

Region 1 Panhandle Community-Based Care Stage II Operations Manual

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TEXAS
Department of Family
and Protective Services



Saint Francis
Texas

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The CPS Mission

We partner with families and communities to address child abuse and neglect by practicing in a way that ensures safety, permanency, and wellbeing for the children and youth we serve.

The CPS Vision

Children First: Protected and Connected

CPS Values

Respect for Culture

Inclusiveness of Families, Youth and Community

Integrity in Decision Making

Compassion for All

Commitment to Reducing Disproportionality

Single Source Continuum Contractor: Saint Francis Community Services in Texas, Inc.

On June 1, 2019, DFPS awarded a Community-Based Care contract to Saint Francis Community Services in Texas, Inc. (SFCS). SFCS with a home base in Kansas, serves children and families in Kansas, Oklahoma, Nebraska and Texas. After six months of readiness activities, SFCS began serving children and youth as the Single Source Continuum Contractor (SSCC) for the Region 1 on January 6, 2020. SFCS serves Region 1 counties: Dallam, Sherman, Hansford, Ochiltree, Lipscomb, Hartley, Moore, Hutchinson, Robert, Hemphill, Oldham, Potter, Carson, Gray, Wheeler, Deaf Smith, Randall, Armstrong, Donley, Collingsworth, Parmer, Castro, Swisher, Briscoe, Hall, Childress, Bailey, Lamb, Hale, Floyd, Motley, Cochran, Hockley, Lubbock, Crosby, Dickens, King Yoakum, Terry, Lynn and Garza.

Note: Some links in this document will only work for DFPS and SFCS staff with access to the DFPS Intranet.

Mission Statement:

Saint Francis, providing healing and hope to children and families.

Vision Statement:

To transform lives and systems.

SFCS will operate a model through the SSCC contract that includes:

- Work to increase the capacity of existing providers and identify more community-based supports and services.
- Conduct a comprehensive assessment of community needs and an analysis to find gaps between the need for services and their availability.
- Do comprehensive safety and risk assessments to evaluate family strengths and needs.
- Provide service coordination based on the ten principles of Wraparound. For children and youth with complex behavioral health needs, SFCS will use what is known as evidence-informed models.
- Use a trauma-informed and trauma-based care service approach.

- Use a comprehensive continuous quality improvement (CQI) process to assess, inform, and guide how services are provided, and the system improved.
- Have a centralized training department that provides evidence-based training to all providers and stakeholders in SFCS System of Care, based on CQI data and stakeholder feedback.

Community-Based Care

This operations manual gives CPI, CPS and SFCS staff a more in-depth look at the protocols for case actions in conservatorship cases that include placement and case management services provided through Community- Based Care in Region 1.

Background

Community-Based Care is a new way of providing foster care and case management services. It's a community-based approach to meeting the individual and unique needs of children, youth, and families. Within a geographic catchment area, a single contractor (officially a Single Source

Continuum Contractor or SSCC) is responsible for finding foster homes or other living arrangements for children in state care and providing them a full continuum of services.

DFPS began expanding the community's role to meet the challenges of serving children in foster care under Foster Care Redesign. Under Foster Care Redesign, a SSCC was responsible for:

- Developing foster care capacity.
- Building a network of providers.
- Engaging the community to help.
- Foster care placement services.
- Coordinating and delivering services to children in foster care and their families.

In 2017, the Texas Legislature directed DFPS to expand this model to include both foster care and relative or "kinship" placements and give the SSCC sole responsibility for case management - rather than sharing that responsibility with DFPS.

As Community-Based Care takes shape statewide, CPS' focus will shift to ensuring quality oversight of foster care and services for children and families. The SSCC will be responsible for case management and services that move children from foster care or kinship care into a permanent home.

Community-Based Care Quality Indicators

1. Children and youth are safe from abuse and neglect.
2. Children and youth are placed in their home communities.
3. Children and youth are appropriately served in the least restrictive environment.
4. Children and youth have stability in their placements.
5. Connections to family and others important to the child are maintained.
6. Children and youth are placed with their siblings.
7. Services respect the child's culture.
8. Children and youth are provided opportunities, experiences, and activities similar to those available to their peers who are not in foster care.
9. Youth are fully prepared for successful adulthood.
10. Youth have opportunities to participate in decisions that affect their lives.
11. Children and youth are reunified with their biological parents when possible.

12. Children and youth are placed with relative or kinship caregivers if reunification is not possible.

Community-Based Care is intended to allow a SSCC and the community more flexibility to innovate to meet the unique needs of the children, youth, and families in each designated service area. This increased flexibility comes with greater responsibility and accountability for overall safety, permanency, and well-being outcomes.

Operating Policies and Rules

The protocols detailed in this operations manual are for children from Region 1 (legal county is within Region 1) placed with and/or receiving services through SFCS as the Single Source Continuum Contractor.

DFPS Policy, Resource Guides and other supportive material linked in this operating manual may reference DFPS staff specifically. Texas statute provides authority for the Single Source Continuum Contractors (SSCC) in the State of Texas, either directly or through subcontractors, to assume the statutory duties of DFPS staff. See [Legal Basis for DFPS and Single Source Continuum Contractor Relationship](#).

CPS Handbook policies and DFPS and HHSC Texas Administrative Code rules, including HHSC

Child Care Licensing Minimum Standards apply to an SSCC unless specifically waived, by DFPS. However, this manual may identify that the actions that were previously completed by DFPS are now completed by SFCS. For example, suppose differences or conflicts in the CPS Handbook policy are present that affect a child's best interest. In that case, the two parties will reference the Solution-Based Communication (Dispute Resolution) process and determine if SFCS needs to submit a policy waiver request. See [TAC §700.108](#).

If you have any questions about any information in this manual, please contact your supervisor or Jennifer Avila Region 1 Community-Based Care Administrator at 806-570-5971, or Jennifer.Avila5@dfps.texas.gov

For more information about Community-Based Care, visit the [DFPS Community-Based Care website](#).

Legal Basis for CPS and Single Source Continuum Contractor Relationship

For information regarding the legal basis for Child Protective Services including the governing State and Federal Laws see [CPS Policy 1200 Legal Bases for Child Protective Services](#).

Legal Basis for Single Source Continuum Contractor to Act on Behalf Of CPS

Texas statute provides authority for the Single Source Continuum Contractors (SSCC) in the State of Texas either directly or through subcontractors, to assume the statutory duties of the Texas Department of Family and Protective Services (DFPS) in connection with the delivery of foster care services, relative and kinship caregiver services, and case management services in the SSCC's defined catchment area.

In accordance with Texas Family Code §264.151, the provision of case management services to a child for whom the department has been appointed Temporary Managing Conservator or Permanent Managing Conservator or to the child's family, a young adult in extended foster care, a relative or kinship caregiver, or a child who has been placed in the catchment area through Interstate Compact on the Placement of Children, and includes, but is not limited to:

- Caseworker visits with the child, family, and caregivers.
- Convening and conducting permanency planning meetings.
- Development and revision of child and family plans of service, including a permanency plan and goals for a child or young adult in care.
- Coordination and monitoring of services required by the child & the child's family.
- Assumption of court-related duties regarding the child; and
- Any other function or service that the department determines necessary to allow a Single Source Continuum Contractor to assume responsibility for case management.

History

In 2017, the 85th Texas Legislature through Senate Bill 11 established the Community-Based Care (CBC) Model for delivery of the state's child welfare services. Under the CBC Model, DFPS is required to purchase case management and substitute care services from the SSCC for children, youth and young adults who are in the department's conservatorship or who are receiving services through the extended foster care program.

Implementation of the CBC model transitions the Texas child welfare system from a statewide, "one size fits all" approach, to a community-based model designed to meet the individual and unique needs of children, youth and families in Texas at the local level.

As of December 2019, DFPS implemented CBC in 4 catchment areas of the state: catchment areas 1 (Lubbock/Amarillo), 2 (Abilene/Wichita Falls), 3b (Fort Worth Area), and 8b (Region 8 counties surrounding Bexar county). The latest version of the statewide Implementation Update can be found on the [Community-Based Care public site](#) under [Implementation Plan](#).

Authority

Under Texas statute, the Legislature required DFPS to contract with community-based nonprofit and local governmental entities to provide child welfare services. These statutes provide authority for the community-based entities, known as the SSCC, to either directly or through subcontractors, assume the statutory duties of the department in connection with the delivery of foster care services and services for relative and kinship caregivers in the SSCCs defined catchment area. Delivery of foster care services and services to relative and kinship caregivers can include but is not limited to:

- A SSCC staff member's direct contact with a child or youth in DFPS Conservatorship who they are serving under the SSCC continuum of care.
- A SSCC staff member's ability to visit privately with a child or youth in DFPS Conservatorship at schools, foster or kinship homes or any other meeting site.
- Entities providing confidential information to a SSCC staff member upon request about a child or youth in DFPS Conservatorship who is served under the SSCC continuum of care.

Under Texas statute, an SSCC in a contract with DFPS will, at a minimum:

- Assume the statutory duties of DFPS in connection with the delivery of foster care services and services for relative and kinship caregivers in a defined catchment area.
- Provide or protect records as outlined in the Open Records Act found in Texas Government Code Chapter 552.

When acting as a representative of DFPS, be afforded protection of attorney-client privilege in communications between the SSCC's employee, agent or representative and a prosecuting attorney or other attorney representing DFPS.

Under Texas statute, DFPS will, at a minimum:

- Contract with community-based nonprofit and local governmental entities that have the ability to provide child welfare services.
- Develop and maintain a plan for implementing Community-Based Care.
- Develop a formal review process to assess the ability of a single source continuum contractor to satisfy the responsibilities and administrative requirements of delivering foster care services and services for relative and kinship caregivers.
- Expand community-based care.
- Review contractor's performance.
- Provide legal representation in an action under the Texas Family Code.

Texas statute found in the Texas Family Code provides additional details regarding the requirements of the SSCC and DFPS.

In summary, the SSCCs, under contract with DFPS, assume the statutory duties of DFPS in connection with the delivery of child welfare services in a defined catchment area. Vendors and other organizations should treat the SSCCs as an agent of DFPS as it relates to the child welfare services being delivered by the SSCCs.

Placement and Family Service Referrals

Region 1 INV/FBSS staff will work directly with SFCS upon determining that a child is entering DFPS conservatorship. This section outlines protocols for referrals for new paid placements, kinship placements and other non-paid placement settings.

INV/FBSS staff must follow CPS Handbook policy related to the assessment, consideration, and selection of the least restrictive placement for every child's initial placement in substitute care.

For more information, see CPS Handbook policies:

- [4114 Required Factors to Consider When Evaluating a Child's Possible Placement](#)
- [4114.4 Preference for the Least Restrictive Setting](#)

SFCS is responsible for assessing the service level needs of children (policy 4410 Service Level

Determinations and Reauthorizations) in conservatorship and providing a continuum of care and services to each child. CPS Handbook policies and other items related to requesting a service level for a child are, therefore, waived. See [TAC §700.108](#).

General Requirements for all SSCC Placements

Regardless of the type of placement, INV/FBSS workers must staff the child's case and specific needs with their supervisor and Program Director and obtain approval prior to requesting any type of substitute care placement and case management services from SFCS.

In situations where the removal worker has identified that a child *may* require substitute care placement, the Program Director (PD) may direct the INV/FBSS worker to provide SFCS advance notification of a child's need for possible placement.

- The INV/FBSS worker will notify SFCS by email or phone within 1 hour of the initial referral /call if it is determined that placement is not needed.
- Provide any possible kinship/relative options with 24-48 hours to SFCS.

The CPS Rights of Children and Youth in Foster Care, also known as the Bill of Rights

The CPS Rights of Children and Youth in Foster Care, also known as the Bill of Rights, is an important document that outlines the rights children and youth have when they are placed in foster care. It is required by federal law, Texas law, and policy Rights of Children and Youth in Foster Care CPS Handbook 6420.

Every time it is reviewed with the child or youth, it must be signed by the child or youth, the caseworker, and the caregiver.

The primary caseworker is responsible for reviewing the Bill of Rights with the child or youth:

- Within 72 hours of the child or youth entering foster care (i.e. at initial placement following the child's removal).
- Within 72 hours of the child or youth changing placements into a DFPS FAD foster home.

- Every time the Child's Plan of Service (CPOS) is reviewed, including the first time the CPOS is developed. The Bill of Rights is included with the CPOS when the CPOS is generated from the Forms drop-down in IMPACT 2.0.

Again, at the time of initial placement but no later than 72 hours, children and youth in foster care must be provided with a copy of the CPS Rights of Children and Youth in Foster Care ([Form 2530](#)).

- The primary caseworker must review these Rights with the child or youth.
- Upon completion of the review, the primary caseworker must have the child or youth and caregiver sign on the appropriate signature lines.
- Provide a copy to the child or youth.
- Upload a signed copy into OneCase in IMPACT.
- Place a signed copying in the physical case file.

The primary caseworker must review the Bill of Rights orally and in the child's primary language, if possible. There are no exceptions for age or disability. Caseworkers will need to provide accommodations where needed, such as translators or sign language interpreters.

If a child cannot sign the Bill of Rights (such as infants, for example), this must be noted on the form by the caseworker.

- The review must still occur with the caregiver.
- A signed copy must still be uploaded into OneCase.
- A signed copy must still be included in the physical case file.

The Bill of Rights contains language and words that will not necessarily be understood by all children and youth. Some notable examples from the Bill of Rights are:

13. "Participate in... unsupervised childhood and extracurricular activities."
20. "Healthy foods in healthy portions for my age and activity level."
27. "Be informed of emergency behavioral intervention policies in writing..."
45. "Make calls, reports, or complaints" to
 - The HHSC Ombudsman for Children and Youth currently in Foster Care at 1-844-286-0769
 - The DFPS Office of Consumer Affairs at 1-800-720-7777.

The caseworker should check for understanding and explain anything the child or youth does not understand in a developmentally appropriate way.

The review of the Bill of Rights can be done via virtual meeting, in-person/face-to-face, over the phone, or an app such as FaceTime (available on DFPS-issued iPhones).

For additional information see CPS Handbook Policy

- [6420 Rights of Children and Youth in Foster Care](#)
- [Rights of Children and Youth in Foster Care – Form 2530](#)

Child Sexual Aggression Designation

[Remedial Order 28-CSA](#)

SFCS's Executive Director of Support, Esmeralda Kennedy, is the designated individual responsible for determining if a child or youth's behavior meets the definition of being sexually aggressive and has

specific protocols and definitions that guide in that decision. If a child or youth is determined to have sexually aggressive behavior, SFCS's Executive Director of Support must document the behavior in the child or youth's case record and in the Sexual Aggression tab in IMPACT.

If DFPS staff have a child/youth entering DFPS conservatorship from a Region 1 county who needs to be assessed for sexually aggressive behavior, DFPS must:

- Contact SFCS's Executive Director of Support, Esmeralda Kennedy
- SFCS Executive Director of Support is responsible for the CSA designation in IMPACT for any child or youth legally from Region 1.
 - Rachel Williams-Ehue is to be back-up point of contact.
- As soon as the removal worker is made aware of possible sexual aggression, they will alert their chain of command and the removal Program Director will email SFCS Executive Director of Support to set up a child sexual aggression staffing.
- SFCS Executive Director of Support will schedule the staffing within 48 hours of notification.
 - Participants include:
 - DFPS Removal Worker (required)
 - DFPS Supervisor (required)
 - DFPS Program Director (required)
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor
 - SFCS Director of Permanency
 - SFCS Regional Vice President
 - SFCS Clinical Utilization Staff
- The removal worker will be prepared to share all known information required for the staffing.
- SFCS Executive Director of Support will be responsible for documenting the staffing in IMPACT and, if determined, adding the designation in IMPACT.

For additional information see CPS Handbook Policy

- [6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse](#)
- [Sexual Incident History Resource Guide](#)

If the designation is determined at the time of removal

- And the child or youth **has not** been placed, DFPS worker updates the abbreviated version of the Application for Placement ([form 2087ex](#)) thoroughly before submission to SFCS for placement.
- If the child or youth **has already** been placed, and the placement is not aware of the child or youth's behavior, the SFCS Director of Support **IMMEDIATELY** notifies the SFCS Permanency Worker regarding the designation so they can notify the placement about the child or youth's behavior and documents the notification in IMPACT.

If the designation is determined after the child or youth is in conservatorship

- And the child or youth **is pending** a new placement, SFCS staff launches a new application for placement. The new application for placement will autofill with the information from the sexual aggression page in IMPACT.
- And the child or youth **is currently** in placement, the SFCS Permanency Case Manager updates Child Plan of Service (CPOS) for the child or youth who was determined to have sexually aggressive behaviors and the child or youth who was the victim of child sexual aggression to include services and supports.

Within 24 hours of the child or youth being identified as being sexually aggressive, SFCS's Clinical Utilization Specialist will send an email to the SFCS Permanency Director and Executive Director of Support asking that they confirm that the Permanency Case Manager has updated the application for placement, updated the Child Plan of Service, and notified the placement and Provider Child Case Manager by providing the [Form 2279](#), Attachment A and [Certification of Receipt of Child Sexual Abuse or Sexual Aggression Information Form 2279b](#).

The Permanency Director will have 24 hours to respond to the Clinical Utilization Staff and Executive Director of Support confirming the above activities required of the Permanency Case Manager have been completed.

Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

Initial Placements

- INV/FBSS Worker will complete DFPS Placement Summary [Form 2279](#)
- INV/FBSS Worker will complete the question under the sexual victimization tab in IMPACT and enter any episodes if marked yes.
- If sexual aggressive behavior is identified, DFPS will follow the child sexual aggression designation process above.
- If applicable, DFPS will complete the trafficking information in IMPACT prior to printing the Child Sexual History Attachment A form.
- DFPS will print the Child Sexual History Attachment A form.
- When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form [2279b](#) will be signed.

If INV/FBSS Worker **IS** transporting the child to the initial placement, DFPS will:

- Discuss the information in DFPS Placement Summary [Form 2279](#) and the Child Sexual History Attachment A with the receiving caregiver.
- Obtain signatures from the receiving caregiver
- Provide copy to caregiver
- When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form [2279b](#) will be signed.
- Upload DFPS Placement Summary [Form 2279](#), Child Sexual History Attachment A, and [Certification of Receipt of Child Sexual Abuse or Sexual Aggression Information Form 2279b](#) (when applicable) into OneCase in IMPACT.
- [Form 2279b](#) is used when a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary, or GRO caregiver.

If INV/FBSS Worker **IS NOT** transporting the child to the initial placement,

- INV/FBSS Worker will provide SFCS with a printed copy of the DFPS Placement Summary [Form 2279](#), Child Sexual History Attachment A, and [Certification of Receipt of Child Sexual Abuse or Sexual Aggression Information Form 2279b](#) (when applicable).
- SFCS, or their designee, will be responsible for discussing information in the DFPS Placement Summary [Form 2279](#) and Child Sexual History Attachment A with the caregiver at the time of placement.
- Obtain signatures from the receiving caregiver
- Provide copy to caregiver

- When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form [2279b](#) will be signed.
- SFCS will upload signed DFPS Placement Summary [Form 2279](#) ,Child Sexual History Attachment A, and [Certification of Receipt of Child Sexual Abuse or Sexual Aggression Information Form 2279b](#) into OneCase in IMPACT.

Subsequent Placements

- SFCS will update all information under the person detail page tabs prior to the placement change.
- SFCS (or designee) will be responsible for discussing information in the SFCS Region 1 Placement Change Form and Child Sexual History Attachment A with the caregiver at the time of placement.
- Obtain the signature of the receiving caregiver on the SFCS Region 1 Placement Change Form and the Child Sexual History Attachment A Form.
- When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form [2279b](#) will be signed.
- Upload a signed copy of SFCS Region 1 Placement Change Form with Child Sexual History A into OneCase in IMPACT.

Signature Requirements for Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

DFPS/SFCS is required by federal court order to provide **all caregivers** who care for children in the conservatorship of DFPS with information regarding a child's history of sexual victimization and sexual aggression. At initial and subsequent placements of a child in DFPS conservatorship in any setting, staff must review the information contained in the placement summary form and the Child Sexual History Report Attachment A, obtain signatures, and provide a copy of the documents in accordance with the guidance in this chart.

Type of Setting	Who must review and sign the 2279 and Attachment A	Additional Guidance
Unverified Kinship Home	All adults living in the home who have unsupervised access to the child.	If anyone is not present at the time that the information is presented, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This may be done electronically.
Unauthorized Home	The caseworker makes every effort to have the unauthorized caregiver sign the forms.	If the caregiver refuses to sign the form, the caseworker documents the refusal to sign on the forms.
Foster Home	All foster parents	If all foster parents are not present at placement, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This may be done electronically.

Type of Setting	Who must review and sign the 2279 and Attachment A	Additional Guidance
<p>General Residential Operation (includes Emergency Shelters and any licensed facility that is not a foster family home)</p>	<p>Administrator Intake staff Case Manager</p>	<p>Depending on the size of the operations, some of these roles may be held by the same individual. In those instances, notate that on the form.</p> <p>If anyone who is required to review and sign the documents is not present, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This can be done electronically.</p>
<p>Facilities Regulated by Another State Agency and there is no intent for the child to return to the placement. This includes Juvenile Detention Settings, Psychiatric Hospitals, State Supported Living Center, and Medical Hospitals. If a child is placed in one of these facilities and there is intent for the child to return to the placement, see 4133 Temporary Absence from Placement.</p>	<p>Hospitals- Hospital care coordinator or similar staff.</p> <p>Juvenile Detention Centers or other facility settings: admission staff member or person responsible for oversight of the child.</p>	<p>Caseworkers must review the information with the staff who is admitting the child and make efforts to have them sign the documents. If they refuse to sign, document who the information was provided to, their title, date, and indicate their refusal to sign.</p> <p>If the caregiver admits the child, staff must review the information and obtain signatures upon notification of the admission.</p>

Note: there are limited signature lines on the Attachment A, additional signatures can be captured anywhere on the document along with their printed name, title, and date.

When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form [2279b](#) will be signed.

For additional information see CPS Handbook policy:

- [4121.2 Prepare the Current and New Caregivers for the Move](#)
- [4121.3 Complete the Placement Summary Form](#)
- [4133 Provide and Discuss the Placement Summary \(Form 2279\)](#)
- [4152.2 Meeting the Needs of a Child or Youth without Placement](#)
- [4231.1 Notifying a Facility Regulated by Another State Agency of a Child's Sexual Victimization and Sexual Aggression History](#)
- [6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse](#)

Evaluating a Possible Placement

The safety of the child or youth is the paramount consideration in any placement selection. When evaluating potential placements, the SFCS/Designee must consider substitute caregiver's history of abuse and neglect allegations. For foster homes, this includes history of abuse and neglect allegations while verified with previous child placing agencies, if applicable, and substitute caregiver's licensing variances

For additional information see CPS Handbook policy:

- [4114 Required Factors to Consider When Evaluating a Possible Placement](#)
- [Placement Process Resource Guide](#) for additional guidelines.

IMPACT and CLASS History Checks

The SFCS Placement Coordinator must complete a Residential Child Care Investigations (RCCI) investigation history check of all potential placements using CLASS to consider compliance history. The SFCS/Designee also checks IMPACT for any pertinent abuse or neglect history.

The SFCS Placement Coordinator must review the results of the history checks and confer with the caseworker or supervisor if the history checks return results such as:

- Pending licensing investigations.
- Investigations that were closed as *reason to believe* or *unable to determine*, or any patterns in the investigation history that cause concern.
- History of licensing violations.

If Residential Child Care Licensing placed a general residential operation (GRO) on probation, SFCS must not place a child or youth in that GRO, unless the Associate Commissioner or Deputy Associate Commissioner of CPS or the Deputy Commissioner or Commissioner of DFPS approves the placement or a court orders it.

For additional information see CPS Handbook policy [4151 Court-Ordered Placements in Unapproved Facilities](#).

SFCS may not place a child or youth in a foster home with more than six children unless there is an approved 24-hour awake supervision plan and the director of conservatorship services approves the placement in advance.

SFCS must not place a child or youth in a foster home or foster group home if the child placing agency (CPA) that verifies the home has put its verification on inactive status.

For additional information see [DFPS Rules, 40 T.A.C. §700.1311\(c\)](#)

CLASS Variance Checks

The SFCS Placement Coordinator must review all licensing variances, including variances pertaining to caregiver ratio, supervision, and training, when determining if the placement can meet the child's individual needs. The SFCS Placement Coordinator must review and confer with the Permanency Case Manager or Supervisor if the variance checks return results that may impact the placement's ability to meet the child's individual needs.

Heightened Monitoring

[Remedial Order 20-Heightened Monitoring](#)

SSCC will follow steps outlined in CPS Handbook policy [4211.6 Placements into Operations on Heightened Monitoring](#) (HM) when:

A child is already placed in a child placing agency (CPA), or a general residential operation (GRO), including a residential treatment center (RTC), and the operation is placed on heightened monitoring, **OR**

- For prospective placements, if a GRO, RTC, or CPA is on heightened monitoring at the time of the placement search.
- If the operation is also on probation (in addition to heightened monitoring), the approval of the associate commissioner or deputy associate commissioner of CPS is also required before placement.

This request should be submitted at the same time.

Placements on Probation

If a GRO or CPA is on probation, then the CPS Associate Commissioner must provide advanced approval prior to placement. SFCS Intake Staff must submit the placement request to the Division Administrator for Placement. Once reviewed, it is submitted to the Associate Commissioner for final approval.

Follow the Heightened Monitoring request process stated in the section above.

When An Operation is Issued A Placement Hold

A placement hold on an operation is issued by the CPS Director of Conservatorship Services or CPS Director of Heightened Monitoring. The CPS Director of Conservatorship Services will notify the SSCC within 24 hours when a placement hold is issued. Once the SSCC receives notification, they must notify their placement staff immediately or within 24 hours.

If an operation is issued a placement hold, then no children may be placed into that operation.

