning Meetings policy](#)

4518. Substance Use Disorder Testing, Assessment and Treatment

4518. Substance Use Disorder Testing, Assessment and Treatment sarah.sanchez Tue, 08/28/2018 - 11:38

Approval: Ross Hunter, Secretary

Original Date: July 1, 1997

Revised Date: October 1, 2018

Policy Review: November 1, 2021

Purpose

To provide direction regarding substance use disorder assessment, testing, and treatment services.

Scope

This policy applies to Division of Children, Youth, and Families (DCYF) caseworkers.

Laws

[Public Law 115-123](#) Family First Prevention Act 2018

[RCW 26.44.195](#) Negligent treatment or maltreatment - Offer of services - Evidence of substance abuse

[RCW 26.44.170](#) Alleged child abuse or neglect - Use of alcohol or controlled substances as contributing factor

[RCW 71.12.670](#) Licensing, operation, inspection—Adoption of rules

Policy

The caseworker must:

1. Determine if the use of substances is an identified risk factor, contributes to alleged child abuse or neglect, or impacts child safety based on information gathered and documented in one or more of the following:
 1. [Structured Decision Making Risk Assessment \(SDMRA\)](#)
 2. [Child Protective Services Investigation](#)
 3. [Child Protective Services Family Assessment Response](#)
 4. [Early Periodic Screening Diagnostic and Treatment \(EPSDT\)](#)
 5. [Child Health and Education Tracking \(CHET\) Screening](#)
 6. [Comprehensive Family Evaluation \(CFE\)](#)
 7. Substance Abuse Wizard
2. If substance use is identified as a risk factor, is assessed to have contributed to child abuse or neglect, or impacts a child's safety:
 1. Develop a case plan in collaboration with the client.
 2. Initiate a comprehensive substance use disorder evaluation, within available resources, with a qualified chemical dependency professional. Include a completed signed [Consent Form DCYF 14-012](#). Substance use assessment or treatment agencies may also require clients to sign a consent form in order to disclose information to DCYF. To determine available resources:
 1. Obtain the client's insurance coverage information to determine available substance use disorder assessment and treatment resources. Refer adult clients without insurance or resources to the local DSHS Community Service Office (CSO) to determine their eligibility for state or federally funded assessment and treatment services.
 2. DCYF-funded services are to be used only when:

1. All other payment resources have been exhausted and the family has demonstrated that they do not have the financial resources or insurance to pay for the service.
 2. Funding is available to provide the service.
 3. A DCFS Administrative Approval Request DSHS form 05-210, has been completed and approved by the regional administrator or designee.
 4. Services are provided by a DCYF-contracted provider.
3. Arrange for substance testing by a DCYF drug testing contracted provider to facilitate decision-making and case planning when either the:
 1. Suspected use impacts child safety and the parent or caregiver is not already in substance use disorder treatment, or
 2. Testing is court ordered under a dependency action.
4. Authorize testing for substances by:
 1. Obtaining the required testing approvals as shown on the Drug and Alcohol Testing Guide located on the DCYF intranet.
 2. Submitting the online form to the contracted provider.
5. If substance use disorder treatment is recommended by the comprehensive substance use disorder evaluator, coordinate treatment planning with the provider.
6. A child in the placement and care authority of DCYF may be placed with their parent who is residing in a licensed residential treatment facility (RTF) for substance abuse. DCYF may pay the facility for the child's incidentals up to twelve months. When it has been determined that a child will be placed with their parent who is in a licensed RTF for substance abuse complete the following:
 1. Update the child's case plan to include the recommendation for placement with the parent in a licensed RTF for substance abuse.
 2. Update the parent's address in the Person Management page in FamLink to the licensed RTF for substance abuse they are residing in.
 3. Document in a case note the date the child is residing with the parent in a licensed residential treatment facility.
7. Refer a child in out-of-home care to a medical provider if the child's exposure to substances causes concern for the child's safety or health.
8. Refer a child to [Apple Health Core Connections \(AHCC\)](#) to initiate coordination of services and interventions to address any substance use disorder concerns for a child under age eighteen.

Forms

[Consent Form DCYF 14-012](#)

Resources

- [Substance Abuse and Mental Health Services Administration website](#)
- [Behavioral Health and Recovery - Substance Use Treatment Services](#)
- [Washington State Health Care Authority Substance Use Treatment](#)

4519. Concrete Goods

4519. Concrete Goods sarah.sanchez Tue, 08/28/2018 - 11:39

Original Date: May 1, 2014

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Vickie Ybarra, Secretary for Partnership, Prevention, and Services Division

Purpose

The purpose of this policy is to provide guidance on the use of concrete goods. Concrete goods are to assist children and families with goods or expenditures to support children's and youth's safety, reduce risk of abuse or neglect, prevent or support out-of-home placement, or facilitate safe reunification.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Policy

1. Caseworkers:
 1. Must:
 1. Provide concrete goods for children, youth, parents, guardians, relatives, and suitable persons that are in-home, placed in out-of-home care, or to remove barriers for a trial return home, when:
 1. Funding is available and approved.
 2. Purchases are made that are economical and reasonable.
 3. The goods or services meet the identified need to maintain safety, well-being, stability, or placement.
 2. Not use concrete goods for the following:

1. Items or services that may be paid through a DCYF service contract.
 2. As an ongoing means of support.
 3. For licensed placements, including relatives and suitable persons, unless it meets the criteria outlined in the [Concrete Goods Guide](#) document.
3. Obtain approval for:
 1. In and out-of-home concrete goods, for children or youth placed in-home, as follows:
 1. \$501 to \$1000 must be approved by supervisors.
 2. \$1001 to \$2000 must be approved by area administrators.
 3. \$2001 or more must be approved by regional administrators or designees.
 2. Additional clothing vouchers for children or youth up to \$400 per year when a child or youth demonstrates an exceptional clothing need, per the [Concrete Goods Guide](#) document.
2. May approve:
 1. Purchases of concrete goods up to \$500.
 2. Clothing vouchers for up to \$400 when children are initially placed (regardless of placement type, in-home or out-of-home), at case closure or reopening, and when a child enters or exits a trial return home.
 3. LD workers may purchase concrete goods for relatives and suitable persons for goods needed to either:
 1. Support their home study completion.
 2. Assist in meeting licensing requirements, prior to becoming licensed or ongoing.
 4. Caseworkers and LD workers must follow these when accessing gift and stored value cards:
 1. DCYF Administrative 1.01.05 Gift Cards and Stored Value Cards policy.
 2. [Concrete Goods Guide](#) document.

Procedures

1. Using Concrete Goods for Parents, Guardians, Relatives, and Suitable Persons
 1. Caseworkers must:
 1. Use concrete goods for children or youth placed with their:
 1. Parents or guardians to:

1. Maintain safety
 2. Reduce risk
 3. Promote their well-being
 4. Prevent out-of-home placement
 5. Support [family time](#)
 6. Remove barriers for [trial return homes](#)
2. Relatives and suitable persons who are unlicensed or have a pending foster care license to:
 1. Eliminate barriers to placement by providing goods necessary to meet the children's and youth's needs.
 2. Purchase goods required for home study or licensing approval. Purchases may be completed by caseworkers or LD workers.
 3. Support or maintain placement stability through available services.
2. Collaborate with parents or guardians, relatives, and suitable persons to assess and identify the goods or services needed.
 3. Follow the [Concrete Goods Guide](#) document to verify the goods needed may be purchased.
 4. Obtain a signed [Consent DCYF 14-012](#) form from the parents or guardians, or relatives or suitable persons allowing DCYF to release their address to Amazon to deliver goods directly to their home.
 5. Verify parents or guardians, relatives, and suitable persons:
 1. Are willing and able to cooperate with the services.
 2. Have a plan that will continue to maintain the support provided temporarily by the concrete goods.
 6. Request the identified goods or services by:
 1. Completing the Service Referral DCYF 10-492 in FamLink.
 2. Obtaining the appropriate level of approval based on the total amount of the goods or services to be purchased.
 3. Emailing the Service Referral DCYF 10-492 to the designated child welfare (CW) administrative support workers to purchase the goods.

2. CW administrative support workers must follow the [Concrete Goods Guide](#) document to process and order the goods approved for purchase.
3. LD workers must:
 1. Collaborate with the relatives and suitable persons to assess and identify the goods needed to support their home study completion or ongoing licensing requirements.
 2. Obtain a signed [Authorization and Consent to Share Records DCYF 15-824](#) form from the relatives or suitable persons allowing DCYF to release their address to Amazon to deliver goods directly to them.
 3. Complete their section of the Support Funds DCYF 06-135 form to request a concrete goods purchase.
 4. Send the Support Funds DCYF 06-135 form to the designated LD administrative support workers.
4. LD Administrative support workers must complete the following when they receive a Support Funds DCYF 06-135 form:
 1. Complete their section of the Support Funds DCYF 06-135 form in consultation with the LD supervisor.
 2. Obtain signatures as required on the form based on the total amount of the purchase.
 3. Order the goods that have been approved for purchase.
 4. Document the purchase order number on the online retailer's website for payment reconciliation.
 5. Send the following to [DCYF Finance](#):
 1. Completed Support Funds DCYF 06-135 form.
 2. Authorization and Consent to Share Records DCYF 15-824 form.
 3. Receipt for purchase.
 4. Confirmation of delivery.

2. Documentation

1. Caseworkers must document the following in FamLink case notes, how the concrete goods:
 1. Maintained or increased the children's or youth's safety.
 2. Promote the children's or youth's well-being.
 3. Stabilize placement or prevent out-of-home placement.

4. Supported [family time](#).
 5. Promoted the plan for reunification.
2. LD workers must document the following in the licensing provider portal, how the concrete goods for relatives or suitable persons:
 1. Supported and maintained placement.
 2. Assisted in:
 1. Completing their:
 1. Home study
 2. Foster care license
 2. Maintaining their foster care license.

Forms

[Authorization and Consent to Share Records DCYF 15-824](#)

[Consent DCYF 14-012](#)

Service Referral DCYF 10-492 (located in the Forms repository on the DCYF intranet)

Support Funds DCYF 06-135 (located in the Forms repository on the DCYF intranet)

Resources

Amazon E-Voucher DCYF document (located on the DCYF intranet under Programs, Intake and CPS, and Basic Needs)

[Concrete Goods Guide](#)

[Community Service Office Basic Food, Cash, Medical](#)

DCYF Administrative 1.01.05 Gift Cards and Stored Value Cards policy.

[In-Home Goods Provider Guide](#)

[Office Inventory and Direct Shipping](#)

[Technology for Virtual Services-Tip Sheet](#)

4520. HIV/AIDS Support Services

4520. HIV/AIDS Support Services sarah.sanchez Tue, 08/28/2018 - 11:53

Service Definition

DCFS provides coordination and information and referral within each region for locating appropriate medical and support services for clients with HIV or AIDS and for assisting social workers with administrative policy and law specific to casework with clients who may be HIV positive.

Eligibility

Clients who are at risk of becoming or who are HIV positive are eligible for the service.

Procedures for Access

1. The social worker consults with their regional AIDS coordinator regarding HIV statute and policy whenever an issue surfaces that involves HIV.
2. Specific confidentiality statutes apply regarding sharing information about HIV status. Testing for HIV also is governed by specific statute. Refer to 8010. Bloodborne Pathogens Implementation Practices and Procedures, for state policy and guidelines on blood borne pathogens.
3. See [4313. Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) for requirements to disclose information regarding HIV infection and sexually transmitted diseases to the residential care provider for the child who is less than 14 years of age.

4521. Psychological/Psychiatric Services

4521. Psychological/Psychiatric Services sarah.sanchez Tue, 08/28/2018 - 11:54

Service Definition

1. Services to provide psychiatric and psychological evaluations and treatment to implement a permanency plan, to prevent CA/N, to prevent out-of-home placement, or to make placement/permanency planning decisions. See section 4539, below, for information regarding Inpatient Mental Health Treatment for Children. In general, there are two main types of psychological/psychiatric funding sources available for utilization by DCFS: Title XIX/Healthy Kids (EPSDT) services through the Regional Support Networks (RSN) and DCFS direct funded services.
2. The RSNs in the state are the conduit for mental health services for recipients of Medicaid. Serving as Prepaid Health Plans, these networks receive and distribute all state and federal mental health dollars to the community mental health centers, institutions, and other certified mental health providers.

Eligibility

1. Under Healthy Kids Services, Medicaid-eligible children and their families are provided specific mental health evaluation and treatment. For eligible children under 19 years of age, mental health services must be determined to be medically necessary as a result of a Healthy Kids/EPSDT health screen.
2. Medicaid-funded mental health services must be the first choice for treatment. DCFS-funded services are to be used only when all other payment resources have been exhausted. Families or children are eligible for DCFS direct-funded psychological/psychiatric services under the following circumstances:
 1. Parents or children with an active CPS, FRS, or CWS case.

2. All RSN resources have been exhausted or the child/parent is not eligible to receive the service under a Healthy Kids plan.
3. The child/family has demonstrated it doesn't have the financial resources or insurance to pay for the service.
4. Funding is available to provide the service.
5. Services are only available from DCFS-contracted providers.

Procedures for Access

1. Unless the child has already been referred, the caseworker will ensure a mental health referral is made within five working days of receiving notification from the CHET screening specialist that a mental health need has been identified.
2. Children and families can access RSN funding by presenting at any mental health provider which is certified to accept Medicaid. For Healthy Kids services, the following steps shall be taken:
 1. The caseworker refers Medicaid-eligible children and families for a Healthy Kids screening utilizing regional procedures.
 2. If the child does not have a current Healthy Kids/EPSTD examination, the caseworker must schedule a Healthy Kids examination to be completed within 30 days.
 3. For situations involving inpatient treatment, see section 4539, below.
 4. DCFS caseworkers supply mental health screeners and providers with the information they request to make screening decisions and to provide mental health services.
3. For DCFS direct-funded psychological/psychiatric services, the following steps shall be taken:
 1. The caseworker determines that Healthy Kids services are not available and that funding is not available for the service through other sources listed below.
 2. The caseworker authorizes psychiatric/psychological services utilizing the authorization guidelines in paragraph A above and regional procedure.
4. The caseworker authorizes psychological/psychiatric procedures using current SSPS codes and sends a copy of the authorization to the provider.
5. The caseworker requests a final report and terminates payment.

Other Sources

1. If the need for the service is primarily to support the child's ability to stay in school, funds for evaluations/treatment may be available through the local school district. The

caseworker may contact the child's school, or have the child's family contact the school, and make a referral to determine if the child is eligible for special education services.

2. DDD may provide psychiatric/psychological evaluations and/or behavior management training or treatment for developmentally disabled children living in their own homes or parents.
3. The JRA or local juvenile probation offices may provide similar services for delinquent children.
4. Division of Vocational Rehabilitation (DVR), General Assistance-Unemployable (GA-U), and SSI evaluations may be a resource. If the child has a current or recent SSI application, the caseworker shall ask the SSI facilitator to access the SSI file for current medical or psychological assessments.

4522. Income Maintenance

4522. Income Maintenance sarah.sanchez Tue, 08/28/2018 - 11:54

Service Definition

Services are to provide financial assistance to meet the basic needs of a family for housing, utilities, food, clothing, etc.

Eligibility

1. DCFS refers individuals and families to Economic and Medical Field Services' (EMFS) CSOs for determination of eligibility for specific income maintenance programs such as Temporary Assistance to Needy Families (TANF) or GA-U.
2. Eligibility for some federally funded financial maintenance programs, such as Social Security disability and SSI, are determined by the federal Social Security Administration.

Procedures for Access

1. As part of initial and on-going family assessment, the social worker assesses the family's ability to maintain financially to meet basic needs. When it appears that the family may have little or no income, the social worker assesses the reasons contributing to the situation (e.g. injury, lay-off, divorce, lack of needed job skills) and refers the family to the CSO or other appropriate agencies for determination of eligibility for benefits.
2. When a child who may be eligible for federal disability payments is in the home of their parent or guardian, the social worker refers the parent to their local Social Security office for information on applying for benefits. SSI facilitators in each region can provide technical assistance to a family/child needing to make application for SSI or survivor's benefits.
3. When a child is in out-of-home care and it appears that the child may be eligible for federal disability benefits, the social worker makes a referral to the Social Security disability specialist in the DCFS regional office to begin the process of determining benefits.

4. The social worker completes the federal funding forms and provides them to the federal funding specialist, who determines fund source for children in out-of-home care.

Other Sources

1. Clients whose jobs have ended may be eligible for unemployment benefits.
2. The Division of Child Support (DCS), formerly the Office of Support Enforcement, will assist in the collection of child support with parents who are due court-ordered child support and have been unable to collect it.
3. Some clients injured in the course of employment may be eligible for financial assistance through the Department of Labor and Industries (L&I).
4. Many communities and non-profit charitable organizations maintain private, non-profit sources for food and clothing for families and individuals in emergency need. Schools and churches may also maintain food and clothing banks. The Community Public Health and Safety Networks may contribute to this resource.
5. While not providing income maintenance, private non-profit credit counseling services are available in many communities to assist individuals in managing debt.
6. Food and formula supplements are available for some low-income women with infants through the WIC program to help promote healthy infant development.
7. Families and children of U.S. military service veterans may be eligible for veteran's benefits provided through the Veteran's Administration.

4524. Educational And Job Training Services

4524. Educational And Job Training Services sarah.sanchez Tue, 08/28/2018 - 11:55

Service Definition

Services to assist individuals to complete their education or to locate employment or training that would qualify them for employment. DCFS direct services consist of information and referral to state, federal, and community funded programs. DCFS contracts regionally with community agencies to provide educational and job counseling services for youth emancipating from foster care. See the ILS program description.

Eligibility

DCFS clients who need education, job training, or employment are eligible.

Procedures for Access

1. The social worker refers adults who need to complete their high school diploma or General Equivalency Development (GED) certificate to the school district nearest the client's home for information regarding programs available in the local community.
2. The social worker refers youth emancipating from foster care to the regionally contracted ILS program for career and job counseling utilizing regionally established procedures.

3. Adults or youth who are seeking employment may be referred to the Employment Security Department, Job Service Center office, for listings of job openings and other services available to help find employment.

Other Sources

1. Services are available through colleges, universities, and vocational institutes to provide career counseling, job training, and education for individuals. Financial Aid Offices and Career Counseling Offices in those institutions provide information and assistance.
2. Private Industry Councils (PIC) in communities coordinate and administer job training programs available from the federal government. The Employment Security Department provides information about the availability of such programs. Information on other federal programs such as Job Corps, providing training for young adults, and Summer Youth Employment Programs for low-income youth can also be accessed through the Employment Security Department.
3. DVR and L&I provide services to train workers who have had injuries or disabilities so that they can regain employment.

4525. Administrative Approvals for Child Welfare

4525. Administrative Approvals for Child Welfare sarah.sanchez Tue, 08/28/2018 - 11:56

Approval: Jennifer Strus, Assistant Secretary

Original Date: January 31, 2016

Policy Review: January 31, 2020

Scope

This policy applies to all Children's Administration (CA) staff.

Purpose

DCFS administrative approvals are requested when a policy indicates an administrative approval is required, exception to a policy is needed, or to provide reimbursement /supports to a licensed caregiver beyond what the foster care rate assessment or policy allows.

Policy

1. Approval requests are only for exceptions to a policy, exceptional cost foster care reimbursement, or when a policy requires an administrative approval.
2. Approval requests must be submitted on [DCFS Administrative Approval Request form DCYF 05-210](#).
3. Exceptional cost foster care is only approved when the foster care rate assessment is completed and the support or supervision for the child needed goes beyond what the rate assessment can provide.

4. Exceptional cost foster care requests must be submitted on a [DCFS Administrative Approval Request form DCYF 05-210](#).
5. Exceptional Cost Foster Care Plans (ECP):
 1. Are developed for placements intended to be permanent or beyond thirty days when a child in out-of-home care has extreme physical, medical, emotional or intellectual impairments, and the licensed caregivers are providing intensive supervision or extra supports to meet the child's exceptional needs.
 2. Must only be considered when all other sources of financial or other supports have been explored to meet the special needs of the child.
 3. Must be reviewed by the assigned CA caseworker and supervisor at the time the foster care rate assessment is completed. Approval by the regional administrator or designee is required to initiate or maintain the plan and payment.
 4. May be backdated up to, but not exceed, 30 days. Approval must be granted before a payment can be made.
 5. Not required for crisis or emergent placements (Emergent placements are less than 30 days).

Procedures

1. Approval Request

The assigned caseworker must:

1. Determine if an approval request is needed. Requests may include, but are not limited to:
 1. Policy requirements ([4533. Behavior Rehabilitation Services](#), etc.)
 2. Camps
 3. Additional funding allowed in policy, but not requiring an Exceptional Cost Foster Care Plan
 4. Exceptions to a policy
 5. Respite
 6. Caregiver supports
 7. Childcare services
 8. Exceptional Cost Foster Care Plans
2. Complete and submit a [DCFS Administrative Approval Request form DCYF 05-210](#) when policy requires it or when an exception to a policy is needed.

3. Send a completed [DCFS Administrative Approval Request form DCYF 05-210](#) for review and approval to the supervisor, area administrator, regional administrator or designee.
4. Once approved, upload the document into FamLink.

2. Exceptional Cost Foster Care Plans (ECP)

The assigned caseworker must:

1. Complete and submit a [DCFS Administrative Approval Request form DCYF 05-210](#) when a placement is to continue beyond 30 days, and a foster parent needs exceptional reimbursement for supervision or support for a child with exceptional needs.
2. Request an ECP reimbursement only for foster care reimbursement and not to pay for contracted services such as, but not limited to: case aides, counseling etc.
3. Complete all required fields on [DCFS Administrative Approval Request form DCYF 05-210](#).
4. Only state to a licensed caregiver that an ECP request will be submitted. The worker should not pay the ECP prior to approval.

Forms and Tools

[DCFS Administrative Approval Request form DCYF 05-210](#)

4526. Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents

4526. Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents sarah.sanchez Tue, 08/28/2018 - 11:56

Original Date: September 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

The purpose of this policy is to provide guidance on placing with and supporting licensed caregivers, including relatives, suitable persons, and foster parents.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees

Laws

[RCW 13.34.065](#) Shelter care-Hearing-Recommendation as to further need-Release

[RCW 13.34.096](#) Right to be heard-Notice.

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings.

[RCW 13.34.260](#) Foster home placement-Parental preferences-Foster parent contact with birth parents encouraged.

[RCW 74.13.031](#) Duties of Department

[RCW 74.13.290](#) Fewest Possible Placements for children-Preferred Placements

[RCW 74.13.332](#) Rights of Foster Parents

[RCW 74.13.335](#) Reimbursement-Property Damage

[RCW 74.13.710](#) Prudent Parent Standards

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[RCW 74.15.020](#) Definitions

Policy

1. Caseworkers must:
 1. Place children or youth with foster parents only if one of the following is met:
 1. No licensed or unlicensed [relatives or suitable persons](#) are available or approved prior to establishing dependency, and it is necessary to prevent imminent physical harm to a child or youth due to child abuse or neglect.
 2. If the efforts to reunite the parent and child or youth will be hindered by placement with the relative or suitable person.
 2. Follow the:
 1. [Placing with and Supporting Unlicensed Relatives and Suitable Persons](#) policy to initiate initial licenses for unlicensed relatives and suitable persons.
 2. [Out-of-Home Placements](#) policy to document placements with licensed caregivers in the FamLink Child Locator to initiate the foster care reimbursement payment.
3. Provide [services and supports](#) to both licensed and unlicensed relatives and suitable persons to maintain and stabilize placements.

2. Fiduciaries must authorize payments for licensed:
 1. Relatives
 2. Suitable persons
 3. Foster parents

Procedures

1. Placing with Licensed Relatives, Licensed Suitable Persons, and Foster Parents
Caseworkers must:
 1. Follow these policies:
 1. [Relative Search and Notification](#).
 2. [Indian Child Welfare \(ICW\) Tribal Inquiry](#) if there is reason to know children are or may be Indian children to:
 1. Verify whether children are recognized as Indian children with the tribes.
 2. Identify tribal relatives.
 3. [Placing with and Supporting Relatives and Suitable Persons](#) for the initial license process for relatives and suitable persons.
 4. [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) and provide the required information on the children or youth to caregivers, including but not limited to the:
 1. Physical and mental health information.
 2. Court hearing information.
 3. [Caregiver's Report to the Court DCYF 15-313](#) form or the [Caregiver's Report to the Court \(Abbreviated\) DCYF 15-313A](#) form.
 5. Follow the DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy when considering placement of children and youth who are exploring or identify as LGBTQIA+.
2. Provide:
 1. The placement packet.
 2. All known safety, permanency, and well-being information including health and education information about the children or youth to their caregivers.
 3. Support through services and [concrete goods](#) throughout the life of the case to maintain and stabilize placement.
3. Complete the following within seven calendar days of placement:

1. The initial [health and safety](#) and ask the caregivers privately:
 1. How the children or youth are adjusting?
 2. Do they:
 1. Need additional services to provide appropriate care and supervision to meet the children's or youth's health, safety and well-being needs?
 2. Have any immediate needs or if there are any barriers to maintaining placement?
 2. Collect and document identifying information for children or youth, per the [Emergency Planning for Children in Out-of-Home Care](#) policy.
 4. Conduct monthly [health and safety visits](#) with children or youth and caregivers.
 5. Provide notice to the caregiver if the children or youth will be moving to a different placement, per [Placement Moves](#) policy.
2. Initiating the Caregiver Support Level and Foster Care Reimbursement Level
 1. Caseworkers must:
 1. Follow the [Caregiver Support Level and Foster Care Rate Assessment Determination](#) policy.
 2. Immediately notify fiduciaries if they learn of a foster care overpayment or underpayment.
 3. Request area administrator approval and obtain caregiver agreement to authorize payment for children or youth who are returning to their home after an absence of 15 calendar days or less. Reasons for absences, include, but are not limited to children or youth:
 1. Receiving medical or mental health care services.
 2. Who are [missing from care](#).
 3. That are in runaway status.
 2. Fiduciaries must review the prepopulated placement date in FamLink within 24 hours of the children's or youth's placement change. If a:
 1. Placement discrepancy is identified, fiduciaries must contact both the:
 1. Caseworker
 2. Placement desk

2. FamLink error is identified for the provider, e.g., issues related to licenses, services, or address, they must notify clerical for the office the case is assigned, to correct the error.

3. Closing Licensed Placements in FamLink

1. Caseworkers must follow the Timely & Accurate Placement Entry User Guide document when closing the out-of-home placement within three calendar days of children or youth leaving a placement to avoid overpayments. Caregivers are not reimbursed for the last day children or youth are in their care. End and begin dates for the change of placement must be the same.
2. Fiduciaries must review the prepopulated placement date in FamLink within 24 hours of the children's or youth's placement change. If a:
 1. Placement discrepancy is identified, fiduciaries must contact both the:
 1. Caseworker
 2. Placement desk
 2. FamLink error is identified for the provider, e.g., issues related to licenses, services, or address, they must notify clerical for the office the case is assigned, to correct the error.

4. Supporting Caregivers Caseworkers must:

1. Refer caregivers to the Licensing Division (LD) workers when they have licensing questions.
2. Connect caregivers with the:
 1. [Alliance Caregiver Retention, Education, and Support \(CaRES\) program](#) for:
 1. Peer support
 2. Support groups
 3. Referrals to community resources
 2. [Alliance](#) for training opportunities.
3. Follow these policies, when applicable:
 1. [Approving Client Travel and Transportation Activities](#) when reimbursing caregivers for children and youth related transportation.
 2. [Child Care](#) when needed for caregivers.
 3. [Administrative Approvals](#) when there is exceptional cost or service payment to provide supports or reimburse caregivers.

4. [Respite for Licensed Foster Parents, Unlicensed Relative Caregivers, and Other Suitable Persons](#) when respite is needed for children or youth in placement.
 5. [Guardianships](#) policy when caregivers are interested in pursuing guardianships.
 6. [Identifying Adoptive Families](#) when caregivers request information about adoption.
 7. [Concrete Goods](#) when goods, services, or clothing are needed to support children's and youth's safety, stability, and permanency.
 8. [Foster Parent Liability Plan](#) when items belonging to caregivers are damaged or destroyed by children or youth in out-of-home care.
4. Allow caregivers to make decisions about normal children and youth activities following the:
 1. [RCW 74.13.710](#)
 2. [Prudent Parenting Guide DCYF CWP_0078 publication](#)
5. Placement Concerns
Caseworkers must complete the following when placement concerns arise in licensed relatives or suitable persons' homes:
 1. Consult with their supervisor.
 2. Follow the [Placement Moves](#) policy.
6. Documentation
Caseworkers must follow the [Documentation](#) policy and document:
 1. The child's or youth's placement.
 2. In a FamLink case note:
 1. Conversations with licensed caregivers about the supports they need or have requested to maintain or stabilize placement.
 2. What supports were needed or requested to maintain or stabilize the placement.
 3. How the caregivers have been supported or why DCYF was unable to provide the support needed or requested.
 3. Exceptional costs, if applicable, in both:
 1. FamLink case note.
 2. Administrative Approval Request DCYF 05-210 form.

4. The caregiver's email address in the FamLink Provider Page.

Forms

Administrative Approval Request DCYF 05-210 (Located on the Forms repository on the DCYF internet)

[Background Check Authorization DCYF 09-653](#)

[Caregiver Monthly Transportation Reimbursement DCYF 07-090](#)

[Caregiver's Report to the Court DCYF 15-313](#)

[Caregiver's Report to the Court \(Abbreviated\) DCYF 15-313A](#)

Child Welfare Provider and Placement Request DCYF 10-065 (located in the Forms repository on the DCYF intranet)

Resources

[Caregiver Support Level and Foster Care Rate Assessment Determination policy](#)

DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy

Introduction to Child Safety Framework document (located on the DCYF internet, under Programs, Intake & CPS, and Policy)

[DCYF Become a Foster Parent](#)

[Documentation policy](#)

[First Rack Card DCYF CWP_0005 publication](#)

[Foster, Adoptive, and Kinship Caregiver Email Service and Caregiver Connection Newsletter](#)

[Foster Parent Guide to Foster Care Rate Assessment CWP_0038 publication](#)

[Foster Parent Liability Plan policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[ICW Tribal Inquiry policy](#)

[Identifying Adoptive Families policy](#)

[Permanency Planning Matrix DCYF CWP_0088 publication](#)

[Placement Moves policy](#)

[Out-of-Home Placements policy](#)

Placement Packet (located on the DCYF intranet, under Forms, and Placement Packet)

[Prudent Parenting Guide DCYF CWP_0078 publication](#)

[Relative Search and Notification policy](#)

[Reporting Responsibilities for Foster Parents DCYF LIC_0003 publication](#)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

4527. Placing with and Supporting Unlicensed Relatives and Suitable Persons

4527. Placing with and Supporting Unlicensed Relatives and Suitable Persons sarah.sanchez Tue, 08/28/2018 - 11:57

Original Date: September 27, 1995

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

This policy provides guidance when placing and supporting children or youth when they are placed in out-of-home care with relatives and suitable persons.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) employees.

Laws

[RCW 13.34.060](#) Shelter care-Placement-Custody-Duties of parties

[RCW 13.34.065](#) Shelter care-Hearing-Recommendation as to further need-Release

[RCW 13.34.096](#) Right to be heard-Notice

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives-Petition seeking termination of parent-child relationship-Placement with relatives, foster family home, group care facility, or other suitable persons-Placement of an Indian child in out-of-home care-Contact with siblings

[RCW 13.34.260](#) Foster home placement-parental preferences-Foster parent contact with birth parents encouraged

[RCW 13.38.030](#) Findings and Intent

[RCW 26.44.030](#) Reports-Duty and authority to make-Duty of receiving agency-Duty to notify-Case planning and consultation-Penalty for unauthorized exchange of information-Filing dependency petitions-Investigations-Interviews of children-Records-Risk assessment process

[RCW 26.44.240](#) Out-of-Home care-Emergency Placement-Criminal history record check

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.280](#) Client information

[RCW 74.13.290](#) Fewest possible placements for children-Preferred placements

[RCW 74.13.332](#) Rights of foster parents

[RCW 74.13.710](#) Out-of-home care-Childhood activities-Prudent parent standard

[RCW 74.13.335](#) Foster care-Reimbursement-Property damage

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[RCW 74.15.020](#) Definitions

[PL 110-351](#) Fostering Connections to Success and Increasing Adoptions Act of 2008

Policy

1. Caseworkers must:

1. Give placement preference to relatives and suitable persons with whom the children or youth have a relationship with and are comfortable and when in the child's or youth's best interest.
 1. Absent good cause, shall follow the wishes of the natural parent regarding the placement of the child or youth with a relative or other suitable person pursuant RCW 13.34.130. If the parent's preference is for the child not to be placed with a relative or suitable other, DCYF is not relieved of the responsibility of engaging the interested relative or suitable other for the purpose of evaluating placement.
 2. Reconsider relatives and other suitable persons previously evaluated and ruled out as placement options if their circumstances change.
 3. Place children or youth in licensed foster care only when relatives and suitable persons placements are not available or appropriate, per the [Placement and Support for Licensed Relatives, Licensed Suitable Persons, and Foster Parents](#) policy.
2. Follow these policies:
 1. [Relative Search and Notification](#).
 2. [Placement moves](#) if considering a move for a child or youth.
 3. [Indian Child Welfare \(ICW\) Tribal Inquiry](#) if there is reason to know children are or may be Indian children to:

1. Verify whether children are recognized as Indian children with the tribes.
 2. Learn if there are tribal relatives.
 3. Inform relatives and suitable person placements of initial licenses.
 4. Provide relatives or suitable persons financial information, available resources, and critical child or youth-specific information:
 1. At time of placement or within three calendar days of an emergent placement.
 2. During:
 1. [Shared Planning Meetings \(SPM\)](#)
 2. [Monthly health and safety visits](#)
 3. As needed throughout the children's or youth's placement.
 5. Follow the [Interstate Compact on the Placement of Children \(ICPC\)](#) policy if relatives or suitable persons' placements reside outside of Washington State.
 6. Notify the following within seven calendar days when initial licenses, home studies, or background checks for household members are not approved:
 1. Assistant attorney general (AAG)
 2. Court
2. LD workers must support relatives and suitable persons, during the:
 1. Initial license
 2. Home study
 3. Foster care licensing process
 4. Post-licensure
 3. Tribal payment only (TPO) workers or designees must support tribes in their case management with their relatives and suitable persons with their children under tribal jurisdiction.

Procedure

1. Prioritizing Placement with Relatives and Suitable Persons
Caseworkers must:
 1. Prioritize:
 1. Parent's, guardian's, child's, and youth's placement preferences, per the [Out-of-Home Placements](#) policy.

2. Relatives and suitable persons' placements for children or youth that are placed in out-of-home care:
 1. When:
 1. There are no safety threats. If there are risks, caseworkers must offer:
 1. In-home services.
 2. [Concrete Goods](#).
 3. It is in their best interest.
 2. By following these policies:
 1. [Relative Search and Notification](#).
 2. [Out-of-Home Placements](#).
 2. Invite relatives and suitable persons' placements to [Family Team Decision Making \(FTDM\) meetings](#) to:
 1. Identify placements options.
 2. Remove barriers to placements.
 3. Complete the following when relatives or suitable persons have been identified and children or youth may potentially be moving from a foster home or group care facility to their home:
 1. Follow the [Placement Moves](#) policy.
 2. Conduct a [FTDM](#).
 3. Request their home study within 10 calendar days of the FTDM recommending the placement move in the DCYF-Child Welfare Field Ops Hub SharePoint.
 4. Report on the status of the licensure process during the entry of any dispositional orders in the case.
2. Prior to Placing with Relatives and Suitable Persons
Caseworkers:
 1. Must complete the following before placing children and youth with relatives and suitable persons:
 1. Follow the:
 1. [Out-of-Home Placements](#) policy.
 2. Timely & Accurate Placement Entry User Guide document.