[Regional Director Contacts](#)

Exceptional Foster Care

The Exceptional Care Rate is used to secure placement for children and youth in the designated Catchment area with exceptional needs that cannot be met appropriately through use of the blended foster care rate. The SSCC cannot charge DFPS for both the blended rate and the exceptional care rate for the same child on the same day or use the exceptional care rate for SIL Youth under any circumstances. DFPS will authorize use of exceptional care days of care using a validation process in instances when:

- there is a Court Order that dictates a child specific placement or payment that exceeds the contemplated rate structure of the blended rate,
- the child has extraordinary service needs that far exceed the traditional residential childcare settings (example: major eating disorders, severe medical/psychiatric needs); or
- the SSCC has performed an exhaustive search and placement cannot be located without the use of a child-specific contract whose rate exceeds the contemplated rate structure of the blended rate.

The SSCC will electronically submit the request to seek approval of the exception care rate for **all** youth entering an exertional care placement after the effective date. The SSCC should expect a response from the Director of Placement for CPS within one to two (1-2) business days of the submission. A third day may be required if the request is for a rate over \$1,000. If the request is denied, the Director of Placement for CPS will submit a written response to the SSCC detailing the basis for the denial and include a recommendation concerning placement for the subject child. In addition, should the subject child be denied an exceptional care rate, the SSCC retains and reserves the right to have the contract-approved

Third-Party Vendor review the DFPS denial and issue a subsequent opinion and recommendations with respect to placement. This review process shall occur within three (3) days of the SSCC receiving notice of the denial for the exceptional care rate. This Third-Party recommendation shall be submitted to DFPS for re-consideration concerning the subject child.

Please note that the exceptional care rate cannot be paid until approval is given. If approved, the payment will be from the date the request was submitted. Approvals will not be backdated. If a placement took place prior to submitting for approval, those prior dates will not be considered for payment.

Please see the [Exceptional Care Rate Request Resource Guide](#).

SSCC Contracts with Non-Paid Residential Providers

Placements into no-pay residential providers require unique placement entry documentation and may impact eligibility for the blended rate or may result in additional requirements regarding how the blended rate is used.

Foster Care Placement:

If the subcontract between the SSCC and a residential foster care provider is no-pay, the placement entry will continue to be under the SSCC network and the SSCC must arrange for the minimum pass thru amount for foster care to be placed in a savings account for the child or youth. The savings account for the child/youth must be sent to the family once the adoption is consummated. The remainder of the blended rate is available for the SSCC to re-invest in their network.

IMPACT Documentation

- A child referral to the SSCC should be added.
- On the placement page, FPS Contracted Placement type should be selected.
- The appropriate resource is selected.
- An example would be a child that is placed with Gladney Center for Adoption (which is a no-pay placement resource for the SSCC) as a foster placement until the adoptive placement can be completed.

General Residential Placement (GRO):

If the contract between the SSCC and a residential GRO provider is no-pay, the placement entry will not be under the SSCC network and is not eligible for the blended rate.

IMPACT Documentation

- A child referral to the SSCC should be added.
- On the placement page, Non-Paid Placement type should be selected.
- The appropriate resource is selected.
- Please note the contract agreement between the SSCC and a GRO may differ from the contract agreement between DFPS and a GRO. DFPS may have a no-pay contract with a GRO and the SSCC may have a paid contract with the same GRO.

Children/Youth Under SSCC Supervision

SSCC must establish policies/procedures for safely caring for children/youth and meeting their needs while a placement is being located. Policies/procedures must comply with CPS Handbook policy [4152.2 Meeting the Needs of a Child or Youth until a Placement Is Secured](#) and all of its subitems.

The SSCC will report children under SSCC supervision to DFPS no later than **9:00 am** every day via email to the DFPS Placement team at cwop@dfps.texas.gov copying the CBCA and CAM. Please title the e-mail "SSCC Supervision for the evening of DATE" This is the date prior to midnight for the overnight supervision that occurred.

If there were children under SSCC Supervision, the SSCC Single Point of Contact completes the **SSCC Supervision Daily Log** (excel spreadsheet template) with information on all children supervised by the SSCC overnight (as defined above). The naming convention for the log is "SSCC Supervision Log for DATE". The date in the log is the date prior to midnight for the overnight supervision that occurred.

- The log is a record of all children supervised overnight on a single date. The log is completed every night a child remains under SSCC Supervision until a placement is found. Logs completed for Friday-Sunday nights are submitted Mondays by 9am following the naming convention for each night.
- If a child in SSCC supervision runs away, the incident must be reported to the placement team and the SSCC must verify that the runaway protocol was followed or will be followed.
- (This information is reported by the CPS placement team to the CPS Associate Commissioner.)
- Daily reporting to the placement team, CBCA and CAM is in addition to and does not take the place of communication between SSCC and regional DFPS CPS staff about locating placements as outlined in the operations manual. Transparent communication is essential so that DFPS and the SSCC can work together to meet the needs of the child.

If no children were under SSCC Supervision, the SSCC reports to DFPS that there were **NOT** any children in SSCC Supervision.

Note: Per an allowance of the SSCC to deviate from CPS Handbook policy [4152.1 Plans for a Child or Youth When Placement Is Unavailable](#), if a child or youth in DFPS conservatorship does not have a placement, the child or youth can be supervised by a qualified SSCC staff. The request will be granted to all SSCC employees as long as: (1) SSCC employees are in charge of the children, (2) those employees have appropriate background checks (both of which are required by the statute), and (3) have received all the required training. Significant Events or Issues

SFCS is to follow CPS Handbook policy [4152.2 Meeting the Needs of a Child or Youth without Placement](#) and the [Child without Placement Procedures](#) guide provided by CPS program and the internal SFCS document regarding supervising children without placement..

If a significant event or issue arises while supervising a child or youth, staff members and caregivers must notify their supervisor immediately. All significant events and serious incidents must be immediately escalated up the chain of command to the regional director, using the email subject line *CWOP Incident*.
*Note: Well-Being Specialist and Behavioral Services staff may be able to assist in addressing medical or behavioral needs.

New Paid Placement and Case Management Referrals

After INV/FBSS determines, with Supervisor and Program Director approval, that the child requires placement the worker must determine if the child needs placement in a [Kinship Placement](#), or a Paid Placement or other Non-Paid Placement. Once initial placements are made, SFCS takes responsibility for all subsequent placements.

Notification & Referral

INV/FBSS Worker will contact SFCS during regular work hours and after hours by phone at 806-381-3573 (listen carefully and choose appropriate selection) and immediately follow-up by email at

txreg1networkreferral@st-francis.org (include txreg1placement@st-francis.org if paid placement is needed).

Subject line will read: "Last name, first name of oldest child being referred" and will:

- Provide the (the referring party's) contact information
- Provide back-up worker's contact information (i.e. supervisor)
- Request & include name of SFCS Permanency Specialist to be assigned as **primary** on the FSU and SUB stage in IMPACT. During business hours the txreg1networkreferral@st-francis.org mailbox monitor will respond with the SFCS Permanency Specialist to be assigned primary within 4 hours. Outside of business hours, the Permanency Supervisor on call can be assigned primary, until SFCS Permanency Specialist is identified on the next business day.
- If paid placement is needed, request name of SFCS Placement Coordinator to be assigned secondary on the SUB stage in IMPACT.
- Provide SFCS initial information (can be verbal)
- If removal involves a sibling group and kinship placements have been identified for some of the children and not all require a paid placement search, INV/FBSS worker will clearly identify those that are needing an immediate paid placement.
- Open the FSU and SUB stages in IMPACT and assign the identified SFCS Permanency Specialist as primary.
- Create SFCS Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning SFCS Permanency Specialist as **primary** on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
 - Ensure all principals identified in the case are added to the family referral.
- If sexual aggression is identified, follow the child sexual aggression designation process above.
- If applicable, complete the trafficking information in IMPACT prior to completing the DFPS Placement Summary [Form 2279](#) and printing the Child Sexual History Attachment A Form.
- Complete the child's placement information in IMPACT by creating either:
 - Application for Placement of Children in Residential Care **or**
 - Alternative Application for Placement of Children in Residential Care **and**
 - Child Sexual History Attachment A for **all** initial placements
- Provide notification regarding if the child/youth requires a 3-day medical exam as well as the criteria that is met to require the exam. Note: This will also be included in the form 2087ex in the physical health section.
- Based on the child's needs, notify relevant regional CPS Subject Matter Experts (e.g. Nurse, Developmental Disability Specialist, Well-Being Specialist, Education Specialist, etc.).

***Based on the child's needs, the INV/FBSS worker will notify the Developmental Disability Specialist prior to the child's removal.**

*Verbal SFCS placement referral must be followed up by documented SFCS referral in IMPACT within 1 hour and email notification to SFCS once the SFCS referral is complete in IMPACT.

*[Form 2087ex](#) must be complete in IMPACT and reviewed by the INV/FBSS Supervisor within **1 hour** of referral.

*The acceptance of the official referral begins once DFPS has:

- Created the Child Referral in IMPACT (assigning SFCS as primary and DFPS as secondary on SUB stage)

- Created the Family Referral in IMPACT (assigning SFCS as primary and DFPS as secondary on FSU stage)
 - Ensure all principals identified in the case are added to the family referral.
- Submitted an approved 2087ex to SFCS (approved by SFCS and DFPS supervisor) via IMPACT
 - Be sure to include and identify under the physical health section whether the child/youth requires a 3-day medical exam as well as the criteria met for the exam.
- Provided any other requested placement information that may not be on the 2087ex or Attachment A in IMPACT via email to SFCS (cc: DFPS Supervisor) that is needed to begin the placement search in ECAP Client Assessment
- SFCS will review the 2087ex within 1 hour of it being received and will notify CPI/FBSS, via email, of the acceptance of the 2087ex or any needed changes or additional information to begin the placement search process. Reminder: the 4-hour timeframe does not begin until the 2087ex is accepted by SFCS.
- If there are any issues completing the 2087ex in IMPACT, the CPI/FBSS caseworker will obtain approval from the CPI/CPS Program Director to complete the paper form 2087ex to submit to SFCS. The issues identified, and approval from Program Director will be communicated with SFCS. All timeframes to complete and review the 2087ex still apply.

Removal While Child/Youth is in Psychiatric Hospital

If a child/youth is in a Psychiatric Hospital at the time of removal, the removal worker will complete the initial notifications identified in the Psychiatric Hospitalization Protocols.

When a child currently in a psychiatric hospital is removed:

- The removal worker will send a Non-Emergency placement referral to TXreg1placement@st-francis.org indicating whether the child is currently on acute or placement days.
- At the time of removal, the removal worker and SFCS Intake will determine if placement days are needed.
- The removal worker will enter the hospital as the first placement within IMPACT, and the next identified placement will be considered a subsequent placement which SFCS will be responsible for entering in IMPACT.

For additional information see:

- [Psychiatric Hospital Contact Protocol](#),
- [Psychiatric Hospital Workers Safety Net](#),
- [6151.3 Notification Requirements and Schedule](#).

Placement of Child/Youth

SFCS Placement Option

No later than **7 hours** after receiving notice of an official referral for the need for emergency placement, SFCS will provide the INV/FBSS Worker with:

- Notification of a recommended placement and medical consent by phone, followed by an email to the
- INV/FBSS Worker and Supervisor, or electronically (IMPACT).
- Information about the recommended placement will include:
 - Placement Name, Address, Phone and Resource ID, if known
 - Network Provider Name
 - Medical Consenter name and PID, if known

- Information regarding other children or youth placed in the home, including if any have a child sexual aggression designation or a victim of child sexual aggression designation

*If SFCS has not established a placement for a child within 7 hours of initial notification, SFCS Intake Placement Coordinator will notify CPS worker of status and planned strategy for finding a placement. INV/FBSS worker will notify the INV/FBSS supervisor that no placement has been found. The INV/FBSS supervisor will notify the CBC Administrator.

*If there are concerns about a placement recommendation, the Dispute Resolution Process should be utilized.

Physical Placement of the Child/Youth

If placement is located **within 4 hours** of documented emergency placement referral which includes completed Application for Placement of Children in Residential Care:

- INV/FBSS Worker will physically transport the child to the placement.
- INV/FBSS and SFCS (or designee i.e. Provider Case Manager) will exchange placement paperwork.
- INV/FBSS Worker will notify SFCS and the caregiver if the child or youth meet the criteria for a 3-day exam.
- INV/FBSS Worker will complete the physical placement and provide and review the following placement documents with the caregiver: The 2085FC and 2085 B can be generated in IMPACT if placement information and medical consenters have been entered.
 - [Placement Authorization \(form 2085fc\)](#) to be made out to placement
 - [Designation of Medical Consenter \(form 2085-B\)](#) to be signed by consenter and returned to DFPS electronically
 - [Designation of Education Decision-Maker \(form 2085-E\)](#) to be signed by decision maker and returned to DFPS electronically
 - DFPS Placement [Summary](#) Form 2279
 - Child Sexual History Attachment A from IMPACT
 - [Rights of Children and Youth in Foster Care \(Form 2530\)](#) with child or youth
 - Obtain signature from child or youth
 - Provide copy to child or youth
- After completing placement, and no later than 12 hours from completing placement, the INV/FBSS worker will send an email to DataManagementTXReg1@st-francis.org using the following template:
 - Subject line will read: "Child's first initial, child's last name-Transportation Summary"
 - (Ex. J. Smith- Transportation Summary)
 - Client's Name:
 - Transported by:
 - Placement or Visit:
 - Pick-Up Date:
 - Pick-Up Time:
 - Pick-Up Location:
 - Drop-Off Date (date of placement):
 - Drop-Off Time:
 - Drop-Off Location:
 - Client behavior at pick-up and in route:
 - Client behavior at drop-off:
 - Was education binder present at time of pick-up:
 - If education binder was not present, was a blank one provided:

- Were you given documentation to give to the caregiver at time of placement:
- Were medications sent along with the child:
- Was the child and/or current placement aware of this move prior to driver's arrival for pick up?
- INV/FBSS Worker will upload the signed DFPS [Placement Summary Form 2279](#) with Child Sexual History Attachment A and the [Rights of Children and Youth in Foster Care Form 2530](#) into OneCase; and
- INV/FBSS Worker will provide scanned copies of the placement documents to SFCS within **1 business day**.

If placement is located **outside the 4 hours** of documented emergency placement referral:

- INV/FBSS Worker will transport the child or youth to an alternative location coordinated between SFCS and INV/FBSS Worker.
- For a child or youth's initial placement (brand new removal), when a placement has **not** been identified, INV/FBSS Worker will remain medical consenter until a placement is identified.
- SFCS will physically transport the child or youth to the placement.
- SFCS will complete the placement and provide and review the following placement documents with the caregiver: The 2085 FC and 2085 B can be generated in IMPACT if placement information and medical consenters have been entered.
 - [Placement Authorization \(form 2085fc\)](#) to be made out to placement
 - [Designation of Medical Consenter \(form 2085-B\)](#) to be signed by consenter and returned to DFPS electronically
 - [Designation of Education Decision-Maker \(form 2085-E\)](#) to be signed by decision maker and returned to DFPS electronically
 - [DFPS Placement Summary Form 2279](#)
 - Child Sexual History Attachment A from IMPACT
 - Discuss the [Rights of Children and Youth in Foster Care \(Form 2530\)](#) with child or youth
 - Obtain signature from child or youth
 - Provide copy to child or youth
- After completing placement, and no later than 12 hours from completing placement, the Permanency Specialist, or transport designee, will send an email to DataManagementTXReg1@st-francis.org using the following template:
 - Subject line will read: "Child's first initial, child's last name-Transportation Summary"
 - (Ex. J. Smith- Transportation Summary)
 - Client's Name:
 - Transported by:
 - Placement or Visit:
 - Pick-Up Date:
 - Pick-Up Time:
 - Pick-Up Location:
 - Drop-Off Date (date of placement):
 - Drop-Off Time:
 - Drop-Off Location:
 - Client behavior at pick-up and in route:
 - Client behavior at drop-off:
 - Was education binder present at time of pick-up:
 - If education binder was not present, was a blank one provided:
 - Were you given documentation to give to the caregiver at time of placement:
 - Were medications sent along with the child:

- Was the child and/or current placement aware of this move prior to driver's arrival for pick up?
- SFCS will upload the signed DFPS [Placement Summary Form 2279](#) with Child Sexual History Attachment A and [Rights of Children and Youth in Foster Care Form 2530](#) into OneCase.
- SFCS will provide scanned copies of the placement documents to INV/FBSS **within 1 business day**.

For additional information see [Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification](#)

Documentation

IMPACT Documentation

INV/FBSS worker will, within 4 hours of referral to SFCS:

- Update Person Information in IMPACT

SFCS will, within 12 hours or no later than 7pm the following calendar day of the placement:

- Complete the placement entry in the placement information page of IMPACT.
 - If placement is in a Treatment Family Foster Home, please select TFC (Treatment Foster Home) as the living arrangement on the placement entry.
- Create the Medical Consenter entry in IMPACT.
- Save/submit the placement entry in IMPACT to SFCS supervisor.

INV/FBSS Supervisor will, by 5:00pm the next business day:

- Review the placement and medical consenter documentation in IMPACT.
 - If the placement entry is not documented in IMPACT from SFCS within 12 hours of the referral, INV/FBSS Worker will email datamanagementtxreg1@st-francis.org and request placement be documented.
 - If placement information is not documented in IMPACT within 1 hour of contact with SFCS, INV/FBSS Worker will notify their supervisor.
 - The INV/FBSS Supervisor will contact the SFCS Care Management Supervisor for immediate resolution and will notify CBC Administrator.

Additional Documentation

By 5:00pm the next business day, INV/FBSS worker will provide SFCS any remaining placement documentation including:

- Birth verification/certificate.
- Social Security card or number (if available).
- Education portfolio.
- Medicaid/STAR Health card or qualifying information (if available).
- Any external documentation (e.g. assessments, evaluations, or therapy notes) related to the care of the child.
- Update person characteristics in IMPACT.
- Update education log in IMPACT (with as much information as available).
- Update medical/dental page in IMPACT.
- Any requested intake forms from the residential provider.

Any external forms and written placement information not available in IMPACT should be emailed to SFCS datamanagementtxreg1@st-francis.org with Subject Line; "CPS Emergency Placement- Last Name of Oldest Child,"

Within 3 Days of Placement

SFCS will:

- Ensure the caregiver or residential provider obtains the 3-day medical exam screening, if applicable, (3 business days) for all children and youth and document in IMPACT, as well as notify INV/FBSS Worker
- Ensure the caregiver schedules CANS appointment to occur within 30 days for children age 3 years and older
- Ensure the caregiver schedules and completes the TX Health Steps checkup within thirty (30) days.
- Ensure any child under age 3 years is referred to Early Childhood Intervention (ECI) if the child is suspected of having a disability or developmental delay, is identified as affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, or the disability or developmental delay requires evaluation prior to their scheduled TX Health Steps check-up.
- Schedule the first parent-child visit within five days of referral per [Texas Family Code 262.115](#)
- In collaboration with the parent create the temporary visitation plan.
- File the temporary visitation schedule with the court by the Adversary hearing if required by the court. Bring to the temporary visitation plan to the Adversary hearing.
- Obtain updated [Form 2625 Child Caregiver Resource](#).

3-Day Medical Exam:

Within 3 business days, some children entering DFPS care must see a medical provider to be checked for injuries or illnesses and get any needed treatments. Children who meet one of six criteria at the time of removal should receive a 3-day exam. These criteria are:

- Removal due to physical abuse
- Removal due to sexual abuse
- Obvious physical injury
- Chronic medical condition
- Complex medical condition
- Diagnosed mental illness

The 3-day medical exam is a medical screening that is intended to provide a baseline of a child's or youth's physical health when they are first removed and enter foster care.

The DFPS removing worker will notify the caregiver and SFCS if the child or youth meet the criteria for the 3-day exam. This notification will be included in the SSCC referral email and in the Common Application Form 2087ex in the physical health section. SFCS will ensure the 3-day medical exam is completed by the caregiver and will ensure the caregiver notified the primary worker within 1 business day of the appointment occurring.

INV/FBSS will:

- Communicate any information as to who may or may not attend visits and any safety threats they maybe aware of.

Kinship Placement and Case Management Referral

The Kinship placement process is used when INV/FBSS makes a referral to SFCS for a child or youth when an approved non-verified kinship placement has been secured by the INV/FBSS worker. Follow current policy regarding [4114.1 Preference for Relatives and Other Connections](#). If INV/FBSS does not have an approved kinship home at the time of referral, then follow the [New Paid Placement And Case Management Referral](#) process. INV/FBSS must notify SFCS if an approved kinship placement is secured, or a potential kinship placement is being considered, after a referral for paid placement has been made.

**Note if the referral involves a sibling group and any child in the sibling group requires a paid placement, the Paid Placement Process will be followed.

Notification & Referral

INV/FBSS Worker will contact SFCS during regular work hours and after hours by email at txreg1networkreferral@st-francis.org Subject line “Kinship Placement Referral – Last name of oldest child being referred” and will:

- Provide their contact information.
- Provide a worker back-up contact information (i.e. supervisor).
- Provide SFCS initial information.
- Open the FSU and SUB stages in IMPACT.
- Create SFCS Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning SFCS Kinship Supervisor as **primary** on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
 - Ensure all principals identified in the case are added to the family referral.
- Kinship Supervisor assignments will be based on a rotation schedule that is included in the CPS on-call schedule. Kinship Supervisors are:
 - Vecelia Mann – Vecelia.mann@st-francis.org
 - Stephanie Puente – stephanie.puente@st-francis.org
- Provide notification regarding if the child/youth requires a 3-day medical exam as well as the criteria that is met to require the exam (this will also be included in the form 2087ex in the physical health section).
- Based on the child's needs, notify relevant regional CPS Subject Matter Experts (e.g. Nurse, Developmental Disability Specialist, Well-Being Specialist, Education Specialist, etc.).

For additional information see [Placing Children Who Have Intellectual and Developmental Disabilities or Primary Medical Needs](#).

Placement of Child/Youth

INV/FBSS will complete the placement of the child in the kinship placement. This includes providing the caregiver with: The 2085 KO and 2085B can be generated in IMPACT if the placement information and medical consenters have been entered.

- [Placement Authorization: Kinship or Other Non-Foster Caregiver](#) to be made out to placement
- [Designation of Medical Consenter \(form 2085-B\)](#) [Designation of Medical Consenter \(Form 2085-B\)](#) to be signed by consenter and returned to DFPS electronically

- [Designation of Education Decision-Maker \(Form 2085-E\)](#) to be signed by decision maker and returned to DFPS electronically
- [DFPS Placement Summary Form 2279](#)
- Child Sexual History Attachment A from IMPACT
- Discuss the Rights of Children and Youth in Foster Care Form 2530 with child or youth
- Obtain signature from child or youth
- Provide copy to child or youth
- In addition to other required placement forms, at the time of placement into a kinship home, the caseworker must provide the kinship caregiver with the [Kinship Manual](#) and get the kinship caregiver's signature on [Form 0695 Kinship Caregiver Agreement](#).
- Upload the signed DFPS Placement Summary Form 2279 with Child Sexual History Attachment A and Rights of Children and Youth in Foster Care into OneCase; and
- Provide scanned copies of the placement documents to SFCS **within 1 business day**.

For additional information see [Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification](#)

IMPACT Documentation

INV/FBSS worker will:

Complete the placement entry in IMPACT and save/submit to their supervisor.

- Update person characteristics in IMPACT.
- Update education log in IMPACT (with as much information as available).
- Update medical/dental page in IMPACT.
- Upload the DFPS Placement Summary Form 2279, the Child Sexual History Attachment A and Rights of Children and Youth in Foster Care Form 2530 in OneCase

*INV/FBSS worker is responsible for ensuring all placement documentation is entered in IMPACT within current policy timeframes. See CPS Handbook policy: [4142 Enter the Placement Change Information in IMPACT](#).

If Kinship placement is made, DFPS will complete a Kinship Home Assessment Request to SFCS by submitting the following documents to txreg1kinship@st-francis.org within 48 hours of placement.

*If Kinship placement is outside of region 1, form 2077 will be used in place of form 6581.

For additional information see CPS Handbook policy: [6623 Completing a Risk Assessment, and a Written Home Assessment of the Kinship Caregiver](#)

- Complete [Request for Kinship Home Assessment or Services Form 6581](#)
- Criminal History checks for all household members 14 years of age and older
- IMPACT CPS History checks for all household members 14 years of age and older
- Removal Affidavit

[Preliminary Kinship Caregiver Home Assessment Form 6587](#) (IF APPLICABLE) *SFCS is responsible for ensuring completion of home assessment*

Within 3 Days of Placement

SFCS will:

- Ensure the caregiver or residential provider obtains the 3-day medical exam screening, if applicable, (3 business days) for all children and youth and notify INV/FBSS Worker.
- Ensure the caregiver schedules CANS appointment to occur within 30 days for children ages 3 years and older.
- Ensure the caregiver schedules and completes the TX Health Steps checkup within thirty (30) days.
- Ensure any child under age 3 years is referred to Early Childhood Intervention (ECI) if the child is suspected of having a disability or developmental delay, is identified as affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, or the disability or developmental delay requires evaluation prior to their scheduled TX Health Steps check-up.
- Schedule the first parent-child visit within five days of referral per [Texas Family Code 262.115](#)
- In collaboration with the parent create the temporary visitation plan.
- File the temporary visitation schedule with the court by the Adversary hearing if required by the court.
- Bring to the temporary visitation plan to the Adversary hearing.
- Obtain updated [Form 2625 Child Caregiver Resource](#).

Request for Placement into a CBC Catchment Area

This process outlines the steps INV/FBSS caseworkers from outside the CBC area must take to request a paid foster care placement or adoption placement for a child or youth, who is legally from another part of the state, into a CBC Catchment area.

This process does not include:

- SSCC requests for placement into a different CBC catchment area; or
- Youth who desire a SIL placement.

Requesting CPI/CPS Region will

- INV/FBSS workers will complete each section of [Request for Placement Into CBC Area Form 1508](#) and staff with their supervisor.
- The completed form will be emailed to receive approval from their chain of command: Supervisor/Program Director/Program Administrator/Regional Director.
- If the requesting Regional Director approves the child's placement located in the CBC catchment area, the Regional Director will email the completed [Request for Placement Into CBC Area Form 1508](#) to Rachel Williams, SFCS Regional Vice President, Rachel.williams@st-francis.org and cc the Community-Based Care Administrator (CBCA) for that catchment area.

SFCS will

- If the Placement Director of SFCS agrees with the placement, she will notify the requesting Regional Director via email and cc the CBCA and assigned SSCC staff to provide courtesy supervision.
- If there is a disagreement about the child's placement into the CBC catchment area, SFCS Leadership or requesting Regional Director can email the CBCA requesting a staffing on the case. The CBCA will set up a resolution staffing with the following in attendance:
 - SFCS Regional Vice President
 - SFCS Placement Director

- Requesting Area Regional Director
- Region 1 Regional Director
- Director of CPS Placement
- Director of Conservatorship Services
- OCBCT Director

For all contact information on CBCA's and SSCC Leadership please visit the Contact CBC section on the [Community-Based Care DFPS site](#).

Referrals When Placement Is Not Needed Immediately but DFPS Has Obtained Conservatorship

This process is used when INV/FBSS takes conservatorship of a child or youth, but due to the unique circumstances, a placement is not being sought at the time of referral. An example would be when a child or youth is hospitalized. SFCS will begin providing case management services upon referral.

Notification & Referral

INV/FBSS worker will contact SFCS during regular work hours and after hours by phone at 806-381-3573 and select menu option 1 to get to the On-Call Permanency Specialist, follow-up by email to txreg1networkreferral@st-francis.org (include txreg1placement@st-francis.org if paid placement is needed) with Subject Line: "TMC Obtained, Placement Not Needed but Immediate Case Management Services Needed- Last Name of Oldest Child" and will:

- Provide INV/FBSS worker contact information.
- Provide INV/FBSS worker back-up contact information (i.e. supervisor).
- Request name of SFCS Permanency Specialist to be assigned as **primary** on the FSU and SUB stage in IMPACT. During business hours the txreg1networkreferral@st-francis.org mailbox will respond with the SFCS Permanency Specialist to be assigned primary. Outside of business hours, the Permanency Supervisor on call can be assigned primary, until SFCS Permanency Specialist is identified on the next business day.
- If paid placement will eventually be needed, request name of SFCS Placement Coordinator to be assigned secondary on the SUB stage in IMPACT.
- Provide SFCS initial referral information (can be verbal).
- Open the FSU and SUB stages in IMPACT.
- Create SFCS Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning SFCS Permanency Specialist, or Supervisor as appropriate, as **primary** on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
- Provide notification regarding if the child/youth requires a 3-day medical exam as well as the criteria that is met to require the exam (this will also be included in the form 2087ex in the physical health section).
- Complete child's placement information in IMPACT by creating either:
 - Application for Placement of Children in Residential Care in IMPACT or
 - Alternative Application for Placement of Children in Residential Care
 - DFPS Placement Summary Form 2279 **and**
 - Child Sexual History Attachment A.

*When possible and based on the child's needs, the INV/FBSS worker will notify the Developmental Disability Specialist prior to the child's removal.

Placing Children Who Have Intellectual or Developmental Disabilities (IDD), Primary Medical Needs (PMN) or Complex Medical Needs

Placing children who have IDD or primary medical needs requires careful consideration to make the best placement matches to serve the special needs of these children. [The Primary Medical Needs Resource Guide](#) describes the needs of children who have Primary Medical Needs (PMN). [The Foster and Licensed Facility Placements Process Resource Guide](#) describes the needs of children who have IDD needs.

New Placement with No Time for the PMN Meeting Before the Removal

The caseworker follows the processes below to access special support services. If the caseworker is unable to safely transport the child, the caseworker may contact an ambulance to transport the child.

When a PMN child is initially removed after hours or on weekends and the child's care needs are unclear, the child's caseworker may contact the child's healthcare provider after hours, or have the child seen in the local ER when appropriate (examples: diabetic child with insulin pump, child on a ventilator or with other special medical equipment).

Star Health does have a benefit available on a case by case basis. This benefit provides an observation stay in an inpatient setting for up to 48 hours, when placement or supports are not immediately in place during an emergent transition. If the stay exceeds 48 hours, staff must request an authorization for the inpatient stay, going back to the date of admission.

Special Medical Transportation or Nursing Support

If the child requires special medical transportation (including ambulance transport) or nursing support during the move the caseworker requests assistance:

- If the move occurs before the PMN meeting access through the regional Well-Being Specialist
- If after hour, or on holidays or weekends, by contacting STAR Health at 1-866-912-6283.

If the placement is occurring outside of regular business hours or on a holiday, prior to placement, an **immediate** staffing will take place between DFPS and SFCS, involving the Director level or above.

This staffing is to ensure all of the child's medical needs will be met until a PMN staffing can take place with the Well Being Specialist. This staffing will **not replace** the required PMN staffing with the Well Being Specialist.

For additional information see:

- [Primary Medical Needs Resource](#) Guide.
- CPS Policy [4117 Specific Placement Considerations for Children or Youth Who Have Primary Medical Needs](#) and the subsections.

New Placement Referral with time for PMN Staffing

INV/FBSS workers should follow the process outlined in [New Paid Placement And Case Management Referrals](#) process when requesting a paid foster care placement from SFCS for a child with Intellectual or Developmental Disabilities (IDD), Primary Medical Needs (PMN) or Complex Medical Needs.

Upon Placement Referral

When planning the removal of a child with PMN in a non-urgent situation, the caseworker should contact the Well-Being Specialist and placement staff to set up a PMN Meeting before removal, to plan for the safe transportation and placement of the child.

In addition to the placement referral, the INV/FBSS worker will upon placement referral or prior to the removal, when possible, coordinate a telephone staffing with:

- INV/FBSS supervisor and Program Director,
- Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist),
- SFCS Intake Placement Coordinator

To discuss:

- The specific needs of the child or youth. Example: if a child needs a hospital sitter, INV/FBSS will request and pay for this service and share coordination with SFCS.
- The ability of available placement options to meet the child or youth's specific needs.

After a placement for a child *with PMN* has been recommended by SFCS

- **INV/FBSS worker** will contact the Well Being Specialist to request a PMN Staffing to develop a plan to address the medical services, equipment and other needs during the transition to the new caregivers.
- The WBS will coordinate, facilitate, and document the PMN staffing.
- The staffing will include:
 - SFCS Placement Coordinator,
 - Chosen caregivers
 - Their provider
 - Medical staff if applicable
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor and Director of Permanency
 - Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist)
 - STAR Health and previous caregivers (when appropriate).
- The PMN staffing must occur prior to placement if possible. If not possible, a staffing should occur and must be requested within 24 hours following the emergency placement.

After a placement for a child with significant medical issues, but not PMN has been recommended by SFCS

SFCS Placement Coordinator or Permanency Case Manager may contact the Well Being Specialist to request a Medical Staffing.

- The WBS will coordinate, facilitate, and document the Medical Staffing.
- The staffing will include:
 - SFCS Placement Coordinator
 - Chosen caregivers
 - Their provider
 - Medical staff if applicable,
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor and Director of Permanency
 - Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist)

- Well- Being Specialist)
- STAR Health and previous caregivers (when appropriate).
- The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the emergency placement.
- When there is no time for a Medical Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.

After a placement for a child *IDD* has been recommended by SFCS

- INV/FBSS Removal Worker will coordinate with SFCS Placement Coordinator or Permanency Case Manager for a staffing.
- The staffing will include:
 - SFCS Placement Coordinator
 - Chosen caregivers
 - Their provider
 - Medical staff if applicable
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor and Director of Permanency
 - Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist
 - Well- Being Specialist)
 - STAR Health and previous caregivers (when appropriate).
- The staffing must occur prior to placement if possible.
- The DFPS Education Specialist should be included in the staffing as appropriate.
- If possible, the staffing should occur prior to the child or youth arriving in his or her new placement, but no later than two business days after the child or youth's placement.

Placement Change Process

SFCS Permanency Case Managers will request a non-emergency paid foster care placement or placement change from their placement team for a child with Intellectual or Developmental Disabilities (IDD) or Primary Medical Needs when needed.

- As a part of the placement request process, the SFCS Permanency Case Manager will within 24 hours of the placement referral, coordinate a telephone staffing to discuss the specific needs of the child or youth:
- Staffing will include:
 - SFCS Permanency Supervisor and Director of Permanency,
 - Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist),
 - SFCS Intake Placement Coordinator
 - Director of Permanency to discuss

After a placement for a child *with PMN* has been recommended:

- SFCS Placement Coordinator or Permanency Case Manager will contact the Well Being Specialist to request a PMN Staffing to develop a plan to address the medical services, equipment and other needs during the transition to the new caregivers.
- The WBS will coordinate, facilitate, and document the PMN staffing.

- The staffing will include:
 - SFCS Placement Coordinator
 - Chosen caregivers
 - Previous caregivers
 - Their provider
 - Medical staff if applicable
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor
 - STAR Health.
- The staffing must occur prior to placement if possible. If not, a staffing should occur immediately following the placement.
- When there is no time for a PMN Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.
- For PMN children already in DFPS custody who experience a change in placement after hours, the SFCS Permanency Worker can contact STAR Health Member Services' Nurse Wise medical advice line at 1-866-912-6283, option 7 (available 24/7, after hours, holidays and weekends).

For additional information please see [Primary Medical Needs Resource Guide](#).

After a placement for a child *with significant medical issues, but not PMN* has been recommended:

- SFCS Placement Coordinator or Permanency Case Manager may contact the Well Being Specialist to request a Medical Staffing.
- The WBS will coordinate, facilitate, and document the Medical Staffing.
- The staffing will include:
 - SFCS Placement Coordinator
 - Chosen caregivers
 - Their provider
 - Medical staff if applicable,
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor and Director of Permanency
 - Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist
 - Well- Being Specialist)
 - STAR Health and previous caregivers (when appropriate).
- The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the placement.
- When there is no time for a Medical Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.

After a placement for a child *IDD* has been recommended:

- SFCS Placement Coordinator or Permanency Case Manager will coordinate staffing.
- The staffing will include:
 - SFCS Placement Coordinator
 - Chosen caregivers
 - Their provider
 - Medical staff if applicable,
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor and Director of Permanency

- Regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist
- Well- Being Specialist)
- STAR Health and previous caregivers (when appropriate).
- The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the placement.

Placing Children in Certain Institutions

CPS (including the regional Developmental Disability Specialist and DFPS Placement team in State Office) and SFCS will work together when considering and requesting placement of a child or youth in one of the following settings (non- DFPS placement):

- HHSC-Licensed Institutions for children with intellectual or developmental disabilities.
- State Supported Living Centers.
- Home and Community-Based Services (HCS) Residential Placements.
- Nursing Facilities **or**
- Intermediate Care Facilities for the Intellectual Disabilities/Related Conditions (ICF/IID- RC).

Placing a child or youth in a certain institution should only take place when no other less restrictive placement is available that can meet the child or youth's needs. These placements should not be the first placement option.

Placement in a certain institution requires careful consideration, assessment, and justification. CPS and SFCS will coordinate with the regional Developmental Disability Specialist to carefully assess the child or youth's specific needs and exhaust all least restrictive placement options before recommending a child or youth's placement in a certain institution.

Depending on the type of institutional placement requested for the child or youth, SFCS will need to follow current CPS processes outlined in:

- [The Foster and Licensed Facility Placement Process Resource Guide](#)
- [CPS Policy 4118 Additional Actions for Placing Children with Intellectual or Development Disabilities](#)

If a child or youth is placed in a certain institution, the Permanency Case Manager must discharge the child or youth from the SSCC in IMPACT by ending the child referral to ensure the placement is 2-tiered. Once the placement has been entered, the Permanency Case Manger will need to reestablish the SSCC Child Referral so case management services provided by SFCS may continue as long as DFPS continues to have conservatorship.

Placement at Casa Esperanza (Hope House), Mission Road

If SFCS has a contract with either Mission Road or Casa Esperanza (Hope House), SFCS Placement Coordinator will contact Mission Road or Hope House for a placement request for a child who meets criteria established by the provider in the Texas Provider Gateway. If the provider agrees to accept the child for placement, the SFCS Placement Coordinator will follow the below process beginning with submitting the required documents to the DFPS Developmental Disability Specialist (DDS).

If SFCS does not have a contract with Mission Roads or Casa Esperanza (Hope House), SFCS Placement Coordinator will notify the DFPS Disability Specialist and submit the referral and required documents for the placement of the child/youth to the DDS. Once the DDS determines the child meets the criteria for placement in Casa Esperanza (Hope House) or Mission Road the DDS will submit the referral to the provider.

The required documents for placement in Casa Esperanza (Hope House) or Mission Road are as follows and must be submitted to the Developmental Disability Specialist (DDS):

- Exhaustive Search for Placement Logs
- Current Application for Placement
- Psychological Evaluation
- School Records

Once Mission Roads or Hope House has accepted a child for placement, the DDS specialist, upon receipt of required documents, will reach out to the local CRCG to coordinate a meeting and obtain a CRCG letter, immediately, but no later than two (2) business days.

Once the DDS specialist has all the above documents and the decision is to proceed with Institutional Placements and the CRCG is held, the DDS will, within two (2) business days, develop and submit a formal written request to the SFCS Executive Director. The SFCS Executive Director will review and approve within two (2) business days.

Once approved, the DDS will forward the request to the State Office Child with Disability Project Program Specialist who will review and seek approval from:

- The CPS Director of Placement
- The CPS Associate Commissioner Director who will make the final decision.

If placement is approved, SFCS will then coordinate with the provider for admission date.

For additional information, please refer to [Foster and Licensed Facility Placements Process Resource Guide](#).

Special note: When a Home Community Services (HCS) placement is having issues with a child/youth and is not able to meet their needs:

- The SFCS worker must contact the local intellectual developmental disability authority (LIDDA) and the Developmental Disability specialist (DDS) to seek another Home Community Service (HCS) placement.
- This possible disruption/change in placement should go through the DFPS Developmental Disability specialist (DDS), *not* SFCS.

Home Community Services (HCS) placements

When a Child Specific Contract for a Home and Community-Based Services (HCS) Placement is needed by SFCS, refer to Appendix [Child Specific Contract Placement is needed by SFCS](#).

Utilize the below resources to determine if exploration of an HCS placement is appropriate.

For additional information see:

- [4118.1 Assessing the Need for Facility Placement](#)
- [Intellectual or Developmental Disabilities \(IDD\)](#)
- [Home and Community-Based Services \(HCS\) Resource Guide PDF Document](#)

Placement into an Inpatient Psychiatric Stabilization Program (IPSP)

Before placing a youth in a IPSP, the program must be approved by DFPS.

The SSCC will electronically submit a request for approval of the IPSP to the CPS Director of Placement or designee. The SSCC will submit a copy of the subcontract with the IPSP that includes:

- The sub-acute treatment model
- The criteria and methodology used in considering a child/youth for sub-acute placement, including client characteristics, approval process for the placement, and level of internal managerial approval
- How the SSCC will oversee, support, ensure safety, and monitor the placement while the child/youth remains in the placement
- A transition plan to ensure the youth is moved to a lesser restrictive setting after the program's treatment model timeframe, with the intent that the youth transitions as soon as the youth has completed the program.

If IPSP Is Approved

- The SSCC will forward the approved email to the Contract Administrator Manager (CAM) and the Community-Based Care Administrator (CBCA).
- The CAM will create a resource in IMPACT add the Sub-Acute Program under the SSCC's provider network in IMPACT and reply to the email once completed.

Appeal Process If the IPSP is not Approved

If the request was denied, and the SSCC does not agree with denial then:

- The SSCC can forward the denial, along with their reason of appeal, to the CPS Associate Commissioner and/or the Director of Conservatorship Services.
- The CPS Associate Commissioner and/or the Director of Conservatorship Services have two business days to respond to the denial.

Requesting Exceptional Foster Care

After approval of the sub-acute program is received, the SSCC may submit a request to use the Exceptional Foster Care Rate to pay for placement (see [Exceptional Foster Care Rate Approval Flow Chart](#)). It is important to include the CBCA on all Exceptional Care requests. Note: The SSCC will not be reimbursed the foster care blended rate for any placement into the Sub-Acute program.

Temporary Placement For A Child When There is No Removal

Under special situations, a child or youth may need a temporary, paid foster care placement. Examples include when a child from another state is traveling through the CBC area and needing temporary placement until a parent or relative can pick them up. If this occurs, CPI will refer the child or youth needing paid foster care placement to the SSCC per current protocols outlined in [New Paid Placement and Case Management Referrals](#).

The SSCC will then secure temporary, paid foster care placement for the child or youth with the following considerations:

- If the child or youth has emergency medical needs, then the CPI will ensure written consent is received from the child or youth's parent/managing conservator, as needed.
- If the child or youth is hospitalized, CPI will work with STAR Health (Superior) to cover the expenses related to the days spent in the hospital.
 - If a child or youth needs a hospital sitter, CPI will request and pay for this service.

- If a foster parent needs to be trained or needs time to bond with the child or youth while the child or youth is in the hospital, CPI will notify SSCC and SSCC will determine a proper course of action.

The SSCC will request payment for placement through current regional processes established with local child welfare boards or, if applicable, the state child welfare department that has legal authority over the child or youth. If payment is denied by a local child welfare board or state child welfare department, then the SSCC will request a Manual Payment (form 4116) from CPS to pay the provider directly for the days the child or youth was in paid placement.

Note: Unless DFPS has custody or in the process of obtaining custody, CPI maintains possession of the child until a placement is located by the SSCC and will be responsible for all related care activities, including transport.

The 4- and 7-hour CBC contract requirements do not apply for youth in this section, as this is courtesy assistance from the SSCC, and the child/youth is not under the SSCC continuum of care.

Placement for Children/Youth From Other Regions That Have Been Missing And Are Recovered In An SSCC Catchment Area Or SSCC Children/Youth Recovered In Legacy Regions

This process primarily pertains to youth who have been on runaway and are recovered. These types of situations are unique in their circumstances and decision-making regarding placement or temporary placement. Primary considerations must include child/youth safety and what is in the child/youth's best interest. The SSCC and DFPS Legacy areas must work together to support children/youth in DFPS Conservatorship as needed to ensure their safety and well-being. *The 4- or 7-hour CBC contractual requirements do not apply for youth in this section, as this is assistance from the SSCC.*

Possible scenarios include, but are not limited to:

- SSCC youth recovered in a legacy region
- Legacy youth recovered in a CBC catchment area
- SSCC youth recovered in other CBC catchment areas will be covered in an agreement between the SSCC's.

When the circumstance does not support the child/youth being able to return to their legal region/catchment area immediately, a collaboration between DFPS legacy region and the SSCC is required to develop a plan that meets the child/youth's immediate needs, including the possible need for securing temporary placement.

Circumstances that may require a temporary placement for the youth may include, but are not limited to:

- Recovery at a late hour and a distance from Legal Region/Catchment that would not support safe return at the immediate time of recovery
- Weather conditions in either recovery or legal region/catchment that do not support a safe return to the Legal Region/Catchment at the immediate time of recovery

Those involved in planning may include:

- Legal Region/Catchment DFPS/SSCC Program Director depending on Stage I or II

- Recovery Region/Catchment DFPS/SSCC Program Director depending on Stage I or II • SSCC Intake Director
- Community-Based Care Administrator

Note: On-Call DFPS and SSCC staff would need to be involved in the planning after hours and on weekends or holidays.

Options to consider in resolving placement needs include, but are not limited to:

- Legal Region SSCC secures in-network placement in the recovery region if they have an available contract with an opening.
- Legal Region SSCC seeks assistance from Recovery Region’s CPU for temporary placement.
- If this is the plan, Recovery Region Program Director facilitates the referral to CPU for assistance.
 - Legal Region CPU requests assistance from Recovery Catchment SSCC for temporary placement.
 - [SSCC Intake and Placement Contacts](#)

The expectation for these types of temporary placements is that they are temporary and will **not** require multiple nights for placement. The Legal Region or the Legal Region’s SSCC will secure placement for the youth the following day after the youth is recovered and facilitate a least restrictive placement. In instances when DFPS cannot reimburse for placements that are less than 24 hours, payment will be made at the Emergency Shelter rate through Form 4116.

IMPACT documentation for the temporary placement

	The placement has a DFPS contract only	The placement has both SSCC and DFPS contract	The placement has an SSCC contract only
Youth Legal Region is SSCC Catchment	CBCA should be contacted and will aid in placement documentation. Payment will be directly paid to the provider and not through the SSCC. *See documentation steps below	Placement documented under SSCC network and paid via 3-tiered placement under SSCC contract	Placement documented under SSCC network and paid via 3-tiered placement
Youth’s legal region is a legacy region	Placement documented under DFPS contract and paid via 2-tiered placement	Placement documented under DFPS contract and paid via 2-tiered placement	CBCA should be contacted and will aid in placement documentation. Have the SSCC provide you with the specific

	The placement has a DFPS contract only	The placement has both SSCC and DFPS contract	The placement has an SSCC contract only
			RID for the organization that only has an SSCC contract. Payment will then need to be requested for the organization via 4116 will be made to the provider for the emergency shelter rate.

IMPACT will not generate payment if placements are started and ended on same date

- If this occurs, the SSCC or DFPS will notify the CBCA that a temporary placement for placement services across catchment boundaries that started and ended on the same date.
- The CBCA will verify the circumstances and contact the CAM to request that payment be requested via 4116 at the Emergency Shelter rate.
- All placements that meet these criteria of having a start date and end date on the same date payment via 4116 should be directed to the provider.

Foster Care Assistance

Foster Care Assistance consists of daily care (such as food, clothes and shelter) and medical coverage provided through Title IV-E or medical assistance only (MAO) foster care. DFPS Rules 40 TAC §700.315

Applying for Foster Care Assistance

INV/FBSS worker is responsible for completing the initial Foster Care Assistance Application in IMPACT and submitting it to the foster care eligibility specialist. This includes sending the required documentation.

Determining Eligibility

The DFPS Foster Care Eligibility Specialist has the following roles in determining eligibility:

- Obtain birth verification.
- Verifies the child's Social Security number.
- Searches other systems to obtain the child and family income and resource information.
- Processes the Foster Care Assistance Application and records in IMPACT.
- Maintains the eligibility file.
- Please see [CPS Policy 1512 Determining Eligibility](#) for additional information.

Annual Review of Eligibility

DFPS must review the child's eligibility for IV-E or Medicaid at least once every 12 months while the child is in foster care. The SFCS Permanency Case Manager will receive an IMPACT *Task To-Do* when a foster care review is due for the child. To complete the review, the SFCS Permanency Case Manager must:

- Complete the Foster Care Review in IMPACT and submit it to the assigned foster care eligibility specialist.
- Send the eligibility specialist copies of all child-specific court orders since the previous review or initial determination.
- Send the eligibility specialist documentation of the child's citizenship or alien status, if new documentation has been obtained since the previous foster care review or initial eligibility determination.

DFPS must annually review continued eligibility for older youth, 18 or older, who are in extended foster care.

- The SFCS Permanency Case Manager will receive an IMPACT *Task To-Do* when the review is due.
- The SFCS Permanency Case Manager must:
 - Confirm that the young adult is meeting one or more of the education and work-related criteria
 - Provide verification to the eligibility specialist.

For additional information see CPS Handbook Policy [10421 Eligibility for Extended Foster Care](#)

If the annual eligibility review is not completed in response to the IMPACT "To Do" the regional eligibility specialist will receive a monthly data warehouse report and send a notice to the primary worker and

supervisor listing the children who have an annual review that is due. If there continues to be no response, the regional eligibility specialist will then send the report of pending reviews to the Director of Permanency.

For additional information see CPS Handbook policy [1514 Annual Review of Eligibility](#).

Obtaining Certified Birth Certificates and Screen-Printing Birth Records

A SFCS Permanency Worker always attempts to obtain a birth certificate from the child's parents, relatives, or guardian instead of requesting a copy of the birth certificate through the Birth Verification System (BVS) system. If a SFCS Permanency Worker obtains a copy of the birth certificate, he or she submits it to the eligibility specialist to serve as documentation of a child's birth and citizenship or alien status when submitting the documentation for the Foster Care Assistance Application.

Please refer to CPS Policy [1520 Obtaining Certified Birth Certificates and Screen Printing Birth Records](#) to learn more regarding which type of birth verification is required for specific case management circumstances and the documentation required to support the request.

The Foster Care Eligibility Specialist is the subject matter expert that can assist in getting birth certificates. Please refer to CPS Policy [1521 Requesting Certified Birth Certificates](#).

The DFPS points of contact for Region 1 birth certificates are [Foster Care Eligibility Specialists](#) Mary Baker and Jeannie Stephenson.

Beginning in June 2019, the request for birth certificates for youth **who turn age 15** are handled at CPS State Office. The certified copy (or original) birth certificate, photocopy of the birth certificate, and a cover memo with instructions will be mailed to the SFCS Point of Contact. The SFCS Permanency Case Manager will deliver the birth certificate to the youth in person and have them sign [Form 2527 Personal Documents Checklist – 15](#) or [Form 2528 Personal Documents Checklist – 18](#). In addition, the worker will check the new indicator box on the Child's Plan of Service in IMPACT.

Any birth certificate requests that do not meet CPS Policy [1520 Obtaining Certified Birth Certificates and Screen Printing Birth Records](#) guidance prior to the child turning 15 will require SFCS completing the request for the certificate and providing any funds needed.

The SFCS Point of Contact for birth certificate related issues is Saint Francis Administrative Staff at txreg1adminsupport@st-francis.org

Initial Coordination Meeting

The Initial Coordination Meeting (ICM) is an internal, collaborative process between INV/FBSS and SFCS that focuses on the unique, individualized needs of the child and outlines services to address those needs. The ICM process seeks to share all relevant information about a child in DFPS conservatorship who require placement or case management services from SFCS. This includes children placed in both kinship and paid placement. Relevant information includes assessments, evaluations, medical reports, recommended services, and all other information that pertains to the child's individual needs.

The ICM takes the place of the traditional removal staffing.