2. Identify all individuals living in the home and those living on the premises.
 3. Complete background checks, per the [Background Checks](#) policy.
 4. Assess the home and property for safety concerns by:
 1. Conducting a thorough walkthrough of the home and all outbuildings.
 2. Completing the [Home Inspection Checklist \(Kinship\) DCYF 10-453](#) form.
 5. Verify relatives and suitable persons' placements are able and willing to complete the following for children or youth:
 1. Provide:
 1. Infants a [safe sleep environment](#).
 2. Them a safe and stable home, that meets their health, safety, and well-being needs.
 3. For their basic and special needs.
 2. Meet their cultural, sexual orientation, gender identity expression, and other individualized needs, per the DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy.
 3. Is able to meet any special needs of the child or youth.
 4. Not hinder efforts to reunify the parents and children or youth, but support reunification when reunification can safely occur.
 5. Cooperate with their [case plans](#).
 6. Make them available for court ordered [family time](#).
 7. Facilitate [sibling visits](#), if visitation is court ordered.
3. Placing with Relatives and Suitable Persons
Caseworkers must complete the following:
1. At the time of placement:
 1. Complete the following with relatives and suitable person placements:
 1. Placement Agreement DCYF 15-281 form.
 2. Provide information regarding the initial license process to them, including:
 1. The option and process for applying and receiving Non-Needy Temporary Assistance for Needy Families (TANF)

immediately for the months until the foster care maintenance payment (FCMP) is received.

2. Notifying caregivers that if they receive TANF, they must notify the Department of Social and Health Services (DSHS) Community Service Office (CSO), by the 10th of the month following their receipt of their first FCMP to either:
 1. Report the change of income, which will count the FCMP as income against their family benefits.
 2. Remove the child or youth placed in their care from the DSHS CSO Assistant Unit, which will not count the FCMP as income against their family's benefits.
2. Follow the:
 1. [Out-of-Home placements](#) policy for required notification to either NCIC BCU or fiduciaries of emergent and non-emergent initial placements and placement changes.
 2. Timely & Accurate Placement Entry User Guide document.
3. Document unlicensed caregivers' emergency contact information in FamLink and review and update the information:
 1. When they are notified of changes.
 2. Yearly, at a minimum.
4. File upload the following signed forms in FamLink:
 1. Placement Agreement DCYF 15-281, name "Placement Agreement MM/YY" using the month and year of the inspection.
 2. Home Inspection Checklist (Kinship) DCYF 10-453, name "Home Inspection MM/YY" using the month and year of the inspection.
5. Verify placement care and authority is open in FamLink, for NCIC BCU to document placement.
6. Follow the [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) policy.
7. Provide the required information on the children or youth to the caregiver, including but not limited to:
 1. Court hearing information.
 2. Health care information.

3. Kinship and Foster Placement Packet Overview document and complete placement packet.
8. Inform relatives and suitable persons about:
 1. The home study process.
 2. Initial licenses.
 3. Available [caregiver resources](#).
 4. Case plan and court orders, and their required compliance including, but not limited to:
 1. [Family time and sibling and relative visits](#).
 2. Conditions ordered by the court.
 3. Keeping information about the children or youth confidential except as allowed by:
 1. [RCW 26.44.030](#)
 2. [RCW 74.13.280](#)
 5. Non-compliance with court orders or intentional disruption of the case plan may be grounds for children or youth to be moved from their home and will be discussed with them at a [SPM](#).
 6. Children's or youth's communication with their parents or guardians, per the [Outside Communication for Children in Out-of-Home Care](#) policy.
 2. Inform the court at the shelter care hearing of the caregiver's interest in an initial license.
 3. Within seven calendar days of placement, complete the [health and safety visit](#) and ask the caregivers privately:
 1. How the children or youth are adjusting?
 2. If they:
 1. Need additional services to provide appropriate care and supervision to meet the children's or youth's health, safety, and well-being needs?
 2. Have any immediate needs or if there are any barriers to maintaining placement?
4. Initial License Placements and Payments
Fiduciaries must:

1. Correct any placements entered in error and notify NCIC of the error, when appropriate.
2. Close unlicensed placements and open initial license placements with correct codes when notified by LD workers.
3. Track the 90-day expiration date to prevent overpayment.
4. Close initial license placements on the 91st day and open either the:
 1. Child Specific License Placement with the correct codes, when notified by LD workers.
 2. Unlicensed Placement with correct codes on 91st day.
5. Supporting Relatives and Suitable Persons Placements
Caseworkers must support relatives and suitable persons, when applicable by:
 1. Continuing to assess their:
 1. Ability to provide safe care to children and youth.
 2. Ongoing need for services.
 2. Using the [Concrete Goods](#) policy to provide goods and services to unlicensed relatives and suitable persons to:
 1. Meet the needs of children and youth in their care.
 2. Remove barriers to home studies or foster care licenses.
 3. Providing them following:
 1. Information on financial resources:
 1. The monthly:
 1. Initial license reimbursement payment, if applicable.
 2. Foster care reimbursement payments, if licensed.
 2. Concrete goods to support relatives and suitable persons.
 3. Reimbursement or exceptional cost payments if applicable, per the [Administrative Approvals for Child Welfare](#) policy.
 4. Social Security Administration (SSA) benefits if applicable, by following the [Supplemental Security Income \(SSI\) and Retirement, Survivors, and Disability Insurance \(RSDI\) Benefits for Children in Out-of-Home Placements](#) policy.
 5. [Travel and Transportation](#) reimbursement for children or youth-related travel costs, including mileage.

6. [Guardianship Assistance Program \(GAP\)](#) subsidy when both:
 1. Children or youth are placed with a qualified caregiver.
 2. A determination has been made through a SPM that guardianship is in their best interest.
 2. Training information through the [Alliance for Child Welfare](#).
 3. Information on support and resources available through the [Alliance Caregiver Retention, Education, Support \(CaRES\)](#) program.
 4. Available resources to support children or youth placed in out-of-home care, including, but not limited to:
 1. [Child care](#)
 2. [Respite care for relatives and suitable persons](#)
 3. [Developmental Disability Administration \(DDA\)](#) when children or youth may be eligible for DDA services. Services for youth may extend beyond age 18, if they are eligible.
 4. In-home services
 5. [DSHS Kinship Navigator program](#).
 6. Local resources
6. Tribal Jurisdiction Cases
- TPO workers or designees must support tribes in their case management with their relatives and suitable persons by:
1. Opening the TPO FamLink case.
 2. Submitting the tribe's request for an initial or kinship license to the Licensing Division, if applicable.
 3. Assisting caseworkers or GAP gatekeepers with GAP subsidy, if applicable, by following the Tribal Guidance Assistance Payment Guide (TGAP) document.
7. Placement Concerns
- Caseworkers must complete the following when placement concerns arise in relatives' or suitable persons' homes:
1. Consult with their supervisor.
 2. Complete a Safe Child Consultation.
 3. Notify the tribe, if applicable.
 4. Follow these policies:
 1. [Safety Assessment](#)

2. [Placement Moves](#)
5. If it is determined there is no present or impending danger, but there is concern for risk:
 1. Develop a Placement Support Plan DCYF 10-025 form.
 2. Offer in-home services and concrete goods, as applicable.
6. If the home is found to be unqualified for licensure notify the:
 1. Tribe, if applicable.
 2. Court within seven calendar days by filing the Notice of Inability to Recommend Placement DCYF 09-025 form from the LD worker.
8. Documentation
Caseworkers must:
 1. Follow the [Documentation](#) policy.
 2. Document:
 1. In FamLink case notes:
 1. Conversations with caregivers about the supports they need or to maintain or stabilize placement.
 2. What supports caseworkers believe are needed to maintain or stabilize the placement.
 3. How caregivers have been supported or why DCYF was unable to provide the needed or requested support.
 2. The following information for the unlicensed caregiver in their FamLink Provider file:
 1. Email address.
 2. Emergency contact information, including at minimum one individual that does not live in their household.:
 3. Current:
 1. Address and their emergency contacts' address.
 2. Phone numbers and their emergency contacts' phone numbers.
 3. Exceptional costs, as applicable, in both:
 1. FamLink case note.
 2. Administrative Approval Request DCYF 05-210 form.

Forms

Administrative Approval Request DCYF 05-210 (located in the Forms repository on the DCYF intranet)

[Background Check Authorization DCYF 09-653](#)

Caregiver Court Notification Letter DCYF 09-086 (located in the Forms repository on the DCYF intranet)

[Caregiver Monthly Transportation Reimbursement DCYF 07-090](#)

[Caregiver's Report to the Court DCYF 15-313](#)

[Foster Parent Reimbursement Claim and Checklist DCYF 18-400](#)

[Home Inspection Checklist \(Kinship\) DCYF 10-453](#)

Notice of Inability to Recommend Placement DCYF 09-025 (located in the Forms repository on the DCYF intranet)

[Permanency Planning Matrix DCYF 16-231](#)

Placement Support Plan DCYF 10-025 (located in the Forms repository on the DCYF intranet)

Policy Agreements DCYF 10-290 (located in the Forms repository on the DCYF intranet)

[Vendor Affidavit of Lost, Stolen, or Destroyed Warrant DCYF 09-013](#)

Resources

[Alliance Caregiver Retention, Education, Support \(CaRES\) program](#)

[Caregivers and Court Dependency Process DCYF CWP_0065 publication](#)

Concrete Goods Guide document (located on the DCYF intranet under Programs, CFWS, and Services)

DCYF Administrative 6.04 Supporting LGBTQIA+ Individuals policy

[DCYF Become a Foster Parent](#)

[DCYF Kinship Care: Family and Close Family Friends](#)

[Documentation policy](#)

[First Rack Card DCYF CWP_0005 publication](#)

[Foster Care Licensing for Kinship Caregivers DCYF Lic_0017 publication](#)

[Foster Parent Guide to Foster Care Rate Assessment DCYF CWP_0038 publication](#)

[Foster Parent Rights and Responsibilities DCYF Lic_0001 publication](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[ICW Tribal Inquiry policy](#)

Kinship and Foster Placement Packet Overview document (located on the DCYF Intranet, under Programs, under Child Welfare, under Placement Packet)

[Kinship Care: Relative and Suitable Person Placement DCYF CWP_0074 publication](#)

[Out-of-Home Placements policy](#)

Placement Packet (located on the DCYF intranet, under Forms, and Placement Packet)

[Prudent Parenting Guide DCYF CWP_0078 publication](#)

[Relative Search and Notification policy](#)

[Safety Plan policy](#)

[Shared Planning Guide DCYF CWP_0070 publication](#)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

Tribal GAP and Extended GAP Guide (TGAP) document (located on the DCYF intranet, Programs, Permanency, Guardianship)

4528. Regular Receiving Care

4528. Regular Receiving Care sarah.sanchez Tue, 08/28/2018 - 11:58

Service Definition

1. Receiving home care is out-of-home care provided in licensed foster homes which are designated to provide emergent or short-term care.
2. Receiving home care is temporary care not to exceed 30 days.
3. Receiving home care is used when need for placement is immediate, and time does not allow for planning to place directly into regular foster care or other alternate care.

Procedures for Access

1. The social worker first determines that relative care is not available.
2. The social worker locates and contacts an available, appropriate receiving home parent utilizing the locally determined placement system. For example, in some offices, placement in receiving care is accessed through a Home Finder or placement desk. In other offices, social workers contact the receiving home parent directly.
3. To assist the receiving home to make a decision about the child, the social worker provides the receiving home parent with information about the immediate condition of the child, the child's behaviors, school and medical information, background information, and specifics

of the permanency plan that will affect the child and the placement. For example, the worker will let the receiving home parent know what behaviors to expect, what the family time and sibling visitation plan is, what the foster parents' responsibilities are, when the child next needs to see a doctor or other professional, and where and when the child is likely to be moved.

4. The social worker clarifies future family time and sibling visits to the receiving home and provides the receiving home with written background information and emergency numbers upon placing the child.
5. The social worker completes the following paperwork after placement:
 1. Open appropriate SSPS codes and complete the CAMIS placement module.
 2. Complete a federal funding packet (all Title IV-E documents), answer Categorical Criteria questions in CAMIS, and send the packet to the DCFS federal funding specialist within 10 days of placement. Utilize local procedures to notify the SSI facilitator of placement of an SSI/SSA eligible child or for screening for SSI of a special needs child.
 3. Notify the licenser of placement of the child in a particular home.
6. The federal funding specialist shall notify the CSO Financial Services Specialist of the child's placement if the child is receiving TANF and, in all cases, the Division of Child Support (DCS) and provide a copy of the authority to place in care.
7. Receiving care is meant to be very short term care. However, in rare instances, it may become necessary to request an authorization from the Regional Administrator or designee, according to regional procedures, to extend receiving care beyond 30 days. A child is not to be moved to another receiving home simply to avoid requesting an extension.
8. The child's assigned social worker shall conduct a face-to-face interview, or have face-to-face contact with the child incapable of being interviewed, with the child placed into care after hours or on weekends in the placement facility within the next few days following placement. The social worker shall document such interviews and contacts in the case SER.

4529. Specialized Receiving Care

4529. Specialized Receiving Care sarah.sanchez Tue, 08/28/2018 - 11:59

Service Definition

Specialized receiving care is short-term licensed foster care. Certain receiving homes have been identified as specialized receiving homes to serve some children who are in conflict with their parents, runaways, and other children with special needs. This type of care is short-term, emergency care for thirty days or less.

Procedures for Access

1. The social worker determines that kinship care, regular receiving care, and Crisis Residential Center (CRC) care are not available or are inappropriate prior to placement in specialized receiving care.
2. The social worker locates and contacts an available, appropriate specialized receiving home parent utilizing the locally determined placement system.
3. The social worker provides the specialized receiving home parent with information about the immediate condition of the child, the child's behaviors, school and medical information, background information and specifics of the permanency plan that will affect the child and the placement. For example, the worker will let the specialized receiving home parent know the family time and sibling visitation plan, what the foster parents' responsibilities are, when the child next needs to see a doctor or other professional, and where and when the child is likely to be moved.
4. The social worker clarifies future visits to the specialized receiving home and provides the specialized receiving home with written background information and emergency numbers upon placing the child.
5. See section 45282 for procedures regarding federal funding.
6. See section 45282, paragraph H, for the requirement to contact the child placed after hours or on weekends within the next few days following placement.
7. See section 45283 for information regarding TANF maintenance for the child's family.

4531. Placing in Child Placing Agency (CPA) Certified Foster Homes

4531. Placing in Child Placing Agency (CPA) Certified Foster Homes sarah.sanchez Tue, 08/28/2018 - 12:00

Original Date: September 27, 1995

Revised Date: January 1, 2024

Sunset Review Date: January 31, 2028

Approved by: Vickie Ybarra, Interim Assistant Secretary for Partnerships, Prevention, and Services

Purpose

The purpose of this policy is to provide guidance on placing children and youth in child placing agency (CPA) certified foster homes.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) child welfare employees.

Laws

Policy

1. Regional administrators or designees must designate a regional CPA lead.
2. CPA leads must assist caseworkers with monitoring CPA contract requirements.
3. Caseworkers must:
 1. Use CPAs contracted with DCYF to provide:
 1. Placement to children and youth.
 2. CPA services.
 2. Authorize services to be provided by CPAs.
 3. Monitor the progress of children and youth while placed with CPA-certified homes.
4. Fiduciaries must update placement and make payments to CPAs in FamLink.

Procedures

1. Caseworkers must complete the following:
 1. Prior to placing children or youth in a CPA certified foster home:
 1. Verify that the CPA has a contract with DCYF prior to:
 1. Making a referral for placement.
 2. Providing confidential information about the child or youth to the CPA.
 2. Send the Child Information and Placement Referral DCYF 15-300 form.
 2. After the CPA accepts the placement of the children or youth:
 1. Complete the Child Placing Agency (CPA) Authorization DCYF 10-402 form and send to the prospective CPA.
 2. Request the signed copy of the Child Placing Agency (CPA) Authorization DCYF 10-402 form from the CPA.
 3. Sign the Child Placing Agency (CPA) Authorization DCYF 10-402 form.
 4. Notify fiduciaries by documenting the child's or youth's placement in the FamLink Child Locator within three calendar days of placement.
 5. File upload the Child Placing Agency (CPA) Authorization DCYF 10-402 form into FamLink.
2. Fiduciaries must complete the following in FamLink after being notified of the placement from caseworkers, update:

1. Placement.
2. Payment for the CPAs.
3. Caseworkers must complete the following after children or youth have been placed in CPA certified foster homes:
 1. Contact the CPA within seven calendar days of the referral to the CPA to discuss:
 1. Coordination
 2. Roles
 3. Responsibilities
 2. Monitor CPA placements by:
 1. Following the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy.
 2. Reviewing the child's or youth's quarterly progress reports completed by the CPA when required by their contracts.
 3. Contacting the CPA lead when a CPA:
 1. Is not meeting their contractual requirements.
 2. Has identified concerns.
4. CPA leads must complete the following when they are notified that contractual requirements have not been met:
 1. Consult with the caseworker.
 2. Contact the CPA to discuss the contract requirements. If it is determined the contract is not being met, notify the following of the identified concerns, the:
 1. CPA, by email.
 2. Contracts manager, using the Contract Smartsheet.
 3. Regional licensor, by email.
 3. Monitor the CPA in coordination with the contracts manager until the concerns have been addressed.

Forms

[Child Information and Placement Referral DCYF 15-300](#)

Child Placing Agency (CPA) Authorization DCYF 10-402 (located in the Forms repository on the DCYF intranet)

Resources

Contract Smartsheet (located on the DCYF intranet under Support Services, and Contracts and Procurement)

DCYF Administrative 4.01 Contracting policy

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[WAC 110-50-0230-WAC110-50-0250](#)

[WAC 110-147 Licensing Requirements for Child Placing Agency and Adoption Services](#)

4533. Behavior Rehabilitation Services

4533. Behavior Rehabilitation Services sarah.sanchez Tue, 08/28/2018 - 12:01

Original Date: September 27, 1995

Revised Date: September 25, 2020

Sunset Review: September 25, 2024

Approved by: Jody Becker, Deputy Secretary Children and Families

Purpose

The purpose of this policy is to provide guidance to child welfare employees for identifying and providing services to children and youth with high-level complex needs.

Scope

This policy applies to Department of Children, Youth, and Families (DCYF) child welfare employees.

Laws

[RCW 13.34.130](#) Order of disposition for a dependent child, alternatives - Placement with relatives, foster family home, group care facility, or other suitable persons

[RCW 74.13.031](#) Duties of Department - Child Welfare Services - advisory committee.

[RCW 74.13.080](#) Group Care Placement - Prerequisites for payments

Policy

1. Caseworkers must verify children or youth have been referred to and received a Wraparound Intensive Services (WISe) screen prior to considering a referral to BRS.
 1. If the WISe screen shows the child or youth is eligible and recommended for services, WISe must be given priority over BRS.
 2. Consider BRS if:

1. WISe alone cannot safely serve the child or youth's needs. BRS and WISe can be opened concurrently.
 2. The WISe agency is unable to meet the child or youth's needs and intensive services is required to meet their needs.
2. BRS Managers may only refer children and youth to contracted BRS service providers when the child or youth:
 1. Has a high-level complex service need.
 2. Received a WISe screen from a provider on the [WISe Referral Contact List](#).
 3. Been assessed to need BRS level of care based on all of the following:
 1. A completed WISe screen.
 2. The [BRS Referral DCYF 10-166A](#) form and supporting documentation packet.
 3. The Children's Functional Assessment Rating Scale (CFARS).
 4. Recommendations from the shared planning meeting (SPM) or [Family Team Decision Making \(FTDM\) meeting](#).
 4. Received the required approvals on the [BRS Referral DCYF 10-166A](#) form.
3. The DCYF Contracts Unit can only approve BRS ongoing contracts to out-of-state agencies if they are located within 50 miles of Washington State.
4. Caseworkers must continue to pay BRS In-Home or Support Services if they are being provided at the contract rate. This rate is not intended to be all inclusive. Services and other funds DCYF would normally pay for should continue, e.g., rent, child care, concrete goods, etc.
5. Employees must follow the [Placement - Intensive Resources](#) policy when a child or youth's individual service needs are beyond what can be provided through the BRS contract and other more intensive services are needed.
6. Caseworkers assigned to children or youth in BRS must:
 1. Participate in the BRS Child and Family Team (CFT) case review meetings.
 2. Facilitate discussions identifying a targeted discharge date and transition placement.
7. Caseworkers must obtain DCYF and court approval for children and youth placed in a BRS Qualified Residential Treatment Program (QRTP) and request the following:
 1. A court review hearing within 60 calendar days of the QRTP placement.
 2. A court review at least every six months.
 3. Regional administrator (RA) approval for youth age:

1. Twelve and younger after the first consecutive or non-consecutive six months.
2. Thirteen and older, after the first 12 consecutive months, or 18 non-consecutive months.

Procedures

1. Eligibility and Referral

1. Before a BRS referral is made, caseworkers must:
 1. Refer the child or youth for a WISE screen from a provider on the [WISE Referral Contact List](#) if a screen has not already been completed within the last 60 calendar days.
 2. Consult with the regional BRS Program Manager (PM) to determine if BRS is appropriate.
 3. Conduct a [SPM](#) or [FTDM meeting](#) to identify needed supports and services for the child or youth and family, and determine if BRS is an appropriate and needed resource for the child or youth.
2. If the [SPM](#) or [FTDM meeting](#) determines BRS is needed, caseworkers must:
 1. Complete a [BRS Referral DCYF 10-166A](#) form and provide the documentation listed on the form. The BRS referral must include:
 1. Information about the child or youth's current needs.
 2. The SPM or FTDM meeting recommendations.
 3. The most current supporting documentation in the BRS packet.
 2. Review the WISE results and:
 1. Include a copy of the completed WISE screen results in the BRS packet, when available.
 2. Document on the [BRS Referral DCYF 10-166A](#) form:
 1. Reasons why the youth is not eligible for WISE or is screened eligible, but WISE services are not being used.
 2. The results of the WISE screen, if a copy of the completed WISE screen is not available.
 3. If the WISE screen was not completed:
 1. The reason it was not completed and date of the request.
 2. The plan to complete the WISE screen.

3. Document in a FamLink case note:
 1. When a WISE referral is made.
 2. WISE screening completion date.
 3. Results of the WISE screening.
3. Obtain supervisor and area administrator (AA) approval and send the completed BRS referral packet to the regional BRS PM for final approval.
4. Determine if the child or youth will need an out-of-state BRS contract placement. If so:
 1. Complete the [Interstate Compact on the Placement of Children \(ICPC\)](#).
 2. Obtain court approval, when required.
3. When receiving the BRS referral packet, regional BRS PMs must:
 1. Verify the BRS referral packet is complete and includes the WISE screen results and reasons why BRS is needed for a child or youth who is eligible for WISE. If a WISE screen was not completed, verify the [BRS Referral DCYF 10-166A](#) form includes:
 1. The date of the WISE screen request and reasons why it was not completed.
 2. The plan to complete the WISE screen.
 2. Review the BRS referral packet:
 1. For current supporting documentation and recommendations from the SPM or FTDM meeting.
 2. To determine the child or youth's eligibility for BRS based on information provided. This includes:
 1. The results of the WISE screen.
 2. Documentation listed in the [BRS Referral DCYF 10-166A](#) form.
 3. The [SPM](#) or [FTDM meeting](#) recommendations.
 3. To complete a QRTP Assessment DCYF 10-167 on BRS eligible children or youth to determine their needed level of care.
 3. Make a referral to BRS contractors based on the assessment of the child or youth's needs, the contractor's ability to adequately provide services for those unique needs, quality of services provided, and performance on outcome data.

4. Only refer children or youth to a QRTP who are assessed to need that level of care.
5. Provide the completed QRTP Assessment DCYF 10-167 to the assigned caseworker if a child or youth is placed in a QRTP.
6. Review the child or youth's discharge or permanency plan.
7. Only send complete and current referral packets to contractors.
8. Notify the caseworker once the referral has been accepted by a contractor, with contractor information, service level, and contracted rate.
9. Determine if the child or youth's supervision needs exceed the BRS level of care.
 1. Negotiate one-to-one supervision as needed to address the child or youth's specific behaviors with in-state agencies.
 2. Complete the extra supervision rate proposal using Child Specific Contract Rate Proposal DCYF 10-490 form and submit for approval and signatures listed on the document.
 3. Provide the approved completed Contract Rate Proposal DCYF 10-490 form to a fiduciary for the additional payment.
 4. Follow [Placement - Intensive Resources](#) policy for Intensive Residential Child Specific contract if one-to-one supervision through the BRS provider does not meet the specific needs of the child or youth.
 5. Follow the [Placement - Intensive Resources](#) policy if an out-of-state child specific contract is required.

2. After placement and ongoing services are provided:

1. Regional BRS PMs must provide the service agreement to the regional fiscal analyst that includes the following:
 1. Type
 2. Placement, if needed
 3. Payment type and level
2. Regional Fiscal Analysts or designees must:
 1. Enter the placement and payment information into FamLink.
 2. Upload the service agreement.
3. CFT Meetings
Caseworkers must:

1. Participate in CFT case review meetings and actively involve the child or youth, their family, and other identified supports in case planning.
 2. Focus on measurable outcomes related to the child or youth's safety, stability, permanency, and discharge planning including transitioning to less intensive services or a permanent home.
 3. During the CFT meetings with the BRS provider:
 1. Review the child or youth's progress and transition planning, WISE screen results, and CFARS to guide case and discharge planning.
 2. Document the results of case reviews in FamLink case notes.
 4. Follow the [Health and Safety Visits with Children and Monthly Visits with Out-of-home Caregivers and Parents](#) policy, and:
 1. Discuss safety, stability, permanency, and discharge planning, with the child or youth. If necessary, conduct a SPM to address these areas .
 2. Share information with the child or youth about the court processes and their right to request legal representation.
 5. Assist youth age 15 years and older and placed in out-of-home care for more than 30 calendar days in completing the Casey Life Skills Assessment (CLSA) and Learning Plan (LP), per the [Transitioning Youth for a Successful Adulthood](#) policy.
 6. Follow [Transitioning Youth for a Successful Adulthood](#) and [The Transition Plan](#) policies to effectively engage, support, and prepare youth for adulthood.
4. Youth Placed in a QRTP
1. For court hearings, caseworkers must:
 1. Immediately notify the assistant attorney general (AAG) to request a court hearing to:
 1. Inform them that court approval is needed for the placement.
 2. Occur within 60 calendar days of the QRTP placement if one is not already scheduled, e.g. shelter care hearing, dependency hearing, permanency review hearing, etc.
 2. Initial and Ongoing Court Hearings
 1. Provide the court with the completed QRTP Assessment DCYF 10-167 and justification for the QRTP.

2. Obtain court approval for the QRTP placement.
3. Upload the completed court order and other court documentation, as applicable, into FamLink.
4. Provide copies of court approved documents to the regional BRS program manager.
5. For ongoing dependency or permanency planning hearings:
 1. Request a copy of the current QRTP Assessment DCYF 10-167 from the regional BRS managers at least 14 calendar days prior to the hearing.
 2. Provide the court with the updated QRTP Assessment DCYF 10-167 and court report including justification for the continued need for QRTP.

2. [Administrative Approvals](#)

1. Caseworkers must complete the [Administrative Approval Request DCYF 05-210](#) form and send to the RA for approval when youth:
 1. Age 12 and younger have been placed six consecutive or non-consecutive months.
 2. Age 13 and older and have been placed 12 consecutive or 18 non-consecutive months.
2. RAs, after determining approval, must send:
 1. The form to the caseworker.
 2. A copy of the form to the Field Operations director for youth age 12 and younger.
3. Caseworkers must:
 1. Once they receive the completed [DCYF 05-210](#) form:
 1. Provide a copy of the completed and signed [DCYF 05-210](#) form to the regional BRS PM.
 2. Upload the document in FamLink.
 3. Document the date this review was completed in the Court Report, per the Mapping Guide.
 2. Follow the [Extended Foster Care](#) policy when a youth will remain in BRS past their 18th birthday.

5. Regional BRS PMs must:

1. Provide oversight, guidance, and consultation regarding BRS provider's compliance. Including quality of service, outcomes, and performance.
 2. Monitor and track regional BRS data, including, but not limited to:
 1. Date of entry
 2. Exit
 3. Length of stay
 4. Placement type
 5. Service and rate
 6. Dates of the six-month case review hearings (children or youth in QRTP only)
 7. Contractor outcomes and performance measures on the BRS Monthly Census Report.
 3. Review the child or youth's service needs, level of care, expected exit date, and transition plan every six months in collaboration with the caseworker and contracted service provider.
 4. Participate in CFT meetings, when possible.
 5. If a child or youth is placed in a QRTP:
 1. Provide the caseworker with a current QRTP Assessment DCYF 10-167 at least 14 calendar days prior to all dependency or permanency planning review hearings.
 2. Provide a copy of the assessment to the caseworker.
3. Aftercare support services are provided to children or youth transitioning out of BRS to a less restrictive environment. When this occurs:
1. Caseworkers must:
 1. Participate in CFT meetings, at least quarterly, to discuss aftercare wraparound planning that supports the child or youth and family to achieve stability, permanency, or placement transition.
 2. Verify discharge planning and family-based aftercare support is provided to children and youth transitioning from a QRTP for at least six months as determined by the transition plan, if applicable.
 3. Arrange aftercare support with another contractor closer to the child or youth's discharge placement, if needed. WISe must be used as the discharge support service, when applicable.
 2. Regional BRS PMs must:

1. Consult with caseworkers to develop an aftercare service plan.
2. Negotiate with the contracted provider on an aftercare service plan.

Forms

- [Administrative Approval Request DCYF 05-210](#)
- [BRS referral form DCYF 10-166A](#)
- Child Specific Contract Rate Proposal Form DSHS 10-490
- QRTP Assessment DCYF 10-167
- [WiSe Referral Contact List](#)

4534. Crisis Residential Center (CRC) Placement

4534. Crisis Residential Center (CRC) Placement sarah.sanchez Tue, 08/28/2018 - 12:02

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Original Date: December 12, 1996

Revised Date: July 1, 2024

Policy Review: July 31, 2028

Purpose

Crisis Residential Centers (CRC) are short-term, semi-secure or secure facilities for runaway youth and adolescents in conflict with their families. CRCs provide resources for emergency, temporary residence, assessment, and referrals to services for youth ages 12-17.

Scope

This policy applies to caseworkers.

Laws

[RCW 13.32A.030](#) Definitions

[RCW 13.32A.080](#) Unlawful harboring of a minor

[RCW 43.185C.305](#) Youth Services-Crisis Residential Services-Removal From-Unauthorized leave

[RCW 43.185C.310](#) Youth services-Crisis residential centers-Removal to another center or secure facility—Placement in Secure Juvenile Detention Facility

[RCW 74.14A.020](#) Services for Emotionally Disturbed and Mentally Ill Children, Potentially Dependent Children, and Families-In-Conflict

[RCW 74.13.031](#) Duties of Department-Child Welfare Services-Children's Services Advisory Committee.

[RCW 74.13.035](#) Residential Centers Annual Records-Multiple Licensing

Policy

1. Accessing Placement in a CRC

Caseworkers must:

1. Follow policies:

1. [Intake Process and Response](#) or [Family Reconciliation Services](#) for service requests for non-dependent youth requiring placement.
2. [Indian Child Welfare Reason to Know](#) if there is reason to know child or youth is an Indian child

2. Send a [Child Information and Placement Referral form DSHS 15-300](#) to the CA placement coordinator for dependent youth. The CRC will make the final determination whether to accept the placement request and priority will be given to:

1. Youth who have run from out of home care; or
2. Youth whose health and safety is at risk and a short-term placement is needed until an alternative is found.

2. Placement in a CRC

Caseworkers must:

1. When a child is not in DCYF placement and care authority (PCA) and is placed in a CRC:

1. Contact the youth within 24 hours of placement, excluding weekends and holidays and:
 1. Identify the youth's critical needs.
 2. Obtain legal authorizations for placements lasting longer than 72 hours, if needed.
2. Verify placements in a CRC do not exceed 15 calendar days; the placement should not be longer than it takes to facilitate family reconciliation, return of the youth to the youth's home, or to develop an alternative long-term placement plan.
3. Verify a youth's length of stay in a juvenile detention-based secure CRC does not exceed five calendar days. NOTE: For youth moving between CRC and Secure CRC, the youth's stay cannot exceed 15 calendar days total.

2. When a child is in DCYF's PCA and placed in a CRC:

1. Schedule a [Family Team Decision Making](#) or [Shared Planning Meeting](#) within 72 hours of placement, excluding weekends and holidays.
 2. Authorize emergent medical and dental care.
 3. Transition the youth within five days of the discharge placement being identified.
 4. Relocate all dependent youth who have reached the maximum length stay of 15 calendar days for CRC or Secure CRC not located in a detention center, 5 calendar days for Secure CRCs that are located in a detention center, or 15 calendar days total CRC and Secure CRC.
3. Document case coordination in FamLink.
3. Information Sharing with CRC Staff
 1. For dependent youth in a CRC caseworkers will provide and exchange the following information, if applicable, per [RCW 74.13.280](#) and as outlined in the [Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers](#) policy. Information includes, but is not limited to:
 1. Name
 2. Date of birth
 3. Gender
 4. Behaviors
 5. Risks
 6. Special needs
 7. Sexually Aggressive/Physically Aggressive Assaultive Youth (SAY/PAA) history
 8. Offense history

Forms

[Child Information and Placement Referral DCYF 15-300](#)

[Return Child De-Briefing DCYF 15-309](#)

[Youth Run Prevention Plan DCYF 10-484](#)

Resources

[Department of Commerce's Office of Homeless Youth HOPE and CRC Guidelines](#)

[Department of Commerce's Office of Homeless Youth Contracted Youth Services Providers](#)

[Family Reconciliation Services policy](#)

[Family Team Decision Making Meetings policy](#)

[Indian Child Welfare Reason to Know policy](#)

[Intake Process and Response policy](#)

[Notification of Court Hearings, Providing Reports to Court, and Information Sharing with Out-of-Home Caregivers policy](#)

[Shared Planning Meeting policy](#)

4535. Placement - Intensive Resources

4535. Placement - Intensive Resources sarah.sanchez Tue, 08/28/2018 - 12:02

Original Date: September 27, 1995

Revised Date: July 1 , 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Purpose

Intensive resources are used to stabilize children and youth in placement. These services can be emergent, crisis, or longer term depending on the need of the child or youth. This policy provides direction on:

- When to request intensive resources.
- How to refer children or youth to intensive resources.
- When to request an in-state or out-of-state child specific contract.
- How to access Emergent Placement Services (EPS).
- What conditions must change for a child or youth to return home, and making active and reasonable efforts for timely reunification.
- How to access specialized Child Placing Agency (CPA) - Group Receiving Care Services.

Scope

This policy applies to child welfare employees.

Laws

[RCW 13.34.020](#) Legislative declaration of family unit as resource to be nurtured—Rights of child.

[RCW 13.34.030](#) Definitions

[RCW 13.34.050](#) Court Order to take a child into custody, when – Hearing

[Chapter 13.38 RCW](#) Indian Child Welfare Act

[Chapter 26.44 RCW](#) Abuse of Children

[RCW 74.13.283](#) Client Information

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict.

[RCW 74.15.020](#) Definitions

[RCW 74.15.090](#) Licenses required for agencies.

Policy

1. Intensive Resources

1. If a child or youth has intensive service needs above the [Foster Care Rate Assessment](#) levels of care, including any exceptional cost plans or [Behavior Rehabilitation Services \(BRS\)](#), the caseworker must consult with the regional gatekeeper or program manager.
2. Prior to referring for In-State or Out-of-State Intensive Residential Child Specific Contracts (IRCSC):
 1. Follow [BRS](#) or [Medically Fragile Children](#) policies and verify all less intensive services are unavailable or unable to meet the child or youth's needs.
 2. The child or youth must be referred for a [WISe screen](#) and the results documented according to the [WISe](#) and [BRS](#) policies. If WISe is unable to meet the child or youth's needs, document the reasons why in the WISe section of the [BRS Referral DCYF 10-166A](#) form.
3. If services through BRS or medically fragile contracts cannot safely meet the child or youth's needs or are unavailable, the regional BRS program manager will attempt to negotiate a Child Specific Contract with a Washington State service provider.
4. If the child or youth's placement changes to an IRCS contracted provider, verify the placement was documented within three business days in FamLink.
5. Document the following information in FamLink:
 1. Use of shared planning to identify and develop a plan to meet the family and child or youth's needs.
 2. Behavioral and permanency goals to be achieved through this placement.
 3. Determination of anticipated length of stay.
 4. The preliminary discharge plan with an identified date. This plan must include services and supports needed to stabilize and transition the child or youth to a less intensive service.