Timeframes

- SFM will create a reoccurring TEAMS meeting on the ICM Calendar:
- North Mondays at 1:30pm and Wednesdays at 9am
- South Mondays at 9am and Thursdays 9am

Coordination

- Removal worker will send ICM forms and schedule to SFM ICM mailbox Txreg1ICM@saintfrancisministries.org to be set for staffing.
- The Removal Worker will complete as much of the Removal Staffing Checklist as possible, Page 1-4 (up to the Discussion Points) of the CBC [Initial Coordination Meeting \(ICM\)](#) form [K-910-1502](#).
- SFM will update the calendar invite for the specified date and will be forwarded to all appropriate participants.
- SFM will host and facilitate the staffing and will include the ICM Form.
- All ICM referrals need to complete and sent to SFM at least 24 hours in advance of ICM meetings in order to be able to schedule and for DFPS to be able to send out notifications to all participants
- All ICM staffing forms must be received by:
 - North
 - Friday at 1:30pm for Monday 1:30 pm staffing
 - Tuesday by 9am for Wednesday 9am staffing
 - South
 - Friday by 9am for Monday 9am staffing
 - Wednesday by 9pm for Thursday 9am staffing

Participants

At a minimum, the following participants will be notified of the upcoming ICM:

- Removal worker and supervisor
- SFCS Placement Coordinator if paid placement was required
- SFCS Permanency Case Manager and Permanency Supervisor
- SFCS Kinship Case Manager and Supervisor, if placement is kinship
- SFCS Permanency Director
- Other CPS staff or subject matter experts as needed (e.g. Developmental Disability Specialist, Nurse, Education Specialist, Well Being Specialist)

Additional staff may be included in the notification email but may not need to participate in the ICM.

During the ICM

- SFCS Permanency PD will facilitate the ICM Meeting
- INV/FBSS staff will share details about the reason for removal and pertinent information SFCS will need related to ongoing services.
- INV/FBSS and SFCS will exchange copies (with each other) of all external documentation gathered thus far related to the child's needs, including but not limited to removal affidavit, diligent search results for relatives and/or parents, immunization records, birth records, birth certificates, social security cards, medical/dental reports or records, school records, progress notes, assessments, evaluations, and so on.

Documentation

After the ICM, the SFCS Permanency Case Manager worker (or designee) will:

- Record the ICM as a contact in the FSU stage, Contact Detail page in IMPACT.
- Ensure the ICM form is uploaded in OneCase.

Case Transfer

- Primary assignment of the FSU and SUB stages to SFCS will take place at removal.
- INV/FBSS is responsible for ensuring the case's final disposition(s) is communicated to the SFCS Permanency Case Manager.
- See case transfer process under [Case Documentation](#) section for physical transfer of cases and electronic assignment.

Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse

DFPS offers services and support to ensure the safety and well-being of children who meet one or more of the following criteria:

- The child exhibits sexually aggressive behavior.
- A DFPS staff member, another professional, a parent or caregiver, or another person with knowledge of the situation has identified the child as having sexual behavior problems.
- The child is a victim of sexual aggression.

Sexually aggressive behavior is behavior in which a child takes advantage of another person in a sexual way, through seduction, coercion, or force.

SFCS will continue to follow the policy and practice identified in CPS Policy [6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse](#)

Staff members of SFCS providing case management services will follow procedures in the Child Sexual Aggression Resource Guide when working with the following:

- Children who have sexually aggressive behavior
- Children who have sexual behavior problems
- Victims of sexual aggression

If DFPS staff have a child/youth entering DFPS conservatorship from a Region 1 county who needs to be assessed for sexually aggressive behavior, DFPS must:

- Contact SFCS's Executive Director of Support, Esmeralda Kennedy at Esmeralda.kennedy@st-francis.org. The Executive Director of Support is responsible for the CSA designation in IMPACT for any child or youth legally from Region 1.
- As soon as the INV/FBSS worker is made aware of possible sexual aggression they will alert their chain of command and the removal Program Director will email SFCS's Executive Director of Support to set up a child sexual aggression staffing.
- SFCS's Executive Director of Support will schedule the staffing within 48 hours of notification. Participants include:
 - INV/FBSS Removal Worker (required)
 - INV/FBSS Supervisor (required)
 - INV/FBSS Program Director
 - SFCS Permanency Case Manager
 - SFCS Permanency Supervisor
 - SFCS Director of Permanency (required)
 - SFCS Regional Vice President
 - SFCS Clinical Utilization Staff
- The removal worker will be prepared to share all known information required for the staffing.
- SFCS's Executive Director of Support will be responsible for documenting the staffing in IMPACT and, if determined, adding the designation in IMPACT.

Subject Matter Expert Support in Providing Services To Children and Families

For DFPS state office subject matter expert contact information, visit [Region 12: Stage Office Resources](#).

For Region 1 subject matter experts and contacts visit [Region 1 Resources](#).

Behavioral Health Specialists

The Behavioral Health Specialists, specializing in Trauma Informed Care, act as a primary liaison between CPS direct delivery regional staff, CPS State Office staff, and service providers and stakeholders to raise awareness and improve access to services for children in CVS or children in families receiving FBSS services, when there is a history of trauma and behavioral health needs, related to child abuse and neglect. We aim to foster and promote collaboration across child welfare systems. We want to collaborate with local court systems, SSCC staff, community stakeholders, and Star Health to coordinate behavioral health/trauma informed trainings for CPS staff.

For more information see Traumainformedcare@dfps.texas.gov

Developmental Disability Specialist (DDS)

The Developmental Disability Specialists (DDS) are regional subject matter experts and liaisons when an infant, child or youth is suspected or diagnosed with an intellectual and/or developmental disability.

When to contact the DDS?

Whenever there is an infant, child, or youth that comes into care, at any stage, who is diagnosed with IDD or you suspect an IDD is present. If you are unsure if an infant, child, or youth has IDD and you would like a consultation.

Why contact the DDS?

There is a number of reasons why DFPS and/or SSCC staff might want to contact their Developmental Disability Specialist. Not only are they experts in the field of IDD, but they also maintain regional and statewide resource networks and contacts specific to infants, children, and youth with IDD.

DDS can:

- Provide training and support to staff about working with infants, children and youth with IDD.
- Serve as liaisons between DFPS and Health and Human Services for community-based services through the youth's Local Intellectual and Developmental Disability Authority (LIDDA). This includes:
 - Making referrals to the Medicaid waiver interest list for long-term services and supports.
 - Making referrals to HHSC Office of Guardianship, if appropriate.
 - Making referrals for Home and Community Services (HCS) for youth and facilitating referrals for Determination of Intellectual Disabilities (DIDs).
 - Referring to and participating in Community Resource Coordination Groups (CRCG's).
- Address the unique challenges of young adults transitioning out of care into the community and help address resources needed for future support.
- Serve as consultants to DFPS/SFCS staff regarding cases and participate in transition planning meetings, case reviews, circles of support, and permanency conferences.

- Assist in locating and facilitating the placement process for youth needing specialized placements. These specialized placements can include:
 - Intermediate Care Facilities (ICF-IDD)
 - State Supported Living Centers (SSLC)
 - Nursing Facilities
 - Home and Community Based Services (HCS)
 - General Residential Operations (GRO)
 - Mission Road Developmental Center

For additional information see:

- [DFPS Safety Net page for Intellectual and Developmental Disabilities](#)
- [6411.3 Contact with Children in IDD, GRO, SSLC and ICF Facilities](#)
- [6411.31 Responsibilities of Developmental Disability Specialist](#)
- [6411.32 Responsibilities of the Primary Conservatorship Caseworker When a Child Has an Intellectual or Developmental Disability](#)

Education Specialists

DFPS Regional Education Specialists serve as advocates, liaisons, and expert educational resources between local school districts and DFPS staff in providing the best educational outcomes for children in DFPS conservatorship.

DFPS Regional Education Specialists can also be a resource as needed to assist SFCS with access to, or communication with, Region 1 catchment area school districts and campuses.

For additional information see:

- [Education for Children Resource Guide](#)
- [CPS Policy 15000 Education for Children](#)
- [Safety Net Education Page](#)

Faith Based Specialists

The faith community has a long history of helping those in need. DFPS wants to partner with all faith communities in Texas to help children in foster care, their parents and kinship families.

The Texas Faith-Based Model is a joint effort between DFPS and faith-based communities of all denominations and religious affiliations. The goals are to:

- Change the way DFPS collaborates with the faith community to promote positive outcomes for children and families.
- Enhance the well-being of children by shortening their stay in the foster care system.
- Decrease the time for children to achieve permanency.
- Improve community relations.

As part of the Texas Faith-Based Model, DFPS provides information to local congregations about the needs of children and families in their area. The local congregation then decides what type of ministry to develop. DFPS assists with information, attending meetings, and answering questions about the children and families needing help.

For more information see [Texas Faith-Based Model](#).

Fatherhood Initiative

The goal of the Texas Fatherhood Initiative is to build greater capacity within DFPS to serve fathers by shedding light on effective models of service that engage fathers - even if those fathers do not currently live in the homes of their children or are not actively involved in their children's lives.

For more information see [Fathers Matter: The Responsible Fathering Initiative](#)

The DFPS Fatherhood Specialist compiles a report of the children's cases that do not list a father and will provide that report to SFCS.

Immigration Specialist

Immigration Specialists serve as subject matter experts. The Immigration Specialists identify and track children with immigration needs who are in DFPS care.

See DFPS Safety Net: [Immigration Specialist](#) for more information.

FINDRS Search

FINDRS is short for Family Inquiry Network/Database Research System. Using multiple online resources, FINDRS investigators can perform simple or complex database searches and provide locating information on individuals. You can find the information to request a FINDRS search on the [Submit a Search Request to FINDRS](#) page. On this page you will also access the [FINDRS Resource Guide and Search Request Tip Sheet](#) for additional assistance.

Nurse Consultant

Nurse Consultants consult with and educate DFPS and/or SSCC staff about health care issues related to children on their caseloads. They are licensed registered nurses but do not function in a clinical direct patient care role for the agency. Their primary duties include: providing one on one consultation to caseworkers, reviewing medical records and interpreting medical information, and facilitating referrals to the Forensic Assessment Center Network (FACN).

Forensic Assessment Center Network (FACN)

The Forensic Assessment Center Network (FACN) is comprised of physicians who specialize in child abuse and neglect. They provide case consultation, including medical evaluations, expert witness testimony for court proceedings, and training to DFPS.

When and When Not to Use the FACN

- In most instances, staff consult the FACN about an original incident of abuse that was investigated or assessed.
- For instance, if FBSS/CVS staff is working on a case, identifies additional information about the original incident, and needs clarification from the FACN, it would be appropriate for FBSS/CVS staff to consult the FACN.
- If any staff needs court testimony, staff may consult the FACN to see if the FACN can provide appropriate support.
- It is also appropriate to consult the FACN when staff has general ongoing medical questions pertaining to specific cases.

- Staff may not use the FACN for direct examinations of children or for medication services to children in DFPS conservatorship.

See CPS Handbook policy: [2232 Making a Referral to the Forensic Assessment Center Network](#)

Advocacy for Children's Healthcare Needs

The DFPS Nurse Consultant may advocate for DFPS and/or SSCC staff and children receiving DFPS services by discussing the medical needs of children with medical and special needs in all open cases and making recommendations. The DFPS Nurse Consultant accomplishes this by:

- Participating in staffings.
- Engaging in discussions with the children's direct medical providers.
- Attending meetings, such as Family Team Meetings (FTM), Family Group Conferences (FGC), regional removal staffings, case staffings involving children with medical needs, hospital staffings, child death reviews, etc.

How to Request Assistance from Your DFPS Nurse Consultant

The SFCS Permanency Case Manager may request assistance from the DFPS Nurse Consultant in person, or by phone, email, or using a referral form. Regional staff should consult with the DFPS Nurse Consultant covering their region regarding the best way to make a referral.

For the most current list, visit the [DFPS Nurse Consultants](#). More information on the DFPS Nurse Consultant role can be found in the [Medical Services Resource Guide](#).

Psychiatric Hospital Workers

Psychiatric Hospital Workers serve as advocates, liaisons, and expert coordinators between local psychiatric care centers and DFPS/SFCS staff in providing the best acute psychiatric treatment outcomes for children in DFPS conservatorship.

These staff are solely dedicated to ensuring continuity of care and services for a youth experiencing an acute psychiatric hospital stay, with the aim of reducing the length of the hospital stays and positively impacting the permanency and well-being outcomes for every child. Psychiatric Hospital caseworkers are available to provide consultation and/or liaison support for SFCS Permanency Staff who have a child or youth admitted for an acute psychiatric hospital stay.

See [Psychiatric Hospital Contact Protocol](#), and [Psychiatric Hospital Workers Safety Net](#) page for additional information including specific protocols that must be followed anytime a youth is admitted for psychiatric treatment.

Statewide Parent Collaboration Group and Local Parent Support Group

Statewide Parent Collaboration Group (PCG)

The statewide Parent Collaboration Group (PCG) is a partnership between the Texas Department of Family and Protective Services (DFPS) and parents who have been recipients of DFPS services. The PCG is a venue for gathering and incorporating parental feedback to enhance DFPS policy and practice. SFCS will identify a representative to participate in this group to represent their catchment. SFCS will also aid in recruiting parents to be a part of this group as needed.

The PCG provides:

- Information to staff regarding what parents experience as recipients of DFPS services.
- Recommendations for improvement.

Local Parent Support Group

The local Parent Support Groups (PSGs) are informational support groups for parents receiving family-based safety services (FBSS) or conservatorship (CVS) services. These groups are led by a parent who has successfully navigated the DFPS system, INV/FBSS, and SFCS Director of Community Engagement.

Local PSG meetings are held at least once a month in communities around the state, and provide:

- Information about the DFPS system
- Hope and support
- Engagement and encouragement, including the personal story of the parent leading the group
- A short question and answer session
- Information about various community services

Referrals to Parent Support Groups

It is the SFCS Permanency Case Manager's responsibility to ensure that parents being served by DFPS/SFCS are aware of the local PSGs in their area. Regional fliers and information are available from regional DFPS liaisons.

For additional information please refer to CPS Policy [1143 Statewide Parent Collaboration Group and Local Parent Support Group](#) and [Parent Collaboration Group](#) Safety Net page.

SSI Coordinators

SSI Coordinators are responsible for applying for SSI Benefits for children in foster care who may have a disability. SSI Coordinators also serve as a point of contact with the Social Security Administration regarding children in DFPS conservatorship who are on SSI or RSDI.

See [SSI Coordinators Safety Net Page](#)

State Office Divisions Collaboration

Divisions within CPS State Office will add representatives from SFCS to existing workgroups and communications. Example, SFCS Regional Vice President will be invited to participate in Conservatorship Program Administrator calls and meetings. SFCS will also be added to communication d-lists as needed to ensure they are receiving information related to service families and children.

Additionally, program specialists and subject matter experts from CPS divisions in State Office will be available to provide support and technical assistance to SFCS just as they provide support and technical assistance to regional conservatorship programs.

In-State, Out-of-State, and Out-of-Country Travel for Children in Conservatorship

For information on children traveling in-state please follow the [CPS Policy 6471.1](#) and for children traveling out-of-state please follow [CPS Policy 6471.2](#) in regard to approvals and communications.

For children traveling outside of the United States, prior court approval is needed. [Form 2069 Caregiver Declaration Regarding Out-of-County Travel](#) must be filled out by the caregiver and submitted to the SFCS permanency specialist. SFCS will then follow the steps outlined in [CPS Policy 6474.1](#) by following the SSCC's chain of command. Once all approvals are obtained from SFCS leadership, an Action Memo addressed to the Assistance Commissioner, will then be submitted to DFPS State Office Program

Support, Regina Perez at regina.perez@dfps.texas.gov who will route for final review. Refer to [CPS Policy 6474](#) for additional information.

For additional information see [When a Child or Youth in CPS Conservatorship Travels Resource Guide](#).

Substance Abuse Specialist

Substance abuse specialists support DFPS practice in working with children and families, with substance use disorders throughout each stage of service. They are subject matter experts who assist staff in providing technical assistance relating to protocol, policy, and practice regarding substance use, abuse and treatment.

For more information see [Substance Abuse Safety Net Page](#).

Volunteer and Community Engagement

The Office of Volunteer and Community Engagement (OVCE) is a unit within DFPS under External Relations whose purpose is to ensure that the community is involved and contributes to DFPS work through donations, volunteer work, or partnerships.

Through Community engagement, DFPS staff build positive, ongoing, permanent relationships with stakeholders and community partners that support the DFPS mission and goals and, ultimately, improve outcomes for our children and families.

For contacts, see [Volunteer and Community Engagement Coordinators](#).

Access to Resource Rooms

Resource Rooms (RRs) are stocked with donated items SFCS Permanency Case Managers can access to meet the needs of children and families served by DFPS at the time of removal or initial placement. Independent volunteer groups generously coordinate the many aspects of the rooms. SFCS will have access to these rooms during regular DFPS business hours. DFPS staff who assist with managing access to the rooms will assist SFCS with access as needed. The Community Resource Coordinators can provide additional guidance on the use of the Resource Rooms.

DFPS Point of Contact:

- Amarillo Rainbow Room: Jenn Sugg; Jennifer.Sugg@dfps.texas.gov, 806-340-5762
- Lubbock Rainbow Room: Mistie Hill; Mistie.Hill3@dfps.texas.gov, 806-201-1671
- Faith-Based and Community Engagement Specialist (northern counties) Brittany Porter; Brittany.Porter@dfps.texas.gov, 806-445-2196
- Faith-Based and Community Engagement Specialist (southern counties) Leonor Espinoza; Leonor.Espinoza@dfps.texas.gov, 806-470-5197
- Hale County Rainbow Room (serving some outlying counties) Linda Gail Walker; ktlg@suddenlink.net or lgwalker@meteoreducation.com, 806-292-2361

Access to Conference/Visitation Rooms

SFCS will have access to DFPS conference or visitation rooms during DFPS business hours. When SFCS needs to utilize DFPS visitation rooms, the following applies:

- SFCS will schedule all visitations in advance and can only be scheduled through the Designated Visitation Contact for each office. DVC list is maintained/updated by the Regional DFPS Point of Contact.
- SFCS employees must present their badge and sign in and out at the front desk. SFCS employees will only have access to the visitation room and designated restrooms in buildings.
- Visits can only be scheduled during normal business hours.
- DFPS staff will need to be on site for a visit to occur.
- The DFPS Visitation Contact per office will be responsible for entering the visit into Outlook and ensuring a DFPS staff person is present in the office during the scheduled visit.

Regional DFPS Point of Contact for concerns/updates related to scheduling should be directed to the CPS Regional Director Assistant, Kimberly Pendleton at kimberly.pendleton@dfps.texas.gov

SFCS Point of Contact for concerns related to scheduling to txreg1adminsUPPORT@st-francis.org.

Well-Being Specialist (WBS)

Well-Being Specialists are subject matter experts who assist DFPS/SFCS staff, caregivers, and STAR Health in addressing basic and specialized behavioral and physical healthcare needs for children in all stages of service, including dental, vision, and pharmacy services. Their primary duties include troubleshooting for complex cases related to physical and behavioral health needs, serving as the DFPS Liaison to Superior for STAR Health services and facilitating primary medical needs staffings.

Well-Being Specialist duties and responsibilities include, but are not limited to:

- Troubleshooting for Complex Cases related to Physical and Behavioral Health Needs.
- Participate in placement staffings to assist placement staff with resolving barriers to placement, particularly in cases where children have special physical or behavioral health needs.
- Assist staff and caregivers in resolving medical billing issues.
- Respond to psychotropic medication concerns through education and coordination.
- Ensure there is no interruption or delay in services for the child by coordinating communication between medical providers, STAR Health, and staff.
- Assist workers in obtaining prescription medications for children and young adults.
- Identify medical barriers to placement and request recommendations for on-going treatment through consultation with medical staff.
- Work closely with caseworkers and eligibility staff around Medicaid eligibility issues.
- Assist staff with out of state access to healthcare services for children placed through the Interstate Compact on the Placement of Children (ICPC) process.
- Assist DFPS/SFCS staff and caregivers in addressing any denial of services by STAR Health.

CPS Liaison to Superior/Cenpatico

- Serve as Subject Matter Experts for STAR Health, Medical Consent policy, Medicaid policy, and the “3 in 30” (Texas Health Steps, CANS and 3 Day Medical Exam).
- Respond to STAR Health inquiries, including medical consent confirmations, service management denials, refusal of Texas Health Steps Outreach by Kinship family, Eligibility issues, and outreach to staff.
- Manage provider complaints and quality of care concerns.

Child Specific Staffings

- Coordinate and facilitate Primary Medical Needs (see the Primary Medical Needs Resource Guide) and Medical staffings for any child entering DFPS conservatorship or changing placements, who has specialized medical needs, for the purpose of ensuring the child's medical needs are met.
- Participate in placement staffings with STAR Health and Placement to trouble shoot barriers to placements for medically fragile youth.
- Participate as needed in:
 - Initial Coordination Meeting
 - Circles of Support
 - Family Team Meetings
 - Case Planning Meetings
 - Community Resource Coordination Groups
 - Permanency Roundtables
 - Permanency Conferences
 - Special Needs Staffings
 - Hospital Case Reviews
 - Medical Staffings

For additional information see CPS [Medical Services Safety Net Page](#).

Daycare Services

Foster Child Daycare

When foster daycare services are needed for a child, who is legally from Region 1 and placed within SFCS's provider network, SFCS staff will:

- Collect employment verification and send it to the Regional Daycare Placement Coordinator. Acceptable verification includes:
 - Copies of the caregivers last 3 paystubs or
 - Provide statement from the employer attesting to being employed full-time or working 32 hours a week, or
 - In the case of self-employment, provide a completed Form 1806 Caregiver Statement of Self-Employment Income for the past three months and include the tax ID#/business license # if applicable.
- Provide the [Foster/Relative & Other Designated Caregiver Daycare Verification \(Form 1809\)](#) to each foster parent household each time application for initial daycare services are requested. **Note:** Foster parent e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with foster parent approval in return email).
- Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child's SUB stage.
- Send an email to the DISTRICT1DC@dfps.texas.gov mailbox:
 - Subject line: Children's Name, Caregiver's Name, Case ID, SFCS Unit #, Region #, County Name, # of children related to this referral
 - The body of the email must include the following:
 - SFCS Permanency Supervisor's approval. (The request cannot be processed if the supervisor approval is not included in the email.)
 - A statement that employment verification has been provided and verified
 - Number of hours each caregiver works
 - Indicate if the caregiver is a teacher or works for a school district
 - Gender of each child
 - Attach the following:
 - Completed Daycare Request in IMPACT,
 - Completed [Foster/Relative & Other Designated Caregiver Daycare Verification \(Form 1809\)](#) unless an exception is met as described below

Exception:

For the initial daycare authorization, the requirement for the foster parent to complete the form may be waived if it is determined the verification would prevent an emergency placement in the child's best interest. Such an emergency placement would be one where the placement cannot be sustained or is unlikely to be sustained if the person requesting daycare were required to verify the unavailability of community resources. The waiver of the requirement must be approved by SFCS Program Director and should only be utilized where the foster parent has exercised reasonable diligence but has been unable to verify community resource unavailability. If such a waiver is approved, the foster parent will be required to verify the unavailability of community resources at the time of the first daycare renewal.

The SFCS Daycare Placement Coordinator will complete the Daycare Request in IMPACT. After receiving the daycare request email and the daycare request in IMPACT the CPS Regional Daycare Coordinator will:

- Create the service authorization in IMPACT and send to CCMS.
- Upon receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See [8235.4 Foster Child Day Care](#)

Kinship Child Daycare

SFCS may request Kinship Child Daycare for a child in DFPS conservatorship who is placed with kinship caregivers if:

- DFPS has an approved kinship home assessment on file for caregivers who are not verified or licensed foster care providers.
- The caregivers have signed [Form 0695 Kinship Caregiver Agreement](#).
- The caregivers are employed either inside or outside the home, work at least 40 hours per week and provide employment verification.

Please see CPS Policy [8235.5 Kinship Child Daycare](#) for additional eligibility criteria.

To request kinship daycare SFCS will provide to the DFPS Regional Daycare Coordinator:

- [Foster/Relative & Other Designated Caregiver Daycare Verification \(Form 1809\)](#) to each kinship caregiver household each time an application for daycare services are requested. Note this form is required for both initial requests and renewals. **Note:** Kinship caregiver e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with kinship caregiver approval in return email).
- Verification of caregiver employment. Acceptable verification includes:
 - Copies of the caregivers last 3 paystubs, or
 - Statement from the employer attesting to being employed full-time for 40 hours a week, or
 - In the case of self-employment, a completed Form 1806 Caregiver Statement of Self-Employment Income for the past 3 months
- Send an email to the DISTRICT1DC@dfps.texas.gov mailbox with Subject line: Region, Caregiver's Name, Child's Name, Case ID, SSCC Unit #, County Name
- If only 1 child's name is entered in the subject line, but there are multiple children that requests were completed for, all their names must be provided in the body of the email.
- The body of the email must have the SFCS Permanency Supervisor's approval in the body of the email. If supervisor approval is not included in the body of the email, the IMPACT daycare requests will not be provided.
 - A statement regarding the verification that has been provided for the employment verification and the number of hours each caregiver works (note employment verification must also be provided for renewals).
 - Indicate if the caregiver is a teacher or works for a school district
 - Gender of each child
 - Attach the following:
 - Completed Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) unless an exception is met as described below
- SFCS will complete the Daycare Request in IMPACT

Exception:

For the initial daycare authorization, the requirement for the caregiver to complete the form may be waived if it is determined the verification would prevent an emergency placement in the child's best interest. Such an emergency placement would be one where the placement cannot be sustained or is unlikely to be sustained if the person requesting daycare were required to verify the unavailability of community resources. The waiver of the requirement must be approved by the SFCS Director of Permanency and should only be utilized where the foster parent has exercised reasonable diligence but has been unable to verify community resources unavailability. If such a waiver is approved, the foster parent will be required to verify the unavailability of community resources at the time of the first daycare renewal.

After receiving the daycare request email and the daycare request in IMPACT the CPS Regional Daycare Coordinator will:

- Create the service authorization in IMPACT and send to CCMS.
- Upon receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See [8235.4 Foster Child Day Care](#)

Waiving the Eligibility Criteria for Good Cause

The associate commissioner for DFPS has the authority to waive the eligibility provisions for good cause. The SFCS Director of Permanency or designee may request a waiver for good cause on a case-by-case basis if there is a critical need or a safety concern. Waiver requests should be submitted to DISTRICT1DC@dfps.texas.gov

In any Kinship placement, child safety is the paramount concern. When caregivers do not meet eligibility requirements, staff should seek a waiver if there are any concerns for child safety in the kinship placement.