2. In-State IRCSC

1. Regional BRS program managers must only pursue an In-State IRCSC contract for a child or youth when all other less intensive contracted services are unavailable or unable to meet the needs of the child or youth.
2. When the regional BRS program manager determines an In-State IRCSC is needed, they must complete all of the following:
 1. Inform the caseworker of the need to enter into an In-State IRCSC.
 2. Negotiate with prospective in-state agencies regarding an In-State IRCSC and obtain regional administrator (RA) or designee approval.
 3. Consult with the headquarter (HQ) intensive resource manager about the need to pursue an In-State IRCSC and explore other alternatives.
 4. Document the reason for the In-State IRCSC on the [Regional Contract Request DCYF 15-470](#) form, and attach a completed [Child Specific Contract Rate DCYF 10-490](#) form.
 5. Send the completed forms to the individuals listed on the [Regional Contract Request DCYF 15-470](#) form for signature approval.
 6. Verify the WISe screen was completed and the results are documented according to the [WISe](#) policy.
 7. Once approved, inform the caseworker of the rate and placement information so that the caseworker can document this in FamLink
 1. Review the child or youth's service needs, level of care, target discharge date, and transition plan in collaboration with the caseworker and contracted service provider at least every three months.

3. Out-of-State IRCSC

1. DCYF must only pursue an out-of-state placement for a child or youth when in-state resources are unavailable or unable to meet the needs of the child or youth.
2. Prior to looking for an Out-of-State IRCSC resource, the regional BRS manager must:
 1. Verify the caseworker has updated the [BRS Referral 10-166A](#) form and the BRS packet as needed.
 2. Verify the WISe screen was completed and results are documented according to the [BRS](#) policy;
 3. Exhaust all available in-state resources capable of safely meeting the identified needs of the child or youth, including Child Specific Contracts

with Washington State providers. This includes a statewide search. Document these efforts, the in-state provider denials, and:

1. Consult with the HQ intensive resource manager about the need to pursue an Out-of-State IRCSC to identify other resources available to the meet the family and child's needs.
2. Inform the caseworker of the need to search out-of-state.
3. Search for out-of-state resources that meet the unique needs of the child or youth.
4. Once an out-of-state resource is identified:
 1. Contact the Child Protective Services (CPS) and Licensing agency in the receiving state to learn if there are any violations, corrective actions, or serious concerns with the prospective contractor.
 2. Coordinate an in-person site visit by DCYF employees at any newly identified resource to determine suitability prior to requesting a contract for that placement.
 3. Based on the information gathered, determine if the out-of-state resource meets the Washington State minimum standards, including, but not limited to:
 1. No secure external, bedroom, or seclusion room doors.
 2. No secure perimeter fencing.
 3. No video monitoring in common areas or bedrooms unless prior approval and a court order has been obtained.
 4. Negotiate Out-of-State IRCSC with prospective contractors and obtain approval from the RA or their designee.
 5. Document the reason for the Out-of-State IRCSC, efforts to locate in-state resources, results of inquiries, and the site visit for newly identified resources on the [Regional Contract Request DCYF 15-470](#) form, and attach a completed [Child Specific Contract Rate DCYF 10-490](#) form.
 6. Send the completed forms to the individuals listed on the [Contract Request DCYF 15-470](#) form for signature approval.
4. Approved Out-of-State IRCSC Placement
 1. Assigned caseworkers must:
 1. Follow [ICPC](#) policy.

2. Coordinate with the court and child or youth's guardian ad-litem (GAL), Court Appointed Special Advocate (CASA) or attorney, and obtain court approval to place out-of-state.
3. Complete a safety assessment at key points in the case according to the [Safety Assessment](#) policy.
4. Update the Comprehensive Family Evaluation (CFE) in FamLink per the [Family Assessment](#) policy.
5. Coordinate and verify that the receiving state ICPC or contracted out-of-state provider is conducting monthly in-person health and safety visits per the [Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents](#) policy. If the provider does not conduct health and safety visits, consult with the regional contracts manager to identify contracted providers to conduct health and safety visits.
6. Review the contractor's monthly Health and Safety Visit Reports to monitor the child or youth's well-being, and:
 1. Address any identified concerns or needs;
 2. Upload the report in FamLink; and
 3. Document the health and safety visits in FamLink case notes.
7. Contact the child or youth monthly by phone or video conference, and document the interview in FamLink case notes.
8. Conduct an in-person face-to-face visit with the child or youth each month. The time between visits must not exceed 35 calendar days.
 1. A DCYF employee other than the assigned caseworker may conduct the in-person face-to-face visits. DCYF employees conducting the visits must have:
 1. Current or prior child or youth interviewing experience.
 2. Knowledge and skills needed to assess the child or youth's health and safety.
 2. Prior to the in-person visit, review available documentation regarding the child or youth which occurred in the last month, including but not limited to:
 1. Monthly health and safety visit reports.
 2. Incident reports involving any injury or restraints, if any.
 3. Case notes related from the out-of-state placement.

3. During the in-person visit, follow up with the child or youth and facility employees about incidents that may have occurred during the last month.
4. After the in-person visit, document the child or youth interviews in FamLink case notes and upload a completed Out-of-State Child Specific Contract Compliance Monitoring Youth Interview Questions DCYF 05-310 form in FamLink.
9. Participate in quarterly Child and Family Team (CFT) meetings coordinated by the contractor. During the meeting, address youth safety, well-being, and transition planning. Participation may include phone, video conference, or in-person if the meeting occurs during the monthly in-person visit.
10. Coordinate [visits between parents and siblings](#) according to the [Family Time and Sibling and Relative](#) policy.
11. Follow policies:
 1. [Outside Communication for Children in Out-of-Home Care](#) when determining outside communication with parents, relatives, and other important people to the child in out of home care.
 2. [Active, Diligent, and Reasonable Efforts](#) to document efforts to reunify the family and achieve timely permanency.
 3. [Indian Child Welfare Active Efforts and Tribal Collaboration](#) if there is reason to believe the child is or may be an Indian child.
12. Identify conditions for return home at the time of placement and when updating a CFE. Conditions to [return home](#) provide the parent or legal guardian with specific information on what changes need to occur in order to create a safe physical, psychological, and emotional environment for the child or youth. Conditions are not based solely on the completion of services in a case plan.
13. Discuss with your supervisor, the child or youth's progress and readiness for transition to less intensive services in Washington State per the [Monthly Clinical Supervision Case Reviews](#) policy.
14. Once plans to return a child or youth back to Washington begin, refer the child to a provider for a WISe screen to determine eligibility. Use the results to determine service needs.
 1. If the child or youth is eligible follow the service recommendations.
 2. If the child or youth is not eligible or the WISe provider is not able to meet their needs, document the reasons why in a case note or WISe section of the [BRS Referral 10-166A](#) form.

15. Document the following information in FamLink case notes:

1. Use of shared planning to identify and develop a plan to meet the family and the child or youth's needs.
2. Behavioral and permanency goals to be achieved through this placement.
3. Determination of anticipated length of stay.
4. The preliminary discharge plan with an identified date. This plan must include services and supports needed to stabilize and transition the child or youth to a less intensive service.

2. Regional BRS managers must:

1. Track out-of-state placements, the child or youth's progress, and identified discharge dates.
 2. In consultation with the caseworker and out-of-state contractor, monitor and assess the child or youth's readiness for transitioning back to Washington State.
 3. Review cases quarterly based on the out-of-state placement start date, transition plans, and discharge date. If a discharge date has not been identified, obtain it from the caseworker or the out-of-state contractor.
 4. Participate, as needed, in contract monitoring site visits based on identified concerns or monitoring assessments.
 5. Notify the HQ intensive resource manager within the calendar week of learning of any new CPS or other issues or concerns with the out-of-state contractor.
 6. Refer the child or youth to in-state resources when determined they can transition back to Washington State safely or when an emergent need arises due to health and safety concerns. If referring to BRS resources, follow [BRS](#) policy.
 7. If there is a placement disruption, make diligent efforts and document efforts to locate an in-state resource prior to searching for another out-of-state placement.
3. When learning of any health and safety concerns for the child or youth, including but not limited to imminent risk of serious harm, allegations of physical abuse or neglect, or inappropriate or excessive use of restraints or discipline, complete the following:
1. Immediately contact CPS in the receiving state to make a referral and document the CPS referral number, date, and specific information in FamLink case notes;

2. Within 24-hours contact the child or youth, unless they told you in-person.
 3. Within one calendar week, notify the:
 1. Health and safety visit contractor and request they conduct an in-person face-to-face visit the child or youth as soon as possible; and;
 2. Regional BRS manager of any CPS referrals made or if there are any other issues or concerns with the out-of-state contracted services.
 4. Follow up to determine the outcome of the investigation and take any actions necessary to address the youth's safety and well-being.
5. Emergent Placement Services (EPS) are contracted short-term (15 calendar days) crisis intensive resources that are used when there is an emergent need for a placement and no other placement options are available.
1. Referrals
 1. If there is no placement available for a child or youth, the caseworker must contact the regional EPS gatekeeper to see if there is an EPS placement available. Regional EPS gatekeepers are identified by the RA or designee.
 2. The caseworker must update the [CIPR DCYF 15-300](#) form if it is not already updated .
 3. Once a request is received, the regional EPS gatekeeper must contact the EPS provider for placement availability. If there is availability, the EPS gatekeeper will:
 1. Send the completed [CIPR DCYF 15-300](#) form to the provider for consideration, and;
 2. Inform the caseworker of the provider's decision.
 4. If the child or youth is accepted for an EPS placement, the caseworker will arrange the child or youth's transportation to the provider's address.
 5. If there is no placement available in the region, the EPS regional gatekeeper may contact the EPS gatekeeper in another region to request an EPS placement. Approval from the receiving regional EPS gatekeeper must be obtained before a child or youth is moved to that placement.
 2. Length of Service
 1. When the EPS placement begins, the caseworker must immediately begin discharge and transition planning for the child or youth, and communicate the discharge date and transition plan to the provider.

2. If EPS placement is needed beyond 15 calendar days, the caseworker must obtain approval from the regional EPS gatekeeper where resource is located.
3. If the EPS gatekeeper approves the extension, they must notify the EPS provider. EPS placements cannot be extended longer than 30 calendar days.
4. When the child or youth transitions out of EPS, the contractor is required to provide the caseworker an [EPS Transition Summary](#) which must be uploaded into FamLink.

3. EPS Contract Management

1. The RA or their designee must identify one EPS regional lead to oversee the EPS program and compliance monitoring.
2. The EPS regional lead must:
 1. Track a daily census of the contracted programs within their region.
 2. Track the provider's monthly reports for:
 1. Percentage of referrals accepted.
 2. Utilization of contracted bed days per month.
 3. Reasons for denied referrals.
 3. Identify if a provider is in compliance with the referral acceptance rate percentage identified in the contract on a quarterly basis. If the provider fails to meet the required acceptance percentage, notify the regional contracts manager within two weeks and request a compliance plan from the provider.
 4. For providers who are not compliant with the required acceptance rate percentage in the EPS contract for the annual reporting period, the regional lead will inform the:
 1. Provider they will no longer receive the monthly per bed base rate and will move to a fee-for-service daily rate as stated in the EPS contract.
 2. Contracts and fiduciary employees of the payment structure change to a fee for service daily rate for the next contract cycle. This will continue until the next annual review and the provider achieves the required acceptance outcome.
6. CPA Specialized Group Receiving Care are contracted short-term placement (14 calendar days) for children and youth who are in need of emergency housing. The rates cover all costs associated with placement and service delivery for the children and youth. There are

two tiers available within these services. Both tier one and two provide children and youth a residence, food, clothing, and other essentials. Services must include a caregiver or contractor employee providing supervision for the children and youth. Tier two is a higher level of service and includes 30 hours of therapeutic case aide services per 30-day stay. The caseworker will also receive a Tier 2 Transition Summary within 24 hours of discharge to assist with service planning for the youth.

1. Referrals

Caseworkers, placement desk worker, or after-hours worker must:

1. If Specialized Group Receiving Care is needed, send a written referral request to a contracted provider.
2. Authorize the tier one or tier two service when entering the placement. The contracted rate for all tiers is all inclusive and no other payment authorization must be made for placement.
3. Verify the [CIPR DCYF 15-300](#) form is updated and send to the provider as soon as possible, but no later than three business days of the child or youth's placement.

2. Length of Service

Caseworkers, placement desk worker, or after-hours worker must:

1. Immediately begin discharge and transition planning for the child or youth when the placement is approved, and communicate the discharge date and transition plan to the provider.
2. Meet weekly to coordinate timely discharge plans.
3. Only authorize services as needed for no longer than 30 calendar days.
4. Obtain signed authorization by the area administrator if the placement is beyond the initial calendar 30 days. Authorizations must be approved every seven calendar days for a maximum of 60 days. Send a copy of each signed authorization to the provider for their client file.

Forms

[BRS Referral DCYF 10-166A](#)

Out-of-State Child Specific Contract Compliance Monitoring Youth Interview Questions DCYF 06-310310 (located in the Forms repository on the DCYF intranet)

[Child Specific Contract Rate DSHS 10-490](#)

[Contract Approval Request DCYF 15-470](#)

[Contracted Health and Safety Visit Referral DCYF 10-566](#)

[Contracted Health and Safety Visit Report DCYF 10-567](#)

[Child Information and Placement Referral \(CIPR\) DCYF 15-300](#)

[Emergent Placement Services \(EPS\) Transition Summary](#)

[Indian Child Welfare Active Efforts and Tribal Collaboration policy](#)

[Specialized CPA - Group receiving care services Tier 2 Transition Summary](#)

4536. Sexually Aggressive Youth

4536. Sexually Aggressive Youth sarah.sanchez Tue, 08/28/2018 - 12:03

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: September 31, 1995

Revised Date: October 19, 2017

Policy Review: October 19, 2020

Purpose Statement

To guide Children's Administration (CA) caseworkers in identification of Sexually Aggressive Youth (SAY), removing the SAY identification, and providing the needed supervision and services to meet the youth's needs.

Scope

This policy applies to CA staff.

Laws

[RCW 13.34](#) Juvenile Court Act - Dependency and Termination of Parent - Child Relationship

[RCW 74.13.075](#) Sexually Aggressive Youth - Defined

[RCW 26.44.160](#) Allegations that child under twelve committed sex offense - Investigation - Referral to prosecuting attorney - Referral to department - Referral for treatment.

Policy

1. Regions must have at least one SAY committee. The SAY committee determines SAY identification/removal, youth's eligibility for SAY funded resources as outlined in [RCW 74.13.075](#), and provides quality assurance oversight.
2. Each region must have regional SAY leads responsible for oversight of the SAY committees and communicating committee decisions to the caseworker.
3. Caseworkers must refer youth who are the subject of a proceeding under [RCW 13.34](#) or a child welfare proceeding held before a tribal court, who are suspected to have demonstrated sexually aggressive or inappropriate sexual behaviors to the regional SAY committee to determine if a SAY identification is appropriate.

4. For identification as SAY, youth must be eight years or older and meet one of the following criteria:
 1. The regional SAY committee has or has previously approved the youth for SAY funded treatment.
 2. The regional SAY committee has determined the youth meets the definition of SAY as defined in [RCW 74.13.075](#).
 3. A valid record exists documenting the youth has been found guilty in a court of law for a sexual offense.
5. All requests for SAY funding must be approved by the regional SAY committee. The caseworker must submit a new request to the SAY committee every six months for continued funding.
6. Prior to youth being identified as SAY, the regional SAY committee may approve funding for an evaluation to help determine SAY identification and appropriate treatment needs.
7. Placement of youth identified as SAY:
 1. SAY identified prior to being placed:
 1. Licensed caregivers must complete the CA approved SAY training prior to placement.
 2. Unlicensed caregivers must complete the CA approved SAY training within 30 days of placement.
 2. SAY identified while in a placement:
 1. Licensed and unlicensed caregivers must complete the CA approved SAY training as soon as possible, but no later than 30 calendar days, after the youth is identified as SAY.
 3. Caseworkers must verify that caregivers have completed the CA approved SAY training.
 4. If caregivers have not completed the CA approved SAY training, caseworkers must:
 1. Provide caregivers with information on where and how to access the training.
 2. Discuss the training requirement with the caregiver and document in the electronic case file the date the caregiver agrees to complete the training.
 3. Verify completion of the CA SAY training.
8. Priority for SAY funds must go to dependent youth. However, non-dependent youth (i.e. Children in Need of Services, Voluntary Placement Agreement, Etc.) may receive SAY services.

9. Referrals from prosecutors or law enforcement for SAY services will be investigated for abuse and neglect. See [2331. CPS Investigation](#) policy.
10. Polygraph testing can only be provided or funded for youth identified as SAY if a court orders the test. A plethysmograph will not be approved or funded.

Procedures

Caseworker must:

1. Complete the SAY Determination Referral DSHS form 15-399 when seeking determination or removal of SAY identification or authorization of SAY funding. Referrals must include:
 1. A detailed description of the youth's sexually aggressive or inappropriate behaviors.
 2. Any other relevant information necessary to determine SAY identification and funding needs, including a completed Request for Authorization of SAY Funds DSHS form 15-399A.
 3. An uploaded copy of the Youth Supervision Plan DSHS form 15-352 in FamLink (when applicable).
2. Complete the approved Youth Supervision Plan DSHS 15-352 in FamLink:
 1. Ensure the Regional SAY Committee has reviewed and approved the Youth Supervision Plan before implementing for youth identified as SAY.
 2. Review the Youth Supervision Plan DSHS form 15-352 with the caregiver.
 3. Identify with the caregiver any training, support or consultation they need as part of the supervision plan.
 4. Obtain the caregiver's signature prior to placement, but no later than 72-hours after placement and document the plan in a FamLink Case Note within seven calendar days.
 5. Upload the signed Youth Supervision Plan DSHS form 15-352 into FamLink.
 6. Provide a copy of the signed Youth Supervision Plan DSHS form 15-352 to the caregiver.
 7. Notify the DLR Licensor via email a signed plan has been completed.
 8. Review the youth supervision plan at least every six months with caregiver and supervisor. Update as needed.
3. Complete a referral to and provision of an appropriate and comprehensive evaluation, treatment and supplemental services by a CA contracted SAY provider as approved by the Regional SAY Committee.
4. Coordinate services and Youth Supervision Plan with the SAY contracted provider, youth's caregiver and, if applicable, Juvenile Rehabilitation or county probation.

5. Document the SAY Warning Indicator in FamLink on the Person Management page, within seven calendar days of the Regional SAY committee identifying a youth as SAY.
6. Request reauthorization of SAY funding from the Regional SAY Committee every six months. Submit DSHS form 15-399 and DSHS form 15-399A and include the following information with the request:
 1. SAY provider quarterly reports;
 2. New documented incidents of inappropriate sexual behaviors;
 3. Supervision Plan; and
 4. Other new evaluations or reports that are important to determine SAY funding needs.

Forms and Tools

Youth Supervision Plan form DSHS 15-352

SAY Determination Referral form DSHS-15-399

Request for Authorization of SAY Funds DSHS form 15-399A

Resources

Youth Supervision Plan Tips

4413 Placement Services

[SAY On-Line Training video](#)

45362. Physically Assaultive/Aggressive Youth

45362. Physically Assaultive/Aggressive Youth sarah.sanchez Tue, 08/28/2018 - 12:03

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: April 30, 2010

Revised Date: October 19, 2017

Policy Review: October 2, 2021

Purpose

To guide Children's Administration (CA) caseworkers in properly identifying Physically Assaultive/Aggressive Youth (PAAY) and providing the needed supervision and services to meet their needs.

Scope

This policy applies to DCFS staff.

Laws

[RCW 74.13.280](#) Client Information

Policy

1. When identifying and determining a youth as PAAY as defined by [RCW 74.13.280](#), a youth must exhibit one or more of the following behaviors that are developmentally inappropriate and harmful to the child or others:
 1. Observed assaultive behavior;
 2. Reported and documented history of the child willfully assaulting or inflicting bodily harm; or
 3. Attempting to assault or inflict bodily harm on other children or adults when the child has the apparent ability to carry out the attempted assaults, including threats to use a weapon.
2. Regions must establish a PAAY committee to determine PAAY identification and provide quality assurance oversight.
3. All PAAY Determination Referrals DSHS 15-400 and Youth Supervision Plans DSHS 15-352 must be initially reviewed and approved by Regional PAAY Committee.
4. All youth identified as PAAY must have a signed Youth Supervision Plan DSHS 15-352 prior to placement, but no later than 72 hours and the plan must be documented in FamLink within seven calendar days.
5. All youth identified as PAAY must be provided needed services.
6. If a youth has complex behavioral health needs, the caseworker must refer them for a Wraparound Intensive Services (WISe) screen per the [4542. WISe policy](#).
7. Youth identified as PAAY must only be placed with licensed caregivers who have completed the CA PAAY training.
8. Youth identified as PAAY and placed with unlicensed caregivers, the caregiver must complete the CA PAAY training as soon as possible, but no later than 30 calendar days.
9. Youth already placed and then identified as PAAY, the caregivers must complete the CA PAAY training as soon as possible, but no later than 30 calendar days.

Procedures

Caseworkers must:

1. Complete a Youth Supervision Plan DSHS 15-352 in FamLink on all youth identified as PAAY with the caregiver and Division of Licensed Resources (DLR) licensor, if available, within seven calendar days. Identify with the caregiver as part of the supervision and plan any training, support or consultation they need.

2. Submit all Youth Supervision Plans DSHS 15-352 for review and signature to the youth's caregiver and:
 1. Provide a copy of the signed plan to the caregiver.
 2. Obtain the original copy in the case file and upload it into FamLink.
 3. Notify the DLR licensor via email that the supervision plan has been completed and signed.
3. Complete the PAAY Determination Referral DSHS 15-400 form and submit with the completed Youth Supervision Plan DSHS 15-352 to the regional PAAY committee when identifying or removing youth as PAAY.
4. Coordinate services with the contracted provider of services and the caregiver.
5. Document in FamLink by checking or un-checking the PAAY Warning Indicator on the Person Management Page within seven calendar days for youth identified as PAAY.
6. Review each youth's supervision plan at least every six months with caregiver and supervisor and update as needed.
7. Prior to placement, verify a prospective licensed caregiver has completed the CA PAAY training. If the licensed caregiver has not completed the training:
 1. Do not place the youth identified as SAY with the caregiver until training is completed and verified.
 2. Provide the caregiver with information on where and how to access the training.
 3. Discuss and document in FamLink the date the caregiver agrees to complete the training.
8. Verify an unlicensed caregiver has completed the CA PAAY training prior to placement. If the unlicensed caregiver has not completed the training:
 1. Provide them with information on where and how to access the training.
 2. Discuss and document in the electronic case file the date unlicensed caregiver agrees to complete the training. This date must be as soon as possible, but no later than 30 days after placement.
9. For youth who are identified as PAAY after they are placed in out-of-home care verify that their licensed or unlicensed caregiver has completed the CA PAAY training. If the caregivers have not completed the training:
 1. Provide them with information on where and how to access the training.
 2. Discuss and document in FamLink the date caregiver agrees to complete the training. This date must be as soon as possible, but no later than 30 days of the identification.

Forms and Tools

- Youth Supervision Plan DSHS 15-352 (located on the CA intranet)
- PAAY Determination Referral DSHS 15-400 (located on the CA intranet)
- FamLink Document upload instructions (located on the CA intranet)

Resources

- Youth Supervision Plan Tips
- 4413 Placement Services
- [Caregiving for Children With Physically Aggressive Behavior Concerns, UW School of Social Work Professional Education](#)

4539. Inpatient Mental Health Treatment For Children

4539. Inpatient Mental Health Treatment For Children sarah.sanchez Tue, 08/28/2018 - 12:04

Service Definition

1. Services to provide psychiatric/psychological treatment to children in the care and custody of DCFS in a hospital or clinical setting. See section 4521, Psychological/Psychiatric Services, above, for additional guidance. Chapters 13.34 and 71.34 RCW
2. There are two types of inpatient mental health treatment for children in Washington state:
 1. Acute inpatient care provided in community hospitals and Evaluation and Treatment Centers, and
 2. Long term inpatient care, provided in the five Children's Long Term Inpatient Programs.

Eligibility

1. Children who are in the care and custody of DCFS and who require inpatient mental health treatment are eligible for this service.
2. No social worker shall provide written consent for voluntary inpatient treatment of a minor child except as described in this section; nor shall the social worker seek inpatient treatment of a child in a court-ordered placement (i.e., dependency, Child in Need of Services [CHINS]) without prior written consent of the child's parents whenever possible.
3. If a parent's prior consent is not possible, then prior approval of the juvenile court is required unless an emergent situation does not allow time for a hearing. In such a case, the social worker will seek court approval within 48 working hours of the placement by requesting a juvenile court hearing.
4. Consent is not required if the child is involuntarily detained in an Evaluation and Treatment facility by a County Designated Mental Health Professional or is subsequently court ordered through the Involuntary Treatment Act (ITA), chapter 71.34 RCW.

5. Children 13 years of age and older may voluntarily seek and consent to inpatient treatment without consent of their parent/guardian or the department. Such a child must consent to inpatient treatment except under the conditions set forth in paragraph 4, above. Parental consent by itself is insufficient.
6. Admission to publicly-funded acute inpatient treatment shall occur only if the child meets medical necessity guidelines as determined by the Regional Support Network (RSN)-authorized mental health professional(s) and with the concurrence of the professional person in charge of the facility.
7. For long-term inpatient psychiatric care, the Children's Long-term Inpatient Program (CLIP) Committee must provide authorization prior to admission. Referral to the CLIP Committee shall only be made by the RSN/Prepaid Health Plan (PHP) of residence. Different access points and procedures may be applied by the local RSN/PHP.

Procedures for Access

1. Emergent Or Non-Emergent (Elective) Voluntary Inpatient Mental Health Treatment for a Child in Custody of the Department
 1. For purposes of this policy, "voluntary patient" means:
 1. A minor 13 years of age or older who has been evaluated and determined to meet criteria of medical necessity for inpatient treatment and who gives written consent for inpatient care; or
 2. Any child under the age of 13 whose parent or legal guardian makes application for the child to be evaluated by the appropriate professional and who has been determined to meet criteria of medical necessity for inpatient treatment. The consent of the child is not required in this instance.
 3. Any legally free child who is in the permanent custody of the department and who also meets the conditions outlined in ii above. The assigned DCFS social worker, with the approval of the supervisor, may sign the consent for treatment of the child under the age of 13.
 2. The following conditions apply if the child is in the department's custody through a dependency order, a voluntary placement agreement (VPA), or a Child in Need of Services (CHINS) order.
 1. If the social worker believes that a minor child is in need of psychiatric inpatient treatment, the social worker follows the following procedures:
 1. The social worker consults his/her supervisor and obtains the concurrence of the supervisor to seek inpatient treatment. The social worker must also consult with the child's parent/legal guardian whenever possible prior to seeking inpatient care.
 2. The social worker, with concurrence of the supervisor, makes an immediate referral to the RSN/PHP certification authority in

accordance with state Mental Health Division (MHD) policy Memorandum #96-26 or subsequent revisions.

3. Children shall only be admitted after a determination of medical necessity.
 - For acute psychiatric care, the RSN/PHP-authorized mental health professional(s) must determine whether medical necessity is met.
 - In either case, the professional person in charge of the facility concurs with the admission.
4. Once a determination of medical necessity has been made, written consent for admission, treatment, and release of information is given in accordance with the following:
 - For children under 13 years of age, the consent of the parent or legal guardian is required whenever possible, even when the child is under a dependency order.
 - The social worker may give consent for elective care only after obtaining authority to do so from the juvenile court, except when the child is in the permanent custody of the department, in which case the social worker can consent under the permanent custody order. Court review shall occur within 48 hours of the petition except where the department has permanent custody.
 - In emergencies, the social worker may provide written consent for immediate inpatient care within a community hospital.
 - Parental agreement/consent or court review must sanction the social worker's consent within 48 hours, except where the department has permanent custody.
 - Court review does not supplant the authority of the RSN/PHP designated mental health professional(s) and the professional person in charge of the inpatient facility who must determine medical necessity prior to admission.
 - Children 13 years of age and older may consent to treatment without the consent of the parent or social worker. If the parent or social worker does not support inpatient care, they

may give notice to the evaluation and treatment facility that admitted the child in accord with chapter 71.34 RCW.

- The Washington State Supreme Court, in the case of *State v. CPC Fairfax Hospital*, 129 Wn.2d 439 (1996), determined that a child 13 years of age or older admitted to that an inpatient facility on application of the child's parent was detained without due process. Since that decision, providers have declined admissions where the consent of the child has not been obtained prior to a voluntary inpatient admission.
 - Thus, for children 13 years of age and older who are unwilling to be admitted to inpatient care, the parental consent is not considered by care providers as sufficient consent for admission against the child's will.
 - In the absence of parental consent, or consent of the child age 13 or above, the social worker may petition the juvenile court for the authority to give consent for the admission against the child's will.
 - In emergencies the social worker may give consent immediately. This type of admission is considered a voluntary (parent-authorized) admission under chapter 71.34 RCW. Court review shall occur within 48 hours of the petition for elective care, and within 48 hours of admission for emergent care. Court review does not supplant the authority of the RSN/PHP designated mental health professional(s) and the professional person in charge of the inpatient facility who must determine medical necessity prior to admission.
- If the custodial parent does not agree with admission to inpatient care for children of any age, the social worker may file a dependency petition with the court, if one does not already exist. At that time, the social worker may simultaneously request authority to provide consent for inpatient treatment.

2. Involuntary Inpatient Mental Health Treatment for a Child in Custody of the Department

1. The following conditions apply if the child is in the department's custody through a dependency order, a VPA, or a CHINS order.
2. Admission for involuntary treatment may only occur after a determination of medical necessity is made by a County Designated Mental Health Professional

(CDMHP). The CDMHP has authority to initially detain for 72 hours in an acute psychiatric facility any child, 13 years of age or older, who meets the criteria for involuntary detention.

- **Children under the age of 13 may not be involuntarily detained through this process.**
- 2. CDMHPs are bound by law to explore and utilize less restrictive treatment options when they are available and appropriate. Consent of the parent or minor child is not required for involuntary admission to inpatient care.
- 3. Necessity for treatment beyond 72 hours is evaluated by the facility, in concert with significant others involved with that child, and must be ordered by the superior court in accord with chapter 71.34 RCW.
- 4. Youth exhibiting the following conditions, as a result of a mental disorder, may be referred to the local CDMHP for assessment if she/he is unwilling to be hospitalized voluntarily:
 - 1. Is in danger of serious physical harm or manifests severe deterioration in routine functioning resulting from a failure to receive care essential to personal health or safety; and/or
 - 2. Is a danger to self or others as evidenced by threats or attempts to commit suicide or inflict bodily harm to self or others; and/or
 - 3. Is likely to cause substantial loss or damage to the property of others.
- 5. Subsequent Admissions-Any subsequent admissions for voluntary care shall require a new assessment and determination and must follow the appropriate protocol as outlined above.

4541. Psychotropic Medication Management

4541. Psychotropic Medication Management sarah.sanchez Tue, 08/28/2018 - 12:05

Purpose and Scope

1. This standard and procedure establishes guidelines for Children's Administration (CA) staff and CA-licensed or certified out-of-home care providers to follow when a child is in the custody of the department, placed in out-of-home care, and is or may be administered psychotropic medication.
2. This standard applies to children placed in the department's custody, whether by voluntary placement agreement (VPA) or court order. It is prospective only. It applies only to children not receiving such medications on the effective date of this policy, June 1, 1997.

Definitions

1. For definitions of “Medical History,” “PRN,” and “Psychotropic Medication” as they pertain to this section, see Appendix A.
2. “Informed consent” means consent given for administration of psychotropic medications by a person authorized by law or under this section following provision of information by a licensed medical professional regarding the purposes of the medication, the range of dosages, possible side effects, and expected results.

Standard

1. The CA social worker and the out-of-home care provider must comply with the provisions of RCW 13.34.060 regarding authorization of routine medical and dental care for the child in the custody of CA.
2. For children who have been prescribed psychotropic medication, compliance with Chapter 71.34 RCW, Mental Health Services for Minors, is required.
3. Neither the CA social worker nor the out-of-home care provider may authorize the administration of psychotropic medications to a child in the custody of CA, with the following exceptions:
 1. The CA social worker may authorize the administration of such medications if the child is legally free and in the permanent custody of the department.
 2. The CA social worker may authorize the administration of such medications when it is impossible to obtain informed parental consent after normal work hours, on weekends, or on holidays. In such instances, the social worker must obtain either informed parental consent or a court order within 72 hours, excluding weekends and holidays, of authorizing administration of the medication.
4. The parent of the child in CA custody must provide informed consent for the administration of psychotropic medications to the child, unless the child is age 13 or older and competent to provide consent in his or her own behalf. If the parent is unavailable, unable, or unwilling to consent to the administration of medically necessary psychotropic medications, the social worker shall obtain a court order before the medications may be administered.
5. Consent for treatment will vary according to the child's age.
 1. Children age 13 years and older must consent to the administration of their own medication. They also have the right to maintain confidentiality of the information.
 1. The CA social worker needs to encourage the adolescent to share information about the use of such medication with their parents, their out-of-home care provider, and their guardian ad litem. The care of the child is likely to be compromised if the out-of-home care provider does not have knowledge of the medication being used and access to the prescribing physician for consultation.
 2. If the child refuses to release information concerning medication to the out-of-home care provider, the CA social worker shall review the child's

continued need for placement. If the child remains in out-of-home care and continues to refuse to release information about his/her medication, the social worker will request the court to order release of the information to the care provider and to the department.

3. If the child refuses to release information to the parent, the parent, if wanting the information, needs to request a court order to obtain it.
2. Children who are 13 years of age and older may not be able to provide knowledgeable consent to administration of psychotropic medication due to cognitive disabilities. In such an instance, the treating medical professional determines if the child is capable of giving consent. If the child is unable to provide consent, the parent must provide consent or the social worker must obtain a court order to authorize treatment.
6. The informed parental consent or court order needs to be a general authorization for the administration of psychotropic medications at the direction of a qualified, licensed physician so that a change in the consent or court order is unnecessary when it is necessary for the physician to adjust the medication.
7. The social worker may contact the statewide Child Abuse Consultation Network at 1-206-987-2194 or after hours at 1-206-987-2000 whenever medication management would be facilitated by expert medical consultation. For consultation with a pharmacist on prescribed or non-prescribed medications, the CA social worker, the foster parent, or other care provider may contact the Washington Poison Control Center at 1-800-222-1222. Department staff needs to identify himself or herself as a CA social worker, and ask to speak to the pharmacist on duty.

4542. Wraparound with Intensive Services (WISe)

4542. Wraparound with Intensive Services (WISe) sarah.sanchez Tue, 08/28/2018 - 12:05

Original Date: October 19, 2017

Revised Date: July 28, 2019

Policy Review: July 31, 2023

Approved by: Ross Hunter, Secretary

Purpose

To identify and refer Medicaid eligible children and youth up to age 21 who have complex behavioral health needs in-home and out-of-home in an open case in DCYF for a Wraparound with Intensive Services (WISe) screen and support access to WISe, when the child or youth qualifies for services.

Scope

This policy applies to child welfare caseworkers.

Laws

[Sec. 1905 Social Security Act](#) Definitions

Policy

1. WISE referral screens are completed by designated mental health providers. When children or youth meet the criteria below, caseworkers:
 1. Must refer or verify a referral for a WISE screening is completed when children or youth:
 1. Have complex health needs; and
 2. There is an open case; and children or youth are:
 1. Entering or are being discharged from a Children's Long Term Inpatient (CLIP) facility.
 2. Being released from crisis intervention services, including involuntary commitments.
 3. Being considered or referred for [Behavior Rehabilitation Services \(BRS\)](#). A WISE screen must be completed 90 days prior to or within 30 days of commencement of BRS services.
 4. Receiving BRS. A WISE screen must be completed every six months; or
 5. Transitioning out of BRS. BRS contracted providers are responsible for initiating the screening referral for mental health services upon exiting BRS services.
 2. May refer or verify a referral is made for non-BRS cases, when children or youth:
 1. Have a complex health need; and
 2. There is an open case and children and youth are:
 1. At risk of out-of-home placement;
 2. Experiencing multiple placement disruptions;
 3. Have disrupted from a pre-adoptive or adoptive placement;
 4. Are returning home and need additional behavioral health support services;
 5. Have special education needs or a 504 plan with multiple school suspensions; or

6. Are involved in multiple systems (i.e. DCYF, Juvenile Rehabilitation, Developmental Disabilities Administration, or behavioral health agencies and providers).

2. WISe Referral Information

Caseworkers must provide the following information about children or youth to [designated mental health providers](#) for the area where they reside when making WISe referrals:

1. Name;
2. Date of birth;
3. Placement and caregiver information;
4. Prescribed psychotropic medications;
5. The need for interpreter services;
6. Services the child or youth are receiving and indicate the services; and
7. If the child or youth is either:
 1. Currently receiving BRS;
 2. Being considered for BRS; or
 3. Exiting BRS.

3. WISe Referral Verification

Caseworkers must verify when:

1. Children or youth do not qualify for WISe services, verify with their caregiver or [designated mental health provider](#) that they were referred for other behavioral health services to address their behavioral health needs.
2. Children or youth do qualify for WISe services:
 1. Join the Child and Family Team (CFT) and participate in conversations with team members regarding the child or youth.
 2. Attend and participate in CFT meetings. CFT meetings can be combined with other [shared planning meetings](#).
 1. For children or youth in BRS, follow the requirements in the [BRS](#) policy.
 2. For other children and youth with complex behavioral health needs, at the CFT meetings:
 1. Encourage and support engagement and collaboration with the child or youth and family in the development and ongoing monitoring of the [Cross System Care Plan](#) until treatment is completed;

2. Provide consultation on services and resources available through DCYF;
 3. Obtain and bring the signed release of information form from the child, youth or parents when they are unable to attend the meeting prior to sharing any confidential information with any CFT team members.
 4. Review the CFT [Cross System Care Plan](#), to verify it is in alignment with the child, youth or family's child welfare case plan, e.g. court orders.
4. WISe Referral Documentation
- Caseworkers must document the following in a FamLink case note:
1. For BRS cases, follow the documentation requirements in the [BRS](#) policy.
 2. For other cases of children or youth with complex behavioral health needs document:
 1. Conversations with the child or youth, families, and caregivers regarding WISe referral and services.
 2. The date a WISe referral was made and screen results, when made by the caseworker.
 3. Name of the individual who agreed to make the referral, when applicable.
 4. Verification of referral being made by another individual, when not made by the caseworker.

Resources

[Family Youth System Partner Round Table \(FYSPRT\)](#)

[WISe Program, Policy and Procedure Manual](#)

[WISe Protocol](#)

[WISe Referrals Contact List by County](#)

[WISe Reports](#)

[Wraparound with Intensive Services \(WISe\)](#)

4543. Foster Care Assessment Program (FCAP)

4543. Foster Care Assessment Program (FCAP) sarah.sanchez Tue, 08/28/2018 - 12:06

Applies to: This policy applies to DCYF employees.

Policy Number & Title: 4543. Foster Care Assessment Program (FCAP)

Effective Date: August 1, 2024

Purpose

The purpose of this policy is to provide guidance on the use of the FCAP which is a consultation or evaluation to improve the well-being and permanency outcomes for children or youth when barriers to permanency are identified.

Authority

[RCW 74.14A.050](#) Identification of children in state-assisted support system-Program development for long-term care-Foster care caseload-Emancipation of minors study.

Policy

1. Caseworkers may refer children and youth to the FCAP when barriers to permanency are identified and criteria is met in [RCW 74.14A.050](#).
2. FCAP leads must review referrals and manage the FCAP process.
3. Screening and Assessment Program Manager must manage the FCAP contract with the selected contractor.

Resources

Foster Care Assessment Program Intranet Page (Located on the DCYF intranet under Child Welfare Intranet, Programs, and Foster Care Assessment Program)

Foster Care Assessment Program Procedures (Located on the DCYF intranet under Policy & Practice, under Policies & Procedures)

Original Date: January 25, 2001

Revised Date: August 1, 2024

Review Date: August 31, 2028

Approved by: Vickie Ybarra, Assistant Secretary of Partnerships, Prevention, & Services Division

4544. Responsible Living Skills Program

4544. Responsible Living Skills Program sarah.sanchez Tue, 08/28/2018 - 12:06

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: 2002

Revised Date: July 1, 2018

Policy Review: July 1, 2023

Purpose

To assist staff in identifying and referring dependent eligible youth, age 16 through 17, to RLSP. If the youth is participating in RLSP prior to their 18th birthday, the youth may continue participating in RLSP up to age 21 when agreed upon by the caseworker and RLSP contracted provider.

Scope

This policy applies to Division of Children and Family Services staff.

Laws

RCW 74.15.020 Definitions

[RCW 74.15.230](#) Responsible living skills programs, established, requirements

[RCW 74.15.240](#) Responsible living skills program, eligibility

[RCW 74.15.250](#) HOPE centers, responsible living skills programs, licensing authority, rules

Policy

1. Caseworkers must:
 1. Determine if placing the youth age 16 through 17 years old in RLSP is the most appropriate placement based on the youth's circumstance. The youth must meet the following eligibility criteria:
 1. Must be a dependent under [Chapter 13.34 RCW](#);
 2. Does not have primary or alternate permanency plan of return home;
 3. Verbally agrees to participate in RLSP; and
 4. Does not have any behaviors that will hinder them from goals of the program or that could impact the safety of others.
 2. Complete and submit the RLSP Referral Criteria form DSHS 15-354 for all eligible youth to the regional RLSP coordinator or designee. The following information must be attached and submitted with the referral form or as soon as they are obtained:
 1. Most current court report
 2. Most current court order
 3. Mental health documents within the past two years (e.g. psychological evaluations, treatment diagnosis or reports, etc.)
 4. Placement history report
 5. Copy of social security card and birth certificate
 6. Copy of immunization records

7. Education records from the prior 18 months, including 504 or Individual Education Plan (IEP)
 8. Other relevant legal orders pertaining to the youth's RLSP eligibility
3. Collaborate with the contracted RLSP provider in facilitating a meeting with the youth and any significant individuals identified by the youth to discuss the intent and expectations of the program and the youth's commitment to participate in the program.
 4. Review Independent Living pages in FamLink prior to any court hearing or Multidisciplinary Meeting (17.5 staffing) for youth participating in the program.
 5. If the youth is missing from care (MFC), coordinate with the contracted RLSP provider to determine if the bed can remain open until the youth returns. Contracted RLSP providers have the discretion to keep a bed open for 15 calendar days when a youth is MFC.
 6. Complete a new referral if a youth exits the program, wants to re-admit prior to age 18 and continues to meet the eligibility criteria.
 7. Discuss and follow the [43105 Extended Foster Care Program policy](#) with any youth interested in the program prior to their 18th birthday.
2. Regional RLSP coordinators must:
 1. Review the RLSP referral form to verify eligibility and required attachments available at time of referral.
 2. Submit referral forms to contracted RLSP providers.
 3. Review monthly reports from contracted RLSP providers to evaluate the:
 1. Youth's individual outcomes and programmatic objectives are being met.
 2. Provider's ability to meet the youth's needs.
 3. Notify caseworkers in their region when an RLSP opening becomes available.

Forms

RLSP Referral form DSHS 15-354 located on CA intranet

Resources

Independence.wa.gov

www.caseylifeskills.org

FamLink Independent Living Quick Help Guide located on CA intranet

4545. HOPE Center Placement

4545. HOPE Center Placement sarah.sanchez Tue, 08/28/2018 - 12:06

Approval: Jennifer Strus, Assistant Secretary

Original Date: July 1, 2000

Revised Date: July 23, 2017

Policy Review: July 23, 2021

Purpose

Hope centers provide temporary residential placement, assessment and coordination of community services for street youth.

Scope

This policy applies to Division of Children and Family Services (DCFS) caseworkers.

Laws

[RCW 13.32A.140](#) Out-of-Home Placement, Child in Need of Services

[RCW 43.185C.315](#) Youth Services, Hope Centers, Requirements

[RCW 43.185C.320](#) Youth services, Hope Centers, Eligibility, Minors

[RCW 74.13.280](#) Client Information

[RCW 74.14A.020](#) Services for Emotionally Disturbed and Mentally Ill Children, Potentially Dependent Children, and Families-In- Conflict

Policy

1. Accessing Placement in a Hope Center
 1. The caseworker must:
 1. Refer to [2200. Intake](#) or [3100. Family Reconciliation Services](#) policies for service requests for non-dependent youth requiring placement. Contact extended family, CRC, or other resource for placement as appropriate.
 2. Send a [Child Information Placement and Referral DCYF form 15-300](#) to the CA placement coordinator for dependent youth. The Hope Center will make the final determination whether to accept the placement request, and priority will be given to:
 1. Youth close to turning 18 years old or who could utilize a Hope Center placement before accessing:
 1. Responsible Living Skills Program (RLSP)
 2. Independent Youth Housing Program (IYHP)
 3. Extended Foster Care (EFC)

4. Other long term housing and service options.

2. Placement in a Hope Center

The caseworker will:

1. Obtain legal authorization for placements lasting longer than 72 hours.
2. Ensure the youth does not stay in a Hope Center longer than 30 calendar days.
Note: A Hope Center may approve extensions, but placement cannot exceed 60 calendar days total. During the Hope Center stay, the caseworker must try to facilitate family reconciliation, return the youth home, or develop an alternative long-term placement plan.
3. Follow [ICW Manual Chapter 5.05 CPS Referrals – Involvement of All Indian Tribes before Court Intervention](#), and notify the youth's tribe of the placement change if the youth is enrolled or eligible for membership in a federally recognized tribe.
4. When a child is in the care and custody of CA, and placed in a Hope Center:
 1. Follow [4420 Health and Safety Visits](#) policy.
 2. Schedule a [Family Team Decision Making Meeting](#) or [Shared Planning Meeting](#) within 72 hours of placement, excluding weekends and holidays.
 3. Authorize emergent medical and dental care.
5. Document case coordination in FamLink.

3. Information Sharing with Hope Center Staff

1. For dependent youth in a Hope Center who have self-referred or been referred by law enforcement, the caseworker must provide and exchange information per [RCW 74.13.280](#) and [4420 Placement Planning](#) policy. Information includes, but is not limited to:
 1. Name
 2. Date of birth
 3. Gender
 4. Behaviors
 5. Risks
 6. Special needs
 7. Sexually Aggressive/Physically Aggressive Assaultive Youth (SAY/PAAY) history
 8. Offense History

Forms

[Child Information and Placement Referral Form DCYF 15-300](#)

[Youth Run Prevention Plan DSHS 10-484](#)

[Return Child De-Briefing Form DSHS 15-309](#)

Resources

Contracted Youth Service Providers

4550. Youth Missing from Care

4550. Youth Missing from Care sarah.sanchez Tue, 08/28/2018 - 12:07

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: August 2004

Revised Date: June 7, 2018

Policy Review: June 7, 2021

[Policy Update Memo Effective July 10, 2023](#)

Purpose

Dependent youth who run from out-of-home care put their safety and well-being at risk. When a youth runs from out-of-home care, staff need to act quickly to locate the youth, address the youth's reasons for leaving and develop a run prevention plan.

Scope

This policy applies to Children's Administration (CA) staff.

Laws

[RCW 74.13.031](#) Duties of department - Child welfare services - Children's services advisory committee

[PL 113-183](#) Preventing Sex Trafficking and Strengthening Families Act

[PL 106-386](#) Victims of Trafficking and Violence Protections Act of 2000

Policy

1. Youth Missing From Care (MFC):
 1. Active and ongoing efforts must be made to locate a youth MFC within 24 hours of notification and until the youth returns to out-of-home care.
 2. A run report must be filed with law enforcement (LE) and the National Center for Missing and Exploited Children (NCMEC) when a youth is MFC. CA cannot give NCMEC consent to release child information.

3. Caregivers must be informed of the requirement to file a run report with LE and contact NCMEC at 1-800-843-5678 when a youth is MFC. Caregivers must be informed they cannot give NCMEC consent to release youth information.
 4. The youth's dependency must continue while he or she is on the run until their 18th birthday, at which time the caseworker must request to dismiss the dependency unless the youth enrolls in Extended Foster Care (EFC).
 5. When a youth is MFC overnight or longer, the case must be staffed with a supervisor within two calendar days, excluding weekends and holidays.
 6. An attorney must be requested for all youth MFC overnight or longer if the youth does not have an attorney.
 7. LE and NCMEC must be contacted for a youth remaining on the run at 18 years of age to terminate the run report.
 8. The [Commercially Sexually Exploited Children \(CSEC\)](#) policy must be followed regarding the completion of the CSEC screen for MFC youth.
2. Youth Returning to Care:
1. LE, NCMEC and individuals or agencies involved with the youth must be notified within 24 hours of the youth's return to out-of-home care.
 2. A debriefing interview must be conducted with the youth within two calendar days (excluding weekends and holidays) of returning to out-of-home care. A Returning Child De-Briefing form must be completed in FamLink.
 3. A [Youth Run Prevention Plan form DCYF 10-484](#) must be developed or, if a plan has previously been completed, be reviewed and updated with any new relevant information with the youth.
 4. Upload the completed or updated [Youth Run Prevention Plan form DCYF 10-484](#) in FamLink.
 5. Review the completed Run Prevention Plan with caregiver upon youth's return to care.

Procedures

1. When youth are MFC, CA staff must:
 1. Create the FamLink Temporary Situation in Placement to document youth is on the run.
 2. Document LE run report number in a case note. If the caregiver did not file a run report or contact NCMEC, the caseworker immediately contacts LE to file a run report and obtain the LE run report number. Contact NCMEC at (1-800-843-5678) to make a run report.

3. Notify individuals or agencies important to a youth within 24 hours of learning the youth is MFC. Individuals to notify may include but are not limited to:
 1. Legal parent or guardian
 2. Relatives
 3. Child's Attorney, Court Appointed Special Advocate, Guardian Ad Litem
 4. School
 5. Therapist
 6. Tribe
4. Make ongoing search efforts to locate the child beginning within 24 hours of learning the youth is MFC and continue until the youth returns to care. Ongoing outreach and search efforts may include, but are not limited to the following locations, individuals, and entities:
 1. Bus stations
 2. Youth centers
 3. Family members' and friends' homes
 4. Places the youth may frequently be found
 5. School
 6. Homeless shelters
 7. Agency available data bases
 8. Probation/parole
 9. Communication with family, friends and known associates
5. **MFC locators only:** May search social media websites and Not Safe For Work (NSFW) websites such as Craigslist and Backpage.com
6. Notify the Regional MFC lead within 48 hours of learning a youth is MFC.
7. Conduct a MFC staffing with the supervisor within two calendar days (excluding weekends and holidays) for youth MFC overnight or longer. Document the staffing results in FamLink. The MFC staffing includes:
 1. Search strategies and efforts
 2. Protective factors and vulnerabilities of youth
 3. Individuals contacted
 4. Potential reasons the youth ran

5. Determining if the youth needs an attorney appointed
 6. Determining if a pick-up order and warrant are needed, and
 7. Discussing if a court hearing should be scheduled. Some factors to consider when making this determination are:
 1. Placement problems or no appropriate placement options available
 2. All other efforts and interventions have failed
 3. Youth is a chronic runner
 4. If court sanctions would be an effective deterrent for the youth
 8. Write and file a declaration for a pick-up order or warrant for the youth.
 9. Discuss the following areas at the court hearing:
 1. Placement problems or no appropriate placement options available,
 2. Additional services needed to support or stabilize the youth,
 3. Search and run prevention strategies that have occurred and
 4. Any efforts to locate the youth.
 10. Document the following in a monthly case note until the youth returns to out-of-home care or ages out of care:
 1. Continued efforts to locate youth,
 2. Any contact with the youth,
 3. Other critical information obtained related to the youth's health, safety, or whereabouts and
 4. Any follow-up action taken since entry of prior case note.
2. When youth return to care, CA staff must:
1. Notify LE, NCMEC (1-800-843-5678) and other individuals important to the youth's case within 24 hours of the youth's return to out-of-home care.
 2. Assess and address any identified health or safety concerns and assist the youth in accessing appropriate care within 24 hours of the youth's return to out-of-home care.
 3. Close the Temporary Situation Placement and document the youth's current placement in the Placement page in FamLink.
 4. Conduct a debriefing interview with the youth within two calendar days (excluding weekends and holidays) of returning to out-of-home care to:

1. Evaluate the youth for health and safety concerns and assist with appropriate care and safe placement.
2. Discuss the youth's interest in re-establishing connections with their biological family, including parents, grandparents, and siblings. This includes discussing skills and strategies to safely reconnect with any identified family members, provide guidance and services to assist the youth.
5. Complete the Returning Child De-Briefing form in FamLink with the youth.
6. Develop a run prevention plan or review and update an existing run prevention plan with any new relevant information with the youth and document on [Youth Run Prevention Plan form DCYF 10-484](#). The run prevention plan is developed from information gathered from the youth during the returning debriefing interview and should focus on:
 1. Services or activities that the youth needs to help them stay in care including, but not limited to:
 1. Increase in family time or other safe, positive social connections,
 2. Independent living skills,
 3. Medical visits,
 4. Substance use disorder treatment,
 5. Behavioral health services
 2. Interventions that could prevent the youth from running from care, including but not limited to:
 1. Alone time,
 2. Time to visit with friends,
 3. Listening to music,
 4. Creating a list of individuals that youth will reach out to if they have a desire to run in the future,
 5. Talking to youth about what they are feeling during the "need to run" moment.
 3. Upload the completed [Youth Run Prevention Plan form DCYF 10-484](#) in FamLink.
7. Complete the CSEC Screening Tool DSHS 15-476 as required by the [Commercially Sexually Exploited Children \(CSEC\) policy](#).

Forms

[Youth Run Prevention Plan form DCYF 10-484](#)

[Returning Child Debriefing form DCYF 15-309](#)

CSEC Screening Tool DSHS 15-476 (CA Intranet)

Resources

[Run Prevention Tips for Staff](#)

[How to Help a Youth Who is at Risk to Run - Prevention Tips for Caregivers](#)

[Resource Information for Youth at Risk to Run - Tips for Staff and Caregivers](#)

[When a Youth Runs and Returns - Tips for Caregivers](#)

[When a Youth Returns - Tips for Staff](#)

[Youth at Risk for Running Away - Tips for Caregivers and Staff](#)

[MFC Lead and Locator Directory](#)

4551. Day and Overnight Camp Approval Process

4551. Day and Overnight Camp Approval Process admin Thu, 12/09/2021 - 07:50

Original Date: January 3, 2022

Revised Date:

Sunset Review Date: December 31, 2025

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide direction on the approval process for the following requests for dependent children and youth in-home or in out-of-home placement to support their participation in normal childhood activities when attending:

- Overnight camps where overnight attendance is over 72 hours.
- Out-of-state camps.
- Day or overnight camps and payment is requested.

DCYF-sponsored, school-sponsored, and [accredited camps](#) do not require regional camp designee review.

Scope

This policy applies to child welfare employees.

Laws

[RCW 74.13.031](#) Duties of department-Child welfare services-Children's services advisory committee

[RCW 74.13.330](#) Responsibilities of foster parents

[RCW 74.13.710](#) Out-of-home care-Childhood activities-Prudent parent standard

Policy

1. DCYF will review requests for dependent children and youth placed in-home and in out-of-home care to attend or for DCYF to pay for camps to support their participation in normal childhood activities.
2. Regional administrators must designate a regional-level single point-of-contact to review camps when:
 1. Overnight attendance is over 72 hours.
 2. The camp is out-of-state.
3. Regional camp designees must:
 1. Complete reviews on camps located in their region and out-of-state, when requested by caseworkers.
 2. Maintain a statewide camp list of reviewed camps.
 3. Complete annual reviews for camps on the statewide camp list that are:
 1. Within their region.
 2. Out-of-state, if they completed the initial camp review.
4. Caseworkers must obtain approval for:
 1. Camps, prior to allowing children or youth to attend overnight camps over 72 hours and out-of-state camps.
 2. Funding for camps, when requested.
5. Employees must follow the following policies, when applicable:
 1. [Reimbursing Caregiver Transportation Expenses](#)
 2. [Approving Client Travel and Transportation Activities](#)
 3. [Administrative Approvals for Child Welfare](#)

Procedures

1. Day Camp or In-State Camp with Overnight Stay under 72 Hours
When approving DCYF payment for day camps or in-state camps with overnight stays under 72 hours, caseworkers must follow the Camp Approval Quick Reference Guide.

2. Overnight Camps Over 72 hours and Out-of-State Camps

When approving attendance at an overnight camp over 72 hours or an out-of-state camp and when approving DCYF payment for these camps, caseworkers must:

1. Verify the camp's status on the statewide camp list. When a camp is:
 1. On the list, determine camp suitability for the individual child or youth.
 2. Not on the list and the camp is:
 1. In-state, refer the camp to the regional camp designee for review.
 2. Out-of-state, verify the camp experience is not currently offered by an in-state camp by conducting an internet search of in-state camps or contacting in-state camps and reviewing the information about the camp and experiences they offer. When in-state camps:
 1. Offer a comparable experience:
 1. Notify the requestor of the denial.
 2. Provide them with the in-state camp information.
 3. Discuss whether they want to change the request to an in-state camp. If they would like to proceed with an in-state camp determine camp suitability for the individual child or youth.
 2. Do not offer a comparable experience, refer the camp to the regional camp designee for review.
2. Determine camp suitability for the individual child or youth by:
 1. Reviewing the camp information on the Camp Study Report DCYF 15-020 form.
 2. Determining whether:
 1. The camp is in the best interest of the child or youth.
 2. Special accommodation or supervision is needed and the camp is able to meet the child's or youth's needs.
 3. [Health and safety visits](#) can be completed, per the [Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers](#) policy, when applicable.
3. If the camp is determined:
 1. Suitable, follow the Camp Approval Quick Reference Guide.
 2. Not suitable, contact the requestor and include the basis for denial.

3. Regional Camp Designee Reviews

When a camp requires a regional camp designee's review:

1. Caseworkers must request the review by emailing the following to the assigned regional camp designee:

1. Name
2. Location
3. Contact information
4. Camp registration deadline

2. Regional camp designees must:

1. Verify the camp is within their region. For camps located:

1. Within their region, conduct the camp review.
2. Outside of their region, forward the request to the appropriate regional camp designee immediately.
3. Out-of-state:
 1. Add the camp to the statewide list.
 2. Label the camp status "In Process".
 3. Conduct the camp review.

2. Conduct the camp review by:

1. Prioritizing requests with earlier camp registration deadlines, when possible.
2. Completing the following within 30 calendar days of the request:
 1. Complete the Camp Study Report DCYF 15-020 form. Based on the information gathered, determine if the camp will be "Approved" or "Denied" on the form. For "Denied" camps, include the basis for denial in the "Rational for Denial" section on the form.
 2. Update the statewide camp list, including the determination and attach the Camp Study Report DCYF 15-020 form.
 3. Email caseworkers, when the review is complete, including the Camp Study Report DCYF 15-020 form.

4. Annual Regional Camp Designee Reviews

Regional camp designees must complete regional camp designee reviews annually to verify camps on the statewide camp list continue to meet review criteria for camps located:

1. Within their region.
 2. Out-of-state, if they completed the initial review.
5. Camp-Related Incidents or Other Camp Information
- When there are camp incidents or other camp-related information that may impact the safety or health of children or youth participating in the camp:
1. Caseworkers must complete the following:
 1. Review the camp incident or other known information immediately with their supervisor.
 2. Follow the:
 1. [Administrative Incident Reporting](#) policy for notification, documentation, and management of any administrative incidents.
 2. [Present Danger](#) policy, if children or youth are determined to be in present danger.
 3. [Mandated Reports to Law Enforcement](#) policy, if there is reasonable cause to believe a crime has been committed against a child or youth.
 4. [Intake Process and Response](#) policy, if there are new allegations of abuse or neglect.
 3. Report the incident or other information to the regional camp designee.
 2. Regional camp designees must update the camp status from “Approved” to “Hold” on the statewide list and the Camp Study Report DCYF 15-020 form.

Forms

[Administrative Approval Requests DCYF 05-210](#)

[Child Welfare Travel Authorization DCYF 03-478](#)

Camp Study Report DCYF 15-020 (located in the Forms repository on the DCYF intranet)

[Provider File Action Request DCYF 06-097](#)

Resources

[Administrative Approvals for Child Welfare policy](#)

[Administrative Incident Reporting policy](#)

[American Camp Association](#)

Camp Approval Quick Reference Guide (located on CA intranet under CFWS Programs page)

[Approving Client Travel and Transportation Activities policy](#)

[Caregiver Guidelines for Foster Childhood Activities](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Intake Process and Response policy](#)

[Mandated Reports to Law Enforcement policy](#)

[Present Danger policy](#)

[Reimbursing Caregiver Transportation Expenses policy](#)

Statewide Camp List (located on the CA intranet)

Travel Approval Quick Reference Guide (located on the CA intranet)

46100. Monthly Clinical Supervision Case Reviews

46100. Monthly Clinical Supervision Case Reviews sarah.sanchez Tue, 08/28/2018 - 12:11

Original Date: September 27, 1995

Revised Date: January 3, 2022

Sunset Review Date: December 31, 2025

Approved by: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide guidance to child welfare supervisors on conducting monthly clinical supervision case reviews. Clinical supervision includes building caseworker's competencies, encouraging self-reflection and critical thinking skills, and building on training to support casework decision-making.

Scope

This policy applies to supervisors

Policy

Supervisors must:

1. Conduct monthly clinical supervision case reviews and verify policy is followed for the appropriate program with each caseworker under their supervision for all cases open 30 calendar days or more.
2. Maintain caseworker's performance documentation separate from client case files.

Procedure

During clinical supervision case reviews, supervisors must:

1. Verify that the caseworker's decisions demonstrated critical thinking for each case by reviewing and discussing the following:
 1. Safety
 1. The [safety assessments, safety plans](#), and decision-making process, per the [Child Safety](#) policy. This includes, but is not limited to:
 1. Decisions to leave children or youth in the home or to remove them from the home.
 2. [Assessments](#) for all individuals living in the home or on the premises and their role in supervising or providing care for the children or youth.
 3. Behavioral, emotional, and cognitive changes needed for the parents or guardians to safely parent their children or youth in the home.
 4. In-home [safety plans](#), when applicable.
 5. Completion of background checks, per the [Background Checks](#) policy.
 6. Level of supervision for [family time](#).
 2. Timeliness of response times and efforts to locate children or youth, per the [Child Protective Services \(CPS\) Initial Face-to-Face \(IFF\) Response](#) policy.
 2. Permanency
 1. Timely identification and documentation of appropriate [primary or alternate plans](#), including [compelling reasons](#), when applicable.
 2. Progress towards achieving a [primary or alternate plan](#).
 3. Plans and [conditions for return home](#), including, but not limited to:
 1. Whether an in-home [safety plan](#) could support a return home.
 2. Any barriers to the family completing services.
 3. How parents or guardians have increased their parenting abilities to improve the child's or youth's safety.
 4. Whether a dependency dismissal, termination of parental rights, guardianship, adoption, or Extended Foster Care is recommended.
 3. Well-being
 1. Timeliness, frequency, and quality of [health and safety visits and monthly visits with parents and caregivers](#), when applicable.

2. Appropriate services for children and youth, parents or guardians, or caregivers were identified, offered, referred, and are in place, when applicable. Services include whether:
 1. Voluntary or additional services that could either:
 1. Increase a child's or youth's safety.
 2. Reduce or eliminate risk and increase the parents' or guardians' protective capacities.
 2. Additional services needed for children or youth who have been in their parent's or guardian's home for 6 months.
 3. Any other services are needed.
 4. The family has connections to formal and informal supports or other community resources.
 5. Service authorizations are closed.
4. Engagement
 1. Engagement efforts with the family, including what is needed for the caseworker to successfully engage and work with the family.
 2. Ongoing efforts to locate parents, per the Guidelines for Reasonable Efforts to Locate children and/or Parents DCYF 02-607 form, when applicable.
 3. Family's strengths and barriers, determined through the caseworker's assessments in partnership with children and youth and family.
 4. The [case plan](#) was developed with the children, youth, and family and is appropriate to the family needs, when required.
5. Indian Child Welfare (ICW)

Whether ICW applies and [ICW](#) policies were followed, when applicable.

 1. Case Documentation

Whether case documentation is complete and adequately describes case activities, including assessments, collateral contacts, and family contacts.
 2. Document a summary of the discussion under the Supervision/Administrative Review case note or in the Supervisor Case Review Tool in FamLink under the client case name and include important next steps, dates, and specific timelines, when applicable.

Forms

Guidelines for Reasonable Efforts to Locate Children and/or Parents DCYF 02-607 (located in the Forms repository on the DCYF intranet)

Resources

[Background Checks policy](#)

[Case Plan policy](#)

[Child Protective Services \(CPS\) Initial Face-to-Face \(IFF\) Response policy](#)

[Child Safety policy](#)

Clinical Supervision Guide (located on the CA intranet)

Clinical Supervision Staffing Guide (located on the CA intranet)

[Family Assessment policy](#)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Permanent and Concurrent Planning policy](#)

[Placement Out-of-Home and Conditions for Return Home policy](#)

[Safety Assessment policy](#)

[Safety Plan policy](#)

Supervisor Case Review Tool Quick Help Guide (located on the CA intranet)

Supervisor Worker Coaching Guide (located on the CA intranet)

[Termination of Parental Rights \(TPR\) policy](#)

[Trial Return Home policy](#)

4650. Administrative Case Review

4650. Administrative Case Review sarah.sanchez Tue, 08/28/2018 - 12:09

1. Administrative case reviews:
 1. Must occur if court procedures or hearings have not met the federal guidelines or timeframes for periodic review.
 2. May be used for other purposes as determined by the regional administrator.
2. Caseworkers must give reasonable advance notice of the date, time, and place of review to:
 1. Child's tribe, if there is reason to know the child is or may be an Indian child.
 2. Relative caretakers
 3. Treatment Providers
 4. Other professionals who play a significant role with the family
 5. Individuals with responsibilities identified in the safety plan

6. The family, if appropriate, if not present, their perspective should be represented;
 7. Foster Parent
 8. Child, if over 12 years of age
3. With the exception of the guardian ad litem (GAL) and parents' attorney, parents must give written consent to the attendance of others at the review. Caseworkers must encourage such permission. Foster care providers often have valuable information about the child's daily life, medical, educational and emotional condition. They may be invited into the review without parental permission but only for the purpose of giving information about the child's adjustment to out-of-home care and to give the reviewers information on the child's current condition.

4670. Permanency Planning Hearing

4670. Permanency Planning Hearing sarah.sanchez Tue, 08/28/2018 - 12:09

1. The juvenile court makes a determination regarding the future status of the child by the 12th month of placement for all. To provide reasonable assurance that this has occurred, permanency planning hearings are held for any child in placement by the 12th month of original placement date and annually thereafter. See Appendix A for the definition of "Original Placement Date."
2. The social worker must notify the child's foster parent(s) or kinship caregiver(s) of the date and location of permanency planning hearings pertaining to the child.

4671. Preparation for Permanency Planning Hearings

4671. Preparation for Permanency Planning Hearings sarah.sanchez Tue, 08/28/2018 - 12:10

Original Date: December 2014

Revised Date: July 25, 2021

Sunset Review Date: July 25, 2025

Approved by: Jody Becker, Deputy Secretary

Laws

[Chapter 13.34 RCW](#)

Policy

1. The caseworker submits an updated [Court Report DCYF 09-095](#) form to the court prior to the permanency planning hearing within timeframes established in the [Court Report](#) policy. The court report must:
 1. Clearly delineate the Department of Children, Youth, and Families (DCYF) recommendations for permanency planning.

2. Include providing the court evidence supporting DCYF recommendation for the level of supervision or monitoring for family time visitation per the [Family Time and Sibling and Relative Visits](#) policy.
2. While it is always necessary when updating the [Court Report DCYF 09-095](#) form to review the parents' progress towards improving the conditions leading to the child's placement in out-of-home care, it is particularly important that a careful review of the permanency plan occur at the time of the permanency planning review. If, at this point, the caseworker is still recommending to the court that eventual return home will occur, the caseworker will carefully describe to the court how this view is consistent with the child's right to early achievement of a safe, permanent home. The caseworker carefully considers all alternative permanency plans before making a recommendation on either a primary or an alternative plan to the court.

Forms

[Court Report DCYF 09-095 form](#)

Resources

[Court Report policy](#)

[Family Time and Sibling and Relative Visits policy](#)

4730. Court and/or Placement Cases

4730. Court and/or Placement Cases sarah.sanchez Tue, 08/28/2018 - 12:12

1. DCFS shall not close cases for service while a supervised dependency or CHINS order is in effect or within six months of the time a child is returned to parental care as a result of a dependency order.
2. The social worker shall complete all forms and narrative recording within 90 days of a decision to terminate services and close a case.
3. The supervisor shall review both CAMIS and the case folder for accuracy and completeness and sign-off the closure in the case record before closure or transfer to another service.
4. For legally free children who are not adopted and the child leaves care and is at least 18 years of age, the social worker prepares the file for archiving and sends it to Olympia adoption archives

5000: Case Support

5000: Case Support sarah.sanchez Tue, 08/28/2018 - 12:13

5130. Regional Licensing

5130. Regional Licensing sarah.sanchez Tue, 08/28/2018 - 13:27

Notice: Due to leadership decisions to create statewide consistency and to support the DCYF RESJ framework, recent court decisions, legislation, recent WAC changes, and the launch of the online

application portal, etc., this policy is under current revision and may not reflect current practice. For specifics about these changes, please email [DCYF Rules and Policies Unit](#) for assistance.

Original Date: August 31, 2015

Revised Date: June 11, 2020

Sunset Review: June 11, 2024

Approved by: Luba Bezborodnikova, Assistant Secretary of Licensing

Purpose

The purpose of this policy is to state how the Department of Children, Youth, and Family (DCYF) regional licensing assesses, licenses and monitors services provided to children in out-of-home care by group care facilities (GCF) and private child placing agencies (CPA).

Scope

This policy applies to all Licensing Division (LD) regional licensing employees.

Laws

[RCW 43.20A.205](#) Denial, suspension, revocation, or modification of license

[RCW 74.15](#) Care of children, expectant mothers, persons with developmental disabilities

Policy

1. GCFs, CPAs, and Child Foster Homes must meet licensing requirements.
2. The regional licensor must:
 1. Complete the Medication Management and Administration eLearning training within 30 days of hire and verify all contracted group care agency employees have also completed this training within 30 days of hire.
 2. Background Check Authorization
 1. After receiving the completed [Background Authorization DCYF 09-653](#) form or notification of an online background check submission from the GCF for newly hired employees, send it and the Background Check Request/Decision DCYF 09-131 to the DCYF Background Check Unit (BCU) within three business days or when possible.
 2. After receiving the Background Check Request/Decision DCYF 09-131 from the DCYF BCU for the GCF newly hired employees, send the [Background Clearance Notification DCYF 23-037](#) form within three business days or when possible to the agency.

3. Verify all GCF employees, interns, and volunteers, including those not directly working directly with children, have passed a background check per chapters 110-04 and 110-05 Washington Administrative Code (WAC) and WAC 110-145-1325.
 4. Verify all CPA employees, interns, and volunteers have passed a background check per chapters 110-04 WAC 110-147-1325.
3. Quarterly Employee Roster
 1. Verify receipt of the Quarterly Employee Roster (Paid and Unpaid) DCYF 15-287 form from GCF and CPAs before the first day of February, May, August, and November of each year.
 2. Crosscheck the quarterly employee roster with FamLink and work with GCFs and CPAs to immediately fix any discrepancies.
 4. Complete new CPA licenses and renewals within the timeframes per LD Performance Goals located on the DCYF intranet under LD Programs.
3. Waivers to WAC requirements must be approved by the LD administrator or designee using the [Licensing Waiver DCYF 15-411](#) form.
 4. Licensing application documents must be received within 90 days of receipt of application or it may be withdrawn. Regional licensors must work with the agency and notify them before withdrawing an application.
 5. GCF may have more than one type of license depending on the services that it offers.
 6. Foster homes certified by the CPA must meet minimum licensing requirements (MLR).
 7. Applicants for a provisional expedited license certified by the CPA must meet the following requirements:
 1. Held a foster care license in the last five years that was not closed due to a denial, revocation, or an agreement to relinquish.
 2. Resides in the same home in which the applicant was licensed, and no additional individuals have moved into the home.
 3. Seeking a license from the same agency with which they were previously licensed and the agency agrees to supervise the home.
 4. Passed the required [background check](#) for all household members age 16 years and older before the expedited license is issued.
 8. Foster parents must apply for a new license when there is a change in circumstance due to the absence or addition of an identified caregiver.