General Protective Child Daycare

General Protective daycare can be used for a Kinship placement of a child in DFPS conservatorship where the caregivers do not have an approved home study or have not signed the caregiver agreement when:

- The child does not turn 6 by September 1 (there is no before or after school daycare),
- Where all caregivers are employed and work at least 40 hours per week (daycare is available for children up to age 13 for school summer breaks), and
- Caregivers must complete and sign Form 1809 Foster/Relative & Other Designated Caregiver Daycare Verification

When general protective daycare services are needed for a child, who is legally from Region 1 and placed within SFCS's provider network, SFCS staff will:

- Collect employment verification. Acceptable verification includes: Copies of the caregivers last 3 paystubs, or
- Obtain statement from the employer attesting to being employed full-time for 40 hours a week, or
- In the case of self-employment, provide a completed Form 1806 Caregiver Statement of Self-Employment Income for the past three months and include the tax ID#/business license # if applicable.
- Provide the [Foster/Relative & Other Designated Caregiver Daycare Verification \(Form 1809\)](#) to each foster parent household each time an application for initial daycare services are requested.

Note: Foster parent e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with foster parent approval in the return email).

- Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child's SUB stage.
- Send an email to the DISTRICT1DC@dfps.texas.gov mailbox:
 - Subject line: Region, County, Caregiver's Name, Child's Name, Case ID, daycare request date, #1 of (number of children related to this referral)
 - The body of the email must include the following:
 - SFCS Permanency Supervisor's approval. The request cannot be processed if supervisor approval is not included in the email.
 - A statement that employment verification has been provided and verified
 - Number of hours each caregiver works
 - If the caregiver is a teacher or works for a school district
 - The gender of each child

Family Reunification Cases

Where the children are living with their parents there is no work requirement but daycare services during the school year are limited to children who have not reached age 6 by September 1 (no before or after school daycare but daycare is available for children up to age 13 for school summer breaks).

SFCS staff will:

- Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child's SUB stage.
- Send an email to the DISTRICT1DC@dfps.texas.gov mailbox with: Subject line: Children's Name, Caregiver's Name, Case ID, Unit #, Region #, County name
- If only 1 child's name is entered in the subject line, but there are multiple children that requests were completed for, all their names must be provided in the body of the email.
- The body of the email must have the SFCS Permanency Supervisor's approval in the body of the email. If supervisor approval is not in the body of the email, the IMPACT daycare requests cannot be processed.
 - The email must state the gender of each child.

Case Documentation

Documentation and Communication

When a child is placed in substitute care, SFCS staff must document in IMPACT the:

- Contacts, assessments, and services provided to the child and the child's family.
- Key decisions made, and actions taken during care that affect the child and the child's family.

SFCS will be recording contacts in IMPACT in the contact detail page and will follow guidelines seven days to complete documentation.

External Documentation

Primary Case Assignment

Between the Child and Family Referral and the 14th day, SFCS Permanency Case Manager and the removal worker must cooperate in completing and filing all required legal forms and documents, attending court hearings, and ensuring that all required visits take place. If the adversary hearing is delayed, a staffing may be requested by either SFCS or INV/FBSS at 14 days to discuss outstanding removal checklist tasks and responsibilities. The removal worker can request that the SFCS Permanency Case Manager make them secondary on the FSU and SUB Stages if needed.

External Case File Transfer

If CPI or FBSS remove a child, all documents and interviews will be uploaded to OneCase. Any documents uploaded that do not need to be stored in the original physical format are shredded after performing a quality assurance check to verify files were successfully uploaded and reviewed for clarity and completeness. Documents or audio/video material that should not be shredded after upload or cannot be uploaded due to size or format are sent to the Records and Imaging Operations (RIO) using CaseTrack. This should be done within 7 days of the Adversary Hearing taking place. Documents or audio/video that must be kept in original physical format are safely stored and preserved by DFPS Records Management Group (RMG). If a stored document or audio/video is needed in the future, a request for research is submitted through OneCase in IMPACT. **External Case Documentation**

The following documents must be included in OneCase. This list is not all-inclusive. Region 1 may have additional requirements for documents that must be included in the case file. The INV/FBSS worker and SFCS Permanency Case Manager must ensure that as they are obtained, the documents are included in OneCase in IMPACT.

- Birth/citizenship records
- Health records, including a copy of any recent medical exams
- School records
- A copy of the signed foster care assistance application
- Copies of signed court orders, affidavits, and other court documents
- The court's determination that CPS made reasonable efforts to prevent removal, reunify the family or seek other permanency goals for a child
- CPS notice to caregiver of court hearings, PPMs/administrative review. Caretakers include relatives, foster parents, and pre-consummated adoptive parents
- Placement and medical authorizations including medical consent forms
- Designation of education decision-maker

- Temporary Visitation Schedule
- Correspondence
- Other possible documents, such as photographs, authorizations, and letters

INV/FBSS worker will provide the Educational portfolio to the caregiver at the time of placement, with any documents available at that time. The INV/FBSS worker will continue to upload any additional documents to OneCase as they are received.

See CPS Handbook policy [6134 External Documentation](#)

Ensuring Safety

Abuse and Neglect Investigations on Child/ren in Conservatorship

When a report of abuse or neglect is received on child/ren in conservatorship, SSCC staff will need to follow all steps outlined in specific policies.

See policy [4221.1 RCCI Notifying CPS of Alleged Abuse or Neglect in Foster Homes](#) for RCCI's steps and responsibilities in notifying the SSCC of abuse and neglect in foster homes and the SSCC's responsibilities when an intake is Priority None (PN) and a Home History review is completed. See RCCI Screener Email Notification Process Map.

See policy [4221.2 CPS Responsibility and Procedure after Receiving a Notification of Abuse or Neglect by Either RCCI or CPI](#) for the SSCC's responsibility and procedures after receiving a notification on an investigation of abuse, neglect or exploitation of a child in DFPS conservatorship.

If a report involves alleged child-on-child victimization, the SSCC Permanency Case Manager must follow the protocols in [Appendix 4623: Protocol for RCCI Investigations Involving Child-On-Child victimization in Foster Care](#).

If the report alleges child sexual aggression, the SSCC Permanency Case Manager must follow the protocols in the [Sexual Incident Resource Guide](#).

See [6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse](#).

See policy [4221.3 CPS Protocol During an Investigation Involving a Child in Conservatorship](#) for the SSCC's responsibility during an investigation.

RCCI Investigations

The RCCI investigation is a separate record that RCCI maintains. After RCCI concludes the investigation, the SSCC Permanency Case Manager must print and file a copy of the completed investigation in the case file of the child or youth who was the victim.

CPI Investigations

See [CPI & CPS Protocols for Investigations on Open Substitute Care \(SUB\) Stages Resource Guide](#).

See [4221.3 CPS Protocol during an Investigation Involving a Child in Conservatorship](#)

CPS Risk Managers

CPS Risk Managers will facilitate staffings when a new investigation has been opened on an ongoing CPS case.

- If a Case Review is in process or the Risk Manager is involved in training, the Risk Manager will complete at least 5 staffings per week.
- If a Case Review is not in process or the Risk Manager is not involved in training, the Risk Manager will complete 10-13 staffings per week.

Notifications When an Intake is Received

Upon receiving an Intake involving children in conservatorship or on a home in which a child in conservatorship resides, the investigation supervisor will notify by email the:

- SFCS Permanency Case Manager
- SFCS Permanency Supervisor
- SFCS Permanency Director

If the investigation involves a kinship placement, the investigation supervisor must also notify by email the:

- SFCS Kinship Case Manager
- SFCS Kinship Supervisor
- SFCS Kinship Director

These notifications must occur no later than 7 p.m. the next calendar day.

When There Are Risk and Safety Concerns or Danger Indicators

If there are any risk or safety concerns, or danger indicators, then the CPI caseworker will immediately inform the:

- CPI Program director
- Permanency Worker
- Permanency Supervisor
- Permanency Director
- Kinship staff, if assigned

CPI and SSCC staff will coordinate together any need for a new placement. If a new placement is needed, staff must follow policy for notifying legal parties.

If Investigations or Conservatorship would like to complete a staffing that includes the Risk Managers

- A supervisor (or above) may request the staffing by emailing the Risk Manager to notify them of the need for a staffing.
- Prior to the Risk Manager's review, all documentation must be updated with contacts made and history with the family.
- It is the region's responsibility to make sure the documentation is up to date and to notify the Risk Manager once this is complete.

Before the staffing

- At least one person from each stage of service should have read the history prior to the staffing.
- Contact with the families should have been made by each stage of service; though there could be times when this has not occurred due to a lack of cooperation by the family.
- All stages of service should have already been communicating regarding contact and safety.

Timeframes for staffing

- The Risk Manager will work with the field staff to schedule staffing as soon as everyone is available; however, it must be within 14 days of the request.
- Day 1 is the day the request was made to Risk Manager.

Staffing Participants

- CPS Risk Manager
 - if the Investigation is received by CPI in a different region than the CPS case, the Risk Manager in the region for the open CPS case will facilitate the staffing.
- Investigation caseworker & supervisor
- Conservatorship caseworker & supervisor
- Kinship caseworker & supervisor
- Permanency Directors are optional (Notify the Permanency Directors ahead of time by email if there are considerable concerns).

The staffing must be documented by the Risk Manager in the Investigation, FSU, and Kinship stages, and include the following information

- Participants
- Patterns of behaviors and concerns/What are we worried about?
- Identified safety threats along with intervention/services requested
- What is working well?
- Next steps identified/What needs to happen next?

CPI staff will notify the Risk Manager once the Investigation has been completed.

Exceptions

- If the intake report is PN'ed or Administratively Closed, the Risk Manager will not review the report.

Follow up

Once the new Investigation is closed, the Risk Manager will:

- Review contacts in the Investigation and Conservatorship stages to determine if the recommendations were followed.
- If recommendations were not followed and there is no information documented that states reasons why or if there are questions as to why the recommendations were not followed, an email will be sent to the Program Administrator and Program Director.
- If a Single Source Continuum Contractor is involved, an email will be sent to the Permanency Director and Regional Vice President.

Trends & Patterns

- The Risk Manager will send an email to the Program Director and Program Administrator if there are some concerning issues with the history. The Risk Manager will cc their Lead. If a Single Source Continuum Contractor is involved, the Permanency Director and Vice President of Permanency will be included in the email.
- The Risk Manager will cc their Lead. The Risk Manager can participate in unit and regional meetings to share trends and patterns that they see.
- Risk Managers will develop training as it relates to trends, patterns, and concerning issues to provide to field staff.

When Risk Manager is on leave

- Efforts will be made for another Risk Manager to assist in covering the duties of the Risk Manager when they are on leave. However, there may be a need for field staff to determine their own staffings. Every effort will be made to work together with the field when this occurs.

CPS Risk Managers will complete special request Case Reviews.

Request must come from Regional Directors or Program Administrators to the Lead Child Safety Specialists.

- Together the specifics of request can be worked out.

Training/Development

Risk Managers will develop and/or complete training for Regional staff.

- Training will be related to issues regarding trends and patterns found during review of cases.
- Training may be determined in correlation to concerns determined by Regional Leadership.
- Training/Development could be with smaller groups or 1:1 as determined by Regional Leadership; Lead Child Safety Specialist; and Risk Manager.

Requests for specific training/development should be made from the Regional Director or Program Administrator to the Lead Child Safety Specialist and Risk Manager. If a Single Source Continuum Contractor is involved, an email will be sent to the Permanency Director and Vice President of Permanency.

When a Mother in an Open CVS Case is Pregnant

See CPS Policy [6370 When a Mother in an Open CVS Case is Pregnant](#)

The SFCS Permanency Case Manager will coordinate a staffing during the 7th month of the pregnancy to discuss any safety concerns. Participants will include:

- SFCS Permanency Case Manager
- SFCS Permanency Supervisor
- SFCS Permanency Director
- INV/FBSS Removal Supervisor (supervisor during the removal of the other children that are in CVS)
- INV/FBSS Removal Program Director

The SFCS Permanency Case Manager will document the following information prior to the staffing for discussion:

- Case Name
- Date of Staffing
- Participants
- Due Date or Date of Birth
- Age(s) of Other Children
- Father and his role with unborn child/concerns/positives
- Is the mother a current drug user?
- Does the mother have a history of drug use?
- Risk and Safety issues responsible for the open FBSS/ CVS case
- Progress made in current FBSS/ CVS case
- Home Environment
- Risk and Safety issues identified due to pregnancy or birth

Additional decisions or directives will be discussed and added during the staffing. Notes from this staffing will be documented in a contact narrative.

When Children Not in DFPS Conservatorship Are in Immediate Danger

SFCS staff can take immediate action to have a child removed from a dangerous situation when the child is in DFPS Conservatorship due to the authority provided in the TFC authorizing Community-Based Care. See [Legal Basis for Single Source Continuum Contractor to Act on Behalf of CPS](#).

There will be situations when SFCS is working with a family where some of the children in the family are not in DFPS conservatorship. Should the SFCS Permanency Case Manager feel the child(ren) are in immediate danger, the following actions can be taken depending on the severity of situation:

- Staff with SFCS Supervisor for direction
- If at risk of immediate physical harm call 911
- Stay on site and call the local CPS office for assistance from the on duty INV worker
- If it is after hours, refer to the On-Call calendar for INV located in IMPACT.
- Call in a report to Statewide Intake (SWI) and inform that immediate response is needed if have not reached INV/on call
- Submit an intake to SWI for all new safety concerns

Parental Child Safety Placements in CVS Cases

A Parental Child Safety Placement (PCSP) is a temporary out-of-home placement a parent can make when INV/FBSS determines that the child is not safe remaining in his or her own home.

For PCSPs where there are no children in the family for which DFPS obtains conservatorship, a referral to SFCS is not needed.

If a PCSP is considered during a DFPS case to an open CVS case, both the INV/FBSS Program Director and the SFCS Director of Permanency must approve the PCSP before it is implemented. SFCS Permanency Case Manager will update the existing family referral in IMPACT.

Although DFPS does not have conservatorship of the child in the PCSP, that child is a member of the family unit. As such, the child must be seen face-to-face each month, and must be included in the parent's family plan of service, just like a child who remains in the home with the parent.

For PCSP's where at least one child in the family enters conservatorship and SFCS will be providing services to the family, they will also provide services to the child(ren) in the PCSP and the caregiver (as needed) as a part of the family referral.

CPS policy outlined, continues to be applicable including Policy 3214 Required Contacts.

For additional information see:

- [PCSP Resource Guide](#).
- CPS Policy [3210 Parental Child Safety Placement \(PCSP\)](#)
- CPS Policy [6380 Parental Child Safety Placements in CVS Cases](#)

Payment for Temporary Absences from Paid Placement

When a child or youth is temporarily absent from a paid placement, SFCS will follow DFPS policies:

- [1537 Foster Care Payments During Absences from Foster Care Placements](#)
- [4280 Temporary Absence from Paid Placement](#)
- [4281 Criteria for Paying for Foster Care During a Child's Absence](#), and

- [4282 Payment Time Frames](#).

For Foster Care payment approvals, SFCS will follow the same approval process outline in DFPS policy above and [TAC 700.323](#) requiring approval by SFCS staff in positions equivalent to DFPS position identified.

These include:

- SFCS Permanency Supervisor and Permanency Director must approve payment for an absence of not more than 14 days. Note that the supervisor is responsible for notifying the foster care eligibility when an approved temporary absence situations exceeds 14 days. The eligibility specialist will monitor the situation until the end of the temporary absence and update the child's Title IV-E eligibility status.
- SFCS Vice President of Permanency or Vice President of Support Services must approve payment for an absence between 15 and 30 days.
- DFPS Regional Director and Director of Placement must approve payment for an absence between 31 and 90 days.
- In unusual circumstances, payments may continue for an absence of longer than 90 days with prior written approval by the CPS Assistant Commissioner or designee.

Approvals will be documented in comment box on the Temporary Absence page for the specific episode that is approved for payment.

See DFPS [Temporary Absence from Placement Job Aid](#) for instructions on how to complete the IMPACT entry.

When a Child or Youth is Missing from DFPS Conservatorship

SFCS and its provider network will follow the [HHSC Minimum Standards](#) for reporting missing children.

If a child in DFPS's managing conservatorship runs away, is discovered to be missing, or is suspected to have been abducted from a substitute care placement, and the child's whereabouts are unknown, the SFCS Permanency Specialist should follow the entire process identified in the [Locating Missing Children in DFPS Conservatorship Resource Guide](#). Part 1 of the guide addresses steps to be taken when it is discovered a child is missing or runs away and Part 2 covers initial case management actions that must be taken, and Part 3 covers ongoing efforts to recover the child.

- Required notifications include:
 - SFCS coordinator manages the txreg1missingchild@st-francis.org, who serves as the Regional Missing Children Coordinator (RMCC), the point of contact for missing children. The RMCC:
 - Oversees and coordinates missing children issues for the region.
 - Helps to ensure assignment of the Special Investigator.
 - Maintains an Excel tracking spreadsheet listing children and youth from the catchment who are missing.
 - Liaisons with DFPS State Office staff on tracking, data reconciliation, policies and protocols, and other needs.
 - SFCS Permanency Supervisor
 - SFCS Missing Children Mailbox: txreg1missingchildren@st-francis.org
 - DFPS Special Investigations Point of Contact: SIRequestRegion01@dfps.texas.gov
 - Appropriate law enforcement officials in the jurisdiction where the child went missing.

- National Center for Missing and Exploited Children (NCMEC) at the [web portal for child welfare reports or the 24-hour call center: 1-800-THE LOST \(1-800-843-5678\)](#)
- [SFCS Clinical Utilization Team: Txreg1clinicalutilization@st-francis.org](mailto:Txreg1clinicalutilization@st-francis.org)
- [Special Investigation Department via SIRequestRegion01@dfps.texas.gov](mailto:SIRequestRegion01@dfps.texas.gov), after the SFCS Permanency Specialist files a missing person or runaway report with the law enforcement agency (LE) with jurisdiction for the location from which the child went missing and with NCMEC. DFPS Special Investigations notification should include completed CPS Missing Child Preliminary Sheet Form 4100.
- SFCS staff will input any needed information into IMPACT to generate a missing child event. All other persons described in [6151.3 Notification Requirements and Schedule](#).

The SFCS Permanency Specialist must provide these notifications immediately and no later than 8 hours after learning the child is missing.

Discharge from Placement Following Missing Event

- Current placement for a child/youth on missing status can be held/paid for 14 days (five days for emergency shelter placements) with SFCS Supervisor and PD approval (See [DFPS Policy 4281 Criteria for Paying for Foster Care During a Child's Absence](#) for additional requirements).
- If the placement is held the placement will remain open and the absence will be reflected on the IMPACT *Missing Child* tab and the *Temporary Absence* tab.

Recovery of the Child/Youth

The SFCS Permanency Specialist and/or the DFPS Special Investigator (SI), whoever made first contact with the child, must interview the child to do the following:

- Determine the reasons the child was absent from care.
- Get information about the child's experiences while absent from care.
- Screen to determine whether the child was a victim of abuse or neglect, or a victim of sex or labor trafficking, while absent from care.

If the interview identifies the child as a victim of crime, including trafficking, the SFCS Permanency Specialist must immediately, but no later than 8 hours after becoming aware of the victimization, report the situation to local law enforcement and the SI mailbox.

If the child is identified as a victim of abuse or neglect or familial trafficking, the SFCS Permanency Specialist must also notify Statewide Intake to make a report.

If the SFCS Permanency Specialist completes the interview, the Permanency Specialist must share the information with the SI, and if the SI completes the interview, the SI must share the information with the Permanency Specialist .

If the reasons the child was missing from care are revealed during the interview, the SFCS Permanency Specialist must, to the extent possible, address those factors in the child's current and future placement.

SFCS Clinical Utilization Team: txreg1clinicalutilization@st-francis.org

SFCS Missing Children Email Box: txreg1missingchildren@st-francis.org

DFPS Special Investigations Point of contact: SIRequestRegion01@dfps.texas.gov. They will assign appropriate SI.

See CPS Handbook [Policy 6461.5 Caseworker Actions When a Missing Child Returns to Care](#).
[42 U.S.C §671\(a\)\(35\)\(A\)](#)

Notifications for Identified or Suspected Victims of Human Trafficking

If a child in DFPS conservatorship is identified as a Confirmed or Suspected-Unconfirmed victim of trafficking, whether familial or non-familial, the caseworker must assess the child's current service array and refer the child to appropriate services, as needed. Confirmed and Suspected-Unconfirmed victims of trafficking must be referred to the local Care Coordination Team (CCT), where local CCT is in operation. The SFCS Permanency Specialist must document the assessment and referrals in a case narrative.

The caseworker must inform local law enforcement immediately, but no later than 8 hours after identifying or suspecting that a child, youth, or young adult (ages 0 – 20) has become or may become a victim of sex or labor trafficking.

All needs and services identified for the child or youth must be addressed in the child's plan of service.

See Human Trafficking and Child Exploitation for services and resources available to children who are placed in other regions and/or counties.

The caseworker must enter into IMPACT each Sex or Labor Trafficking event that is Suspected-Unconfirmed or Confirmed as a trafficking record on the Trafficking Detail page within 48 hours of making the assessment or receiving notification.

A trafficking event is Suspected-Unconfirmed when specific information regarding the child or youth and the surrounding circumstances creates a reasonable belief that the child or youth has been trafficked. Note: A runaway episode, in and of itself, is not equal to Suspected-Unconfirmed.

A trafficking event is Confirmed when evidence supports the conclusion that the child or youth has been trafficked. Note: The supporting evidence must be more than just an allegation or suspicion and does not have to be a direct outcry from the child or youth.

Each trafficking event should only have one entry on the Trafficking Detail page, unless a Suspected-Unconfirmed event is later confirmed, in which case there would be both a Suspected-Unconfirmed and a Confirmed event listed.

For additional information see [6462 Confirmed or Suspected Victims of Human Trafficking](#)
See for more information US Government Code: [42 U.S.C §671\(a\)\(9\)\(C\)](#), [42 U.S.C §671\(a\)\(34\)\(A\)](#) and [42 U.S.C. 5106a\(b\)\(2\)\(B\)\(xxiv\)](#)

DFPS Protocol for Care Coordination

On February 11, 2020, the DFPS Protocol for Care Coordination (CCT) was launched. The DFPS Protocol for Care Coordination outlines the agency's expected and coordinated response when working with a specific Texas Care Coordination Team. All staff are required to comply with the Protocol for Care Coordination when a child is placed in a county with an active Care Coordination Team.

The Protocol for Care Coordination addresses how DFPS collaborates with other anti-trafficking partners in identification and recovery of victims and subsequent service provision using the following:

- [Care Coordinating Teams](#)
- [Advocate Agencies for Human Trafficking and Commercially Sexually Exploited Youth](#)

The DFPS Protocol for Care Coordination excludes: Bexar, Dallas, Harris, Travis and Tarrant counties who are operating under the [DFPS Human Trafficking Response Protocol](#)

Youth Recovery Meeting/Wrap Around Meeting

A Youth Recovery Meeting is to engage a child/youth returning from runaway status and identifying support in creating a plan to address the child/youth's fears and concerns and increase the likelihood of him or her remaining in a safe placement.

Process

As soon as a child or youth in foster care is located and back in DFPS care, the SFCS Permanency Specialist and Permanency Supervisor will immediately notify all legal parties (CPS Attorney, CASA, Ad-Litem, Legal Parents and Parent's Attorney(s)).

Notification will also be sent to txreg1missingchildren@st-francis.org so the Family Engagement Staff can offer and organize a Youth Recovery Meeting. During the Youth Recovery Meeting, the team will work with the child/youth to process the reason for running away, concerns about their experience in foster care, and any solutions to prevent him or her from running away in the future. If the youth has a Care Coordination Team Meeting, and they participate in the meeting when they are recovered, that this counts in place of the Youth Recovery Meeting.

These meetings will be scheduled as soon as possible. The goal is to hold the meeting within 24 to 48 hours from the time the child/youth returned to DFPS Care.

The following individuals should be invited to participate in these meetings:

- Child/Youth
- SFCS Permanency Specialist
- SFCS Permanency Supervisor
- CPS Legal
- SFCS Legal
- Attorney Ad-Litem
- CASA
- Guardian Ad-Litem
- Legal Parents (if no Termination of Parental Rights (TPR))
- Parent Attorney(s)
- Placement (if one has been secured)
- PAL
- Youth Specialist
- Child Advocate, if assigned

Subsequent Meeting

In the event a child/youth runs away after their initial Youth Recovery Meeting/Wrap Around Meeting, the Permanency Specialist, Permanency Supervisor, and Permanency Director should evaluate the previous goals and tasks developed to assess whether another meeting should be held to develop new strategies. If follow-up is not required for the goals and tasks of the previous Emergency Transition Plan Meeting

another meeting may not be necessary. The child welfare team should make attempts to get the child/youth to recommit to the current plan and continue making efforts toward accomplishing the goals and tasks.

For additional information see:

- [Placement For Children/Youth From Other Regions That Have Been Missing And Are Recovered In An SSCC Catchment Area Or SSCC Children/Youth Recovered In Legacy Regions](#)
- [6460 When a Child or Youth is Missing from CPS Conservatorship](#)
- [6461.5 Caseworker Actions When a Missing Child Returns to Care](#),
- [6462 Confirmed or Suspected Victims of Human Trafficking](#)
- [Locating Missing Children in CPS Conservatorship Resource Guide](#)
- [Runaway Prevention Resource Guide](#)
- [Runaway/Missing Youth and Victims of Human Trafficking Protocol Resource Guide for Bexar, Dallas, Harris, Tarrant, and Travis Counties](#).
- Appendix: [Utilizing Background Checks Unit & DFPS Special Investigators](#)

Responsibility for Contact and Services Across Regional Lines

When a child or youth resides outside of the region that has legal jurisdiction, DFPS/SFCS can request to maintain contact, provide services, and monitor the child's or youth's safety:

- Courtesy supervision
- Courtesy contact with incarcerated parent
- Local Permanency Supervision
- Kinship services including home assessments and addendums
- Kinship Adoption Studies
- Adoption Preparation Services
- Adoption Supervision Service

Courtesy Supervision

When a CPS/SFCS unit provides courtesy supervision, the unit providing the supervision must:

- Maintain the required contacts with the parent and child; and
- Follow the procedures in [6411 Contact with the Child](#) and its sub items.

CPS/CPI units outside Region 1 area may make request for supervision assistance from SFCS and likewise, SFCS may make request for supervision assistance from CPS units outside of the Region 1 area.

For additional information see:

- [6314.1 Coordination Between Primary Caseworker and Courtesy Supervision Caseworker](#) and all of its sub items.
- [6320 Conducting Visits with the Family](#)

CPS/SFCS can request courtesy supervision when a parent is residing outside of the region and/or when a child or youth in conservatorship is placed outside of the region that has legal jurisdiction and is residing with a parent.

For additional information see [6314 Services to Children and Parents across Regional Lines](#).

Local Permanency Supervision

Local Permanency Case Manager are secondary caseworkers for children and youth placed outside the region that has legal jurisdiction but are not placed with a parent. The Local Permanency Case Manager acts as an extension of the primary caseworker and aids the primary caseworker in ensuring that the child or youth's needs for safety and well-being are being met. The Local Permanency Case Manager also works to ensure that the child or youth achieves permanency.

See CPS Handbook policy: [6412.2 Local Permanency Supervision](#)

Kinship Home Assessment Requests

Before CPS can place a child with a kinship caregiver, or recommend to the court that the child be placed, the child's caseworker or a contracted provider must assess the caregiver's suitability by completing:

- A written assessment of a kinship caregiver's home, using [Form 6588 Kinship Caregiver Home Assessment](#).
- A risk assessment, using form 2049.

Either SFCS staff or a contractor may complete the written home assessment and risk assessment.

Please see [6623 Completing a Risk Assessment, and a Written Home Assessment of the Kinship Caregiver](#) for additional information regarding Kinship Home Assessments.

Requesting Services Across Regional lines from SFCS

[Request for Kinship, Conservatorship and Adoption Services \(aka Universal Referral Form 2077\)](#) is used to request Kinship, Conservatorship and Adoption services. The SFCS mailbox identified to request all case assignments is txreq1courtesyservices@st-francis.org SFCS will assign the case within 2 business days and notify the caseworker from the sending region of the caseworker assigned.

Please see the Request for Kinship, Conservatorship and Adoption Services (aka Universal Referral Form) instructions for additional information.

SFCS Requesting Services from Another SSCC Catchment or DFPS Region

SFCS will also use the [Request for Kinship, Conservatorship and Adoption Services \(aka Universal Referral Form 2077\)](#) to request services from other catchments or DFPS Regions. Please follow the instructions on the [Form 2077 Instructions](#) for additional information regarding completing and submitting the form to the region services are requested from.

Payment for Purchased Client Services/Home Assessments

Primary and secondary case management staff must work closely together to ensure the coordination and payment of purchased client services to family members and caregivers across regional lines.

Payment for Purchased Client Services

If...	Then...
<p>SFCS primary case manager requests purchased client services (i.e. counseling) for a parent or caregiver who resides in another DFPS Region</p>	<ul style="list-style-type: none"> • The SFCS primary case manager will manage the payment for services through SFCS's billing system. • CPI, CPS courtesy, LPS, and KDW staff will NOT initiate a Service Authorization (form 2054) for any purchased client services for family members served by SFCS.
<p>Another DFPS Region requests purchased client services for a parent or caregiver who resides in an SSCC catchment area</p>	<ul style="list-style-type: none"> • The primary CPS/CPI case manager will issue payment for services by submitting a Service Authorization (Form 2054 in IMPACT with the legacy provider's service code.

Payment for Kinship Home Assessments

If...	Then...
<p>SFCS primary case manager requests a kinship home assessment on a caregiver that resides in another DFPS Region</p>	<ul style="list-style-type: none"> • The SFCS primary case manager will manage the payment for services through the SFCS's billing system. • CPI, CPS courtesy, LPS, and KDW staff will NOT initiate a Service Authorization (form 2054) for any purchased client services for family members served by SFCS.
<p>Another DFPS Region requests a kinship home assessment on a caregiver who resides in an SSCC catchment area</p>	<ul style="list-style-type: none"> • The primary CPS/CPI case manager will issue payment for services by submitting a Service Authorization (Form 2054) in IMPACT with the legacy provider's service code (68A) and selecting the SSCC as the provider.

Payment for Purchased Client Services When No Family Referral is Present

There may be times when the Department has PMC of a child and there is no longer a FSU or FRE stage open and there is a need for a purchased client service for the family or child that is not covered by Star Health or other means. An example may be a relative is being considered for placement and requires a home assessment. These and other purchased client services are typically covered by the 71 series of service authorizations that are opened for the case at the time of the referral. IMPACT will now allow for individual 71 series service authorizations to be opened in the SUB stage to cover the costs for services when needed.

Extraordinary Medical Conditions

Enrollment and Participation in Certain Drug Research Programs

[Texas Family Code §266.0041](#) requires a court order before a child in DFPS conservatorship may enroll or participate in a drug research program, unless the person enrolling the child is the child's parent and has been authorized by the court to make medical decisions for the child.

In the [Medical Services Resource Guide](#), see *Enrollment and Participation in Certain Drug Research Programs*.

See CPS Policy [11710 Enrollment and Participation in Certain Drug Research Programs](#)

End of Life Medical Decisions

If a child in DFPS conservatorship has been diagnosed with an "irreversible condition" or a "terminal condition" and medical professionals suggest withholding or withdrawing life-sustaining treatment, the regular process for medical consent does not apply.

See CPS Policy [11720 End of Life Medical Decisions](#) for specific guidance and requirements for approvals.

Organ Donation/Anatomical Gifts

There are specific requirements regarding organ donation in the event a child dies while in care.

Please see CPS Policy [11730 Organ Donation/Anatomical Gifts](#) for additional guidance.

Pregnancy

Please see CPS Policy [11740 Pregnancy](#).

Legal Services

SFCS will assume responsibility of court-related duties regarding the child, including but not limited to:

- Providing required notifications or consultations.
- Preparing court reports.
- Attending judicial and permanency hearings, trials, and mediation.
- Complying with applicable court orders.
- Ensuring the child is progressing toward the goal of permanency within state and federally mandated guidelines.

For additional information see:

- [CPS Policy 5000](#) regarding Legal Services.
- Appendix: [Subpoena Protocol for SSCC Workers](#).

Process For Transferring A Legal Case Between SFCS and DFPS

If...	Then...
A Court/Judge orders a case to transfer from an SFCS region to a DFPS region	<ul style="list-style-type: none"> • The SFCS Primary Case Worker notifies their chain of command up to the SFCS Regional Vice President. • The SFCS Regional Vice President notifies the receiving region's DFPS Program Administrator of case transfer by email within 2 business days.
A Court/Judge orders a case to transfer from a DFPS region to an SFCS region	<ul style="list-style-type: none"> • The DFPS primary caseworker notifies their chain of command up to the DFPS Program Administrator. • The DFPS Program Administrator notifies the SFCS Regional Vice President of case transfer by email within 2 business days.

The sending region's Regional Vice President /DFPS Program Administrator or designee must set up a case staffing/transfer between the sending and receiving region within 5 business days of notification.

Attendees should include Permanency/Program Directors, Supervisors, and case manager/caseworkers.

- Legal representation for both the sending and receiving counties (county attorney or ADA) should be notified and invited to staffing.
- Staffing should result in a plan with identified tasks, timeframes, needs of children, youth and family members, and who will be responsible for them.
- To ensure that no deadlines are missed, the plan should include when and who will schedule the next required court date in the sending county until the case is legally accepted in receiving county.
- All participants will receive a copy of the agreed upon plan developed from the staffing (the sending region should be responsible for taking notes) and a copy of the transfer order if available.

The Permanency Director/DFPS Program Director for the receiving region maintains communication with the attorney representing DFPS for the receiving region to ensure the case is received and no required timeframes for hearings are missed. Once the case is received by the court, the receiving Permanency

Director /DFPS Program Director will notify the Regional Vice President and DFPS Program Administrator that the case has transferred courts.

A case is not officially transferred from one region to another until:

- A judge signs an order to transfer and the court file is received by the receiving county and docketed for a court hearing.
- The Permanency Director/DFPS Program Director for the receiving region must regularly follow up with the attorney to determine if the case has been received.
- The case is reviewed by the sending and receiving supervisors to ensure that all agreed-upon tasks have been completed. Once the supervisors agree that tasks are complete the case is reassigned to the receiving region in IMPACT. The paper case file must be sent to receiving region within 1 business day after the case is assigned to the receiving region in IMPACT.
 - When the case transfers the receiving region will need to update the following in IMPACT:
 - Update the Legal Status to reflect the County, Court and Cause Number the case transferred to;
 - Enter a Legal Action for the Transfer of Jurisdiction.
 - If the case is transferring from SFCS to a CPS/SSCC region, then SFCS staff will need to end the SSCC child and family referrals as well as the SSCC Service Authorizations in IMPACT before assigning the case to the receiving CPS/SSCC staff.

Paying for Court-Related Services

Resources to cover legal expenses varies by Individual County in the Region 1 area. Examples of legal services which may incur a fee from the service provider include, but are not limited to:

- Mediation
- Out of State service
- Private Process service
- Court Reporter
- Court transcripts
- Witness travel
- Expert witness testimony
- Citation by Publication postings

Note DNA Testing needs are referred to the Attorney General's office.

For any legal services that are required by the court and not covered through Purchased Client Services funding, STAR Health, or county funds, SFCS will decide, in coordination with the Contract Administration Manager (CAM), on how the services will be paid.

If the decision is that DFPS will pay the provider, SFCS will submit the following items as soon as possible to the CAM:

- Detailed description of the specific legal service that includes the court information, cause number, and case ID.
- Copy of the invoice or bill from the person or entity providing the service.

The DFPS CAM will create a requisition for payment through CAPPs Financial.

Court Orders for Healthcare Related Treatment and Services

When a court orders a healthcare service, treatment or testing for a child in DFPS conservatorship, or enters an order that declines to follow the recommendation of a health care professional who has been consulted regarding a health care service, procedure, or treatment for a child in DFPS conservatorship, SFCS Permanency Case Manager will take the following steps immediately:

- Notify the SFCS Permanency Supervisor about the order. The SFCS Permanency Case Manager and supervisor will notify the attorney representing DFPS/SFCS if there is a concern that the order needs to be appealed in any way.
- Notify the regional [Well-Being Specialist](#) and provide a copy of the written order when it is received.

Completed court orders will be escalated by the Well-Being Specialist to STAR Health. They will be tracked with communication going back and forth between a STAR Health Liaison and the Well-Being Specialist. Note, verbal court orders will not be accepted by STAR Health and court orders must be signed to be considered complete.

Exceptions: Court-Ordered Medical Services Not Covered by Medicaid or STAR Health

If the judge orders a child to undergo a specific type of medical service, treatment, or testing that may not be covered by Medicaid, SFCS will take the following steps:

- Immediately inform the attorney representing DFPS/SFCS (within 3 days of the court's rendering of the order) that SFCS cannot guarantee a doctor will agree to order the specific service, treatment, or test. This allows the attorney to take immediate action in court to inform the judge or pursue legal remedies, such as asking the judge to reconsider the order.
- If and when the court order is issued, inform the child's Medical Consenter (if it is someone other than the SFCS Permanency Case Manager) about the order, and direct him or her to:
- Ask the doctor to order the service, treatment, or test at the child's next visit with a STAR Health general practitioner.
- Make sure the doctor knows that DFPS/SFCS has been told that Medicaid does not generally cover the service, treatment, or test.
- Encourage the doctor to request prior authorization and confirm medically necessary coverage before ordering the service, treatment, or test.

Doctor Refuses to Order Medical Services, Treatments, or Tests

If the doctor refuses to order the service, treatment, or test, SFCS Permanency Case Manager will immediately get the doctor to provide written documentation of the doctor's refusal.

SFCS Permanency Case Manager will provide the doctor's documentation to the attorney representing DFPS/SFCS. Ensure that the documents are filed with the court and provided to the parties in the case.

SFCS Permanency Case Manager will file the documentation in the case record.

Doctor Orders Medical Services, Treatments, or Tests

If the doctor orders the service, treatment, or test, SFCS Permanency Case Manager will notify the supervisor and inform the attorney. At the next court hearing where medical care is discussed, SFCS Permanency Case Manager will report back to the judge the results and any subsequent medical care the doctor prescribes.

When Medicaid Does Not Pay

When Medicaid will not pay for the service, treatment, or test, SFCS will decide, in coordination with the CAM, how the provider will be paid. If the decision is that DFPS will pay the provider, the SSCC will submit the following items as soon as possible to the CAM:

- Signed copy of court order directing that the child be provided the specific medical service, treatment, or test.
- Proof that Medicaid denied paying the claim (an email from the provider is sufficient).
- Copy of the invoice or bill from the laboratory or provider.

The DFPS CAM will create a requisition for payment through CAPPs Financial.

When Medicaid Does Pay

If Medicaid does pay for the service, treatment, or test for a child, no documentation needs to be sent.

Follow this process for all new judicial orders in any region, at any kind of hearing, directing specific medical care that may not be a part of STAR Health coverage.

Indian Child Welfare Act (ICWA)

If a Conservatorship case involves a Native American Child, the Indian Child Welfare Act (ICWA) may apply. If so, the legal requirements change dramatically.

Please see [CPS Policy 5740 Indian Child Welfare Act \(ICWA\)](#) for additional information.

Notice Requirements for Elevating Certain Court Orders

CPS regional management, legal representatives, and DFPS state office, must receive timely notification about court orders that may create problems for the CPS program or may require immediate legal action. SFCS staff will ensure notices to Region 1 Managing Attorney and cc Regional Director.

See CPS Policy [5311 Notice Requirements for Elevating Certain Court Orders](#).

The types of orders that require timely notification include, but are not limited to, the following:

- Court orders that directly contradict federal law or regulation, or state law or regulation, including orders to place a child in violation of Child Care Licensing's rules on background checks, or ordering DFPS to use or conserve SSA benefits in a certain way or to release the benefits to a specific adult.
- Court-ordered placements that fit the criteria explained in [5313](#) Notice Requirements for Court-Ordered Placements with Unapproved Facilities.
- Court orders that place a child in violation of the Interstate Compact on the Placement of Children (ICPC), dismiss DFPS from a lawsuit in violation of the ICPC, or otherwise violate the ICPC, as explained in [5314](#) Court Orders That Violate the Interstate Compact on the Placement of Children.
- Court orders that direct DFPS to use its appropriated funds in an unauthorized manner, such as an order to pay medical expenses for a child in detention; or an order to pay permanency care assistance, adoption assistance, or kinship reimbursement payments, to persons who do not meet the eligibility criteria.
- Court orders that contain findings that indicate DFPS failed in a case to take a type of action required by federal law or regulation, or state law or regulation, such as a finding that DFPS failed to make reasonable efforts to prevent the removal of the child or a finding that DFPS failed to make reasonable efforts to finalize a permanency plan.

- Court orders that may set a precedent for other CPS cases that could be problematic for DFPS to comply with or that conflict with DFPS policy, including but not limited to:
 - Court orders directing a specific service level for a child.
 - Standing orders specific to one jurisdiction.
- Court orders that direct an action that conflicts with DFPS policy or DFPS' recommendation in the case.
- Court orders that may result in a threat to child safety.

Services to Older Youth in Care

Birth Certificates for Youth

See [1520 Obtaining Certified Birth Certificates](#).

Credit Checks for Youth

Every youth in the conservatorship of DFPS age 14 up to age 18, receives a copy of their consumer credit report annually. In addition to ensuring that a youth's credit is checked, and any discrepancies are found and disputed, the SFCS Permanency Case Manager is also required to share the credit report with the youth, provide the youth with a copy, and explain the importance of maintaining good credit.

For additional information see [Credit Reports for Youth on the DFPS Safety Net](#).

Transitional Living Services

SFCS will work to prepare older youth in DFPS conservatorship who are transitioning from substitute care to adulthood. SFCS, in general, will be responsible for all the provision of transitional living services for older youth.

For Additional information see:

- [CPS Policy Section 10000: Services to Older Youth in Care](#)
- [Transitional Living Services Resource Guide](#)
- [Extended Foster Care Resource Guide](#)
- [Trial Independence and Return Resource Guide](#)
- [Preparation for Long Term Care and Support Resource Guide](#)

Transition Plan Development

Beginning when the youth turns age 14, the transition plan is enhanced over time until the youth leaves substitute care or ages out of care. The plan must address the issues that are important for the youth as he or she leaves care and enters the adult world.

See CPS Handbook policy [6252 Permanency Planning Meetings for Youth 14 and Older](#)

During the 90 days before the youth ages out of care, whether at 18 or a later age in extended foster care, SFCS must provide the youth with assistance and support in developing a transition plan that:

- Is personalized at the direction of the youth
- Includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services

- Includes information about the importance of designating another individual to make health care treatment decisions on behalf of the youth, if the youth becomes unable to participate in such decisions and the youth does not have, or does not want, a relative who would otherwise be authorized under state law to make such decisions
- provides the youth with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under state law
- Is as detailed as the youth may elect

Requests for assistance in transitional plan development for youth who are placed but not legally from the catchment area should be coordinated with the youths Primary Case Worker.

If SFCS Permanency Case Manager is not providing services to the youth, please follow the process for [requesting services across regional lines from SFCS](#). On the [Form 2077](#) complete request for Local Permanency Services and indicate that the service requested is Transitional Plan Development assistance.

Point of Contact: txreg1pal@st-francis.org

Preparation for Adult Living (PAL) Life Skills Assessments and Training

SFCS will ensure the development and delivery of PAL Life Skills Training for eligible youth:

- All youth placed in DFPS conservatorship within the catchment area paid and non-paid placements (including kinship) and
- All youth from Region 1 catchment placed in paid and non-paid placements (including kinship) outside the catchment.

For eligible youth, please see policies [10211.1 Targeted Priority Population](#) and 10211.2 Additional Eligible Population.

As part of the delivery of PAL training, the SSCC will ensure the arrangement for the Casey Life Skills Assessments and its interpretation to be shared and discussed with the youth and caregiver. The SSCC will ensure that experiential and community-based learning is included in all PAL training and services.

CPS Handbook policy [10222 Life Skills Training](#).

SFCS PAL Email Box: txreg1pal@st-francis.org

Please refer to [PAL Life Skills Assessment and Training Flow Chart](#) for additional guidance. Please note that SFCS is now responsible for actions previously identified as CVS or PAL responsibilities.

Coordination Required When Young Adults Are in Extended Foster Care and Return to Foster Care

SFCS will identify young adults from Region 1 for either Extended Foster Care or Return to Foster Care programs.

Note: Youth who desire to return to foster care during their 6- or 12-month trial independence period are in Extended Foster Care. Youth who desire to return to foster care after their Trial Independence period are considered youth in Return to Foster Care.

Extended Foster Care

When a young adult from Region 1 is interested in staying in extended foster care, SFCS will:

- Follow their Case Management Policy when serving young adults in these programs.
- Assist the young adult with completing the [Voluntary Extended Foster Care Agreement \(Form 2540\)](#).
- Provide the completed [Voluntary Extended Foster Care Agreement \(Form 2540\)](#) to the CPS Foster Care Eligibility Specialist.

Supervised Independent Living

Supervised independent living (SIL) placement settings are living arrangements offered through the Extended Foster Care program that allow young adults to reside in a less restrictive, non-traditional foster care setting while continuing to receive casework and support services to become independent and self-sufficient.

To be eligible for SIL, young adults must be able to live independently in a setting with minimal to no supervision. Through conversations with the young adult and the initial assessment, the young adult will be placed in the setting which best meets his or her needs. In order to maintain placement in the SIL program, young adults must comply with the [Voluntary Extended Foster Care Agreement \(form 2540\)](#). Young adults can move through the settings offered based on behaviors, enhancement of skills, or overall progress made in the young adult's current setting. The SIL case managers will maintain documentation of the young adult's progress in case notes, as well as in the subsequent service planning meetings, which will be filed in the young adult's case record.

SFCS will continue to follow established protocol regarding SIL placements for Youth Adults being served that are from a legal county within the Region 1 catchment area and those that are from another legal county that desire SIL placement in the Region 1 area.

Please refer to [Supervised Independent Living \(SIL\) Flow Chart](#) for additional guidance. Please note that SFCS is now responsible for actions previously identified as CVS or PAL responsibilities.

Return to Foster Care

A young adult who was in DFPS conservatorship when turning 18 and leaves foster care may return to Foster

Care at any time prior to the month before the young adult's 21st birthday, provided the young adult meets the requirements in [10420](#) Qualifying for Extended Foster Care, or at any time prior to the month before the young adult's 22nd birthday if they are regularly attending high school or in a program leading to a high school diploma or General Education Diploma (GED). Return to Foster Care does not include young adults who are in Trial Independence (see [10510](#) Trial Independence).

Referrals for a young adult who wants to return for Extended Foster Care may include young adults whose legal case was outside the Region 1 catchment area, but the young adult now lives in the Region 1 catchment area. Young adults residing in Region 1 who not from the Region 1 area that indicate to their PAL Coordinator a desire to Return to Care in Region 1 will be prescreened for their sincerity and eligibility for returning to care and then referred to the SFCS Independent Living Specialist.

If placement is found:

SFCS Permanency Case Manager will:

- Ensure the young adult with completes the [Voluntary Extended Foster Care Agreement \(form 2540\)](#)
- Provide completed [Voluntary Extended Foster Care Agreement \(form 2540\)](#) to the CPS Foster Care Eligibility Specialist

SFCS will create, maintain and share an accurate log for auditing purposes of young adults discharged with the regional CBC Administrator.

National Youth in Transition Database (NYTD)

NYTD Outcomes Survey

The NYTD survey is a federal survey that states administer to certain youth and young adults at age 17, 19 and 21.

SFCS Independent Living Specialist must track survey completion, assist youth with taking the survey and enter survey responses in IMPACT according the federal survey reporting requirements.

- The NYTD Information Page in IMPACT alerts SFCS about youth from their catchment area who have been identified to take the survey, status of the survey, and due date of the survey during each survey period (A or B).
- SFCS will check the NYTD Information Page in IMPACT to determine which of their assigned youth needs to take the survey.
- SFCS will take the lead in notifying the identified youth or youth adult their survey is due, obtain survey responses and enter their survey responses in IMPACT.
- CPS State Office will monitor SFCS's NYTD survey completion progress and will send out periodic information about the status of SFCS's survey completion rate.
- When requested, SFCS will update CPS State Office on progress and plans to get surveys completed by period data entry due dates.
- SFCS will maintain current contact information in IMPACT for youth placed within their provider network.

NYTD Data and Information Errors

- SFCS must check the NYTD Information Page in IMPACT for DATA and INFORMATION errors in IMPACT and make corrections and updates.
- DATA and INFORMATION errors correspond to surveys and services provided during the reporting period.
- When requested, SFCS will update CPS State Office on progress and plans to get DATA and INFORMATION errors completed by period data entry due dates.
- Details on correcting data and information errors can be found in the NYTD Manual in SMILEY.

NYTD Services

- SFCS will enter services provided to successfully transition youth to adulthood in the Preparation for Adult Living (PAL) stage in IMPACT.
- Services entered in IMPACT must be either paid for or provided by SFCS.
- When requested, SFCS will update CPS State Office on progress and plans to get services entered by period data entry due dates.
- Details on entering services in IMPACT can be found in the NYTD Manual in SMILEY and in the PAL Staff Manual.

See the [Transitional Living Services Resource Guide](#), NYTD Manual in SMILEY and PAL Manual for information on completing the survey, correcting data and information errors and entering services.

PAL Aftercare Services

PAL Aftercare services and programs are available for young adults from Region 1 and the resources for these services will be shared between SFCS and DFPS. Please see [10200 Preparation for Adult Living \(PAL\)](#) for additional information regarding these services and their eligibility requirements.

To access, SFCS Independent Living Specialist will complete a Service Authorization (2054) to the contractor providing the service and the contractor will bill DFPS directly.

Permanency Care Assistance

When a Region 1 child/youth's permanency plan calls for a change to permanent managing conservatorship by a relative or fictive kin (regardless of the relative/fictive kin's location) with intent to pursue permanency care assistance, SFCS staff must follow current CPS Handbook policy [6680 Permanency Care Assistance](#).

When a prospective kinship permanent managing conservator is nearing completion of the required six consecutive months as a verified foster parent, the child's SFCS Permanency Case Manager must begin working with the caregiver to apply for assistance.

The SFCS Permanency Case Manager must follow current [6685 Applying for Permanency Care Assistance](#).

SFCS Permanency Case Manager will, at least 90 days prior to PMC transfer date:

- Request needed documentation to complete level of care if the level of care is moderate or higher. Documentation includes:
 - Last 30 days documentation: therapy notes, incident reports, daily notes, school reports if any.
 - CANS Assessment.
 - For children/youth with emotional disturbance: Psychological or psychiatric evaluations, completed within 14 months.
 - For children/youth with primary medical needs: An evaluation by a physician (MD), physician's assistant, or nurse practitioner, describing medical conditions or disabilities.
- Request LOC review from Youth for Tomorrow (YFT).
- If the YFT LOC review results in a Moderate LOC or above, email the YFT Utilization Review and Reauthorization Service Form (completed by YFT) to CPS Fed/State Support Program Specialist kaitlyn.wane@dfps.texas.gov upon receipt of the form from YFT.
- Send the completed PCA packet to the eligibility specialist no later than 30 days prior to the transfer of PMC to the caregiver, as there must be enough time for eligibility to be determined and a PCA signed with the family prior to transfer of PMC. The eligibility specialist will determine if the child is eligible and if so will forward the packet to the PCA/ADO negotiator.

Steps for Permanency Care Assistance Packets

Eligibility requirements for PCA

- The caregiver must enter into a permanency care assistance agreement with DFPS on behalf of the child prior to becoming the child's permanent kinship conservator.

- The child is eligible to be the subject of a permanency care assistance agreement if all the following eligibility criteria apply to that child:
 - The child's prospective permanent kinship conservator:
 - is related to the child by consanguinity or affinity **or**
 - has had a longstanding and significant relationship to the child prior to SFCS placing the child in the home of that person **and**
 - must have been eligible for the receipt of foster care reimbursements on behalf of the child who is the subject of the permanency care assistance agreement for at least six consecutive months prior to the effective date of the permanency care assistance agreement.
 - The child has demonstrated a strong attachment to the prospective kinship permanent conservator and that person has a strong commitment to caring permanently for the child.