9. A CPA may certify homes in more than one geographic region as long as the agency provides supervision and support to the home. The license must be issued from the region in which the family physically resides.
10. The CPA license is approved by the regional licenser in the region where the license is issued.
11. Licenses are issued for a maximum of three years.
12. Licenses will be issued or denied in writing.

Procedures

1. New Licenses for GCF and CPA

The regional licenser must:

1. Verify the Application for Child Care Agency License DCYF 10-408 form and the application materials are complete.
2. Contact and obtain references for a newly hired agency director or administrator using the LD Agency Letter of Reference DCYF 16-211 form. A minimum of three references are required. Agency references may be accepted for the agency director or administrator if the agency has upper management complete the references.
3. Process the [background check](#) for licensing applicants, employees, interns, and volunteers in accordance with [chapters 110-04 and 110-05 WAC](#) as applicable.
4. Complete FamLink person search and CA file review on all licensing applicants, employees, interns, and volunteers.
5. Determine if a person is disqualified or denied from association with a child care or private agency for not meeting MLR in chapter [74.15 RCW](#) and chapters [110-145](#), [110-147](#), and [110-148](#). See [5160 Adverse Action on a Foster Care License](#) for more information.
6. Send the completed [Background Clearance Notification DCYF 23-037](#) form to the agency for their employees, interns, and volunteers when:
 1. Approving a new employee, intern, or volunteer to work in a facility or at a CPA.
 2. Issuing a new agency or facility license.
 3. Renewing an agency or facility license.
7. Maintain a copy of the [Background Clearance Notification DCYF 23-037](#) form in the licensing file.
8. Evaluate the agency's policy and procedures, physical setting, personnel files, child files, and provider files using the designated checklist for the type of license. This

includes reviewing sample files for agencies currently pending licensure. (See DCYF intranet LD Programs, LD Forms)

9. Request an inspection from the Department of Health (DOH) and the Washington State Patrol's (WSP) Fire Protection Bureau for all GCF with the exception of Staffed Residential Homes licensed for five or fewer children. Approved inspections must be documented prior to issuing the license. Additional inspections may be requested if concerns are noted.
 10. Confirm that all employees, interns, and volunteers, having access to children, pass a [background check](#).
 11. Confirm that an adequate number of employees are available to provide services. This may include reviewing shift logs or a calendar to verify appropriate staffing levels.
 12. Confirm all WAC licensing requirements for the applicable license are met before issuing a license using the designated checklist for the specific license. For medically fragile group care facilities, use both the Medically Fragile Children and Children with Severe Developmental Disabilities Checklist DCYF 16-188 and the Group Home and Staffed Residential Home Checklist DCYF 16-189.
 13. Document the license start and expiration date in FamLink as three years minus one day.
 14. Submit the file for supervisory review.
2. New Licenses for CPA Foster Homes
- The Regional Licensor must:
1. Verify that a [Family Home Study Application DCYF 10-354](#) has been received.
 2. Complete background checks on individuals age 16 and older, including those living on the premises, and other requirements in the [6800 Background Check](#) policy.
 3. Complete and send the [Background Clearance Notification DCYF 23-037](#) form to the CPA for the individuals in (2)(b) and maintain a copy in the DCYF CPA foster home licensing file.
 4. Open a pending "Full" license in FamLink.
 5. Complete FamLink person search and DCYF file review on all persons, of any age, living in the home, or who are being passed to provide substitute care for children.
 6. Require the applicant to provide additional information or complete an evaluation when concerns are identified during the interview or on the paperwork. Evaluations required are at the foster parent's expense.
 1. Obtain a release signed by the applicant allowing information sharing before, during and after the evaluation.

2. Provide all information to the evaluator related to the worker's concern.
7. Verify the home study meets the [Home Study policy](#) requirements.
8. Verify the CPA foster home application materials are complete.
9. Document the following in FamLink on the provider's "General" tab in the "License Information" group box:
 1. Select "Full" license as the "Type".
 2. The "Date Issued" is the date the foster home license is approved and the "Expiration Date" is three years' minus one day from the "Date Issued".
 3. Select the "Approve" radio button in the "License Recommendations" group box to obtain supervisor approval.
10. Submit the file for supervisory review.
11. Issue a license based on the CPA's certification that a foster home meets the MLR.
12. Provide a paper copy of the license DCYF10-010 and Foster Parent Identification (ID) cards to the agency for the foster parent following supervisor approval.
13. The regional licensor must verify the following information is in the regional licensing paper file:
 1. [Certification for License of Foster Home DCYF 10-016](#)
 2. [Family Home Study Application DCYF 10-354](#)
 3. [Home Study File Checklist DCYF 10-182](#)
 4. [Foster Home Inspection Checklist DCYF 10-183](#)
 5. Home Study
 6. [Emergency Evacuation Plan DCYF 16-204](#)
 7. Background Authorizations forms
 8. [Background Clearance Notification DCYF 23-037](#)
 9. Background Check Request/Decision DCYF 27-131
 10. Administrative Review's collateral information for crimes or negative actions, if applicable
 11. [Licensing and Safety Supervision Plan DCYF 10-419](#), if applicable
 12. Verification of required training
 13. [Verification of Indian Status DCYF 15-128](#), if applicable

NOTE: Other required licensing documents not listed above are required to be completed and maintained in the CPA files (e.g. medical statement,

marriage and divorce statements and documentation, financial statement, policy agreements, immunizations, etc.).

3. Provisional Expedited License for CPA Foster Home

When a provisional expedited license application is received, the regional licenser worker must:

1. Verify the applicant meets the requirements to be eligible for a provisional expedited license.
2. Verify that a Family Home Study Application DCYF10-354 has been received.
3. Complete background checks on individuals age 16 and older, including those living on the premises, and other requirements in the 6800 Background Check policy.
4. Verify the [Provisional Expedited File Checklist DCYF 10-182B](#) form has been completed.
5. Enter the capacity for the license in FamLink by verifying the following:
 1. The number of children cannot be more than the capacity they had when they were previously licensed.
 2. If a caregiver moved out of the home the capacity cannot be more than what is allowed by the minimum licensing requirements.
 3. If children who were previously in the home when licensed have since been adopted or are in a guardianship, reduce the number from their previous license capacity.
6. Document the following in FamLink on the provider's "General" tab in the "License Information" group box:
 1. Select "Expedited" license as the "Type".
 2. Select the "Approve" radio button in the "License Recommendation" group box to obtain supervisor approval.
 3. The "Date Issued" is the date the provisional expedited license is approved and the "Expiration Date" is three months minus one day from the "Date Issued". If the foster home license is not completed within 90 days, discuss with the supervisor whether or not to reissue a second expedited license.
 4. Open a new pending full license the day after the expedited license was approved.
7. Upon supervisor approval, issue the paper copy of the Provisional Expedited Foster Home License DCYF10-010A within five days of requirements being met.

8. Notify the IV-E specialist that this home does not meet minimum licensing requirements. DCYF cannot claim IV-E funds until a full license is issued on the home.
9. The regional licensor must verify the following information is in the regional licensing paper file:
 1. [Certification for License of Foster Home DCYF 10-016](#)
 2. [Family Home Study Application DCYF 10-354](#)
 3. [Provisional Expedited File Checklist DCYF 10-182B](#)
 4. Background Check Authorizations forms
 5. [Background Clearance Notification DCYF 23-037](#)
 6. Background Check Request/Decision DCYF 27-131
 7. Administrative Review's collateral information for crimes or negative actions, if applicable.
 8. NOTE: The completed Policy Agreements DCYF 10-290 and Household Safety Inspection for Unlicensed Placements DCYF 10-453 or Foster Home Inspection Checklist DCYF 10-183 are required to be completed and maintained in the CPA files..
4. After the Provisional Expedited License for CPA Foster Home is Issued
The regional licensor must:
 1. Follow the New Foster Home License procedures section 2.b.-m.
 2. Provide a paper copy of the Foster Home License DCYF10-010 and Foster Parent ID cards to the foster parent following supervisor approval.
 3. Determine the expiration date of the full license in FamLink. The expiration date documented in FamLink is three years minus one day. The start date is the day after the provisional expedited license was closed.
 4. Verify with the agency that all licensing application materials have been submitted by the applicant within 14 days of receipt of the application.
 5. Notify the IV-E specialist that the home is now fully licensed.
5. Renewal for GCF or CPA
The regional licensor must:
 1. Verify that all GCF employees at BRS contracted facilities have completed the Medication and Administration eLearning training.
 2. Verify the Application for Child Care Agency License DCYF10-408 form and renewal materials are complete.

3. Send a courtesy renewal notice to the agency 120 days in advance of the license expiration date. For applications received before the expiration date, the license remains in effect until LD completes the renewal.
 4. Document compliance with all applicable items on the designated checklist. Areas of non-compliance are documented on a [Compliance Agreement DCYF 10-248](#) form.
 5. Complete 1.c.-l. requirements in the New Licenses for GCF and CPA section.
6. Renewals for CPA Foster Homes
- The regional licenser must:
1. Send a courtesy email to the private agency if LD has not received a renewal application within one month of the license expiring.
 2. Contact the agency if LD has not received an application within one day of the license expiration date.
 3. Close the license if LD has not received a signed application by the license expiration date. If there are children in placement, the regional licenser must notify the child welfare (CW) placement worker that the license has been closed.
 4. Verify that a [Family Home Study Application DCYF 10-354](#) form has been received.
 5. Complete background checks on individuals age 16 and older, including those living on the premises, and other requirements in the [6800 Background Check](#) policy.
 6. Review the renewal materials provided by the private agency.
 7. Submit the file for supervisory review.
 8. Issue a license based on the CPA's certification of a foster home meeting MLR.
 9. Provide a paper copy of the license and Foster Parent ID cards to the agency for the foster parent following supervisor approval.
 10. The regional licenser must verify the following information is in the CPA Foster Home paper file for a renewal:
 1. [Certification for License of Foster Home DCYF 10-016](#)
 2. [Family Home Study Application DCYF 10-354](#)
 3. [Home Study File Checklist DCYF 10-182](#)
 4. [Foster Home Inspection Checklist DCYF 10-183](#)
 5. Home Study
 6. [Emergency Evacuation Plan DCYF 16-204](#)
 7. Background Authorization form

8. [Background Clearance Notification DCYF 23-037](#)
9. Background Check Request/Decision DCYF 27-131
10. Administrative Review's collateral information for crimes or negative actions, if applicable
11. Verification of required trainings
12. [Licensing and Safety Supervision Plan DCYF 10-419](#), if applicable

7. Moves for GCF

The regional licenser must:

1. Verify the Application for Child Care Agency License or Certification DCYF 10-408 is complete.
2. Review the agency floor plan and evacuation procedures for compliance with the MLR.
3. Verify that all GCF employees have a background check completed following the [6800 Background Check](#) policy.
4. Complete a physical inspection of the agency using the designated checklist.
5. Request an inspection from the DOH and the WSPs Fire Protection Bureau for all GCF with the exception of staffed residential homes licensed for five or fewer children. Approved inspections must be completed and documented prior to license issuance. Additional inspections may be requested if concerns are noted.
6. Document compliance with all applicable items on the designated checklist. Areas of non-compliance are documented on a [Compliance Agreement DCYF 10-248](#) form.
7. The new facility must be licensed and operating prior to children being moved.
8. The regional licenser may issue a new three-year license in lieu of amending the license if the license expires within six months of the move. The renewal paperwork is required to complete this license.
9. Provide a paper copy of the license to the agency following supervisory approval.

8. Moves for CPA

The regional licenser must:

1. Verify the Application for Child Care Agency License or Certification DCYF 10-408 is complete.
2. Verify that all CPA employees have a background check completed following the [6800 Background Check](#) policy.
3. Complete a physical inspection of the agency.

4. Document compliance with all applicable items on the designated checklist. Areas of non-compliance are documented on a [Compliance Agreement DCYF 10-248](#) form.
 5. The regional licensor may issue a new three-year license in lieu of amending the license if the license expires within six months of the move. The renewal paperwork is required to complete this license.
 6. Provide a paper copy of the license to the agency following supervisory approval.
9. Moves for Child Placing Agency Foster Homes
See Foster Home Family Moves located in the [5120. Licensing State Foster Homes](#) policy.
10. CPA Foster Home Change in Circumstances
The regional licensor must:
1. Review the private agency's assessment of the foster home that had a change in circumstance affecting their parenting.
 2. Require the agency to complete the [Foster Home Re-Assessment DCYF 10-405](#) form or update the home study.
 3. Discuss the change in circumstance with the LD supervisor and private agency licensor to determine the appropriate licensing action (Foster Home Re-assessment, license modification, or new three-year license).
 4. The regional licensor may modify the license depending on the circumstances, evaluation of the regional licensor and CPA Licensor, or by request of the licensee.
11. Health and Safety Visits
1. The regional licensor must:
 1. Complete two six-month health and safety visits annually on all contracted Behavior Rehabilitation Services (BRS) CPA and GCF or contracted medically fragile facilities, one of which must be unannounced.
 2. The Renewal and Comprehensive Review will take the place of a health and safety visit.
 2. For contracted BRS or contracted medically fragile GCFs, regional licensors must:
 1. Complete the site inspection using the designated checklist for the type of license at each health and safety monitoring visit.
 2. Once per year, complete a review of a minimum of three child files during at least one of the two six-month health and safety monitoring visits.
 3. Once per year, complete a review of a minimum of three personnel files during at least one of the two six-month health and safety monitoring visits.

4. Review other documents and conduct interviews with youth and GCF employees as necessary.
 5. Complete a review of storage, administration, and documentation related to medication at each health and safety monitoring visit.
 6. Verify the food in the facility is not expired, there is no home-canned food being served, and that the food being offered meets the child's nutritional needs at each health and safety monitoring visit.
 7. Document the health and safety visit in a FamLink provider note with the activity "Regional Licensing Health and Safety" or "Unannounced Regional Licensing Health and Safety" as appropriate.
3. For contracted BRS CPAs, regional licensors must:
1. Complete the site inspection using the designated checklist for the type of license.
 2. Once per year, complete a review of a minimum of three child files during at least one of the two six-month health and safety monitoring visits.
 3. Once per year, complete a review of a minimum of three personnel files during at least one of the two six-month health and safety monitoring visits.
 4. Once per year, complete a review of a minimum of three foster home files during at least one of the two six-month health and safety monitoring visits.
 5. Review other documents and conduct interviews with youth, employees, or foster parents as necessary.
4. For all facilities serving homeless youth, the regional licensors must complete a health and safety review every three years beginning at or around 18 months after entering into a new license or during each renewal (mid-licensing) period. These facilities include overnight youth shelters and facilities that have a contract through the Department of Commerce for HOPE beds.
5. For GCF serving homeless youth, regional licensors must:
1. Complete 100% percent of the mid-licensing health and safety monitoring visits unannounced.
 2. Complete the site inspection using the designated checklist for the type of license.
 3. Complete a review of a minimum of three child files using the appropriate checklist.
 4. Complete a review of a minimum of three personnel files using the appropriate checklist.

5. Complete a review of storage, administration, and documentation related to medication.
6. Review other documents and conduct interviews as necessary.
7. Document the health and safety visit in a FamLink provider note with the activity “Regional Licensing Health and Safety” or “Unannounced Regional Licensing Health and Safety” as appropriate.

12. Comprehensive Review

The regional licensor must participate in comprehensive reviews for contracted BRS or contracted medically fragile providers or other contracted or licensed providers as applicable. See [5140. Comprehensive Reviews](#).

13. Overcapacity Administrative Approval for Age, Gender and Number of Children on the Foster Care License

The regional licensor must:

1. Review the Overcapacity Administrative Approval DCYF 15-349 form in FamLink to approve or deny placements outside the license capacity for private agency foster homes.
2. Review the hard copy of Overcapacity Administrative Approval DCYF 15-349 form for approved overcapacities for respite.
3. Send a copy of the approved DCYF 15-349 to the agency.
NOTE: Overcapacities for GCF require a waiver approved by the DLR administrator or designee.

14. No Referral Process

LD workers:

1. May create a “no referral” when an agency or licensee requests no additional placements be made in a CPA foster home.
2. Must discuss with the LD supervisor if the agency is not in agreement with a “no referral” and if there is a safety, health or well-being concern to determine whether to recommend a “no referral.”
3. When recommending a “no referral” on a CPA foster home, must:
 1. Notify CW caseworkers and other agencies involved.
 2. If LD senior administrator or designee approves the “no referral”:
 1. Inform all involved, including but not limited to CPA, CW, Developmental Disabilities Administration (DDA) employees, and tribes, when a decision is made not to place.
 2. Complete a Notice of No Referral DCYF 10-801 form to the foster parents notifying them that no more placements will be made in

their home and send to the LD senior administrator or designee for approval. Once approved:

1. Send the Notice of No Referral DCYF 10-801 form to the foster parent with a copy to the CPA.
 2. Enter a provider note in FamLink.
 3. Create a “no referral” in FamLink.
4. When recommending a “no referral” on a CPA foster home be lifted notify the:
1. LD senior administrator or designee. If approved, the LD worker will remove the "no referral" in FamLink and complete the Notice of Lifted/Rescinded No Referral Status DCYF 10-800 form.
 2. Foster parent.
 3. CW placement desk
 4. DDA employees
 5. Tribes
5. When recommending a “no referral” on a GCF, must:
1. Discuss with the LD senior administrator or designee.
 2. If LD senior administrator or designee approves the “no referral”:
 1. Inform all agencies involved of the decision.
 2. Complete a Notice of No Referral DCYF 10-801 form to the GCF notifying them that no more placements will be made in the facility and send to the LD senior administrator or designee for approval. Once approved:
 1. Send the Notice of No Referral DCYF 10-801 form to the agency.
 2. Enter a provider note in FamLink.
 3. Create a “no referral” in FamLink.
6. When recommending a “no referral” on a GCF be lifted, must notify:
1. The LD senior administrator or designee. If approved, LD workers will remove the “no referral” in FamLink, complete the Notice of Lifted/Rescinded No Referral Status DCYF 10-800 form, and send it to the GCF.
 2. CW caseworkers
 3. CW placement desk.

4. DDA employees
5. Tribes
6. Others involved
7. For facilities that do not accept placement of children in care and custody of the department, must discuss with LD supervisor and assistant attorney general for possible licensing legal action if health and safety of children is at risk.

Forms

Application for Child Care Agency License or Certification DCYF 10-408

[Background Check Authorizations DCYF 09-653](#)

[Background Clearance Notification DCYF 23-037](#)

Background Check Request/Decision DCYF 09-131

[Certification for License of Foster Home DCYF 10-016](#)

Child Placing Agency Checklist DCYF 16-185

[Child Placing Agency Foster Home Licensing Investigation DCYF 23-036](#)

[Child Placing Agency Foster Home Licensing Investigation Interviews DCYF 23-036A](#)

[Compliance Agreement DCYF 10-248](#)

Crisis & Secured Crisis Residential Checklist DCYF 16-186

[DLR Agency Reference Letter DCYF 16-211](#)

DLR Licensing Findings DCYF 27-068

[Emergency Evacuation Plan DCYF 16-204](#)

Emergency Respite Center and Resource and Assessment Center Checklist DCYF 16-183

[Family Home Study Application DCYF 10-354](#)

[Foster Home Re-Assessment DCYF 10-405](#)

Group Home and Staff Residential Home Checklist DCYF 16-189

[Home Study File Checklist DCYF 10-182](#)

[Licensing and Safety Supervision Plan DCYF 10-419](#)

[Licensing Waiver DCYF 15-411](#)

Maternity Services Checklist DCYF 16-184

Medically Fragile Children and Children with Severe Developmental Disabilities Checklist DCYF 16-188

Notice of Lifted/Rescinded No Referral Status DCYF 10-800

Notice of No Referral DCYF 10-801

Overnight Youth Shelter Checklist DCYF 16-190

Provisional Expedited Foster Home License DCYF 10-010A

Provisional Expedited License Checklist DCYF 10-182B

Quarterly Employee Roster (Paid and Unpaid) form DCYF 15-287

[Verification of Indian Status DCYF 15-128](#)

NOTE: Forms that are not linked are on the DCYF intranet under LD Programs, LD Forms.

Resources

LD Performance Goals located on the DCYF intranet under LD Programs.

THERE IS NO CURRENT CHECKLIST FOR GROUP RECEIVING CENTER OR DAYTREATMENT SERVICES*

[WAC 110-145](#) Group Care Facilities minimum licensing requirements

[WAC 110-147](#) Child-placing agencies and adoption centers minimum licensing requirements

[WAC 110-148](#) Child foster homes minimum licensing requirements

6000. Operations

6000. Operations sarah.sanchez Tue, 08/28/2018 - 13:44

6001. Case Assignment

6001. Case Assignment sarah.sanchez Tue, 08/28/2018 - 13:44

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Original Date: September 1, 2017

Revised Date: July 1, 2024

Policy Review: July 31, 2028

Purpose

To provide direction for Department of Children, Youth, and Family (DCYF) employees in making a case assignment. Case assignment is prioritized based on the child's safety, well-being and permanency needs.

Scope

This policy applies to DCYF employees.

Laws

[RCW 26.44.030](#) Reports-Duty and authority to make-Duty of receiving agency-Duty to notify-Case planning and consultation-Penalty for unauthorized exchange of information-Filing dependency petitions-Investigations-Interviews of children-Records-Risk assessment process.

Policy

1. Primary intake case assignment belongs to the DCYF office where:
 1. The parent or legal guardian of the victim or identified child resides, e.g. the residential address as provided to the school, medical provider or for public benefits, etc.
 2. The child resides and the parent's whereabouts are unknown.
 3. The facility address where the child is located, e.g. childcare, foster home, state-regulated facility, etc.
2. If the risk only intake is screened in on an open case and the parent, legal guardian, or unlicensed kinship caregiver caring for the identified child lives in another office catchment area, the intake is assigned to that office.
3. If a victim or identified child is in need of emergent response in a county where the parent does not reside, the office in the county where the child is located will:
 1. Conduct an initial face-to-face contact.
 2. Assess for [present danger](#) and take [protective action](#) if present danger exists.
 3. Arrange temporary placement if needed.
 4. Attempt to contact the tribe if there is reason to know the child is an Indian child per the [Indian Child Welfare Active Efforts and Tribal Collaboration](#) policy.
 5. Access medical or mental health treatment if needed.
4. [Extended Foster Care \(EFC\) Program](#)
 1. When a youth requests to participate in EFC starting on his or her 18th birthday, assign the case to the office where the case is currently assigned.
 2. When a youth requests to re-enter care to participate in EFC, assign the case to where the youth is currently residing.
5. Interstate Compact on the Placement of Children (ICPC)
 1. When the Headquarters ICPC unit requests a case be created for an incoming ICPC request, the case is opened and assigned to the home study straw.

2. Intakes with new allegations of child abuse or neglect will be screened per the Intake policy.
6. When requesting a transfer of case assignment for a non-court involved case, follow the [Case Transfers](#) policy.
7. When requesting a transfer of case assignment for a court-involved case, follow policy [Legal Jurisdiction and Office Assignment](#) and [Case Transfers](#) policy.
8. Disagreement about primary case assignment must be resolved at the lowest level possible. If a disagreement remains unresolved, the supervisors must work with the area administrators or their chain of command to resolve it.
9. When any child in an open case is believed to be at imminent risk of serious harm or there is a new allegation of child abuse or neglect, the assigned caseworker must make a report to intake per [RCW 26.44.030 \(1\)\(a\)](#).

Resources

[Indian Child Welfare Active Efforts and Tribal Collaboration policy](#)

6100. Reimbursing Caregivers for Transportation Expenses

6100. Reimbursing Caregivers for Transportation Expenses sarah.sanchez Tue, 08/28/2018 - 13:45

Original Date: September 27, 1995

Revised Date: July 25, 2021

Sunset Review Date: July 31, 2025

Approved by: Jody Becker, Deputy Secretary

Purpose

The purpose of this policy is to provide guidance about reviewing and approving reimbursement when caregivers submit the [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) form for transportation expenses for a child or youth in their care. This does not include reimbursing caregivers for activities that are part of typical parenting or age or developmentally appropriate activities.

Scope

This policy applies to child welfare (CW) and Financial and Business Services Division (FBSD) fiduciary employees.

Laws

[RCW 47.04.280](#) Transportation system policy goals.

[RCW 47.06.020](#) Role of department.

Policy

1. CW employees must adhere to the following when approving and documenting transportation expenses:
 1. The [Client Travel Approval Quick Reference Guide DCYF 07-085](#) publication.
 2. Department of Children, Youth, and Families (DCYF) Administrative 1.07.02 policy.
2. Caseworkers must verify the following when receiving caregiver's reimbursement requests for transportation expenses:
 1. Other resources were considered, per the [Approving Client Travel and Transportation Activities](#) policy.
 2. Transportation expenses are consistent with the case plan and either:
 1. Supports a permanent plan.
 2. Directly prevents out-of-home placement and is not payable from another source.
 3. The caregiver's travel met the requirements in this policy.

Procedures

When approving reimbursement:

1. CW employees must only approve reimbursements that meets the child or youth's need for safety, stability, education or other unique needs.
2. Caseworkers must:
 1. Review and verify the caregiver's explanation and purpose for each trip.
 2. Determine what transportation expenses are reimbursable, per the:
 1. [Approving Caregiver Travel and Transportation Activities](#) policy.
 2. DCYF Administrative 1.07.02 policies.
 3. Activities listed on the [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) form. This includes mileage, meals, tolls and parking reimbursement when these are part of the caregiver transporting children or youth.
 3. Review the date of submission. Transportation reimbursements submitted after the timeframes identified in the DCYF Administrative 1.07.02 policy must be approved by the area administrator (AA).
 4. Document in the "office use only" box, the number that matches the explanation the caregiver provided on the [Caregiver Monthly Transportation Reimbursement 07-090](#) form.

5. Sign the [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) form if approved. If not approved:
 1. Contact the caregiver by email or phone and discuss questions or reasons for denying any of the reimbursement request.
 2. Refer caregivers to the caseworker's supervisor if there is a disagreement about denied reimbursement requests.
 6. Obtain the following signed approvals on the [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) form from the:
 1. Supervisor for reimbursements that exceed \$200.
 2. AA for reimbursements that exceed \$300 or more.
 3. Regional business manager for reimbursement totals that exceed \$500 or more.
 7. Submit the approved [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) form to their fiduciary employee.
3. FBSD fiduciary employees must process the [Caregiver Monthly Transportation Reimbursement DCYF 07-090](#) for payment and upload into FamLink.

Forms

[Caregiver Monthly Transportation Reimbursement DCYF 07-090](#)

Resources

[Approving Client Travel and Transportation Activities policy](#)

[Client Travel Approval Quick Reference Guide DCYF 07-085 publication](#)

DCYF Administrative 1.07.02 Travel policy (located on the DCYF intranet)

[OFM 10.10 Travel policy](#)

6150. Client De-escalation Training

6150. Client De-escalation Training sarah.sanchez Tue, 08/28/2018 - 13:46

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: July 1, 2018

Revised Date: July 1, 2018

Policy Review: July 1, 2021

Purpose

Children's Administration (CA) staff need tools and training to engage with clients, recognize escalation, and make effort to de-escalate the encounter while remaining engaged. This policy makes mandatory Right Response Level 3 (RRL3) training provided through the Alliance for Child Welfare Excellence (Alliance).

Scope

All CA caseworkers, supervisors, area administrators and any staff who have verbal or physical contact with CA-involved children, youth, and families.

Laws

[RCW 74.13.031](#) Duties of department - Child welfare services - Children's services advisory committee.

Policy

1. All CA staff who have verbal or physical contact with children, youth, and families will complete RRL3 training in their first year of employment.
2. All CA staff who complete the training become certified in RRL3. Certification expires after two years and all staff required to complete RRL3 must repeat the training.
3. All CA staff employed on or after the original date of the policy will complete RRL3 training. Priority of enrollment in the training is according to the following:
 1. Social service specialist 2 and 3
 2. Social service specialist 4
 3. Area administrator
 4. Deputy regional administrator (DRA)
 5. Regional administrator (RA) and Division of Licensed Resources (DLR) administrator
 6. Headquarters staff who have contact with children, youth, and families

RAs, DRAs, and the DLR administrator may be waived from RRL3 through an administrative waiver. The [DCFS Administrative Approval Request DSHS form 05-210](#) must be completed and submitted to the Assistant Secretary for approval. See [DCFS Administrative Approval](#) policy.

Procedures

1. New social service specialist staff will enroll in RRL3 training after Regional Core Training (RCT) through the WA State Learning Center (WSLC) within one year of employment.
2. The Regional Administrator and DLR Administrator or designee will create a RRL3 regional plan to ensure that all regional staff, including themselves, employed on the original date of the policy complete RRL3 training within three years of the original date of the policy.
 1. The RRL3 regional plan will be communicated to the assistant secretary of child welfare programs or designee within six months of the original date of this policy.

2. The regional administrator and DLR administrator will request additional training as capacity is reached impacting the ability of staff to complete training.
3. The regional training plan must include recertification of staff every two years after completion of initial training.
3. Social service specialist staff employed on or after the original date of the policy will enroll in RRL3 through the WSLC based on capacity.
4. Headquarters staff will enroll in RRL3 through the WSLC.

Forms

[DCFS Administrative Approval Request DSHS form 05-210](#)

Resources

[WA State Learning Center](#)

6301. Child Fatality/Near-Fatality Reviews

6301. Child Fatality/Near-Fatality Reviews sarah.sanchez Wed, 09/05/2018 - 13:17

Approval: Jennifer Strus, Assistant secretary

Original Date:

Revised Date: October 31, 2016

Sunset Review: October 31, 2019

Purpose

Child fatality or near-fatality reviews are used to examine cases involving a fatality and near-fatality of a child and meet specific criteria to:

1. Increase our understanding of the circumstances surrounding the child's death or near fatal injury.
2. Examine existing CA policies and procedures to determine the need for policy development or revision, or recommend legislative change.
3. Evaluate CA services and community response to the identified needs of the family and to identify areas for education and training.
4. Build community alliances, expertise and commitments for program improvements, policy, and procedural changes, and improved multi-disciplinary collaboration.

Scope

This policy applies to CA staff.

Laws

Policy

1. A Child fatality or [near-fatality](#) review is required for a child under age 18 and the following conditions apply:
 1. The cause of the child's death or near-fatality is believed to be abuse or neglect.
 2. There is an open case on the family or CA was providing services to the deceased or injured child within 12 months prior to the fatality or near fatal injury. Adoption support or Tribal Payment Only cases do not meet these criteria, unless there has been another active service provided to the child during the 12 months preceding the death or near-fatality.
2. The critical incident practice consultant or critical incident review specialist (CIRS) must consult with the Office of the Family and Children's Ombuds (OFCO) to determine if a child fatality or near-fatality review should be conducted in any case when it is unknown if the death or fatal injury is a result of child abuse or neglect.
3. The child fatality or near-fatality review process is not a personnel investigation, and the report must not include the name of the employee.
4. When conducting a child fatality or near-fatality review, the CIRS must:
 1. Organize and facilitate a multidisciplinary Child Fatality or Near-fatality Review Team unless the assistant secretary requests facilitation by an impartial professional.
 2. Consult with the Assistant Attorney General's office prior to each review when there are legal questions or complex legal issues.
 3. Consult with the CA legislative liaison and the CA assistant secretary when a legislator participates in the review.
 4. Consult with the CA assistant secretary and Department of Social and Health Services (DSHS) Communications Director when a media representative participates in the review.
 5. Consult with the regional administrator (RA) when a CA staff member requests to observe a child fatality or near-fatality review.
 6. Invite committee members who:
 1. Have no prior or direct involvement with the case.
 2. Have professional expertise relevant to the specific issues of the case such as service providers, foster parent representatives, child advocates, medical professionals, law enforcement, and CA staff.
 3. Represent a child's ethnic or cultural heritage.

7. Require all review team members, consultants and observers to sign a Child Fatality Case Review Confidentiality Agreement Form DSHS 27-128 or Child Near-fatality Case Review Confidentiality Agreement DSHS Form 27-129 before reviewing CA records or documents.
 8. Request case information from the assigned caseworker, supervisor or area administrator prior to the review.
 9. Arrange interviews with CA caseworkers or any persons involved with the family or the deceased or injured child as appropriate for the review.
 10. Ensure observers do not participate in review discussions.
5. The critical incident practice consultant must:
1. Track the progress and completion of the review in coordination with the Field Operations Division.
 2. Collaborate with the headquarters statewide quality assurance unit manager to track completion of all review recommendations requiring implementation.
 3. Document the completed review in the Administrative Incident Response System (AIRS) under the same incident number identified in the initial AIRS report.
6. The CIRS must ensure the child fatality review or near-fatality review report includes:
1. The committee's discussion and findings addressing policy and case practice or individual employee actions and decisions in the specific case under review.
 2. The committee's recommendations (if applicable).
7. The CIRS must ensure the child fatality review report is completed and posted on the public website within 180 calendar days of a child's death.
8. When a Child Fatality Review report cannot be completed within the timeframe, CA must request an extension from the Governor. The CIRS will document the request for an extension in the follow-up section in the AIRS report.
9. The CIRS or designee:
1. Sends all fatality and near-fatality reports to the DSHS secretary and CA assistant secretary, and CA division directors and regional administrators, as applicable.
 2. Makes fatality and near-fatality reports available to all CA staff.
 3. Provides a copy of all fatality and near-fatality reports to OFCO.
 4. Provides a copy of all redacted child fatality reports to legislative committees and the public through posting on the DSHS internet.
 5. Prepares and distributes the quarterly report findings to the legislature.

10. The RA or designee collaborates with the CA Headquarters Quality Assurance staff to review the recommendations, and track implementation status and outcomes in response to policy, legislative or training recommendations. The statewide portion of the action plan will include a timeline and monitoring for progress and completion.
11. All requests for information and documentation about the child fatality report, near-fatality report, or related documents must be forwarded to the Public Disclosure Unit.

Forms

- [Child Fatality Case Review Confidentiality Agreement Form DSHS 27-128](#)
- [Child Near-fatality Case Review Confidentiality Agreement Form DSHS 27-129](#)

Resources

[Office of the Family and Children's Ombuds](#)

6302. Administrative Incident Reporting

6302. Administrative Incident Reporting sarah.sanchez Tue, 08/28/2018 - 13:50

Approved by: Natalie Green, Assistant Secretary of Child Welfare

Original Date: September 2006

Revised Date: July 1, 2024

Sunset Review: July 1, 2028

Purpose

Establish requirements for the timely notification, documentation and management of administrative incidents. Administrative incidents are serious and emergent situations involving the clients of the Department of Children, Youth, and Families (DCYF), DCYF employees and providers, and include:

- Critical incidents (Near-Fatality or Fatality of a Child)
- Client related incidents
- Provider related incidents
- Employees safety
- Theft, vandalism. or property damage

Documentation of these incidents in the Administrative Incident Reporting System (AIRS) is used to identify issues, patterns, and trends, and determine needed actions to address the safety of children, clients, and employees.

Scope

This policy applies to DCYF employees.

Laws

[RCW 26.44.020](#) Definitions

[RCW 74.13.500](#) Disclosure of child welfare records

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[RCW 74.14A.025](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

Policy

1. DCYF employees will immediately notify their supervisor when learning of an [Administrative Incident](#).
2. Supervisors will immediately notify law enforcement when there is reason to believe an Administrative Incident involves a crime.
3. Employee Misconduct (Not documented in AIRS)
 1. DCYF employees will:
 1. Immediately notify their supervisor when learning of allegations of employee misconduct or criminal conduct.
 2. Refer to DCYF Administrative 11.07 Conducting Workplace policy Investigations, if applicable.
 2. Supervisors will immediately notify their chain of command up to the regional administrator (RA) or Licensing Division (LD) administrator.
 3. RAs or designees or LD administrators or designees, will notify the Deputy Assistant Secretary of Child Welfare or designee of the alleged misconduct within 48 hours.
 4. Directors will notify the assistant secretary.
4. Critical Incidents
 1. Critical incidents include:
 1. Child fatalities or near-fatalities
 1. That occurred on an open case at the time of the fatality or near-fatality or there was DCYF history on the family within 12 months of the fatality or near-fatality, including intakes screened out for investigation.
 2. That occurred in a DCYF licensed, certified, or state operated facility.

2. High Profile incidents that may generate significant interest by the media, the legislature or the Governor's Office.
 2. The regional designee will document critical incidents in AIRS within one hour of being notified of the incident. If one hour is not possible, the designee must notify their chain of command up to the Deputy Assistant Secretary of Child Welfare or designee.
 3. DCYF employees will notify intake to create a new intake when:
 1. A child fatality or near-fatality is suspicious for child abuse or neglect.
 2. A child dies and there is an open case on that child or while placed in a DCYF licensed or state operated facility.
 4. The intake worker or unit supervisor will update AIRS and document in a case note if a near-fatality becomes a fatality due to the circumstances described in the original intake. A new intake is not required.
 5. Intake workers will inform the child's tribe when there is a fatality or near-fatality within 24-hours of learning of the incident if there is [reason to know](#) the child is or may be an Indian child.
5. Other Administrative Incidents
- Supervisors will document all other administrative incidents in AIRS within 24 hours of receiving notification. Other administrative incidents include:
1. [Client](#) Related Incidents serious injury of a child client on an open case requiring professional medical treatment (beyond first aid treatment) alleged to be the result of:
 1. A [serious injury](#) of a child client on an open case requiring professional medical treatment (beyond first aid treatment) alleged to be the result of:
 1. Physical abuse
 2. Sexual abuse
 3. Neglect
 4. Unexplained injury
 5. Injury that is not consistent with parent or caregivers' explanation.
 2. Allegations of molestation or rape by an adult caregiver of a child client who is in the care and supervision of DCYF.
 3. A suicide, suicide attempt or a near-fatal injury of a child client.
 4. Placement of a child in any of the following:
 1. DCYF office due to no placement resource available.

2. Detention facilities for children in DCYF care and custody.
 3. Apartments or hotels
 5. Placement is not allowed in an institution not designed for children, such as adult mental hospitals and detoxification facilities, or institutions or homes with caregivers who don't have the specialized training required to care for a child with sexually aggressive or physically assaultive behaviors per these policies:
 1. [Sexually Aggressive Youth](#)
 2. [Physically Assaultive/Aggressive Youth](#)
 3. Child/Youth refusing placement in hotel, leased facility or foster home.
 6. Any other client-related incident that does not fall into one of the previously identified categories believed to require administrative notification or attention.
2. Provider-Related Misconduct Incidents occurring in a facility licensed or subject to licensing by DCYF or other facilities certified by DCYF. Misconduct includes:
 1. Alleged criminal activity
 2. A conviction disqualifying a licensed provider from providing care to children, as outlined in [WAC 110-04-0120](#).
 3. Any arrest or pending arrest for:
 1. Child abuse or neglect.
 2. Spousal abuse or domestic violence.
 3. A crime against a child.
 4. A crime involving violence, including rape, sexual assault, or homicide, but not other physical assault or battery.
 5. Felony physical assault or battery offense
 4. Felony drug-related crimes including:
 1. The Imitation Controlled Substances Act, per [chapter 69.52 RCW](#).
 2. Illegal sale and distribution of prescription drugs, per [chapter 69.41 RCW](#).
 3. Selling, transferring, or otherwise furnishing to any individual, substances used in making controlled substances per [chapter 69.43 RCW](#).

4. Illegal drugs or substances use, per [chapter 69.50 RCW](#).
 5. Unlawfully manufacturing, delivering or possessing a controlled substance with intent to deliver, per [RCW 69.50.401](#).
 5. Incidents involving multiple victims or patterns of molestation or rape between child clients placed by DCYF.
 6. A pattern of high-risk child abuse or neglect referrals.
 3. Safety Incidents involving DCYF employees, licensed caregivers, and contracted providers. Follow DCYF Administrative 7.01 Employee Safety and Security policy. Incidents include:
 1. An assault, safety threat or a perceived safety threat to employees, a licensed caregiver or contracted provider by a child client, parent or individual related to the case.
 2. Employees involvement in a traffic accident while on the job, in a personal or state-owned vehicle when any of the following apply:
 1. A child client was a passenger.
 2. The employees or child client was injured and required medical treatment.
 3. The employee was at fault for the accident.
 4. Property Damage or Loss of Client Information
 1. A theft, or incident involving vandalism or damage to state property estimated to be in excess of \$750.00.
 2. Incidents resulting in any loss of client information, e.g., loss of case file, printed case documents or on thumb drives.
6. Additional AIRS Documentation Requirements
1. Supervisors of the assigned caseworker will ensure documentation about a client related placement exception includes:
 1. Detailed attempts to locate a more permanent placement for the child.
 2. Reason for placement.
 3. Approving authority.
 4. DCYF employees providing care of the child if applicable.
 2. Supervisors will include the following information about a safety incident:
 1. Identification of the subject of an AIRS report by job title and office, not by name, when they are a DCYF employee.

2. The jurisdiction and police report case number in the AIRS "Community" section.
 3. Information about an incident resulting in a serious injury requiring professional medical treatment, if applicable.
3. The intake worker or LD area administrator or designee will document alleged misconduct in a facility or foster home and complete the Facility-Foster Home section.

Resources

AIRS Companion Guide (located on the DCYF intranet under Computer Help and CA Systems Login)

DCYF Administrative 7.01 Employee Safety and Security policy

DCYF Administrative 11.07 Conducting Workplace policy

[DCYF Administrative 11.21 Ethics and Employee Conduct policy](#)

[Indian Child Welfare Reason to Know policy](#)

[WAC 110-04-0120 If I have a pending criminal charge, conviction, or negative action may I ever be authorized to be licensed, contracted, certified, authorized to be employed at a group care facility, or authorized to have unsupervised access to children?](#)

[WAC 110-110-0040 Serious injury, death, abandonment, child abuse, neglect, incarceration of an Indian child](#)

County protocols (located on the DCYF intranet page under Programs and Law Enforcement Protocols)

6500. Photograph Documentation

6500. Photograph Documentation sarah.sanchez Tue, 08/28/2018 - 13:51

Approval: Jennifer Strus, Assistant Secretary

Original Date: September 16, 1995

Revised Date: April 27, 2017

Policy Review: April 30, 2022

Purpose

To ensure effective documentation of a child's physical condition or surroundings when responding to allegations of child abuse or neglect (CA/N) or when a child is in the care and custody of Children's Administration (CA).

Scope

This policy applies to CA staff.

Laws

[RCW 13.50.010](#) Definitions - Conditions when filing petition or information - Duties to maintain accurate records and access—Confidential child welfare records.

[RCW 26.44.050](#) Abuse or neglect of child - Duty of law enforcement agency or department of social and health services - Taking child into custody without court order, when.

[RCW 71A.10.020](#) Developmental Disabilities - Definitions

[RCW 74.13.283](#) Washington State Identicards - Foster youth.

Policy

1. CA staff may take photographs for evidentiary and case management purposes only. Not all cases will require photographic documentation.
2. When taking photographs, only use a state issued device with standard settings, and do not alter, enhance or filter the photographs in any way.
3. CA staff must follow the County Child Abuse, Fatality and Criminal Neglect Investigation Protocol, located on the CA Intranet, prior to taking any photographs when documenting a child's physical condition related to CA/N. Protocols may authorize photographs of the child by law enforcement, a child advocacy center, another agency or forensic interviewer.
4. When the case does not meet the County Child Abuse, Fatality and Criminal Neglect Investigation Protocol, complete the following to document a child's physical condition related CA/N:
 1. Prior to taking any photographs, request parent or caregiver permission in a Division of Children and Family Services (DCFS) and Division of Licensed Resources (DLR) child protective services (CPS) investigation case if the parent is present and has care and custody of the child.
 2. Prior to taking any photographs, request permission from the child who has the capacity to understand what giving permission means.
 3. Obtain parental permission if photographs are needed in a [Family Assessment Response \(FAR\)](#) case.
 4. Document the caseworker's request to photograph a child and the child or parent's answer in FamLink.
 5. Photograph the child when the alleged subject is not present whenever possible.
 6. Take one full-length photograph of the child that includes his or her face.
 7. Photograph the injury that show the shape, size and location of the injury. Include photographs taken from a distance and close-up with a standard measurement (such as a ruler) to demonstrate size.

8. If an alleged injury is located under clothing, caseworkers may ask a child to remove outerwear, roll-up sleeves, or pant legs, lift up shirt to expose back or lower torso. Removal of clothing will be based on the child's age and development.
9. Photographing a child may not be possible or appropriate due to, but not limited to, the following:
 1. The child is unable to communicate verbally due to a developmental disability as defined in [RCW 71A.10.020](#).
 2. The child demonstrates emotional distress or discomfort about being photographed.
 3. The parent or child does not give permission.
 4. When a photograph of a child cannot be taken:
 1. The caseworker must ask the parent and child, if present, for permission to observe the injury.
 2. If the observation is permitted, document the following information on the [Child's Physical Description form DCYF 15-359](#) or in a case note and staff with supervisor:
 1. Child's name and date of birth
 2. Case number
 3. Location, date, and time of contact with the child.
 4. Caseworker name, office and phone number
 5. Name of any other adult present for the face-to-face with the child.
 6. When applicable, facility name, type of license and address
 7. Description of the child's physical condition that may include injuries (location, shape, size, color)
 8. When applicable, the name, date, and contact information of any other professionals who viewed the injury.
 3. If observation of the injury is not permitted:
 1. Assess if [present danger](#) exists during contact with the child;
 2. If [present danger](#) does not exist, request the parent take the child to his or her primary care physician or urgent care provider.
 4. If the parent will not or does not access medical care for the child:

1. Staff with your supervisor; and
 2. Notify law enforcement.
5. When taking photographs of the child's surroundings, the DCFS/CPS caseworker and DLR/CPS investigator must:
 1. Request permission from the parent or caregiver.
 2. Photograph the room or area at a distance to identify place and overall condition.
 3. Take photographs of health and safety hazards that are outside of the house and the hazards are in public view.
 4. Take close-up photographs of items that present health and safety risks.
 5. Take photographs with and without an item of standard measurement to demonstrate size.
 6. Take photographs to demonstrate progress when identified health and safety risks have been eliminated.
 7. Document the following in a case note:
 1. Caseworker's request for permission and the caregiver's response in FamLink.
 2. When a photograph of a child's surroundings cannot be taken or permission from the caregiver is not given:
 1. Name of any other individuals who were present at the time of the observations.
 2. Description of the environment as it relates to the child's health and safety.
6. DLR workers must document conditions of a home or facility as necessary by doing the following:
 1. Obtain caregiver permission to photograph items inside and the condition of the home or facility.
 2. Photograph the room or area at a distance to identify place and overall condition.
 3. Take close-up photographs of items that present any health and safety risks.
 4. Take photographs to demonstrate progress when identified health and safety risks have been eliminated.
 5. Document the worker's request and caregiver's response in FamLink.
7. The CA caseworker must:

1. Photograph and document a child's height and weight within five business days of placement in out-of-home care per [2421. Emergency Planning for Children in Out-of-Home Care](#) policy.
2. Photograph and update the height and weight information of the child:
 1. When there are significant changes in the child, e.g. change in appearance, major weight loss or gain, etc.
 2. Every six months for a child younger than six years.
 3. Annually for a child age six years and older
3. Follow [43103. Washington State Identicard, Instruction Permit and Personal Driver License for Foster Youth](#) policy when photographing a youth to obtain a state issued photo identification card prior to his or her 18th birthday
4. Include a clear photograph of the child when referring to the [WA Access](#) through [Northwest Adoptions Exchange \(NWAE\)](#), per the [Identifying Adoptive Families](#) policy.
8. CA staff must upload every photograph taken of the child or child's surroundings, except those taken for Identicard purposes, into File Upload in FamLink in their unaltered state within seven calendar days. This includes photographs that are not clear or taken in error. CA staff must not delete photographs from the device until uploaded into FamLink. Uploaded photographs must include the following information:
 1. Date and time of the photograph.
 2. Location where the photograph was taken.
 3. A brief description of what is in the photograph.
 4. First and last name of the photographer.
 5. Title, workplace and contact information of the photographer.
9. CA staff must assess for [present danger](#) and report to intake when any child which there is an open case is believed to be at imminent risk of serious harm or there is a new allegation of child abuse or neglect.
10. CA staff must upload every photograph received from any individual or entity, such as law enforcement or providers, into FamLink. Maintain all hard copies of photographs in the hard-copy file. Document the following in a case note when a photograph is received:
 1. Date the photograph was received.
 2. Name of the person who provided the photograph.
 3. Name and contact information of the person who took the photograph, if available.
 4. Description of what the photograph depicts

5. Any additional information specific to the pictures.

Forms

- [Child's Physical Description DCYF 15-359](#)
- Request for "Washington State Identocard" DSHS 11-077

Resources

- CPS Guide
- FamLink File Upload Quick Help Guide (CA Intranet)
- Storing Multiple Images in FamLink (CA Intranet)
- Digital Photo Quick Help (CA Intranet)
- How to Attach an Image to a Case Image Upload (CA Intranet)
- [Identifying Adoptive Families](#) policy
- [Ten-4 Bruising Rule](#)

6530. Random Moment Time Study

6530. Random Moment Time Study admin Mon, 04/29/2019 - 13:27

Original Date: July 1, 1997

Revised Date: April 29, 2019

Sunset Review: April 30, 2023

Approved by: Ross Hunter, Secretary

Purpose

The Random Moment Time Study (RMTS) is a sampling tool that is used to generate statistically valid statewide estimates of various activities performed by Department of Children, Youth, and Families (DCYF) child welfare employees. The sampling procedure is designed to meet the federal financial participation requirements for claiming matching funds for child welfare employees' salaries and benefits and to provide audit documentation for state and federal review.

Scope

This policy applies to DCYF caseworkers, supervisors, time studied program managers, eligibility specialists, regional RMTS coordinators, and headquarters (HQ) program managers who provide a service, directly or indirectly, to children in home or in out-of-home care, for a majority of their time even if they do not carry a caseload i.e., staffing or supervising a case with another caseworker.

Laws

[Social Security Act Title IV-A](#) Block Grants to States for Temporary Assistance Needy Families

[Social Security Act Title IV-B](#) Child and Family Services

[Social Security Act Title IV-E](#) Federal Payments for Foster Care and Adoption Assistance

[Social Security Act Title XIX](#) Grants to States for Medical Assistance Programs

[Social Security Act Title XX](#) Block Grants to States for Social Services and Elder Justice

Policy

1. RMTS sampled employees must:
 1. Record the appropriate RMTS Activity and Detail Code, alpha and numerical designation, from the RMTS Activity and Detail Code Sheet available on RMTS DCYF intranet webpage.
 2. Complete each required field based on the code chosen including child and case information.
 3. Complete the sample within three business days.
2. Sampled employee's supervisors must provide RMTS training to caseworkers, time study program managers, and eligibility specialists using the training materials available on the RMTS DCYF intranet webpage.
3. The regional RMTS coordinator must:
 1. Monitor the sample status for the employees in their offices or units.
 2. Work with the sampled employee's supervisor when a sampled employee does not respond to their sample.
 3. Notify the HQ RMTS program manager when there is any change in the employment status of employee participating in the RMTS survey within five working days of the change.
 4. Provide HQ RMTS program manager with an appropriate RMTS Worker Type for each employee added to the FamLink RMTS system.
4. The HQ RMTS program manager must:
 1. Review all completed samples for correctness as identified in the RMTS instructions;
 2. Generate a monthly sampling data summary, referred to as the RMTS Report; and
 3. Keep the list of sampled workers current by keeping in contact with the regional RMTS coordinators.

Resources

RMTS Activity & Detail Code Sheet (located on the RMTS DCYF intranet page)

RMTS Home Page (located on the RMTS DCYF intranet page)

RMTS Instructions (located on the RMTS DCYF intranet page)

RMTS Worker Types (located on the RMTS DCYF intranet page)

6600. Documentation

6600. Documentation sarah.sanchez Tue, 08/28/2018 - 13:52

Original Date: October 17, 2017

Revised Date: July 1, 2024

Sunset Review Date: July 31, 2028

Approved by: Natalie Green, Assistant Secretary of Child Welfare Division

Purpose

This policy provides direction for documenting case and provider-related:

- Communications
- Events
- Activities

Scope

This policy applies to:

- Child welfare (CW) employees
- Licensing Division (LD) workers
- Information Technology Division (ITD) service desk employees

Laws

[RCW 74.14A.020](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict

[RCW 74.14A.025](#) Services for emotionally disturbed and mentally ill children, potentially dependent children, and families-in-conflict-Policy updated

[RCW 74.15.020](#) Definitions

Policy

CW employees and LD workers must document communication, events, and activities related to cases and providers in FamLink.

Procedures

1. Documenting and Notification of Critical and Administrative Incidents

1. Caseworkers must immediately notify their supervisor when notified of a:
 1. [Critical incident](#)
 2. [Administrative incident](#)
2. Caseworker supervisors must:
 1. Immediately notify the area administrator (AA) and regional administrator (RA) or designee of a critical incident.
 2. Document administrative incidents in the Administrative Incident Response System (AIRS), within 24 hours of being notified.
3. LD workers must immediately notify their:
 1. LD AA or designee and their supervisor, when notified of a critical incident.
 2. Supervisor, when notified of an administrative incident.
4. LD supervisors must document administrative incidents in AIRS, within 24 hours of being notified.
5. RAs, LD AAs or designees must verify critical incidents have been documented in the AIRS, within one hour of being notified.

2. General Documentation Timeframes

1. Caseworkers must:
 1. Within three calendar days of completion, document in FamLink:
 1. [Initial face-to-face \(IFF\) contact](#).
 2. [Child victim or identified child abuse interview](#).
 3. Placements of children or youth in out-of-home care following the Timely & Accurate Placement Entry User Guide document.
 4. [Monthly health and safety visits with children and youth, parents, and caregivers](#).
 5. [Safety Assessment/Safety Plan DCYF 15-258](#).
 6. [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to parents and caregivers at initial contact in CPS investigations.
 7. When qualified interpreters were used at initial contact with individuals, per DCYF Administrative policies:

1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
 8. Termination of payment authorization when services are completed, per the [Child Care](#) policy.
 2. Within seven calendar days of:
 1. Completion, document in FamLink:
 1. [Shared planning meetings \(SPM\)](#)
 2. [Case transfer](#) summaries
 2. Children or youth entering out-of-home care, collect photos of them and document their height and weight, per the [Emergency Planning for Children in Out-of-Home Care](#) policy.
2. LD CPS workers, within three calendar days of completion must document the following:
 1. [IFF contact](#).
 2. [Child victim or identified child abuse interview](#).
 3. [Public Notice of Nondiscrimination DCYF HR_0012](#) publication was provided to parents and caregivers at initial contact in the investigations.
 4. When qualified interpreters were used at initial contact with individuals, per the following DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP).
 2. 6.03 Access to Services for Individuals with Disabilities.
3. Caseworkers and LD workers, within 10 calendar days must complete the following as they occur, unless their supervisor has approved an exception or extension:
 1. Document:
 1. Case or provider-related communication, by selecting the appropriate activity type in FamLink, i.e., in-person or phone contact, subject interviews, activities, collateral contacts, other child or youth interviews, and meetings, excluding SPM. Documentation must:
 1. Be complete and accurate.
 2. Include the following in case or provider notes if applicable:

1. Who was present, with full names and roles.
2. When qualified interpreters or translations were used.
3. What occurred.
4. When the communication occurred, including date and time.
5. Where the communication occurred.
6. Reason or purpose of the communication.
7. Description of the worker's assessment of the contact including supporting facts or evidence.

2. Indian Child Welfare (ICW) communications by:

1. Creating a FamLink case note and selecting one of these activity types:

1. "Active Efforts" to prevent children's removal or promote the timely reunification of Indian families.
2. "Referral to Tribe" when intakes are sent to tribes.
3. "Tribal Contact" for communication with tribes.
4. "Tribal Contact-Placement Preference" to document the tribe's placement preference.

2. Upload FamLink ICW:

1. Indian identity request related information as Type: "Indian Identity Request".
2. Inquiry-related activity as Type: "ICW Specific Records".
3. Legal-related records in FamLink as Type: "ICW Legal".

3. Communication with Assistant Attorney Generals (AAG) in FamLink case notes using category "Attorney".

2. Store hard copies of AAG information in the "Privileged Communication with AAG" or confidential section of the hard case or provider file, if applicable.

4. Caseworkers and LD CPS investigators, within 15 calendar days of completing [children's physical or sexual abuse near verbatim interviews](#) must document near-verbatim interviews that were not audio recorded.

5. Caseworkers must complete within 30 calendar days from the date of intake, the Safety Assessment/Safety Plan DCYF 15-258 form per the [Safety Assessment](#) policy.
6. LD CPS investigators, within 30 calendar days from the date of intake must complete the Safety Assessment/Safety Plan DCYF 15-258 form in FamLink in licensed foster homes for:
 1. Biological children or youth
 2. Adopted children or youth
 3. Children or youth in a guardianship
7. Caseworkers, within 45 calendar days of being assigned a Child and Family Welfare Services (CFWS) or [Family Voluntary Services \(FVS\)](#) case must complete the initial [Comprehensive Family Evaluation \(CFE\) DCYF 10-480](#), per the [Family Assessment/Assessment of Progress](#) policy.
8. Caseworkers, within 45 calendar days from the date of intake for FAR cases must complete the:
 1. Risk assessment using the Structured Decision Making Risk Assessment (SDMRA) DCYF 16-208 form in FamLink, per the [SDMRA](#) policy.
 2. Following for families that did not agree to services or consent to keeping the case open for more than 45 calendar days:
 1. [FAR Family Assessment \(FARFA\) DCYF 10-474](#) form in FamLink per the [CPS Family Assessment Response \(FAR\)](#) policy.
 2. Case closure in FamLink.
9. LD foster care licensors, within 45 calendar days from the date of intake must complete licensing only investigations, per the [Licensing Investigations](#) policy.
10. LD CPS investigators, within 45 calendar days from the date of intake must complete LD CPS investigations, unless the supervisor approved an extension in FamLink per the Licensing Investigations policy.
11. Caseworkers, within 60 calendar days from the date of the intake must complete the:
 1. [Investigative Assessment \(IA\)](#) in FamLink.
 2. Risk assessment using the SDMRA DCYF 16-208 form in FamLink, per the [SDMRA](#) policy for CPS investigations and Risk Only intakes.
12. Caseworkers within 120 calendar days from the date of the intake must complete the following for families that participated in FAR services and consented to keeping the case open for more than 45 calendar days:

1. FARFA DCYF 10-474 form in FamLink per the CPS FAR policy.
2. Close the case in FamLink.

13. CW supervisors must:

1. Within two business days of receipt from caseworkers, review for approval the [Safety Assessment/Safety Plan DCYF 15-258](#).
2. Within seven calendar days of receipt from caseworkers, review for approval:
 1. Initial and ongoing CFEs.
 2. [Case closure](#) in FamLink.
3. Every 30 calendar days, document review of safety plans during [monthly clinical supervisor case reviews](#).

14. LD licensing supervisors within seven calendar days of foster care licensors and relative and adoption home study writers requesting provider closure, they must review and approve the provider for closure in FamLink.

15. LD CPS investigators' supervisors must review and approve:

1. Within two business days of receipt from LD investigators, the Safety Assessment/Safety Plan DCYF 15-258 form.
2. Within 15 calendar days of receipt from LD CPS investigators, case closure in FamLink.

3. Documenting Intakes and Use of Photography and Audio Recording

1. CW CPS and LD CPS investigators must perform their duties consistent with the following the policies:
 1. [Intake Process and Response](#) for documentation timeframes.
 2. [Photograph Documentation](#) when taking photographs in the course of a CPS investigation.
 3. [Audio Recording](#) when either:
 1. Recording children or youth physical or sexual abuse interviews.
 2. Retaining voicemails from parents or caregivers for evidentiary purposes.
2. Caseworkers and LD workers must follow the Photograph Documentation policy when taking photographs of children or youth in the DCYF placement care and authority or their surroundings.

4. Documenting Exceptions or Extensions for CW CPS and LD CPS Investigations
Caseworkers and supervisors must follow the:
 1. [CPS IFF Response](#) policy, for exceptions for IFFs.
 2. [CPS Investigation](#) policy, for extensions on CPS and LD CPS investigations.
5. Documenting and Safeguarding Confidential Information
Caseworkers and LD workers must perform their duties consistent with the following policies for safeguarding confidential information when working with clients and providers:
 1. [Domestic Violence \(DV\)](#) when documenting safety planning information for:
 1. DV victims using the Specialized DV Assessment.
 2. Witnesses to a crime.
 3. DV victims' children or youth.
 2. [Bloodborne Pathogens Implementation Practices and Procedures](#) when documenting blood-borne pathogen information about parents, children, or youth.
 3. DCYF Administrative 13.04 Protecting Privacy and Confidential Information to protect client and provider-related information.
 4. Records Management for storage and retention requirements of confidential information and when storing these records temporarily in DCYF share drives, personal folders, desktops, or on handwritten notes.
6. Documenting Emails and Text Messages
Caseworkers and LD workers must perform their duties consistent with the following policies:
 1. DCYF Administrative 12.04 Acceptable Use of Information Technology (IT) Resources and the Internet when sending emails containing sensitive or confidential information.
 2. DCYF Administrative 13.06 Records Management and Retention policy when creating, receiving, documenting, and storing emails and text messages.
7. Documenting Corrections to Errors in Case or Provider Notes
 1. Caseworkers or LD workers must complete the following when errors are found in FamLink or additional information needs to be added to a case or providers note:
 1. Correct or add the information to notes that have not been finalized.
 2. Use the "Insert correction note" in FamLink if notes have been finalized.
 2. Caseworkers or LD workers must complete the following when confidential information is put in the wrong case or provider note:
 1. Correct or add information to notes that have not been finalized.

2. Consult with their supervisor for permission to unlock a finalized case or provider note.
 3. Email the AA, with a cc to the supervisor, to obtain approval to contact the [ITD service desk](#) to unlock finalized notes.
3. AAs receiving requests to unlock finalized notes must:
1. Review requests for caseworkers or LD workers to contact the ITD service desk.
 2. Approve or deny requests, and notify the caseworker or LD worker with a cc to the supervisor.
4. Caseworkers or LD workers must send approved requests to the ITD service desk.
5. The ITD service desk must:
1. Unlock case or provider notes to allow for corrections.
 2. Notify caseworkers or LD workers that the case or provider notes are unlocked.
 3. Provide consultation as needed.
6. Caseworkers or LD workers who have been notified case or provider notes have been unlocked must document the following in case or provider notes:
1. The correction date.
 2. What specifically was corrected.
 3. Reasons for the correction.

Forms

[FAR Family Assessment \(FARFA\) DCYF 10-474](#)

[Safety Assessment/Safety Plan DCYF 15-258](#)

Structured Decision Making Risk Assessment (SDMRA) DCYF 16-208 (located on the forms repository)

Resources

[Administrative Incident Reporting policy](#)

[Audio Recording policy](#)

[Bloodborne Pathogens Implementation Practices and Procedures](#)

[Child Care policy](#)

[Court and/or Placement Cases policy](#)

[CPS Family Assessment Response policy](#)

[CPS Initial Face-to-Face \(IFF\) Response policy](#)

DCYF Administrative 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP) policy (located on the DCYF Child Welfare intranet, Policy, Policy and Rules)

DCYF Administrative 6.03 Access to Services for Individuals with Disabilities policy (located on the DCYF Child Welfare intranet, Policy, Policy and Rules)

DCYF Administrative 12.04 Acceptable use of IT Resources and the Internet policy (located on the DCYF Child Welfare intranet, Policy, Policy and Rules)

DCYF Administrative 13.04 Protecting Privacy and Confidential Information policy (located on the DCYF Child Welfare intranet, Policy, Policy and Rules)

DCYF Administrative 13.06 Records Management and Retention policy (located on the DCYF Child Welfare intranet, Policy, Policy and Rules)

[Domestic Violence policy](#)

[Emergency Planning for Children in Out-of-Home Care policy](#)

[Family Assessment/Assessment of Progress policy](#)

[Family Assessment Response Family Assessment \(FARFA\) policy](#)

[Family Voluntary Services \(FVS\) policy](#)

FamLink User Manuals (located in FamLink under the Knowledge Web)

[Health and Safety Visits with Children and Youth and Monthly Visits with Parents and Caregivers policy](#)

[Intake Process and Response policy](#)

[Interviewing a Victim or an Identified Child policy](#)

[Licensing Investigations policy](#)

[Photograph Documentation policy](#)

[Public Notice of Nondiscrimination DCYF HR_0012](#)

[Shared Planning Meetings policy](#)

Timely & Accurate Placement Entry User Guide document (located on the DCYF Child Welfare intranet, under Practice Guides)

6620. Referrals to the Division of Child Support

6620. Referrals to the Division of Child Support sarah.sanchez Tue, 08/28/2018 - 14:05

Original Date: July 1, 1997

Revised Date: September 1, 2022

Sunset Review: September 1, 2026

Approval: Frank Ordway, Chief of Staff

Purpose

The purpose of this policy is to provide guidance on when child welfare cases must be referred to the Division of Child Support (DCS).

Scope

This policy applies to child welfare (CW) and Financial and Business Services Division (FBSD) employees.

Laws

[RCW 13.34.030](#) Definitions

[RCW 13.34.270](#) Child with developmental disability - Out-of-home placement - Permanency planning hearing

[RCW 26.20.030](#) Family abandonment-Penalty-Exception

[Chapter 71.A.20 RCW](#) Out-of-home services

[RCW 74.13.020](#) Definitions.

[RCW 74.13.031](#) Duties of department - Child welfare services - Children's services - advisory committee.

[RCW 74.13.350](#) Children with developmental disabilities - Out-of-home placement - Voluntary placement agreement.

[RCW 74.20.040](#) Duty of department to enforce child support - Requests for support enforcement services - Schedule of fees - Waiver - Rules.

Policy

When children or youth are in out-of-home placement under the care and authority of DCYF, DCYF must review and refer cases to DCS when there is a court finding of abandonment as defined in [RCW 13.34.030](#), unless good cause exists for not pursuing the collection of child support or establishing paternity.

Procedures

When children or youth are in out-of-home placement under the care and authority of DCYF and a court has made a finding of abandonment as defined in [RCW 13.34.030](#), FBSD strategic operations program specialists must review those cases to determine if good cause exists using the criteria in [WAC 110-50-0320](#). If good cause:

1. Exists, enter a good cause determination into FamLink and include the criteria met.
2. Does not exist, refer the cases to DCS by:
 1. Completing a DCS IV-E Referral/Child Support Referral form for each parent.
 2. Sending the completed DCS IV-E Referral/Child Support Referral form to DCS through the [child support email inbox](#).

Forms

DCS IV-E Referral/Child Support Referral form (this is a DCS form)

Resources

[WAC 110-30-0040 What is child abandonment?](#)

[WAC 110-50-0300 When will cases be referred to the division of child support \(DCS\)?](#)

[WAC 110-50-0320 What constitutes good cause for not pursuing the collection or establishment of child support or paternity?](#)

6650. Trust Funds for Children in Out-of-Home Placement

6650. Trust Funds for Children in Out-of-Home Placement admin Tue, 10/08/2019 - 05:47

Original Date: September 27, 1995

Revised Date: October 31, 2019

Sunset Review Date: October 31, 2023

Approval by: Nicole Rose, Director of Eligibility and Provider Supports

Purpose

Provide guidance to the Department of Children, Youth, and Families (DCYF) employees for managing trust fund accounts for children who are in the placement and care authority of DCYF.

Scope

This policy applies to DCYF child welfare and Eligibility and Provider Supports Division Supplemental Security Income (SSI) and federal funding employees.

Laws

[RCW 74.13.060](#) Secretary as Custodian of Funds of Person Placed with Department or it's Agent – Authority – Limitations – Termination

[CFR 404.2040](#) Use of Benefit Payments

[CFR 416.640](#) Use of Benefit Payments

[SI 02101.010](#) Past-Due Benefits Payable – Individual Alive Under Age 18 with Representative Payee
– Dedicated Account Required

Policy

1. Caseworkers must:
 1. Refer all children to local SSI facilitators, when:
 1. It is known they receive or may be eligible to receive benefits from any of the following:
 1. SSI or Social Security Administration (SSA)
 2. Labor and Industries (L&I)
 3. Railroad Retirement Board (RRB)
 4. Veterans Benefits (VA)
 5. Crime Victims Compensation
 6. Legal Settlement
 7. Other private contributions
 2. Their parents, step parents, or adoptive parents are one of the following:
 1. Deceased
 2. Retired
 3. Disabled
 3. They are potentially eligible and have a Diagnostic and Statistical Manual-5 (DSM-V) diagnosis or are receiving an Individualized Education Program (IEP) through the school district.
 2. Inform the SSI facilitators of the child's placement, resources, or income when the child meets one of the following:
 1. Emancipation
 2. Returns home
 3. Transfers to Developmental Disabilities Administration (DDA)
 4. Is adopted
2. SSI facilitators must:
 1. Verify through system checks children are receiving eligible benefits.
 2. Request to change representative payees to DCYF for all clients currently entitled or receiving SSI or SSA benefits.

3. Report changes in circumstances regarding placement resources or income to the payer. This would include SSA, Veterans Affairs (VA), L&I, Crime Victims Compensation, Railroad Retirement and other private contributions.
 4. Coordinate all relevant financial, education, medical, and other information with the Trust Funds Unit.
3. The Trust Fund Unit must:
1. Maintain all accounting and disbursement documentation for children in out-of-home licensed placements receiving SSI, SSA, VA, or other benefits.
 2. Serve as the representative payee for the client's funds.
 3. Close the account when a child exits foster care.
4. Regional federal funding coordinators must:
1. Coordinate work with caseworkers and SSI facilitators to approve expenditures or plans for conserving a child's trust fund resources.
 2. Approve plans to protect the child's assets or forego reimbursement on foster care expenditures. Examples of potential assets include, but are not limited to:
 1. SSI lump sum benefits
 2. Dedicated Accounts
 3. Gifts from relatives
 4. Inheritances
 5. Life insurance payments
 6. Tort claim settlements
 7. SSA benefits
 8. Victims compensation funds
5. SSI program managers must:
1. Complete appeals on SSI and SSA cases.
 2. Review SSI facilitator's applications and verify medical, school, and additional evidence documentation is complete.
 3. Determine if an attorney needs to be involved in assisting with setting up and managing a Special Needs Trust Account or other accounts. If one is needed:
 1. Provide documentation to set up the trust account.
 2. Upload trust documentation to the case record.
 3. Notify the primary caseworker the trust account is established.

4. Determine when a Special Needs, Achieving Better Life Experience (ABLE), or other account needs to be established for children receiving SSI and SSA. If needed:
 1. Coordinate with the Trust Fund Unit or an attorney to manage the accounts.
 2. Upload trust documentation to the case record.
 3. Notify the primary caseworker the trust account is established.

Resources

Trust Funds Handbook (located on the DCYF CA Intranet)

SSI On-Line Guide (located on the DCYF CA Intranet)

6660. Supplemental Security Income (SSI) and Retirement, Survivors, and Disability Insurance (RSDI) Benefits for Children in Out-of-Home Placements

6660. Supplemental Security Income (SSI) and Retirement, Survivors, and Disability Insurance (RSDI) Benefits for Children in Out-of-Home Placements admin Tue, 10/08/2019 - 05:56

Original Date: September 27, 1995

Revised Date: October 31, 2019

Sunset Review Date: October 31, 2023

Approved by: Nicole Rose, Director of Eligibility and Provider Supports

Purpose

To provide guidance to the Department of Children, Youth, and Families (DCYF) employees on assessing children placed in out-of-home care for Supplemental Security Income (SSI) or Retirement, Survivors, and Disability Insurance (RSDI) received from the Social Security Administration (SSA).