SFCS Tasks to Complete Before Transferring PMC

- At the time the permanency care assistance agreement is signed, SFCS has determined that neither adoption nor reunification are appropriate permanency options.
- If the child will be at least 14 years of age at the time the permanency care assistance agreement is signed, SFCS has consulted with the child about the prospective permanent kinship conservator's commitment to assume permanent managing conservatorship of the child.
- When the child is nearing the completion of being in the foster home for 6 consecutive months, SFCS will prepare a complete PCA packet for each child using the [Permanency Care Assistance Checklist/Guide-Form 2124](#).
- The checklist requires a SFCS Supervisor's original signature and date for each child.
- Original signatures & dates are required on the family's forms ([PCA Request/Form 2115](#), [PCA Worksheet/Form 2116](#), and [Kinship Family Resources/Form 2118](#), found on [Smiley Forms webpage/CPS/Permanency Care Assistance](#)).
- If a sibling group, a complete set of forms is required for each child. Scans or faxes are not accepted.
- SFCS will gather source documentation needed for each child's packet (reference PCA Checklist/Guide).
- The PCA/AA negotiator will receive the required information from the eligibility specialist to create the FAD stage and will also request a Vendor ID Number. The PCA/AA negotiator will assign the FAD stage to the SFCS Permanency Data Supervisor Sherry Sanford once the FAD stage is created.
- In the Substage, PCA tab, In the PCA stage complete a PCA application for each child in IMPACT and submit to the assigned Eligibility Specialist. Cases are assigned to the Eligibility Specialist by county. Refer to Foster Care Eligibility Coverage Map. The PCA application must be completed at the time the PCA packet(s) are emailed to the SFCS Adoption Mailbox.
- SFCS will ensure the Authorized Level of Care (ALOC) listed in IMPACT is correct and accurate for child.
- SFCS will provide the complete packet(s) to SFCS Permanency Supervisor for final review at least 30 days prior to the transfer of PMC. Once reviewed, the SFCS final reviewer will email the complete packet(s) to the AA/PCA Eligibility Specialist for that county. The complete packet(s) will also be mailed to the assigned AA/PCA Eligibility Specialist.
- It is preferred to NOT have a court date scheduled to transfer PMC. This is to allow sufficient time for the negotiator to schedule a time to meet with the family.

The Eligibility Specialist will review each packet for completeness. Once completed, the Eligibility Specialist will email a Preliminary Determination notification to SFCS, SFCS Supervisor and the Regional Negotiators.

The Negotiator will meet with the family either in person or by phone, negotiate subsidy benefits, and obtain caregivers signature on the permanency care assistance agreement. The Regional Negotiator will email SFCS when signed PCA negotiations are completed and that PMC can be transferred to caregiver. The Regional Negotiator will email SFCS the agreements for the family to sign. SFCS will return the original, signed documents to the AA/PCA eligibility worker.

Do **NOT** proceed with transferring PMC until PCA benefits have been negotiated and the Negotiator has notified SFCS the negotiation has been completed. **Note: If a hearing is held and PMC is transferred prior to the PCA benefits being negotiated, then the caregiver cannot receive PCA benefits.

SFCS Tasks to Complete After Transferring PMC

- After the final court hearing, scan the order signed by the judge to the assigned Eligibility Specialist.
- In the SUB stage, update legal status with "PMC to REL/FK"
- End placement in the SUB stage with reason "Child placed in PCA."
- Email AA/PCA Eligibility Specialists to end billing/FC benefits. Close Sub stage after FC eligibility has been ended
- Enter placement in the PCA stage using the RID for the FAD stage that was created.
- Assign the PCA stage as primary to the eligibility specialist.

Adoption

SFCS will be responsible for the full array of adoption services in Region 1 as outlined in CPS Policy 6900 Adoption Preparation and Support Services

Out-of-state Interstate Compact on the Placement of Children (ICPC) adoption services requests will follow established [ICPC protocols](#).

SFCS will work with the DFPS Adoption Subsidy Negotiator and Eligibility Specialist in securing adoption assistance for eligible families.

Steps for Adoption Assistance Packets

Child meets one of the special needs criteria below:

- At least six years old
- At least two years old and a member of a racial or ethnic group
- Being adopted with a sibling or to join a sibling who has been adopted by the parents or the parents already have permanent managing conservatorship
- Has a verifiable physical, mental, or emotional disabling condition, as established by an appropriately qualified professional through a diagnosis that addresses:
 - That the condition is; and that the condition is disabling
 - Receives Supplemental Security Income (SSI) benefits.

SFCS Tasks to Complete Prior to Adoptive Placement

- Request LOC review from Youth for Tomorrow (YFT).
- Prepare a complete subsidy packet for each child using the [Adoption Assistance Checklist/Guide-Form 2368](#) The checklist requires the Permanency Case Manager's original signature and date for each child.
- Original signatures & dates are required on the family's forms
 - [Adoption Assistance Request Form 2250](#) ,
 - [Adoption Assistance Worksheet Form 2253A](#) and
 - [Adoptive Family Resources Form 2253B](#),
 - Forms also found on Smiley/CPS/Post-Adopt.
- If sibling group, a complete set of forms is required for each child. Must be original documents, scans or faxes are not accepted.
- Gather source documentation needed for each child's packet (reference [Adoption Assistance Checklist/Guide-Form 2368](#)).
- The PCA/AA Negotiator will receive the required information from the Eligibility Specialist to create the FAD stage and will also request a Vendor ID Number. The PCA/AA Negotiator will assign the FAD stage to the SFCS Permanency Data Supervisor Sherry Sanford once the FAD stage is created.
- Ensure the Authorized Level of Care (ALOC) listed on IMPACT is correct and accurate for child.
- SFCS Supervisor will open an ADO stage.
- In the ADO stage, complete an adoption assistance application for each child on IMPACT and submit to assigned AA/PCA Eligibility Specialist assigned to that county.
- The adoption assistance application must be completed at the time the original packet(s) are submitted to the SFCS adoption mailbox.

- Email the complete packet(s) to SFCS Permanency Supervisor for final review at least 30 days prior to ADO placement.
- Once reviewed, the final reviewer will email the original packet(s) at least 30 days prior to ADO placement to the AA/PCA Eligibility Specialist assigned to that county (Refer to [Foster Care Eligibility Specialist](#)). After the adoptive placement, end placement in the SUB stage, and enter new placement in the ADO stage with the RID received from the PCA/AA Negotiator.

SFCS Tasks to Complete if a Child Does Not Qualify for Adoption Assistance

- If the child clearly will not qualify for adoption assistance no Adoption Assistance Packet will be submitted to the Adoption Eligibility worker.
- If the SFCS case manager is unsure about the child's eligibility, a packet should be submitted and the adoption eligibility worker will determine eligibility and notify all parties.
- If an AA packet is not submitted, the SFCS case manager will need to email the adoptive parent's home study and the child's name and PID to the Adoption Assistance Negotiator at least 10 business days prior to the planned adoptive placement so that a FAD stage can be created.
- The PCA/AA Negotiator will receive the required information from the Eligibility Specialist to create the FAD stage and will also request a Vendor ID Number. The PCA/AA Negotiator will assign the FAD stage to the SFCS Permanency Support Supervisor once the FAD stage is created.
- Adoption placement will be completed by the SFCS case manager using the RID for the FAD stage created.
- Following the adoption consummation, the SFCS case manager will email the petition to adopt and the adoption decree to the adoption eligibility worker.

Subsidy Tasks to Complete

- The DFPS Eligibility Specialist will review each packet for completeness.
- If complete, the Eligibility Specialist will email a Preliminary Determination notification to SFCS Permanency Case Manager, SFCS Supervisor and the Regional Negotiators.

CPS Negotiator Tasks to Complete

- The Negotiator will contact the family and negotiate subsidy benefits and will fill out the adoption assistance agreement. Do NOT proceed with the adoption until subsidy benefits have been negotiated.
- The Regional Negotiator will email SFCS the agreements for the family to sign at the adoptive placement. The Regional Negotiator will sign the agreements prior to emailing them to SFCS. The SFCS Case Manager will return the signed original agreements to the assigned foster care adoption Eligibility Specialist to be filed.
- Carla Marshall, DFPS PCA negotiator, carla.marshall2@dfps.texas.gov, (806) 470-6029

SFCS Tasks after Adoption is Final

- Do not change the child's name in IMPACT as the eligibility specialist will change the child's name once the adoption is finalized.
- Scan the adoption decree to the eligibility specialist.
- In the ADO stage enter the legal status of "Adoption Consummated."
- Once the eligibility specialist has entered the subsidy benefits in IMPACT, close the SUB and ADO stages. Make sure the ADO stage has the new adoptive names of the children in the person list and as stage name.

- A PAD stage will show up (if child is subsidy-eligible) once the ADO stage is closed. Assign the PAD stage as primary to the eligibility specialist.

Issues that cause a delay with presentation staffing/adoptive placement

- Packet does not have original signatures from family or supervisor.
- AA checklist not fully completed.
- Child's name or date of birth does not match what is on the birth certificate or legal documents
- Source documentation missing.
- Home study update/addendum not included (within 1 year of placement).
- Vendor ID not obtained prior to placement.
- ADO stage not opened.
- Online AA application not submitted.
- ALOC issues where family is disputing Basic ALOC for child at negotiation.

For additional information see CPS Policy [1700 Adoption Assistance Program](#).

Authorization of Adoption Services

SFCS will:

- Complete the service authorization (form 2054) for the identified adoption service to SFCS in IMPACT:
 - In the comments section of the 2054, add the following:
 - The licensing agency (CPA) name.
 - Whether the 2054 is for a sibling set; if so, how many siblings.
 - The type of adoption (e.g. Foster-to-adopt/kinship/matched).
 - The Youth for Tomorrow (YFT) Level of Care (LOC) Determination for the child.

See [Community-Based Care \(CBC\) Adoption Placement and Service Authorization Process](#) for more information.

Post-Adoption Services

Adopted children who have been abused or neglected often need help coping with the effects of abuse and the loss of their birth family.

All families of children adopted through DFPS can obtain post-adoption services. This service is available to families along with Title IV-E and state-paid adoption subsidies from DFPS.

SFCS Regional Post-Adoption Liaison will facilitate referring the family to the local post-adoption service provider.

Since funding is limited there are times that children/youth requires out of home placement to meet their mental health needs and funds are not available through traditional Post Adoption Services. Refer to CPS Policy [6961 Post Adoption Substitute Care Services](#) for these situations.

Post Adoption Liaisons responsibilities include, but are not limited to:

- Fielding calls from post adoption families who may be in crisis or in need of Post Adoption Services and referring them to the appropriate provider.
- Working as a facilitator between, CPI, post adoption provider and the family.
- Be a subject matter expert for Region 1 catchment and for CPI and other CPS staff to reach out to with questions.

- Review service plans completed by the post adoption provider as appropriate.
- Coordinate, facilitate, and attend staffings with post adoption families, post adoption providers, CPI (If applicable) to assist in identifying steps and roles if needed for [Return to Care](#) placement.
- Be a point of contact for their regional post adoption providers.
- Stay in communication with the SFCS Adoption Specialist as well as attend quarterly providers meetings (conference lines will be available).
- If any child/youth has the potential to enter Post Adoption Substitute Care Services and DFPS is seeking Joint Managing Conservatorship, the CBCA, CPS Adoption Program Specialist, as well as, the SFCS Regional Vice President will need to be notified.
- The Post Adoption Liaison or their designee will process, which includes entering and approving 2054 service authorizations for the post adoption cases.

SFCS will notify the CBCA of any children/youth that are unable to be served by Post Adoption Services.

Additionally, if any child/youth enter Post Adoption Substitute Care Services and DFPS is granted Joint Managing Conservatorship, the CBCA will need to be notified. The CBCA will then notify the CPS Adoption Program Specialist.

See CPS Handbook policy [8400 Post Adoption Services](#) and [Adoptions Support Programs Safety Net Page](#)

Interstate Compact on the Placement of Children

For additional information regarding processes for referrals for services related to the Interstate Compact on the Placement of Children (ICPC) please see the [ICPC Resource Guide](#) on listed with [CBC Resources](#) on the DFPS Safety Net.

If a Texas Caregiver Moves to Another State

If a child's caregiver moves to another state, and it is in the child's best interest to move with the caregiver, the SSCC must ask the other state for permission to continue the placement there. Please see CPS Policy [4513.6 If a Texas Caregiver Moves to Another State](#)

When a SSCC worker receives an I&R in IMPACT and/or notification from Texas ICPC of a report of alleged child abuse, neglect, or exploitation in another state

When notification is received, the SSCC Permanency Worker must follow CPS Policy 4221.2 CPS Responsibility and Procedure after Receiving a Notification of Alleged Abuse and Neglect by Either RCCI or CPI and take the following actions:

- Immediately review the abuse, neglect, or exploitation report in IMPACT.
- Immediately discuss the intake with the supervisor.
- Contact the investigator from the other state for additional information.
- Consult with the program director about the circumstances surrounding the investigation no later than 7 p.m. the next business day.
- Document an *I&R A/N Notification Staffing* contact type in the child's *Sub* stage no later than 7 p.m. the next business day after notification of the report.
- The contact documentation must include the following:
 - A copy of the I&R.
 - Discussions with supervisor and program director.
 - Consideration of the child's safety needs and any related actions.
 - Any plans for future actions.

The SSCC Permanency Worker must document the execution and results of any follow-up actions as normal contacts in IMPACT when they are completed.

The SSCC Permanency Worker must document as a contact in IMPACT a summary and the disposition of the investigation once the investigation is concluded.

ICPC Violations

Court orders that violate the Interstate Compact on the Placement of Children (ICPC) include orders that:

- place a child in another state without an approved ICPC home study
- send a child into another state on visits that extend past 30 days; or
- dismiss DFPS from its lawsuit without the other state's agreement.

The exception involves placement of a child with a noncustodial parent who resides in another state. This type of placement is not subject to the ICPC but requires following a specific protocol. See [4513.1 Placing a Child with an Out-of-State Non-Custodial Parent](#).

For Subject Matter Assistance regarding ICPC matters, please contact [Texas Interstate Compact Office \(TICO\)](#)

Additional reference:

[Hearings and Legal Proceedings Resource Guide.](#)

CPS Policy [5314 Court Orders That Violate the Interstate Compact on the Placement of Children](#)

Administrative Related

Title IV-E University Training Program

Refer to: DFPS Policy [3000 Introduction to the Title IV-E Program](#) , [4000 Title IV-E Training Contracts With Universities](#)

SFCS Title IV-E University Training Program for Current and Non-Employees

This section explains the:

- Process for applying to the Title IV-E University Training Program; and
- How the SFCS training academy managed by the SFCS training division support that effort.

Each year, DFPS awards federally funded training to eligible SFCS employees and eligible state universities for students preparing for employment with the SFCS. The number of awards is based on the number of Title IV-E-funded positions that the SFCS anticipates each year.

The awards are made to eligible SFCS employees who are interested in a Master of Social Work (MSW) and eligible students who are enrolled in academic programs that lead toward a Bachelor of Social Work (BSW) or Master of Social Work (MSW).

The SFCS training academy provides basic skills development training to these trainees to prepare them for SFCS employment.

Applying for Title IV-E Training with SFCS for Prospective Employees

To request admission for a student, the university's coordinator for the Title IV-E Child Welfare Program sends an email to:

- The CPS Regional Operations Support Administrator (ROSA)
- SFCS Director of Human Resources
- The DFPS Title IV-E contract manager

The email must contain the applicant's:

- Name
- Date of birth
- Social Security number; and
- Type of degree (BSW or MSW)

For BSW students, the coordinator sends the email at least three months before the start of the student's *final* semester. For MSW candidates, the coordinator sends the email at least three months before the candidate's *first* semester.

Each applicant submits the following to the university coordinators. The University will then provide the information to the ROSA and the SFCS Director of Human Resources. The ROSA will maintain all original documents for the Title IV-E stipend program.

- University acceptance letter
- Statement of interest
- Three professional letters of recommendation from professors or employers
- Copy of students most recent unofficial transcript from University

- Waivers as appropriate
- Certified copy of the applicant's driving record
- Volunteer application, Form 0250
- Authorization for a background check, Form 0250b An HHS Acceptable Use Agreement, Form HHS-AUA
- Form 0261 Volunteer Program Work Rules, Standards of Behavior and Performance
- Volunteer Confidential Statement Form 0251
- TB Test Results

To enable the applicant to take any required pre-employment test/assessments, the university's coordinator directs the applicant to apply for a SFCS specialist position in the appropriate SFCS unit. Taking this step creates a profile in the SFCS human resources system that allows the applicant to access any required tests/assessments.

Once the applicant has applied for a SFCS specialist position, the SFCS designee forwards copies of the following to the Centralized Background Check Unit (CBCU), so that appropriate checks can be performed:

- A certified copy of the applicant's driving record
- A volunteer application, [Form 0250](#)

The CBCU forwards the results of the checks to:

- The ROSA
- SFCS Director of Human Resources and
- The contract manager.

If the results are questionable, the ROSA or SFCS Director of Human Resources reviews them and determines whether the applicant is employable.

If the checks are acceptable, the ROSA sets up interviews which includes the ROSA, SFCS Hiring Manager, and SFCS personnel. If the interview is acceptable, the ROSA or SFCS Director of Human Resources notifies each University coordinator who will prepare a Stipend Student Information Form for each student. The university coordinator will then forward the information form to the contract manager who prepares an agreement for each student.

If the results of any of the above assessments are not satisfactory, the ROSA or SFCS designee:

- Prepares a disapproval memo; and
- Forwards it to the university coordinator who will notify the student.

The ROSA sets up an orientation meeting to review and sign the stipend contract agreement. Participants include the ROSA, SFCS Director of Human Resources, the university coordinator and the students. These contracts are not executable until they are signed by SFCS.

During the orientation meeting, the following topics are covered:

- The terms and conditions of the agreement, including any payback responsibilities. Repayment if eight calendar months of employment in an IV-Eligible position for each semester which the stipend was paid to the employee. Repayment of the stipend through full time employment begins the first day of employment. The commitment that students must make to accept any statewide employment with SFCS on completion of their training.

The ROSA then forwards all signed agreements, along with a completed checklist for each contract, to the SFCS Director of Human Resources for final approval. Once signed, the ROSA will send the original signed agreement to the State Office Contract Manager for final processing.

After each agreement is approved:

- The State Office Contract Manger will send a signed copy of the agreement to the stipend student.
- The ROSA or SFCS Director of Human Resources completes a Move, Add, or Change form (known as an eMAC) to obtain a log-in ID for access to DFPS systems

The interns are ready to attend training offered by the SFCS.

- The SFCS Director of Human Resources will designate a unit supervisor for the intern to be placed under for training through the duration of the placement, communicate the information/location to the University liaison and intern.
- The SFCS Director of Human Resources will send training orientation invites to the SFCS interns before the intern reports to the placement location.

Interns must maintain satisfactory performance while participating in the program. If an intern fails to complete training or is disqualified from the program, he or she must pay back the award, in accordance with the agreement.

Two months before university graduation, each student must submit an employment application to SFCS for a Title IV-E eligible position.

Each intern must accept any Title IV-E eligible position offered statewide within 60 days of graduation.

The ROSA or SFCS Director of Human Resources notifies the Title IV-E contract manager that the intern has been placed in a Title IV-E position.

Calendar dates for submitting and processing non-employee stipend students must be followed as below:

Fall Semester:

- May 15: All names submitted by University along with background forms, etc during this week.
- June 1: All applicants must have taken any pre-test/assessments required by SFCS
- June 15: Set up interview during this week
- July 15: All contracts ready this week.
- Mid-August: Semester begins

Spring Semester:

- October 1: All names submitted by University along with background forms, etc during this week
- October 15: All applicants must have taken any pre-test/assessments required by SFCS.
- November 1: Set up interview during this week
- December 1: All contracts ready this week.
- Mid-January: Semester begins

Summer Semester:

- February 15: All names submitted by University along with background forms, etc during this week
- March 1: All applicants must have taken any pre-test/assessments required by SFCS.
- March 15: Set up interview during this week
- April 15: All contracts ready this week.

- Last week of May: Semester begins

Inventory and Equipment Agreement

Since Title IV-E interns do not receive Tablet PCs, they require a separate process through the SSCC to ensure accessibility to the required computer equipment. The SFCS Human Resource Manager will ensure the Title IV-E interns under SFCS receive necessary computer equipment.

Applying for Title IV-E Stipend for SSCC Employees

A current SFCS employee interested in obtaining their MSW through the stipend program must be in an SFCS IV-E eligible position and completes the following steps:

- Submit an application to the Title IV-E School of Social Work program that has a stipend program in the region. Employee will need to follow the application deadlines set forth by the School of Social Work program they are applying for.
- Email the ROSA, the University Coordinator and the SFCS Director of Human Resources of the intent to apply to a social work stipend program.
- Obtain approval from the supervisor to apply for the program and have the supervisor complete a Supervisor Checklist and submitted to the ROSA and SFCS Director of Human Resources.
- Three months prior to the beginning of the first semester to which the employee is applying, submit a brief proposal to the ROSA and SFCS Director of Human Resources with an explanation of how the employee will maintain currency of their workload and complete their schoolwork and any internships outside agency time.

The ROSA reviews the Supervisor Checklist and verifies the following:

- Employee has been employed by SFCS or DFPS for at least one continuous year by the start date of the proposed first university semester.
- Employee is currently in an IV-E eligible position.
- Employee meets all performance criteria.

The ROSA schedules an interview which includes the ROSA and SFCS. The interview panel reviews all documentation and based on the interview, approves, or disapproves the stipend. If approved, the ROSA notifies the appropriate university coordinator who will prepare a Stipend Student Information Form for the employee. The university coordinator will then forward the information form to the contract manager who prepares an agreement for each student.

The ROSA sets up a contract signing meeting to review and sign the stipend contract agreement. The participants include the ROSA, SFCS Director of Human Resources, the university coordinator and the employee. These contracts are not executable until they are signed by the SFCS.

During the contract signing meeting, the following topics are covered:

- The terms and conditions of the agreement, including any payback responsibilities.
- The employee must sign a contract with SFCS to repay the stipend received, through full time employment with SFCS.
- Repayment is four calendar months of employment in an IV-E eligible position for each semester which the stipend was paid to the employee.
- Repayment of the stipend through full time employment begins the first working day after the date of graduation.

The ROSA then forwards all signed agreements, along with a completed checklist for each contract, to SFCS for final approval. Once signed, the ROSA will send the original signed agreements to the State Office Contract Manager for final processing. The State Office Contract Manager will send a signed copy of the contract to the stipend employee.

- Stipend employees must maintain satisfactory job performance while participating in the stipend program. The employee is responsible for consistently meeting all agency job expectations and requirements regardless of the field requirements.
- Stipend employees must maintain at least a “B” average on all coursework and remain in good standing in accordance with university standards.
- If any employee fails to complete the academy or is disqualified from the program, the employee must pay back the stipend in accordance with the Stipend Agreement.

Calendar dates for submitting and processing employee stipend students must be followed as below:

Fall Semester:

- May 15: All names submitted by University along with background forms, etc. during this week
- June 1: All applicants must have taken any pre-test/assessments required by SFCS.
- June 15: Set up interview during this week
- July 15: All contracts ready this week.
- Mid-August: Semester begins

Spring Semester:

- October 1: All names submitted by University along with background forms, etc. during this week
- October 15: All applicants must have taken any pre-test/assessments required by SFCS.
- November 1: Set up interview during this week
- December 1: All contracts ready this week.
- Mid-January: Semester begins

Summer Semester:

- February 15: All names submitted by University along with background forms, etc during this week
- March 1: All applicants must have taken any pre-test/assessments required by SFCS.
- March 15: Set up interview during this week
- April 15: All contracts ready this week.
- Last week of May: Semester begins

Records Management

DFPS Records Management Group will support SFCS with the same services it provides to DFPS. For more information about services see [Records Management Group](#) Safety net page.

RMG adheres to the nine-level priority list established by Texas Administrative Code when fulfilling redaction records requests. The detailed priority list from highest to lowest priority raking is as follows:

1. Records provided in response to a subpoena or court order that has been properly served on DFPS.
2. Records provided in response to discovery in a lawsuit to which DFPS is a party.
3. Records provided to a prospective adoptive family before an adoption may be consummated.

4. Records provided to a party or the administrative law judge in an Employee Misconduct Registry administrative hearing.
5. Records provided to a party or the administrative law judge in a hearing conducted by the State Office of Administrative Hearings.
6. Records provided to a duly authorized person documenting the results of a school investigation as required by Texas Family Code [§261.406](#)
7. Records provided to a party in an administrative review of investigative findings that is conducted by DFPS.
8. Records provided to an adult who was previously in the conservatorship of DFPS, if the request is for a copy of the adult's own case record as defined by Texas Family Code [§264.0145](#)
9. Records provided to all other requesters entitled to receive the requested records, which are fulfilled in the order they are received.

SFCS Administrative Support Supervisor will have access to RMG Case Track system.

All records requests should be submitted directly to DFPS Records Management by submitting the request for records through OneCase in IMPACT.

Exceptions for not requesting records through OneCase:

- District and County Attorney Offices may submit an email requesting discovery directly to the RMG mailbox when the office is representing DFPS.
- When a SSCC caseworker receives an email directly from a District or County Attorney requesting discovery, the SSCC caseworker may upload the email into OneCase in lieu of the required discovery court order.

SFCS Permanency Case Manager On-Call

SFCS will be expected to have a Permanency Case Manager On-Call Schedule. To reach the on-call staff member, please contact the **SFCS Care Management division at (877) 254-6135**.

The CPS Liaison, Brandi.Vance@dfps.texas.gov will ensure the on-call schedule on the Safety Net is updated with the SFCS contact information.

Reporting Threats or Incidents

Safety is the most important factor in any client interaction. No law, policy, or local procedure requires employees to put themselves in or remain in a dangerous situation. However, because employees must often interview people who are angry, fearful, and occasionally hostile or aggressive, it is wise to take precautions and ensure that information about worker safety incidents such as assaults, threats, harassment, etc. are reported and information is shared with both SFCS and DFPS. For qualifying safety incidents, DFPS Worker Safety Support (WSS) staff will track safety incidents and ensure that information is shared with both SFCS and DFPS.

Threats or incidents reportable to DFPS Worker Safety Support include but are not limited to:

- Client makes a threat to come to a shared location and cause harm.
- Client makes a threat to SSCC worker that is tied to a case decision and DFPS staff could be perceived as in danger due to the nature of statement/action.