Scope

This policy applies to DCYF child welfare and Eligibility and Provider Supports Division SSI and federal funding employees.

Laws

[RCW 74.13.031](#) Duties of Department – Child Welfare Services – Children’s Services Advisory Committee

[RCW 74.13.060](#) Secretary as Custodian of Funds of Person Placed with Department or its Agent – Authority – Limitations – Termination

[20 CFR 416](#) Supplemental Security Income for the Aged, Blind, and Disabled

Policy

1. Caseworkers must:

Refer all children who meet one of the following criteria to local SSI facilitators, when they:

1. Currently receive SSI or SSA benefits.
2. Have a deceased, retired, or disabled parent or legal guardian.
3. Have a positive toxicology screen or are drug affected.
4. Have a suspected delay or disability.
5. Are diagnosed with any of the following:
 1. Fetal Alcohol Syndrome or related disorders
 2. Borderline Intellectual Functioning
 3. Post-Traumatic Stress Disorder (PTSD)
 4. Behavioral or emotional problems
 5. Cerebral Palsy
 6. Attention Deficit Hyperactivity Disorder (ADHD)
 7. Low birth weight
 8. Failure to thrive
 9. Medically fragile
 10. Down Syndrome
6. Are in a [behavior rehabilitation services \(BRS\)](#) or an exceptional high cost placement.
7. Are blind or deaf.
8. Receive special education services, for example, an Individualized Education Program (IEP) or 504 Plan.
9. Use crutches or a wheelchair.
10. Have impairments with daily functioning.

2. SSI facilitators must:

1. Assess all children and youth in out-of-home placement in FamLink to determine if they are eligible for SSI or SSA benefits.
2. Complete and submit the:
 1. SSI application packet for children who meet the eligibility criteria, per the SSI Desk Guide.

2. Payee Change Application packet for children receiving SSI or SSA benefits when a child is placed in out-of-home care, per the SSI Guide.
 3. Report all changes in circumstances regarding placement, resources, or income to the payer for SSA, Veteran Administration (VA), Railroad Benefits, Crime Victims Compensation and Labor and Industry claims.
 4. Coordinate relevant financial and placement information with the DCYF Headquarters (HQ) SSI and Trust Fund Unit.
3. HQ SSI program managers must:
 1. Review initial SSI application packets for completeness.
 2. Re-examine denied applications from SSA to determine if an appeal needs to be filed. This includes, but not limited to:
 1. Reviewing and gathering additional documentation, when necessary.
 2. Resubmitting the appeal to SSA for reconsideration.
 3. Attending hearings to represent children and youth at administrative hearings.

Resources

SSI Desk Guide (located on the DCYF CA intranet)

8000. Operation Manual Policies

8000. Operation Manual Policies admin Thu, 02/10/2022 - 10:43

Under Construction

8010. Bloodborne Pathogens Implementation Practices and Procedures

8010. Bloodborne Pathogens Implementation Practices and Procedures admin Thu, 02/10/2022 - 12:38

1. Non-Discrimination
 1. CA shall not discriminate against persons with or perceived to have HIV infection. This policy includes discrimination against employees, clients, licensees, contractors, or volunteers. Procedures for persons who believe they have been subjected to discrimination are found in DCYF Administrative 11.13 Preventing and Addressing Discrimination, Harassment, Sexual Harassment, and Retaliation policy.
 2. Licensees are not required by law to share their HIV status with licensers. If this information is shared by the licensee or prospective licensee, licensers may request additional health information, as is the case with disclosure of any serious illness of a licensee. Decisions regarding continued licensing of an HIV infected person are made in the same manner as any serious illness.

2. Regional HIV/BBP Coordinator

1. Each Regional Administrator must designate an HIV/BBP Coordinator to oversee issues related to HIV, HBV, and other BBPs.
2. The social worker refers all HIV/HBV affected cases and issues related to BBP to the regional HIV/BBP Coordinator for consultation and staffing as appropriate.
3. The Coordinator:
 1. Provides information and consultation on CA policy.
 2. Provides consultation for case management.
 3. Serves as liaison with the health care community and AIDS service organizations.
 4. Convenes the HIV/BBP Advisory Team.

3. Regional HIV/BBP Advisory Team

1. Each Regional Coordinator must develop an HIV/BBP Advisory Team to advise on issues related to HIV, HBV, and other BBP.
2. The Regional HBV/BBP Advisory Team:
 1. Assists, as necessary, with development of regional guidelines on issues related to HIV/BBP.
 2. Provides case consultation, as needed.
4. Universal Precautions-All staff, out-of-home care providers, volunteers, licensees, and respite care providers must use universal precautions when dealing with children in care and treat all blood and body fluids containing blood as if known to be infectious. See section 5710, Blood Borne Pathogens Protection Plan.
5. HIV Testing
 1. HIV testing of a child is a medical procedure and, therefore, must be done only in consultation with the Regional HIV/BBP Coordinator and on the recommendation of the local health department or a licensed health care provider knowledgeable about HIV infection.

1. When HIV testing of a child under the age of 14 is being requested as a result of potential perinatal exposure, the social worker or HIV/BBP Coordinator shall inform the child's mother of the request and ask the mother to provide the results of her past HIV tests or to be tested in order to possibly eliminate the need for testing of the child. This testing is voluntary and will be confidential, consistent with this section.

2. When parental rights have been terminated, the social worker of a child under the age of 14 may authorize HIV testing.

3. The social worker shall obtain a court order for testing if the parent or legal guardian is unavailable or unwilling to provide consent for testing of a child under the age of 14 and if a medical reason for testing exists.
 4. If a child under 14 years of age tests positive for any STD, including HIV, the HIV/BBP Coordinator shall ensure that the medical professional or the local health department notifies the parent or legal guardian of the test results.
2. HIV/STD testing of a youth age 14 or over requires the written consent of the youth or a court order. The youth may request testing on his/her own authority.
 1. The written consent or court order shall authorize test results for HIV or HBV to be released to the social worker and out-of-home care provider.
 2. When obtaining a court order or a consent for HIV testing, the social worker shall, if needed, also gain authority to share the results with others who have a compelling "need to know" and are not otherwise authorized to know under chapter 70.24 RCW. All such individuals shall be identified in the consent or court order. The consent or court order shall authorize treatment, as necessary.

6. Confidentiality/Disclosure

1. Infection with HIV and other sexually transmitted diseases is a personal and private matter. Staff, care providers, and volunteers shall treat information related to these issues in a confidential and respectful manner and shall not disclose this information except in accordance with state law and as provided in this section and paragraphs G and H, below
2. Disclosure Practices and Criteria
 1. The social worker shall ensure that the child's current health care provider is aware of the child's exposure to HIV/HSV.
 2. Social workers shall not disclose information related to a parent or child's HIV or other STD status to other CA employees, except their immediate supervisor, manager, and HIV/BBP Coordinator.
 3. When the social worker or HIV/BBP coordinator provides written disclosure of HIV/BBP status information to someone outside of CA, the social worker or HIV/BBP Coordinator shall include the following statement on the Disclosure of Confidential HIV Information, DSHS 09-837:

This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains or as otherwise permitted by state law. A general authorization for the release of medical or other information is not sufficient for this purpose.

4. When the social worker or HIV/BBP coordinator provides HIV/BBP information regarding a parent or child is disclosed orally to someone

outside of CA, the social worker shall send the Disclosure of Confidential HIV Information, DSHS 09-837, to the person(s) receiving the information within 10 days of the disclosure.

5. Documentation that a parent or child has been tested for HIV or other BBP shall be recorded and stored electronically in FamLink.

Document HIV/BBP status in the "Medical Problems" pop-up. Copies of medical records regarding the testing results or HIV/BBP related information will be scanned and stored in the FamLink "Filing Cabinet". Access to this information is secured and limited to the assigned social worker and their supervisor.

Copies of documents and medical records regarding HIV/BBP status or related information may also be kept in a "privileged/confidential information" envelope used to safeguard sensitive case information. Access to this envelope is strictly limited to those authorized by law, with consent or as noted on a court order. Access to other parts of the child's record does not assume the right to access HIV/BBP information.

6. Social workers shall not disclose HIV/BBP information in written reports to the court without consultation with the assigned legal counsel.
7. When HIV/BBP information is discussed in court, the social worker, through legal counsel, shall make special arrangements with the court to protect the confidentiality of the parties.

7. Placement

1. DCFS staff shall inform the residential care provider of the child's HIV/HSV status, if known. The social worker shall not inform the residential care provider of the HIV/HSV status of a child age 14 or older without the child's permission or a court order. However, the social worker shall inform the child that no placement will be made without disclosure of such status to the prospective residential care provider.
2. HIV exposed/infected children may be placed with other children unless otherwise advised by the health care provider. However, DCFS staff shall not place known HSV infected children or perinatally exposed infants in households with other unvaccinated persons.
3. The social worker shall strongly consider a child's and/or parent's wish not to disclose a child's positive HIV/HSV status to relatives when investigating a potential relative placement. However, if the child is actually placed, the social worker must disclose the child's HIV/HSV status. This revelation could negatively impact family relationships.
4. The social worker shall arrange for provision of medical attention for the HIV/STD infected/exposed child by a physician knowledgeable in this specialty area.
5. When placing a child known to be HIV/HSV exposed or infected, the social worker, in addition to providing the residential care provider with information regarding the

child's current health status and names of all health care providers, shall inform the residential care provider of all resources involved and provide instruction in any special care needs of the child prior to placement.

If exposure of infection is discovered after placement, the social worker shall immediately provide the above information to the residential care provider and ensure the provision of instruction in any special care needs.

6. When HBV infection is discovered in an individual living or working in a foster/receiving/group home, the social worker shall immediately notify the Regional HIV/BBP Coordinator and the local health department. Public health department recommendations for testing and immunization of household contacts shall be followed. DCFS staff shall place no additional unimmunized children in the home while the possibility of exposure exists.

8. Adoption

1. The adoption worker or HIV/BBP Coordinator shall provide prospective adoptive parents with all available information on the STD/HIV/HBV status of children under 14 years of age.
2. For children age 14 or above, the social worker shall not disclose status without the child's permission but shall not place the child without such disclosure.
3. Staff shall share the STD/HIV/HBV status, if known, of the parents, if the possibility of infection of the child by that parent exists. In such cases, the identity of the parents may not be disclosed.
4. CA staff shall identify children with HIV infection in adoption exchange books and/or media as having "serious medical problems." HIV exposure of uninfected children does not need to be noted in exchange books. Only when a serious inquiry is received and the social worker has determined that the family is a potential candidate should the child's specific medical history be discussed. The social worker shall not disclose the child's name until the family is selected as the adoptive family.
5. The social worker shall provide prospective adoptive parent(s) with the [Family Genetic and Medical History DCYF 13-041](#) form. The social worker shall include on the document all available medical information related to the child and biological parent, including HIV/STD information if possibility of exposure exists. The identity of the parent is not disclosed on this form.
6. When HIV testing is recommended, the social worker shall consult with the HIV/BBP Coordinator and arrange for completion of the test prior to finalization of the adoption.
7. The social worker shall inform the prospective adoptive parent that HIV I infection may qualify a child for adoption support.

9. Training

1. CA shall arrange for all employees to receive HIV/BBP training which covers prevention, transmission, infection control, treatment, testing, confidentiality CA-related policy and procedure, as it relates to adults and children.
2. All individuals and agencies licensed by CA shall receive HIV/BBP training which covers prevention, transmission, infection control, treatment, testing, confidentiality and CA-related policy and procedure, as it relates to adults and children.

8020. Overpayment and Underpayment Identification and Recovery

8020. Overpayment and Underpayment Identification and Recovery admin Thu, 02/10/2022 - 12:43

1. Purpose and Scope

1. These procedures establish guidelines for CA staff in the resolution of vendor or foster parent disputes regarding payments through an administrative hearing and pre-hearing process. It provides direction when staff determines that an overpayment to a vendor or foster parent exists, for staff participation in steps to recover the overpayment, and for staff participation in the settlement of any overpayment disputes. The procedures also provide direction for pre-hearing efforts to mediate and resolve payment disputes prior to proceeding to hearing.
2. Contracted and non-contracted service providers, including foster parents, may seek dispute resolution through these procedures, under the Administrative Procedure Act and RCW 43.20B.675, with respect to overpayments. However, the following limitations apply:
 1. The right of vendors or foster parents to seek an administrative hearing to contest alleged overpayments applies only to overpayments for goods or services provided on or after July 1, 1998.
 2. These procedures do not create a right to a hearing where no dispute right previously existed except as provided in RCW 43.20B.675. These procedures and department policy limit disputes for foster family and child day care providers to:
 1. Alleged overpayments;
 2. Perceived failure of the department to pay for services actually provided under an agency service authorization; and
 3. Licensing actions taken under WAC 110-148-1625 or WAC 110-300-0443, as applicable.
 3. Adoptive parents who receive assistance through the Adoption Support Program are not vendors within the meaning of the law. They have hearing rights under other provisions of law and WAC. Accordingly, payment disputes involving the Adoption Support Program do not fall within the scope of these procedures.

3. Discovery or recovery of overpayments has no time limit. The department may identify and initiate recovery of overpayments without regard to the length of time that may have elapsed since the overpayment actually occurred or was discovered.
4. CA employees do not have authority to forgive or waive overpayments, nor to offset overpayments from future payments. All such authority rests with the Office of Financial Recovery (OFR). Designated CA staff may mediate a disputed payment with the vendor, but final approval for any negotiated proposed settlement rests with OFR.
5. Governmental entities, including Indian Tribes, with an Inter-local Agreement with the department do not have the right to an adjudicative hearing through the Office of Administrative Hearings (OAH). The dispute process described in the agreement between the entity and the department governs the resolution process.

2. Policy

1. RCW 43.20B.675 and DSHS Administrative Policy 10.02 provide that all vendors have the right to request an adjudicative proceeding if they have a bona fide dispute. Disputes involving rates set in rule or Washington Administrative Code (WAC) are not subject to resolution through an adjudicative hearing held by OAH. The responsible CA organizational unit must routinely offer a pre-hearing conference to all clients and vendors that request an administrative hearing.
2. The department and CA must, when undertaking activities relating to overpayment identification and recovery as well as adjudicative proceedings, comply with DCYF Administrative policies:
 1. 6.02 Access to Services for Clients and Caregivers who are Limited English Proficient (LEP)
 2. 6.03 Access to Services for Individuals with Disabilities

3. Procedures

1. Regional and Headquarters Procedures:
 1. Each DCFS Regional Administrator, DLR Regional Manager, or division Director, as applicable, must establish procedures to provide for consistency in the handling of vendor/contractor disputes in accordance with the Children's Administration Pre-hearing Procedures. Procedures must include:
 1. Methods to informally notify vendors of their right to request a formal adjudicative proceeding if they have a bona fide contract dispute and to provide all appellants with a copy of the CA written pre-hearing process. (OFR provides formal notification of overpayments.) The department limits adjudicative disputes for foster parents to those issues identified in paragraph 1.B., above;

2. Pre-hearing/alternative dispute resolution that incorporates routine offers of a pre-hearing conference to all clients or vendors who have requested an administrative hearing;
 3. Identification of overpayments and steps to initiate recovery of amounts due to the department as a result of overpayments;
 4. Designation of staff to represent CA in behalf of the department in pre-hearing/alternative dispute resolution and administrative hearings for disputes resulting from activities or actions of the applicable organizational unit;
 5. Identification of staff to mediate overpayment and other disputes prior to a formal administrative hearing;
 6. A system to identify overpayments in a timely manner;
 7. A method to document that an overpayment has occurred;
 8. A method to notify the vendor/provider that an overpayment has occurred and to determine the vendor's agreement or disagreement with that determination; and
 9. Identification of staff assigned to review overpayments and to refer them to OFR for collection.
2. CA expects disputes to be resolved at the lowest possible level in the organization. Therefore, CA staff will handle disputes at the following organizational levels:
 1. The DCFS Regional Administrator is responsible for the dispute resolution process for all payments authorized by local office social workers and all payments authorized under regionally managed contracts and service agreements. Regional DCFS staff will coordinate pre-hearing conferences, mediation activities, and administrative hearings for regionally-managed contracts.
 2. Assigned CA Division of Program and Policy Development or Office of Foster Care Licensing (OFCL) headquarters staff, as applicable, will handle pre-hearing conferences, mediation activities, and administrative hearings arising from headquarters-managed contracts and service agreements.
2. Determination of Existence of an Overpayment and Documentation of Referral
 1. If any CA employee has reason to believe that the department has overpaid a contractor or vendor, that employee must contact the employee who authorized the payment and the authorizing employee's supervisor by written memo or e-mail.

1. The CA employee identifying the overpayment must inform the authorizing employee and that employee's supervisor that the employee has reason to believe an overpayment has occurred and must provide the information that led the employee to that conclusion.
2. If the authorizing employee identifies an overpayment, that employee must inform and provide supporting information to the supervisor.
2. The authorizing employee, or other employee designated in DCFS or DLR regional procedures or CA headquarters procedures must contact the vendor/provider directly to inform the vendor/provider of the identified overpayment and the reason the payment constitutes an overpayment.
 1. This contact provides the CA employee and the vendor/provider an opportunity to identify any errors in the conclusion that an overpayment occurred and to enable the CA employee to discontinue overpayment procedures if CA incorrectly identified an overpayment.
 1. This contact serves as an opportunity for CA to educate the vendor/provider in correct methods to complete invoices in order to prevent overpayments from recurring.
 2. In addition, the CA employee can support the vendor/provider in continuing to offer services to CA and its clients.
 2. If the vendor/provider is a foster parent who disagrees with CA determination of an overpayment, the CA employee informs the foster parent of the foster parent liaison program and provides the contact telephone number for the CA office's liaison.
 3. If the CA employee, after contact with the vendor/ provider, continues to believe that an overpayment occurred, the authorizing worker or other employee designated by regional procedures informs the vendor/ provider that the employee will notify OFR of the overpayment. OFR will send an official notice of overpayment to the provider/vendor. This notice will include instructions for the vendor/provider to return the overpaid funds to the department and information on steps to dispute the overpayment.
3. The employee who originally authorized the payment gathers written documentation of the overpayment. This may include gathering payment records through the SPAYMENT procedure in FamLink.

4. The authorizing employee refers to the regional designee any overpayments, with supporting documentation. This information will include documentation of the vendor/ provider's agreement or disagreement with the determination of overpayment. The regional designee reviews the referral information to ensure that supporting documentation adequately supports the conclusion that an overpayment in the amount stated did occur.
3. Referral to the Office of Financial Recovery
 1. The applicable CA designee sends the completed SSPS Overpayment Notice, DSHS 18-398A, (dated 7/1998) along with the documentation of the overpayment, to OFR.
 2. OFR then issues formal notice of the overpayment by certified mail to, and tracks responses from, the vendor/provider. If the vendor/provider wants to formally dispute the overpayment, the vendor/provider must respond to OFR within 28 days of the notice of overpayment.
 3. If the vendor/provider does not dispute the overpayment, OFR establishes a schedule for repayment with the vendor/provider. In accordance with RCW 43.20B.695, interest will not accrue when the overpayment results from department error.
4. Disputed Department Actions
 1. OAH schedules a hearing when a vendor/provider requests a hearing. After a vendor/provider requests a hearing, the CA authorized staff person offers a pre-hearing conference. The pre-hearing conference may be a telephone call, a meeting, or a mediation session with a third party mediator.
 2. The responsible CA organizational unit must identify individuals authorized to mediate a disagreement between the department and the vendor/provider. Those persons designated to refer overpayments to OFR for collection may not serve in the role of mediator for overpayment disputes.
 3. If the CA authorized staff and the vendor/provider reach a settlement, the CA representative and the vendor/provider may execute a stipulated agreement in writing, signed by the parties. If the parties do not resolve the dispute, the formal hearing with OAH takes place as scheduled.
 4. For overpayments:
 1. If the vendor/contractor and the CA representative reach an agreement, before signing the agreement, the CA representative must contact OFR at (360) 664-5557 to obtain verbal approval for the stipulated agreement if it forgives an identified overpayment.

2. If the OFR representative approves the agreement, the CA representative and the vendor/contractor representative sign the agreement, and the CA representative mails it to the OFR representative for signature. Once the OFR representative signs the agreement, it takes effect.
3. If the administrative hearing occurs, the CA employee who authorized the payment must participate in the administrative hearing. Regional or headquarters procedures, as applicable, determine if additional individuals will participate in the administrative hearing to represent the department.

8030. Repayment

8030. Repayment admin Thu, 02/10/2022 - 12:44

1. The vendor or client must send the repayment directly to OFR. If a CA office receives money that is to be applied to a vendor overpayment, assigned accounting staff in the office transmits the money to OFR on a Daily Funds Transmittal, DSHS 18-320(X).
2. Accounting staff indicates the nature of the overpayment in the comment section of the Daily Funds Transmittal.

8040. Unsolicited Payments

8040. Unsolicited Payments admin Thu, 02/10/2022 - 12:45

1. When OFR receives payments from vendors for whom it has not received an overpayment packet, OFR staff will send notification to the appropriate CA office.
2. If CA determines that the payment or any portion was submitted in error or that OFR applied funds incorrectly, responsible staff transmits this information to OFR in writing within 30 days. OFR will then initiate appropriate action.
3. If CA staff determines that the payment or any portion was a program donation, designated staff transmits this information to OFR, including the identity of the program to which the donation was made to enable OFR to credit the proper account.

8050. Interest on Vendor Debt

8050. Interest on Vendor Debt admin Thu, 02/10/2022 - 12:46

Interest on vendor debt is administered in accordance with DSHS Administrative Policy 10.02, Vendor or Provider Overpayment and Debt Policy.

8060. Administrator's Accounts

8060. Administrator's Accounts admin Thu, 02/10/2022 - 12:47

8070. Purpose and Scope

8070. Purpose and Scope admin Thu, 02/10/2022 - 12:48

1. RCW 43.88.195 allows agencies to establish new accounts with the permission of the Office of Financial Management (OFM). Administrator's Accounts are expendable trusts that are local fund accounts available to provide instant assistance to eligible clients. Their sources of funds are usually donations and fund raisers.
2. Please Note: If funds are given for a specific purpose, moneys can only be dispensed for that specific purpose. Accounting records must be maintained so that moneys donated and spent for a specific purpose may be audited.

8080. Establishment of an Administrator's Account

8080. Establishment of an Administrator's Account admin Thu, 02/10/2022 - 12:49

1. CA local offices are to:
 1. Develop a statement of purpose for the account; for example, "The sole purpose of this account is to provide direct needs and opportunities for children and their families when no other resource is available."
 2. Stipulate the criteria for use, the amount available per request, and the process that will be developed to allow access to Administrator Account funds.
 3. Write a memo to the Regional Administrator requesting the establishment of an Administrator's Account. In the request, include the fund's purpose, criteria for use, and process for accessing funds. The Regional Administrator or designee will send a written request to the Chief, DSHS Office of Accounting Services, with a copy to the CA Director of Management Services. The written request must include the name of the bank, name and classification of individuals authorized to sign account checks, and the name and classification of the individual responsible for reconciling monthly bank statements with the office records.
2. Once the DSHS Office of Accounting Services has granted authority to establish the account, the local office identifies staff to be the:
 1. Accounts Receivable Coordinator;
 2. Committee or Person(s) to review/approve requests for funds;
 3. Disposition Person;
 4. Fund Trustee;
 5. Mail Person;
 6. Recording Person, and
 7. Reconciliation Person

8090. Separation of Duties

8090. Separation of Duties admin Thu, 02/10/2022 - 12:55

1. To the extent possible, the duties listed in section 9920(B) are to be separated.
2. If the duties cannot be separated due to a lack of staffing, a "Separation of Duties" waiver which includes compensating controls to show safeguard of the account must be on file in the regional office.
3. The waiver must be signed by the Fund Trustee, the trustee's supervisor, the second line supervisor, and the Regional Administrator.
4. Please note: Any cash or negotiable items received are to be deposited within 24 hours.

8100. Operation of Administrator's Account

8100. Operation of Administrator's Account admin Thu, 02/10/2022 - 12:56

The Regional Administrator, usually through the Regional Business Manager and/or the Clerical Supervisor, designates staff to carry out the duties outlined below.

8110. Mail Person

8110. Mail Person admin Thu, 02/10/2022 - 12:57

The Mail Person logs any cash or negotiable items in the Cash Items Mail Log, DSHS 19-48, and gives it to the Accounts Receivable Coordinator.

8120. Accounts Receivable Coordinator

8120. Accounts Receivable Coordinator admin Thu, 02/10/2022 - 12:58

The Accounts Receivable Coordinator:

1. Receives the Cash Items Mail Log and the cash/negotiable items from the mail person.
2. Verifies that the cash/negotiable items are shown on the Cash Items Mail Log and, after verification, dates and signs the mail log, retaining the pink copy.
3. Issues a pre-numbered and sequential receipt for all cash/negotiable items requiring a receipt. If the cash/negotiable items received are for a specific purpose, they are to be referred to as a restricted donation, with a note of the restriction on the receipt issued to the donor.
4. Prepares the disposition documents required for the disposal of cash and negotiable items. The disposition documents will include the bank deposit slip, the Cash Items Mail Log, and a copy of the receipt issued to the donor.
5. Secures all cash and negotiable items until transferred to the Disposition Clerk along with the disposition documents.

8130. Disposition Person

8130. Disposition Person admin Thu, 02/10/2022 - 12:59

The Disposition Person:

1. Verifies that the cash and/or negotiable received from the Accounts Receivable Coordinator equals the amount shown on the disposition documents. Completes the disposition entries on the various receipt and disposition documents. Signs and dates the disposition documents.
2. Secures the deposit until it can be taken to the bank. Gives bank- validated deposit slips along with the copies of the receipt and disposition documents to the recording person on the same day the deposit is made.
3. Receives approved disbursement authorizations from committee or person(s) responsible for reviewing and approving requests for funds.
4. Prepares check (in ink) and writes the check number on the Disbursement Authorization. Has the check signed by at least two people who are authorized on the bank account signature card.
5. Gives the completed Disbursement Authorizations to the Recording Person.

8140. Recording Person

8140. Recording Person admin Thu, 02/10/2022 - 13:00

The Recording Person:

1. Reconciles the daily cash receipts and bank validated deposit slips.
2. Records all deposits in the Cash Receipts Journal and Ledger Sheet.
3. Verifies the amounts of checks to disbursement authorizations and completes entries to the check register, Cash Disbursements Journal, and the Ledger Sheet. Secures signed checks until they are mailed or given to the appropriate person.

8150. Reconciliation Person

8150. Reconciliation Person admin Thu, 02/10/2022 - 13:01

The Reconciliation Person:

1. Upon receiving the Administrator's Account monthly bank statement, reconciles the statement to the Ledger Sheet and other journals. Completes the reconciliation on the back of the bank statement.
2. Prepares the Administrator's Account Monthly Activity Report and the Bank/Reconciliation Report. Gives them and the appropriate ledgers and journals, along with the bank statement, to the Fund Trustee for review.

8160. Review and Approval of Authorizations

8160. Review and Approval of Authorizations admin Thu, 02/10/2022 - 13:01

The committee or person(s) responsible for review and approval of Disbursement Authorizations approves, modifies, or denies the completed Disbursement Authorization based on the local office use-of-funds criteria and any restrictions that may have been placed on the funds by the donor.

8170. Fund Trustee

8170. Fund Trustee admin Thu, 02/10/2022 - 13:06

The Fund Trustee:

1. Oversees the management and accountability of the Administrator's Account.
2. Reconciles the accounting records to the trustee's records on a quarterly basis. If there are variances, the trustee researches and documents, corrects, or takes appropriate action. He/she prepares the Trustee's Reconciliation Report, DSHS 19-207, and signs and dates it.

8180. Accessing Administrator's Account Funds

8180. Accessing Administrator's Account Funds admin Thu, 02/10/2022 - 13:07

1. A CA staff person submits a completed Request for Disbursement Authorization form to the committee or person(s) assigned by the Regional Administrator the duties of approving these requests.
2. The completed form includes the amount, case name, case number, and purpose of the requested funds. The form is signed and dated by the worker.

Appendix A: Definitions

Appendix A: Definitions sarah.sanchez Tue, 08/28/2018 - 14:18

The following definitions apply for purposes of the *CA Practices and Procedures Guide*.

“ABANDON” means when a child's or youth's parent, guardian, or other custodian has expressed, either by statement or conduct, an intent to forego, for an extended period, parental rights or responsibilities despite an ability to exercise such rights and responsibilities. If the court finds that the petitioner has exercised due diligence in attempting to locate the parent, no contact between the child or youth and their parent, guardian, or other custodian for a period of three months creates a rebuttable presumption of abandonment, even if there is no expressed intent to abandon per [RCW 74.14A.020](#) and [RCW 13.34.030](#).

“ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)” means a disease to the immune system due to an infection with Human Immunodeficiency Virus (HIV). HIV destroys the CD4 T lymphocytes (CD4 cells) of the immune system, leaving the body vulnerable to life-threatening infections and cancers. Acquired immunodeficiency syndrome (AIDS) is the most advanced stage of HIV infection. To be diagnosed with AIDS, a person with HIV must have an AIDS-defining condition or have a CD4 count less than 200 cells/mm³, regardless of whether the person has an AIDS-defining condition.

“ADMINISTRATIVE INCIDENTS” are serious and emergent incidents involving CA clients, staff and providers.

“ADMINISTRATIVE REVIEW” means a review open to the participation of the parents of the child or youth, conducted by a panel of appropriate persons at least one of whom is not responsible for the case management of, or the delivery of services to, either the child or youth or the parents who are the subject of the review, per [42 USC 675, Sec. 475](#).

“ADOPTION SUPPORT AGREEMENT” means a written contract between the adoptive parent(s) and the department that identifies the specific support available to the adoptive parent(s) and other terms and conditions of the agreement.

“AFTERCARE SERVICES” means the provision of less intensive, ongoing services to youth and their families following the youth’s discharge from residential care or in-home services.

“AGE OR DEVELOPMENTALLY-APPROPRIATE” means activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally-appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group; and in the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

“AGGRAVATED CIRCUMSTANCES” means DCYF is no longer required to provide reasonable efforts to reunify the family, if at least one of the following criteria in [RCW 13.34.132](#) are met.

“ALLEGED GENETIC PARENT” means an individual who is alleged to be, or alleges that the individual is, a genetic parent or possible genetic parent of a child or youth. An alleged genetic parent does not include a presumed parent under [chapter 26.26A RCW](#), an individual whose parental rights have been terminated or declared not to exist, or a donor of gametes or embryos. [RCW 74.14A.020](#); [RCW 26.33.020](#); [RCW 26.26A.010](#).

“AT-RISK YOUTH” means a juvenile who:

1. Is absent from home for at least 72 consecutive hours without consent of his or her parent.
2. Is beyond the control of his or her parent such that the child's behavior endangers the health, safety, or welfare of the child or any other person.
3. Has a substance abuse problem for which there are no pending criminal charges related to the substance abuse.

RCW 13.32A.030

“BEHAVIORAL REHABILITATION SERVICES (BRS)” are temporary intensive wraparound supports and treatment program for youth with extreme, high level service needs used to safely stabilize youth and assist in achieving a permanent plan or less intensive services. These services can be provided in an array of settings and are intended to safely:

- Keep youth in their own homes with wraparound supports to the family.
- Reunify or achieve alternative permanency more quickly.
- Increase family based care by using a wraparound approach.

- Reduce length of service by transitioning to a permanent resource or less intensive service.

“BLOODBORNE PATHOGENS (BBP)” are diseases and bacteria that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, the hepatitis B or C virus and human immunodeficiency virus (HIV).

“BORROWED FOSTER HOME” is reimbursement made for the use of the foster home only through a CPA contract and the case management responsibilities remain with DCYF. Borrowed foster home services will be authorized for a maximum of six month increments.

"Caregiver" means an adult living in the home permanently or semi-permanently and has routine responsibility for childcare. This may be the other legally responsible adult, another adult relative or a live-in partner. It may also be any other adult with regular ongoing time in the home and has routine responsibility for childcare.

"CASE PLAN" means a written statement by the social worker of the anticipated activities, including service agreements, which are planned in the conduct of the case.

“CERTIFICATION FOR ADOPTION” means a person or persons constituting a household have submitted an application for adoption to the department or a child placing agency, have had a satisfactory home study completed, and have been determined suitable as adoptive parent or parents.

"CHILD," "JUVENILE," and **"YOUTH"** mean any unemancipated individual who is under the chronological age of 18 years. RCW 13.32A.030

"CHILD ABUSE AND NEGLECT"

CPS WAC Definitions of CA/N

Child abuse or neglect means the injury, sexual abuse, sexual exploitation, negligent treatment, or maltreatment of a child under circumstances which indicate that the child's health, welfare, and safety is harmed. An abused child is a child who has been subjected to child abuse or neglect as defined in this section.

1. Physical abuse means the non-accidental infliction of physical injury or physical mistreatment on a child. Physical abuse includes, but is not limited to, such actions as:
 1. Throwing, kicking, burning, or cutting a child;
 2. Striking a child with a closed fist;
 3. Shaking a child under age three;
 4. Interfering with a child's breathing;
 5. Threatening a child with a deadly weapon;
 6. Doing any other act that is likely to cause and which does cause bodily harm greater than transient pain or minor temporary marks or which is injurious to the child's health, welfare and safety.

2. Physical discipline of a child, including the reasonable use of corporal punishment, is not considered abuse when it is reasonable and moderate and is inflicted by a parent or guardian for the purposes of restraining or correcting the child.
 1. The age, size, and condition of the child, and the location of any inflicted injury shall be considered in determining whether the bodily harm is reasonable or moderate.
 2. Other factors may include the developmental level of the child and the nature of the child's misconduct.
 3. A parent's belief that it is necessary to punish a child does not justify or permit the use of excessive, immoderate or unreasonable force against the child.
3. Sexual abuse means committing or allowing to be committed any sexual offense against a child as defined in the criminal code.
 1. The intentional touching, either directly or through the clothing, of the sexual or other intimate parts of a child or allowing, permitting, compelling, encouraging, aiding, or otherwise causing a child to engage in touching the sexual or other intimate parts of another for the purpose of gratifying the sexual desire of the person touching the child, the child, or a third party.
 2. A parent or guardian of a child, a person authorized by the parent or guardian to provide childcare for the child, or a person providing medically recognized services for the child, may touch a child in the sexual or other intimate parts for the purposes of providing hygiene, child care, and medical treatment or diagnosis.
4. Sexual exploitation includes, but is not limited to, sex trafficking and commercial exploitation as those terms are defined by law. Sexual exploitation also includes, but is not limited to, such actions as allowing, compelling, encouraging, aiding, or otherwise causing a child to participate in one or more of the following:
 1. Any sex act when anything of value is given to or received by any person for the sex act;
 2. Sexually explicit, obscene or pornographic activity to be photographed, filmed, or electronically reproduced or transmitted;
 3. Sexually explicit, obscene or pornographic activity as part of a live performance, or for the benefit or sexual gratification of another person.
5. Negligent treatment or maltreatment means an act or a failure to act, or the cumulative effects of a pattern of conduct, behavior, or inaction, on the part of a child's parent, legal custodian, guardian, or caregiver that shows a serious disregard of the consequences to the child and creates a clear and present danger to the child's health, welfare, or safety.
 1. When considering whether a clear and present danger exists, evidence of a parent's substance abuse as a contributing factor must be given great weight.

2. The fact that the siblings share a bedroom is not, in and of itself, negligent treatment or maltreatment.
3. Poverty, homelessness, or exposure to domestic violence perpetuated against someone other than the child does not, in and of itself, constitute negligent treatment or maltreatment.
4. A child does not have to suffer actual damage or physical or emotional harm to be in circumstances that create a clear and present danger to the child's health, welfare, or safety.
5. Negligent treatment or maltreatment may include, but is not limited to one or more of the following:
 1. Failure to provide adequate food, shelter, clothing, supervision, or health care necessary for a child's health, welfare, or safety, such that the failure shows a serious disregard of the consequence to the child and creates a clear and present danger to the child's health, welfare, or safety;
 2. Actions, failures to act, or omissions that result in injury or risk of injury to the physical, emotional, and/or cognitive development of a child, such that it shows a serious disregard of the consequences to the child and creates a clear and present danger to the child's health, welfare, or safety;
 3. The cumulative effects of a pattern of conduct, behavior, or inaction by a parent or guardian in providing for the physical, emotional or developmental needs of the child, such that it shows a serious disregard of the consequences to the child and creates a clear and present danger to the child's health, welfare, or safety;
 4. The effects of chronic failure on the part of a parent or guardian to perform basic parental functions, obligations, or duties that causes injury or substantial risk of injury to the physical, emotional, or cognitive development of the child, such that it shows a serious disregard of the consequences to the child and creates a clear and present danger to the child's health, welfare, or safety.
6. A Parent or guardian abandons a child when the parent or guardian is responsible for the care, education, or support of a child and:
 1. Deserts the child in any manner whatever with the intent to abandon the child;
 2. Leaves a child without the means or ability to obtain one or more of the basic necessities of life such as food, water, shelter, clothing, hygiene, and medically necessary health care; or
 3. Forgoes for an extended period of time parental rights, functions, duties and obligations despite an ability to exercise such rights, duties, and obligations.

7. Abandonment of a child by a parent may be established by conduct on the part of a parent or guardian that demonstrates a substantial lack of regard for the rights, duties, and obligations of the parent or guardian or for the health, welfare, and safety of the child. Criminal activity or incarceration of a parent or guardian does not constitute abandonment in and of themselves, but a pattern of criminal activity or repeated or long term incarceration may constitute abandonment of a child.

"CHILD ACTION PLAN" means the services and tasks that are provided to the child and placement provider as necessary to support the placement and meet the needs of the child while in out-of-home care. The Child Action Plan includes objectives and tasks pertaining to the following:

- Educational needs
- Medical needs
- Social needs
- Psychological needs
- Cultural needs
- Independent living needs

"CHILD AND FAMILY TEAM (CFT)" means a group of people established by the family and WISe agency that consists of family members and other people connected to them through natural, community, and formal support relationships. The CFT develops and implements the family's plan, addresses unmet needs, works toward the child, youth or family's vision and team mission, and monitors progress regularly to revise and refine the plan of care.

"CHILD IN NEED OF SERVICES (CHINS)" means a juvenile who:

1. Is beyond the control of his or her parent such that the child's behavior endangers the health, safety, or welfare of the child or other person.
2. Has been reported to law enforcement as absent without consent for at least 24 consecutive hours from the parent's home, a crisis residential center, an out-of-home placement, or a court-ordered placement on two or more separate occasions and has exhibited:
 1. A serious substance abuse problem or
 2. Behaviors that create a serious risk of harm to the health, safety, and welfare of the child or any other person.
3. Is in need of necessary services, including food, shelter, health care, clothing, educational, or services designed to maintain or reunite the family, and
 1. Who lacks access, or has declined, to utilize these services.

2. Whose parents have evidenced continuing but unsuccessful efforts to maintain the family structure or are unable or unwilling to continue efforts to maintain the family structure

"CHILD IN NEED OF SERVICES (CHINS) PETITION" means a petition filed in juvenile court by a parent, child, or the department seeking adjudication of placement of the child. RCW 13.32A.030

"CHILD PLACING AGENCIES (CPAs)" are agencies which place children or youth for temporary, continued care, or adoption licensed by DCYF [chapter 74.15 RCW](#) and [WAC 110-147](#).

"CHILD PROTECTIVE SERVICES (CPS)" means those services provided by DCYF designed to protect children and youth from child abuse and neglect, as defined in [RCW 26.44.020](#), and safeguard such children and youth from future abuse and neglect, and conduct investigations of child abuse and neglect reports. Investigations may be conducted regardless of the location of the alleged abuse or neglect. Child Protective Services includes referral to services to ameliorate conditions that endanger the welfare of children and youth, the coordination of necessary programs and services relevant to the prevention, intervention, and treatment of child abuse and neglect, and services to children and youth to ensure that each child and youth has a permanent home. In determining whether protective services should be provided, DCYF must not decline to provide such services solely because of the child's or youth's unwillingness or developmental inability to describe the nature and severity of the abuse or neglect.

"CLIENT" means, for the purposes of defining a child client is a child (or youth up to age 21) in the care, custody, and/or supervision of the Children's Administration and/or the Department of Social and Health Services as it relates to services CA provides.

"COMMERCIALY SEXUALLY EXPLOITED CHILD" (see also SEX TRAFFICKING VICTIM) means a child who has not attained 18 years of age who is induced to perform any sex act on account of which anything of value is given to or received by any person.

"COMMUNITY NETWORK" means working relationships between DCFS, cultural consultants, key informants (lay/professional person), natural helpers (extended families, folk healers), and other agencies to develop cultural responsiveness.

"COMPELLING REASON" means, for purposes of the Adoption and Safe Families Act and RCW, a factor in case planning that presents an unusual circumstance that makes necessary a decision which would not normally be made for a child or family. "Compelling Reason" includes, but is not necessary limited to:

1. Circumstances in which a child:
 1. Is over age 14 and is opposed, following a discussion with the caseworker of the alternatives, to adoption as a permanent plan;
 2. Has significant ties to the child's family which are positive and expected to be on-going and would be disrupted by termination of parental rights;

3. Is in placement for reasons other than abuse, neglect, abandonment, or no parent able or willing to care for the child (e, g., children in care due to the risk they pose to others, due to behavioral management issues, etc.);
 4. Does not have a permanent placement resource identified and for whom there is significant risk that an adoptive resource will not be found; or
 5. Has other unique situations described in the court report by the caseworker that constitute compelling reasons not to file a petition to terminate parental rights.
2. The supervising agency is required to recruit, identify, and process a permanency placement resource for a child when a permanent plan other than reunification is identified for the child. In unusual circumstances, it may be appropriate to leave a child in a temporary placement setting until the court decision-making process is completed or in order to meet the treatment needs of the child.
 3. The court or DCYF has determined that:
 1. A birth parent is considering relinquishment within a reasonable time to free the child for adoption.
 2. A non-offending parent is pursuing an alternate permanent plan.
 3. A professional assessment of the child has determined the child is unable to remain within a family setting.
 4. The parent is incarcerated and:
 1. The incarceration is the only reason for filing the TPR; and
 2. The court has determined the parent maintains a meaningful role in the child's life.
 5. The child's Tribe is opposed to adoption and has identified another acceptable permanency plan for the child per RCW 13.38.150.

"COMPLIANCE AGREEMENT" means a written plan approved by DSHS which identifies deficiencies in Contractor's performance, describes the steps a contractor must take to correct the deficiencies, and sets forth timeframes the contractor must meet in order to return to compliance within the terms of the contract.

"CONFIDENTIAL INFORMATION" is information that is protected by state or federal laws, including information about DCYF clients, employees, volunteers, interns, work study students, vendors, or contractors that is not available to the public without legal authority. This includes client records. Information is categorized into the following four areas:

- Category 1: Is public information that can be released to the public. It does not need protection from unauthorized disclosure, but does need protection from unauthorized changes that may mislead the public.

- Category 2: Is sensitive information that is not specifically protected by law, but is limited to official use only, and protected against unauthorized access. This data is available through public disclosure requests.
- Category 3: Is confidential information that is specifically protected by law and not available through public disclosure requests. It includes:
 - Personal information about clients, regardless of how the information is obtained. [RCW 42.56.590](#) and [RCW 19.255.010](#).
 - Information concerning employee payroll and personnel records per [RCW 42.56.250](#).
 - Lists of individuals for commercial purposes as defined in [RCW 42.56.070\(8\)](#).
 - Sensitive personal information of family child care providers per [RCW 43.17.410](#), [RCW 42.56.640](#), and [RCW 43.216.089](#).
 - Information about the infrastructure and security of computer and telecommunication networks as defined in [RCW 42.56.420](#).
- Category 4: Is confidential information that requires special handling, including, but not limited to:
 - Protected Health Information (PHI), per DCYF Administrative 13.04 Protecting Privacy and Confidential Information policy.
 - Information that identifies a person as being or ever having been a client of an alcohol or substance abuse treatment, or mental health program.
 - Federal wage data.
 - Location of an abused spouse.
 - Data that would compromise the agency's constituents.

"CONTINUOUS IMPROVEMENT" is the complete process of identifying, describing and analyzing strengths and problems and then testing, implementing, learning from and revising solutions; the ongoing process by which the agency makes decisions and evaluates its progress.

"CONTINUUM OF CARE" means provision of care from in-home services to highly structured residential care and the ability to provide appropriate services to the child/family.

"CONTRACTS" are legally binding written agreements between DCYF and other entities, public or private, for the provision of goods or services or for purposes of data sharing. Terms such as Memorandums of Understanding (MOUs) or Service Level Agreements (SLAs) may also be used to refer to contracts.

"CONTRACT FORMAT" means an electronic or hard copy contract template developed or approved by Central Contracts Legal Service. A contract format includes but is not limited to: data elements,

general terms and conditions, and special terms and conditions. All approved contract formats are available in the Agency Contract Database for use by authorized staff.

"CONTRACT RESOURCES" means the Regional and Statewide Contract Directories on the Intranet/Internet, as well as the Regional Contract/Program Managers.

"CONTRACTED AND/OR LICENSED PROVIDER":The individuals or entity performing services pursuant to contracting with Children's Administration.

"CRITICAL INCIDENT" is an event that requires an immediate and thorough response, notification, information gathering and communication. All critical incidents are reported through the Administrative Incident Reporting System (AIRS) and in some high profile situations may require an initial phone call alert to headquarters staff. Critical incidents include:

- Fatality or near fatality of a child with an open case.
- Fatality or near fatality of a child which services were provided to the family within 12 months preceding the child's death or near fatality, including information only referrals.
- High profile event receiving media coverage and involves an individual or family for whom we have provided services.

"CULTURAL COMPETENCE" means a set of behaviors and attitudes that enables individuals working with a child or family to learn about or recognize the cultural context of a situation and to integrate that knowledge into an action.

"CULTURAL CONSULTANTS" means culturally competent individuals recognized by the department and/or client as a resource to help assess and/or resolve problems relating to cultural issues.

"CULTURAL DIVERSITY" means the distinguishable differences in life styles, values, traditions, religions, etc.

"CULTURALLY RESPONSIVE" means being proactively engaged with individuals in ways that are appropriate within their cultural values, behaviors, and norms. This can include shared knowledge, beliefs, laws, arts, customs, habits, priorities, expectations, and many other shared practices.

"CULTURE" means the integrated pattern of human behavior including thought, communication, actions, customs, beliefs, values, institutions, of a racial, ethnic, religious or social group.

"CUMULATIVE CALCULATION" method means the number of months a child or youth spent in foster care over the last 22 months, added up across all entries or re-entries to foster care for any placement episode(s) that started within the last 22-months.

"CUSTODIAN" means the person or entity who has the legal right to the custody of the child. RCW 13.32A.030

"DEPENDENT CHILD" means any child or youth who:

- Has been abandoned;

- Is abused or neglected as defined in [RCW 26.44.020](#) by an individual legally responsible for the care of the child or youth;
- Has no parent, guardian or custodian capable of adequately caring for the child or youth, such that the child or youth is in circumstances which constitute a substantial danger to the child's or youth's psychological or physical development.

"DESK REVIEW" means a monitoring activity comprised of reviewing information including but not limited to the contractor's payment and billing system, and reports to verify contract compliance.

"DEVELOPMENTAL DISABILITY" means a disability attributable to intellectual disability, cerebral palsy, epilepsy, autism, or another neurological or other condition of an individual found by the secretary to be closely related to an intellectual disability or to require treatment similar to that required for individuals with intellectual disabilities, which disability originates before the individual attains age 18, which has continued or can be expected to continue indefinitely, and which constitutes a substantial limitation to the individual. By January 1, 1989, the department shall promulgate rules which define neurological or other conditions in a way that is not limited to intelligence quotient scores as the sole determinant of these conditions, and notify the legislature of this action, per [RCW 71A.10.020](#).

"DEVELOPMENTAL STAGES" means:

1. Adolescent - a child age 12 but less than 18 years.
2. Child - a born person less than 18 years.
3. Fetus - the unborn child.
4. Infant - a child from birth until one year of age.
5. Toddler - a child age one but less than six years.

"DLR COMPREHENSIVE REVIEW": The Comprehensive Review is a thorough review of the BRS contractor or other contracted and/or licensed provider's ability to meet licensing, contracts, and programming requirements. It includes an onsite review, completion of approved forms and tools, and a final report.

"DOCUMENTED MEDICAL CONDITION" is any physical or mental health condition documented by a licensed health care provider that may be temporary or permanent, including but not limited to, a physical injury or a physical or behavioral health condition.

A "documented medical condition" may include physiological, mental, or psychological conditions or disorders, including but not limited to, orthopedic, visual, speech, and hearing impairments.

"DUAL LANGUAGE (DL) EMPLOYEES" are assigned to DCYF approved DL positions and have provided verification of passing the required DCYF DL employee examination from a DCYF-recognized professional examination, including, but not limited to the:

- Language Testing International (LTI)

- Department of Social and Health Services (DSHS) Language Testing and Certification program (LTC)
- American Translators Association
- DSHS Office of the Deaf and Hard of Hearing
- State of Washington Administrator for the Courts
- Federal Court
- American Council on the Teaching of Foreign Languages (ACTFL)

"EMERGENT OR EMERGENCY PLACEMENT" means limited instances when DCYF is placing children or youth in the home of private individuals, including neighbors, friends, or relatives, as a result of a sudden unavailability of the child's or youth's primary caretaker, per [RCW 26.44.240](#).

"ETHNIC" means a group designated by customs, characteristics, language, common history and/or racial affiliation.

"ETHNOGRAPHIC INTERVIEWING" means communication with a member of another culture to identify the:

1. Key cultural differences.
2. Meaning of those cultural practices and norms.

"EXTENDED FAMILY MEMBER" means an adult who is a grandparent, brother, sister, stepbrother, stepsister, uncle, aunt, or first cousin with whom the child has a relationship and is comfortable and who is willing and available to care for the child. RCW 13.32A.030

"EXTENUATING CIRCUMSTANCES" (in relation to adoption support) means a finding by an administrative law judge or a review judge that one or more certain qualifying conditions or events prevented an otherwise eligible child from being placed on the adoption support program prior to adoption.

"FAMILY PRESERVATION SERVICES" means in-home or community-based services drawing on the strengths of the family and its individual members while addressing family needs to strengthen and keep the family together where possible and may include:

1. Respite care of children to provide temporary relief for parents and other care givers.
2. Services designed to improve parenting skills with respect to such matters as child development, family budgeting, coping with stress, health, safety, and nutrition.
3. Services designed to promote the well-being of children and families, increase the strength and stability of families, increase parents' confidence and competence in their parenting abilities, promote a safe, stable, and supportive family environment for children, and otherwise enhance children's development.

"FEDERAL BUREAU OF INVESTIGATION (FBI) BACKGROUND CHECK" means a fingerprint-based background check, that includes a review of the following:

- Founded findings of abuse or neglect made by DCYF or the Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), Department of Corrections (DOC), FBI, and the Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, Department of Health (DOH), and DSHS.
- Sex offender registry.
- Out-of-state founded findings of CAN, when applicable.
- Western Identification Network (WIN) conviction information, if available.

"FOSTER CARE" means the placement of children or youth by DCYF or licensed child placing agencies in homes or facilities licensed pursuant to [chapter 74.15 RCW](#) or in homes or facilities that are not required to be licensed pursuant to [chapter 74.15 RCW](#).

"FOSTER HOMES OR FAMILY FOSTER HOMES" means an individual licensed to regularly provide 24-hour care in their home to children or youth.

"FOSTER PARENT LIABILITY PLAN" means reimbursement for foster parents or respite provider's personal property damages, losses, or injuries that were allegedly due to the actions of foster or respite children or youth per [WAC 110-50-1000](#) to [WAC 110-50-1090](#).

"GROUP CARE" means the provision of a safe, healthful environment for youth in a 24-hour licensed facility for more than six children, which provides the basic needs of food, shelter, and the provision of therapeutic services required for the successful reunification of youth with their family resource.

"GUARDIAN" means that person or agency that (a) has been appointed as the guardian of a child in a legal proceeding other than a proceeding under chapter 13.34 RCW, and (b) has the right to legal custody of the child pursuant to such appointment. The term "guardian" does not include a "dependency guardian" appointed pursuant to a proceeding under Chapter 13.34 RCW. RCW 13.32A.030; 13.34.030

"HEALTH CARE PROVIDERS" are medical doctors (MD), doctors of osteopathy (DO), doctors of naturopathy (ND), physician assistants (PA), or advanced registered nurse practitioner (ARNP).

"HEALTH & EDUCATION RECORD" means the entire array of data entry screens in the electronic data system, including the provider, education, behavior, counseling, and daily routine information entered by CA staff.

"HEARINGS ON THE MERITS OF THE PETITION" are court hearings that take place after a threshold hearing, and the petitioning youth must show clear and convincing evidence that they

have not achieved a sustained permanent plan, and is not likely to achieve such a plan, and that reinstatement is in their best interest.

“HUMAN IMMUNODEFICIENCY VIRUS (HIV)” means the virus that causes AIDS, which is the most advanced stage of HIV infection. HIV is a retrovirus that occurs as two types: HIV-1 and HIV-2. Both types are transmitted through direct contact with HIV-infected body fluids, such as blood, semen, and vaginal fluids, or from a mother who has HIV to her child during pregnancy, labor and delivery, or breastfeeding through breast milk.

"IMMINENT RISK" means, for Intensive Family Preservation Services, when a decision has been made by the department that without intensive family preservation services, a petition requesting the removal of a child from the family home will be immediately filed under chapters 13.13A or 13.34 RCW, or that a voluntary placement agreement will be immediately initiated. 74.14C.010 RCW

"IMMINENT RISK OF SERIOUS HARM" (Used in Risk Only Intakes and coordination with law enforcement)

Imminent - Having the potential to occur at any moment, or there is substantial likelihood that harm will be experienced.

Risk of Serious Harm - A high likelihood of a child being abused or experiencing negligent treatment or maltreatment that could result in one or more of the following outcomes:

- Death
- Life endangering illness
- Injury requiring medical attention
- Substantial risk of injury to the physical, emotional, or cognitive development

"IMPENDING DANGER" means parenting behavior that is harmful and destructive to a child's cognitive, social, emotional or physical development that is likely to occur in the immediate or near future that could result in one of more of the following outcomes:

- Death
- Life endangering illness
- Injury requiring medical attention
- Serious or severe harm

“INDIAN CHILD” means any unmarried and unemancipated person who is under age eighteen and is either (a) a member or citizen of an Indian tribe or (b) is eligible for membership or citizenship in an Indian tribe and is the biological child of a member/citizen of an Indian tribe. 25 U.S.C. § 1903 (4); 25 C.F.R. § 23.2. A child who meets this definition is subject to the Indian Child Welfare Act.

“INFORMED CONSENT” means the process by which the treating health care provider discloses appropriate information to a competent patient or their caregiver so that a decision can be made to

accept or refuse treatment; including medications. It originates from the legal and ethical right the patient has to direct what happens to their body and from the ethical duty of the physician to involve the patient in their health care.

“IN-HOME SERVICES” means services provided in the child’s home in lieu of out-of-home placement equivalent to the level of service intensity required to maintain the child in residential care.

“IN-HOME PRE-FACT FINDING” means when DCYF files a dependency petition and children or youth either:

- Remain in the home.
- Are returned to the home prior to a dependency being established and DCYF does not retain PCA (Placement and Care Authority) per the court order.

“IN LOCO PARENTIS” A person who acts in the position of a parent of a child and who has assumed on an on-going basis a parent’s rights, duties and responsibilities towards the child. A person living in the home and participating in the day-to-day parenting decisions in one or more of the following:

- Financial
- Supervision
- Decisions on where the child sleeps within the home
- Discipline
- Attending medical appointments
- Attending school conferences

“INQUIRY ONLY CALLS” occur when someone contacts Children's Administration for the sole purpose of obtaining information and not for purposes of alleging CA/N or requesting services specific to CA.

“INTENSIVE FAMILY PRESERVATION SERVICES” means community-based services that are delivered primarily in the home, that follow intensive service models with demonstrated effectiveness in reducing or avoiding the need for unnecessary imminent out-of-home placement. RCW 74.14C.010

LEGALLY FREE -A child is legally free for adoption if the child has no legal parent, either because the parent has died or because parental rights have been terminated (through relinquishment or involuntary termination) by a court order.

“LIMITED ENGLISH PROFICIENCY” means individuals that are limited in their ability to read, write, or speak English or have a limited ability to speak or read English well enough to understand and communicate effectively.

LITIGATION is a civil claim or lawsuit alleging that certain kinds of harm or damages were caused by the State of Washington, its agencies, or state employees.

LITIGATION HOLD NOTICE is communication that instructs ‘affected individuals’ who are likely to have DCYF records pertaining to a legal issue to take immediate action to identify and preserve the records for future retrieval.

“**MEDICAL HISTORY**” means health information on the child contained in the child’s case record, as required by the *CA Practices and Procedures Guide*, chapter 4000, section 43092, Health and Education Record.

“**MEDICAL NECESSITY FOR INPATIENT MENTAL HEALTH CARE**” means a requested service which is reasonably calculated to: (a) diagnose, correct, cure, or alleviate a mental disorder; or (b) prevent the worsening of mental conditions that endanger life or cause suffering and pain, or result in illness or infirmity or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no adequate less restrictive alternative available. RCW 71.34.020

"MISSING CHILD" means any child under the care and authority of CA and the child's whereabouts are unknown and/or the child has left care without the permission of the child's caregiver or CA. This does not include children in dependency guardianship

"MONITORING" includes any activity that reviews and evaluates contractor performance and compliance with the terms, conditions, and requirements of a contract.

"MONITORING PLAN" means a written proposal for monitoring contractor(s) compliance with the contract requirements and obligations. The plan is based on the assessment of risk to the department and its clients as well as the performance of services by the contractor.

"NATIONAL CRIME INFORMATION CENTER (NCIC) BACKGROUND CHECK" means a federal name-based background check and includes a Federal Bureau of Investigation (FBI) background check if the NCIC is for an emergent placement when the individual completes fingerprints that includes a review of the following:

- Founded findings of abuse or neglect made by DCYF or Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), Department of Corrections (DOC) or the Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, Department of Health (DOH), and DSHS.
- Sex offender registry.
- Out-of-state founded findings of CAN, when applicable.
- Western Identification Network (WIN) conviction information.

"NEAR FATALITY" means an act that, as certified by a physician, places the child in serious or critical condition. RCW 74.13.500

"NEAR VERBATIM" means in exactly the same words as were used originally.

"NEWBORN" or **"NEONATE"** means a child up to age 1 month (4 weeks old).

"ON-SITE REVIEW" is a contract monitoring activity that reviews and evaluates contractor performance and compliance with the terms, conditions, and requirements of a contract at the contractor's place of business.

"ORIGINAL PLACEMENT DATE" or **"ORIGINAL FOSTER CARE PLACEMENT"**, for the purposes of the Social Security Act and federal regulations, means the date of the child's most recent removal from the child's home and placement into foster care under the care and responsibility of the state agency. 45 CFR 1356.21(k)

This definition applies both to children placed in foster care under a voluntary agreement and to those children under the state's responsibility through court order. Therefore, the original date of placement, for purposes of Title IV-E and section 422 of Title IV-B, would be when the child is in foster care and the state has been given responsibility for care either through a voluntary placement agreement or a court adjudication. PIQ 83-06

"OUT-OF-HOME PLACEMENT or CARE" means a placement in a foster family home or group care facility or placement in a home, other than that of the child's parent, guardian, or legal custodian, not required to be licensed under 74.15 RCW. RCW 74.14C.010

"PARENT" means a biological parent or adoptive parent of a child or an individual who have an established parent-child relationship under RCW 26.26.101, unless the legal rights of that person have been terminated or paternity has been disestablished.

"PARENTING STATUS" means:

1. **Custodian** - a person appointed by the parent, guardian, or court to provide care for a child.
2. **Guardian** - a person appointed by the court to provide care or to supervise a child.
3. **Parent** - is the prime person responsible for the care of a child and may include:
 1. **Adoptive parent** - a person the courts grant parental status, rights, and privileges for a child.
 2. **Birth or natural parents** - the persons, male and female, who conceived and gave birth to the child.
 3. **Custodial parent** - the parent with whom the child resides:
 4. **Legal** - a current court order designating a parent's right to the child's custody that may include:
 1. Joint custody.
 2. Parenting plans.
 3. Shared custody.
 4. Sole custody to one parent.

5. **Physical** - the parent(s) with whom the child resides or is found.
4. **Stepparent** - a person, not the child's parent, who is currently married to the child's parent.
5. **Caretaker** - a person who has actual physical supervision responsibility for a child and may include any of the above parenting statuses or a person appointed to provide physical custody.

"PERIOD OF PURPLE CRYING" is a phrase used to describe the time in a baby's life when they cry more than any other time:

1. The word "PURPLE" is an acronym that describes the characteristics of infant crying:
 1. Peak of Crying - Crying peaks during the second month, decreasing after that
 2. Unexpected - Crying comes and goes unexpectedly, for no apparent reason
 3. Resists Soothing - Crying may continue despite all soothing efforts by caregivers
 1. Encouragement of soothing has been shown to help in up to 50% of cases
 4. Pain-like Face - Infants look like they are in pain, even when they are not
 5. Long Lasting - Crying can go on for 30-40 minutes at a time, and often for much longer up to 5 hours in some cases
 6. Evening Crying - Crying occurs more in the late afternoon and evening
2. The word "Period" informs caregivers that the crying is a temporary event.

"PLACEMENT DECISION" means the decision to place, or to delay or deny the placement of, a child in a foster care or an adoptive home, and includes the decision of the agency or entity involved to seek the termination of birth parent rights or otherwise make a child legally available for adoptive placement. 42 USC 5115a

"PLACEMENT EPISODE" means the period of time that begins with the most recent date that the child or youth was removed from the home of the parent, guardian, or legal custodian for purposes of placement in out-of-home care and continues until one of the following occur, per [RCW 13.34.030](#):

- The child or youth returns home.
- An adoption decree, a permanent custody order, or guardianship order is entered.
- The dependency is dismissed.

"PRESENT DANGER" means immediate, significant, and clearly observable severe harm or threat of severe harm occurring in the present.

"PRESERVATION SERVICES" means family preservation services and intensive family preservation services that consider the individual family's cultural values and needs. RCW 74.14C.010

“PRESUMED PARENT” means an individual who under [RCW 26.26A.115](#) is presumed to be a parent of a child or youth, unless the presumption is overcome in a judicial proceeding, a valid denial of parentage is made under RCW [26.26A.200](#) through [26.26A.265](#), or a court adjudicates the individual to be a parent.

“PREVENTIVE SERVICES” means preservation services, as defined in 74.14C RCW, and other reasonably available services capable of preventing the need for out-of-home placement while protecting the child. RCW 13.34.030

“PRIMARY OR PREFERRED LANGUAGE” is the language a client or caregiver identifies as the language in which they want to communicate verbally or in writing with DCYF.

“PRN” stands for *pro re nata* and means “As needed.”

“PROBATIONARY LICENSE” means a license issued as a disciplinary measure to an agency that has previously been issued a full license but is out of compliance with licensing standards. RCW 74.15.020

“PROPERTY OR PREMISES” means your buildings and grounds adjacent to your residential property that are owned or managed by you.

“PROTECTIVE ACTION” means an immediate short term response to control present danger observed at first contact with a family. Or at any time present danger is identified to manage the immediate threats to a child.

“PSYCHOTROPIC MEDICATION” means medication, the prescribed intent of which is to affect or alter thought processes, mood, sleep, or behavior, including, but not limited to, anti-psychotic, antidepressant, and anxiolytic medications. The classification of a medication depends on its stated, intended effect when prescribed because it may have many different effects. Examples of some such medications are:

- Amitriptyline/Elavil
- Desipramine/Norpramine
- Amoxapine/Asendin
- Imipramine/Tofranil
- Trimipramine/Surmontil
- Fluoxetine/Prozac
- Sertraline/Zoloft
- Phenelzine/Nardil
- Isocarboxazid/Marplan
- Burpropion/Wellbutrin
- Carbamazepine/Tegretol

- Lithium/Eskalith or Lithobid
- Chlordiazepoxide/Librium
- Diasepam/Valium
- Lorazepam/Ativan
- Propranolol/Inderal
- Chlorpromazine/Thorazine
- Halperiodal/Haldol
- Trifluoperazine/Stelazine
- Thioridazine/Mellaril
- Methylphenidate/Ritalin
- Pemoline/Cylert
- Amphetamine Sulfate/Amphetamine

"QUALITY ASSURANCE" measures compliance against standards and informs continuous quality improvement.

PUBLIC RECORDS are any writings related to the performance or conduct of government, that was prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics per [RCW 42.56.010 \(3\)](#).

RECORDS are any documents or recorded information regardless of form or characteristics created, sent, organized, or received by DCYF in the course of public business including paper documents, emails, log books, drawings, graphs, charts, video or audio recordings, photographs, phone records, data compilations, planners, calendars, text messages, draft documents, electronically stored information (ESI), and metadata.

"REASONABLE CAUSE" means an individual witnesses or receives a credible written or oral report alleging abuse or neglect of a child or youth, including sexual contact, per [RCW 26.44.030](#).

REASONABLE AND PRUDENT PARENTING STANDARD means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child, that a caregiver or designated official for a child care institution shall use when determining whether to allow a child in foster care to participate in extracurricular, enrichment, cultural, and social activities. (See [Prudent Parenting Guide DCYF CWP_0078 publication](#)).

The term 'age or developmentally-appropriate' means:

1. Activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally-

appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group; and

2. In the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

"RELATIVES" means the same as defined in RCW [13.36.020\(5\)](#), RCW [74.15.020\(2\)](#), or caregivers of Indian children or youth who are defined by tribal code or custom as relatives or extended family.

"RELINQUISH OR RELINQUISHMENT" means the voluntary surrender of custody of a child or youth to the department, an agency, or prospective adoptive parents, per [RCW 26.33.020](#).

"RESIDENTIAL CARE" is a generic term for group care, residential treatment, and treatment foster care.

"RUNAWAY" is a juvenile who leaves and remains away from home without parental permission. (This definition is taken from "The Runaway and Homeless Youth Act".) **"SAFE"** child means children are considered safe when there is no present danger or impending danger threats or the caregiver's protective capacities control all known safety threats.

"SAFE HAVEN (Safety of Newborn Children Act)" Allows a parent to transfer (abandon) a newborn anonymously and without criminal liability at a hospital emergency room, fire station or federally designated rural health clinic if open and personnel are present to accept the child.

"SAFETY THRESHOLD" means the criteria that must be met in the family's situation to determine that a vulnerable child is unsafe. Criteria include threats to safety that 1) are observable and specific, 2) immediate or near future, 3) out of control, 4) have the potential for severe impacts, there is a vulnerable child 5) there is a vulnerable child.

"SERIOUS INJURY" of a child client is an injury requiring professional and medical treatment (beyond first aid).

"SERVICE AGREEMENT" means a formal written description of services to be provided or performed. Agreements are developed by the social worker with the parent and/or the court and any child over age 13 who is to receive or participate in services.

"SEX TRAFFICKING" means the recruitment, harboring, transportation, provision, or obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act.

"SEX TRAFFICKING VICTIM" (See also Commercially Sexually Exploited Child) means any children or youth that the state or tribal agency has responsibility for placement and care authority and who the agency has reasonable cause to believe is or is at risk of being, a sex trafficking victim, this includes children or youth:

- The agency has an open case for, but they:
 - Have not been removed from their home.
 - Are missing from foster care and have not attained age 18 or such older age as the state has elected under section [Social Security Act §475\(9\)](#) of this the Act.

- Who are not in foster care, but are receiving services under section [Social Security Act §475\(9\)](#).

“**SEXUAL ASSAULT**” means one or more of the following, per [RCW 70.125.030](#):

- Rape or rape of a child
- Assault with intent to commit rape
- Incest or indecent liberties
- Child molestation
- Sexual misconduct with a minor
- Custodial sexual misconduct
- Crimes with a sexual motivation
- Sexual exploitation or commercial sex abuse of a minor
- Promoting prostitution
- An attempt to commit any of the aforementioned offenses

“**SEXUALLY EXPLOITED YOUTH**” means any person under the age of eighteen who is a victim of one of the following crimes:

- Commercial sexual abuse of a minor (RCW 9.68A.100),
- Promoting commercial sexual abuse of a minor (RCW 9.68A.101) or
- Promoting travel for commercial sexual abuse of a minor (RCW 9.68A.102)

“**SPECIAL NEEDS**” means the specific factors or conditions that apply to the child and that may prevent the child from being adopted unless the department provides adoption support services.

“**SUBSTANCE-AFFECTED NEWBORN**” means a newborn child who has withdrawal symptoms resulting from prenatal substance exposure and/or demonstrates physical or behavioral signs that can be attributed to prenatal exposure to substances.

“**SUBSTANCE-EXPOSED NEWBORN**” means a newborn child who tests positive for substance(s) at birth, or the mother tests positive for substance(s) at the time of delivery or the newborn is identified by a medical practitioner as having been prenatally exposed to substance(s).

“**SUBSTITUTE CARE**” means an out-of-home placement of a child or youth for purposes related to the provision of child welfare services in accordance with [chapter 74.13 RCW](#) where the child or youth is in the care, custody, and control of the department pursuant to a proceeding under [chapter 13.34 RCW](#) or pursuant to the written consent of the child's or youth's parent, parents, or custodian.

“**SUITABLE PERSONS**” means nonrelatives with whom the child or youth, or the child's or youth's family, has a preexisting relationship; who has completed all required criminal history background

checks and otherwise appears to be suitable and competent to provide care for the child or youth, and with whom they have been placed pursuant to [RCW 13.34.130](#).

"TEMPORARY OUT-OF-HOME PLACEMENT" means an out-of-home placement of not more than 14 days ordered by a court at a fact-finding hearing on a child in need of services (CHINS) petition. RCW 13.32A.030

"THRESHOLD HEARINGS" are court hearings that take place following youth filing a petition to reinstate their parent's parental rights. These hearings consider the parent's ability and interest in caring for the youth that filed the petition to reinstate parental rights.

"TRANSLATORS" means individuals who are working for contracted translation businesses or have passed one of the following, the:

1. Written translation examination offered by Department of Social and Health Services (DSHS) [Language Testing and Certification Program \(LTC\)](#).
2. DCYF or DSHS LTC recognized written translation examination offered by another organization.

"TREATMENT FOSTER CARE" means a program designed for children, youth, and their families whose special needs are provided through services delivered primarily by treatment foster parents trained, supervised, and supported by agency staff. In addition to the provision of a safe, healthful environment, foster parents are expected to be members of the treatment team and to perform tasks which are central to the treatment process in a manner consistent with the child's treatment plan.

"UNEXPECTED DEATH OF A MINOR" means a death not resulting from a diagnosed terminal illness or other debilitating or deteriorating illness or condition where death is anticipated.

"UNFOUNDED" means available information indicates that, more likely than not, child abuse or neglect did not occur. Chapter 26.44.020

"UNSAFE" child means children are considered unsafe when they are vulnerable to present or impending danger and caregiver(s) is unable or unwilling to provide protection.

"WASHINGTON STATE BACKGROUND CHECK" means an in-state name-based background check that includes a review of the following:

- Founded findings of child abuse and neglect (CAN) made by DCYF or the Department of Social and Health Services (DSHS).
- Current and previous applicant self-disclosures.
- Conviction information from the Administrative Office of the Courts (AOC), the Department of Corrections (DOC), or Washington State Patrol (WSP) received by DCYF.
- Negative actions issued by DCYF, the Department of Health (DOH), and DSHS.
- Sex offender registry.

- Out-of-state founded findings of CAN, when applicable.

“WRAPAROUND WITH INTENSIVE SERVICES (WISe)” means intensive mental health services and supports, provided in home and community settings, for Medicaid eligible individuals, up to 21 years of age, with complex behavioral health needs and their families. These services are provided by community mental health agencies.

WRITING is handwritten, typed, printed, photographed, and every other means of recording any form of communication. This includes papers, video or audio recordings, and any other documents that information may be obtained or translated per [RCW 42.56.010\(4\)](#).