- *Example:* Client's visitation is suspended and makes a threat to physically harm anyone that gets in the way of them and their children.
- Client makes a threat toward DFPS staff or a DFPS building to an SSCC worker.
- There is an outburst by a client in a shared location that causes damage to the building.
- Law enforcement is called to a shared office to respond to a safety concern for staff.
- Vandalism of a car on state property or DFPS leased facility.
- Internal worker safety issue between a DFPS staff and SSCC staff.

To report a worker safety incident, SFCS staff will send notification to WSS at workersafety@dfps.texas.gov and CC txreg1directors@st-francis.org.

The DFPS Worker Safety Support team will document and track reportable incidents as well as send notification to points of contact with DFPS and SFCS. SFCS will be notified at txreg1directors@st-francis.org.

Additionally, SFCS staff should document worker safety information in the IMPACT case record. This information can be documented on the Case Summary page, under the Special Handling drop down section by checking the box next to Worker Safety and adding details regarding the safety concern in the comment box. The information should also be documented as a regular contact in the case, so it appears on the contact summary page.

The screenshot shows a web interface for 'Special Handling'. It includes a dropdown menu for 'Special Handling', a text area for 'Special Handling Comments', a checked checkbox for 'Worker Safety Issues', and a text area for 'Comments' with the placeholder text 'ENTER SAFETY ISSUE HERE!'.

SFCS staff should also follow any internal procedures for incident reporting that may be outlined in the SFCS Operations manual.

Child and Family Services Review

The CPS division of **Federal and Program Improvement Review (FPIR)** provides continuous quality improvement services to all regions in Texas to support successful outcomes for children and families served by CPS. The division is made up of:

- Child and Family Services Review (CFSR) Team.
- Parental Child Safety Placement (PCSP) Review Team.
- Family-Based Safety Services (FBSS) Critical Case Review Team.

The Child and Family Services Review (CFSR) Team will be randomly selecting cases that are served by SFCS as part of their review.

For Additional information see Federal and Program Improvement Review Safety Net page.

Office of Consumer Affairs (OCA) Assignments

SFCS will develop their internal protocol to address OCA/FCO/Legislative Inquiries to adhere to time frames required by the division requesting the response.

- OCA/FCO/Legislative Inquiries will be sent directly to SFCS via the following email box TXcustomer care@SaintFrancisMinistries.org, Mary Olivarez, 1-866-671-4735. The Regional Director's Administrative Assistant (RDAA) and Regional Director Assistant (RDA) will be cc'd on requests.
- SFCS will respond to OCA/FCO and any legislative inquiries within required timeframes as directed by divisions requesting response.
- If a substantiation results from the inquiries, SFCS will create a corrective action plan with staff involved to address policy violations.
- If SFCS believes the substantiation is not valid, they can ask for a review of findings.
- If the substantiation is upheld, they will continue with their corrective action plan.
- The SFCS corrective action plan will be emailed to the RDAA/RDA.
- The RDA will input the information into the State Office OCA/FCO SharePoint.

For more information see: Office of Internal Affairs webpage

Ombudsman for Children and Youth in Foster Care Process (FCO)

Same process as above.

For more information see [HHS Ombudsman Foster Care Help Page](#)

Legislative Inquiry Process

Same process as OCA/FCO; however, there is no corrective action unless there is an inquiry/complaint that accompanies it with a substantiation.

Case Dispute Resolution

There may be times when INV/FBSS and SFCS (and network providers) may not agree on a case decision or what should happen with a child and/or family.

The following section outlines the protocol to resolve any type of case disputes between INV/FBSS and SFCS

Case Dispute Resolution Process:

Step 1

- CPI/CPS workers and supervisors, SFCS and/or a provider (who are closest to the issue in dispute) will work together to resolve case specific issues informally. This will be done through an objective, solution-driven discussion, or meeting.
- If a mutually agreeable solution is not achieved in 3 business days, the individual will notify the other individual with whom they have a concern that they plan to involve their chain of command.

- The disputed issue will be elevated to the Program Director and/or Program Administrator level in CPI/CPS and the Director level in SFCS for attempted resolution.
- The disputed issues will be elevated in writing.

Step 2

- CPI/CPS workers and supervisors, SFCS and/or a provider (who are closest to the issue in dispute) will work together to resolve case specific issues informally. This will be done through an objective, solution-driven discussion, or meeting.
- If a mutually agreeable solution is not achieved in 3 business days, the individual will notify the other individual with whom they have a concern that they plan to involve their chain of command.
- The disputed issue will be elevated to the Program Director and/or Program Administrator level in CPI/CPS and the Director level in SFCS for attempted resolution.
- The disputed issues will be elevated in writing.
- Disputes proceeding to Step 2 will be elevated to a knowledgeable, neutral CPS staff member (Community-Based Care Administrator) who understands the philosophy and goals of community-based care and is not a direct supervisor of the individual involved in the appeal.
- SFCS must ensure continuity of services, as defined by CPI/CPS, to the child or family affected while seeking to resolve case-specific disputes.

Escalation

- The escalating party will send an email with supporting documentation to the Community Based Care Administrator and SFCS Senior Vice President with the subject line of “Dispute Resolution.”

Resolution

- Once a dispute is escalated (appeal), the Community Based Care Administrator will provide a written decision to the appeal within 5 business days.
- The written decision will be emailed to the SFCS Regional Vice President with the subject line of “Dispute Resolution Appeal Decision.”
- If the SFCS Regional Vice President chooses, they will have 3 business days from receipt of the notification from the CBC Administrator to appeal the decision to the CPS Regional Director.
- The CPS Regional Director will have 5 business days to make a decision on the SFCS Regional Vice President’s appeal.
- If the SFCS Regional Vice President chooses not to appeal, they will notify the CBC Administrator.

Situations Requiring Immediate Notification between SSCC and DFPS

Situations that require immediate notification between SFCS and DFPS include:

- When a child, who is referred or placed with SFCS, is in a life-threatening situation **and/or**
- Any time the media is involved with a child placed with SFCS.

Specific examples include, but are not limited to:

- Child Fatality
 - If a child fatality occurs in an open conservatorship case and meets the qualifications for an OCA Child Fatality Review, please follow the process outlined in the appendix [OCA Child Fatality Review Process](#)

- See [Child Fatality Protocol Handbook](#) for additional information
- SFCS will be included in QRT team as appropriate
- Confirmed Abuse or Neglect situations that may attract media attention
- Child abductions
- Investigation or serious incident in kinship placement
- Staff acting inappropriately that may attract media attention or has been posted on social media
- If contacted directly for legislative inquiry
 - See Government Relations Handbook [Policy 3000](#)
- Natural disasters where children are displaced Notification:
- Send notifications to Region 1 RD and CBC Director, Theresa Thomas
- Include high level summary of incident or situation
- Include timeline of events Following notification:
- Regional Director will contact and inform the Regional Media Specialist and Community-Based Care Administrator of the situation.
- Regional Media Specialist will:
 - Contact and inform the Media Relationship Manager of the situation; and
- Contact and coordinate media message with SFCS prior to releasing any information or comments to the media about the situation.

Single Source Continuum Contractor (SSCC) Abuse or Neglect Investigations

A **CPI** investigation is considered an employee abuse or neglect investigation when:

- A DFPS employee or SSCC employee is alleged to have abused or neglected a child in his or her own family.
- A DFPS employee, contracted staff, volunteer, or intern or an SSCC employee is alleged to have abused or neglected a child in DFPS conservatorship, and the child is in an unlicensed setting.

Special investigators are assigned to conduct employee investigations meeting the above criteria. If a special investigator is the alleged perpetrator in an employee investigation, CPI conducts the investigation.

SSCC will follow steps outlined in policy [2121.1 DFPS Employee or Single Source Continuum Contractor \(SSCC\) Abuse or Neglect Investigations](#).

For additional information see policies:

[2120 CPS Authority for Investigating Reports of Abuse or Neglect](#)

[1260 Administrative Review of Investigation Findings \(ARIF\)](#)

Other Miscellaneous Administrative Items

Forms and Publications

If an SSCC needs to re-order DFPS forms or publications, one designated person from the SSCC can order by emailing formsandpublications@dfps.texas.gov.

Appendix A: CBC Forms

Region 1 Removal Staffing Checklist

Please use this link for the Region 1 [Removal Checklist](#). It is [also available on the Smiley Forms webpage](#).

Purpose: Use this form to ensure all tasks associated with an emergency or non-emergency removal are completed.

SSCC Process on Funeral/Burial Procedures and Invoicing

CPS Handbook §6491, 6492 and §8512 (\$4,500 max per policy)

SSCC will arrange a funeral for any child or youth who dies while in CPS managing conservatorship or any young adult, age 18 or older, who dies in extended foster care.

Funeral arrangements include burial or cremation as specified in CPS Policy Funeral and Burial Services for Children in DFPS Conservatorship. Children or youth placed with relatives or in the birth home at the time of death are eligible for financial assistance for funeral arrangements if CPS was the managing conservator.

To ensure proper arrangements are made, the caseworker must complete the following steps in the order outlined:

- Inquire About Children's Funds
- Involve Biological Parents
- Involve Foster Parents and Other Significant Individuals
- Involve Community Partners
- Access CPS Funding

Involve Biological Parents

The SFCS Permanency Case Manager should involve the child's biological parents in the funeral arrangements to the maximum extent possible, even if parental rights have been terminated, if the case manager determines doing so is appropriate. For example, parental involvement:

- may not be appropriate if rights have been terminated and the child was in a pre-consummated adoptive placement; or
- could be appropriate if a parent has remained in contact and the child was in a placement not intended to be permanent.

Regardless of legal status, a parent may wish to help with arrangements, express preferences, and contribute resources to cover the costs of a child's funeral. The case manager may not ask the biological parents to pay for all or some of the funeral expenses. However, parents may contribute directly to the funeral home if they so choose.

- The SFCS Permanency Case Manager must document in the child's case record the:
 - date the case manager spoke with the parents
 - content of the discussions
 - outcome; and
 - date the parents responded.

Involve Foster Parents and Other Significant Individuals

The SFCS Permanency Case Manager should also invite foster parents and other individuals significant to the child's life to participate in planning the child's funeral arrangements. The SFCS Permanency Case Manager does not solicit contributions from foster parents and other significant individuals. However, if they voluntarily indicate that they wish to contribute to some of the funeral expenses, they may do so by paying the funeral home or other vendor directly.

Involve Community Partners

The external community is often a key partner in securing funeral arrangements for a child who died while in

CPS conservatorship. When a community partner expresses a desire to assist with funeral arrangements, CPS coordinates with those partners. CPS is legally authorized to accept donations, gifts, or in-kind contributions to cover funeral expenses.

Access CPS Funding

If resources are not available to fully fund the cost of a funeral for a child who died while in conservatorship, the caseworker may authorize up to \$4,500 per child for reasonable and necessary burial or cremation expenses. The SFCS Permanency Case Manager must contact the regional burial liaison, CBC Region 1 Contract Administration Manager (CAM), to make the request for funds. If the SFCS Permanency Case Manager determines funding in addition to the \$4,500 is needed for the child's funeral, the CPS region must seek approval for additional funding from the CPS Assistant Commissioner. Additional funds may be expended to cover the funeral costs as described in CPS policy Funeral and Burial Services for Children in DFPS Conservatorship.

For the Funeral Home to receive payment, the following is needed:

Prior to SSCC staff signing any agreement you must send to the CBC Region 1 CAM to review for allowable/unallowable items. Itemized contract/agreement from the Funeral Home. The contract must be signed by SSCC designated staff and the authorized funeral home staff.

The allowable expenses for funeral services are limited to:

- transportation of the body
- embalming
- a coffin
- burial or cremation
- grave plot
- headstone or memorial marker (**required**); and • other reasonable and necessary burial expenses.

Unallowable expenses

Burial funds may **not** be used for:

- floral arrangements, cards, registry; or
- limousine transportation for the family or other individuals.

The SSCC caseworker uses as much of the DFPS burial funding as is needed to cover the allowable expenses after applying contributions provided by the parents and community partners. Contributions from parents and community partners may be used for floral arrangements, police escort, limousine transportation, or catering depending on their preferences but must not be included in the funeral home contract/agreement.

- A complete Form 4116 Purchase Voucher. This form must be signed by funeral home representative and SSCC designated staff. Funeral home can contact the CBC Region 1 CAM, Reid Miller for help in filling out this form (325) 691-8267.
- A complete Form AP-152 Application for Texas Identification Number and 74-176 Direct Deposit Authorization.

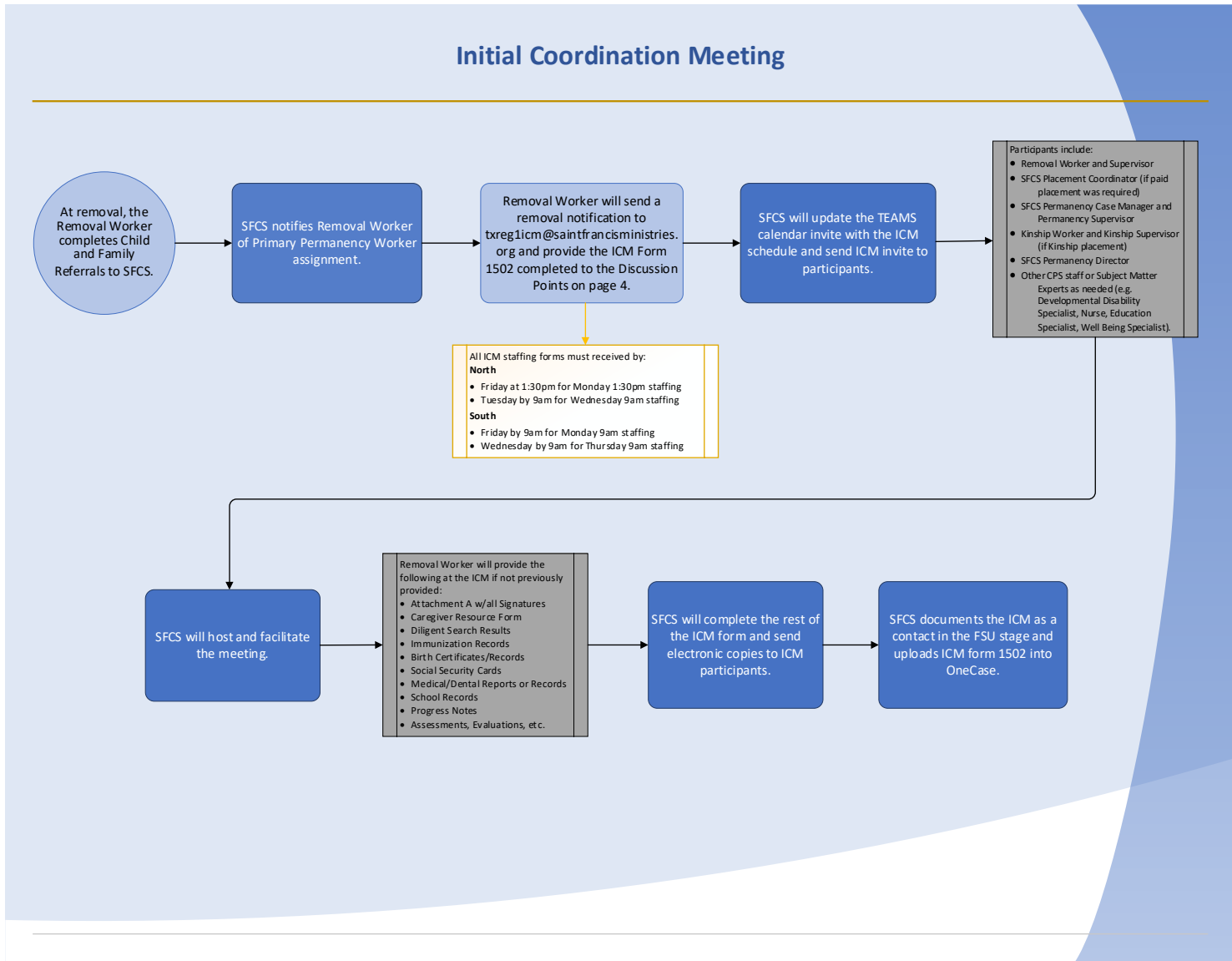
Important Notes:

- Only include the items that DFPS is paying for on the [Form 4116](#) in box #20 Description of Good and Services.
- Funeral home representative signature authority will need to sign next to the X (above box #24), including phone number. Print name and phone number in #24
- SSCC authorized staff must sign the first line in box #26 include phone number and date.
- Email all completed documents to the CBC Region 1 Contract Administration Manager:

Amy.Forister@dfps.texas.gov

Appendix B: CBC Flow Charts

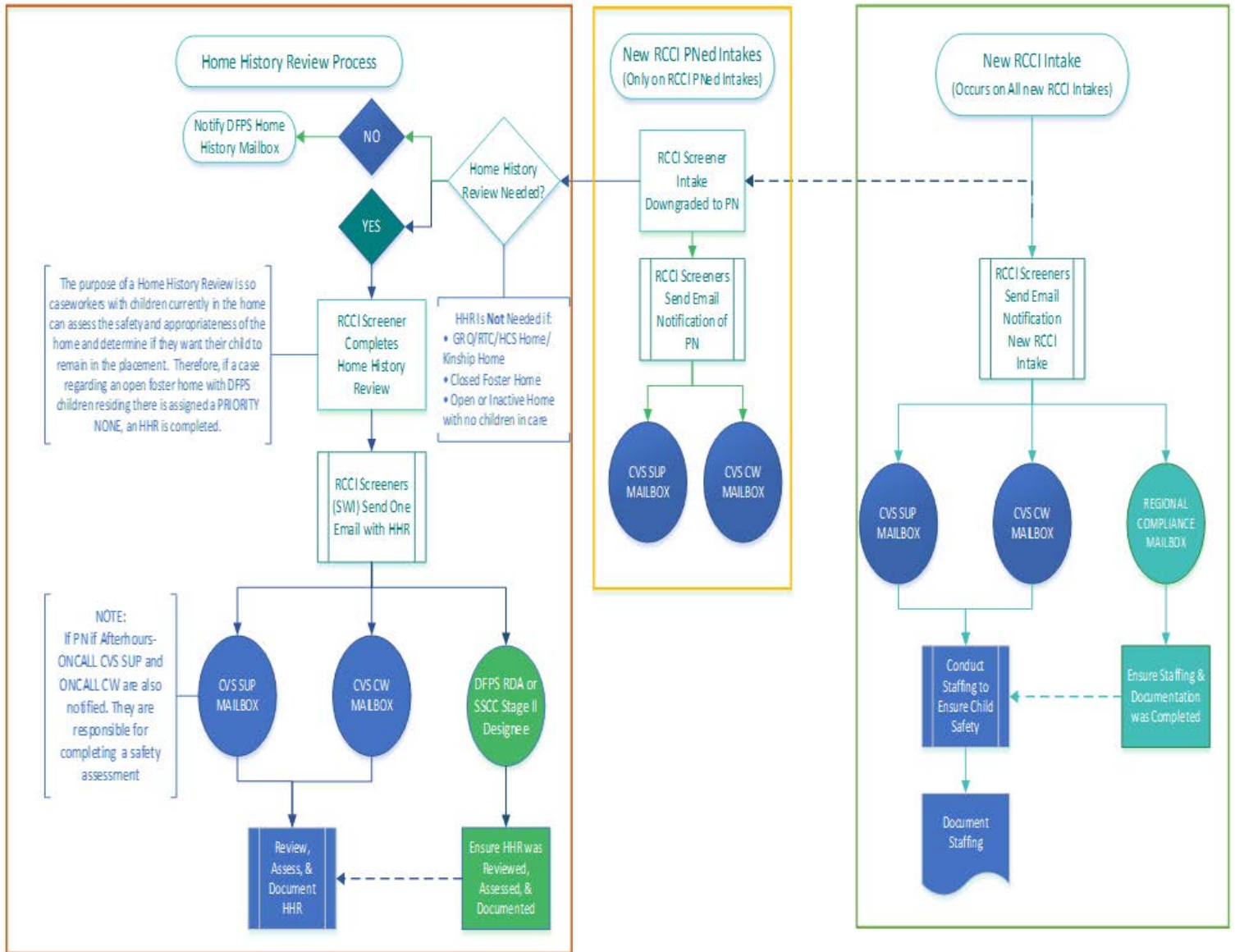
ICM Flow Chart



RCCI Screener Email Notification Process Map

CPS Handbook §4221 Abuse and Neglect Investigations of Placements

DFPS Legacy Regions: 3W counties: Cooke, Wise, Denton ONLY, 4, 5, 6, 7, 8, 9, 10 & 11.
SSCC Stage II Regions: 1, 2, 3W counties: Palo Pinto, Parker, Tarrant, Erath, Hood, Somervell, Johnson



Legend			
	SWI RCCI Screener Roles		First Step- Applies to ALL New RCCI Intakes
	DFPS or SSCC (stage II) Caseworker and Supervisor Roles		Second Step- ONLY Applies to PMed RCCI Intakes
	DFPS or SSCC (stage II) Regional Compliance Mailbox Role		Third Step- ONLY Applies to PMed RCCI Intakes
	DFPS or SSCC (stage II) Regional Director Designee Role		

SSCC Regional Compliance
Mailbox:

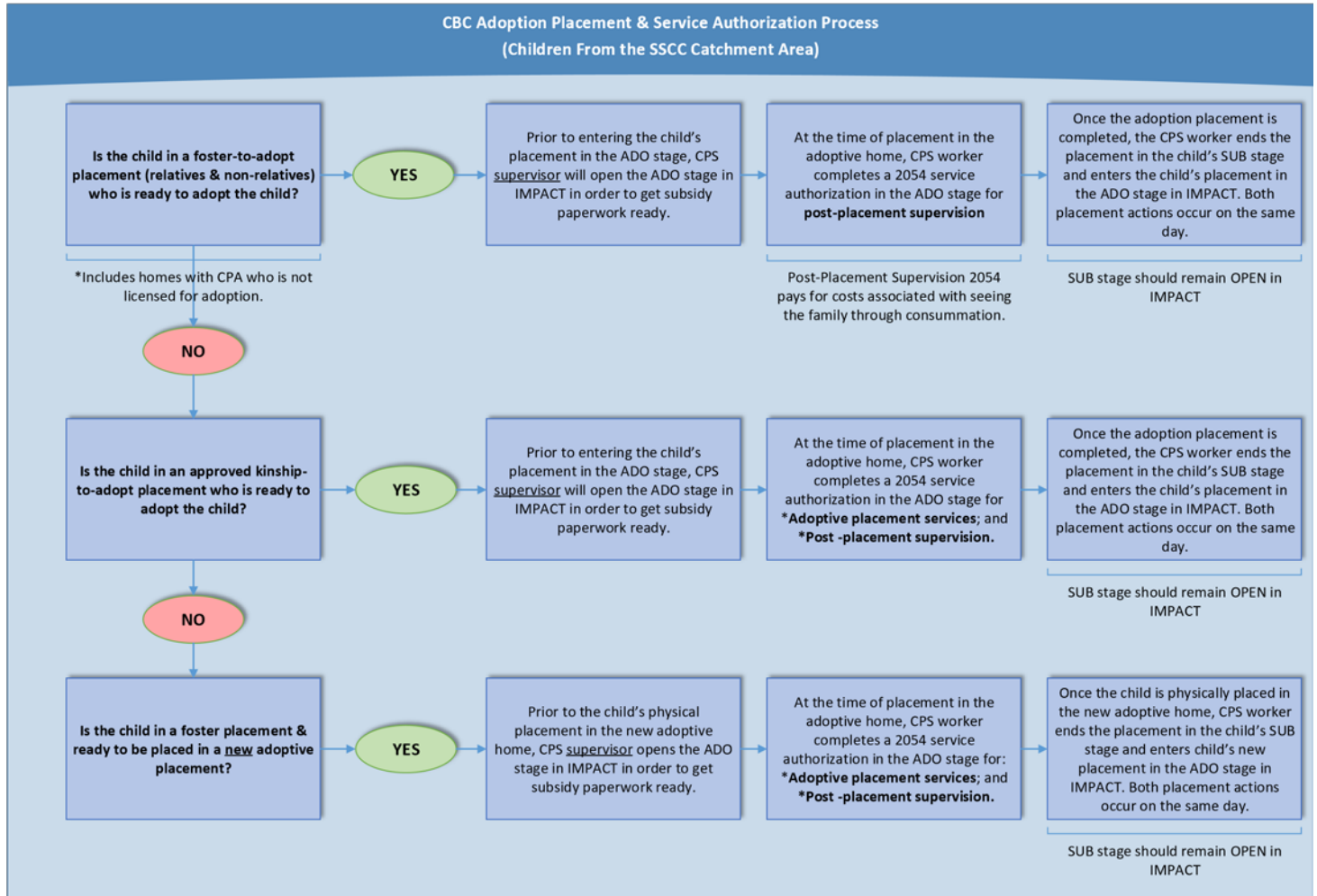
txreg1ir@st-francis.org and

TXproviderrelations@st-francis.org

SSCC Regional Director Assistant
Equivalent:

jenny.bruno@saintfrancisministries.org

CBC Adoption Placement & Service Authorization



Adoption Services Descriptions

Pre-Consummation Services (2054 = Placement services)		Post-Consummation Services (2054 = Post-placement supervision)
Foster-to- <u>New</u> Adopt Home	Kinship-to-Adopt	Supervision of the Adoptive Placement
Case Review	Home Screening	Facilitate Sibling Contact
Pre-Placement Visits (between the child & prospective adoptive family)	Household Members Background Checks	Progression to Consummation (supervision of placement, written reports, legal & policy requirements)

Pre-Consummation Services (2054 = Placement services)		Post-Consummation Services (2054 = Post-placement supervision)
Adoption Placement Documentation	Supervision of the Adoptive Placement	Delays in Consummation (review of placement with CPS & contractor and develop a revised Plan of Service)
Home Screening	Progression to Consummation (supervision of placement, written reports, legal & policy requirements)	Disrupted Placement
Household Members Background Checks	Delays in Consummation (review of placement with CPS & contractor and develop a revised Plan of Service)	Court Related Services: <ul style="list-style-type: none"> • Testimony (judicial hearings, court depositions & admin reviews) • Court Related Assistance (assist adoptive family & their attorney to complete consummation process)
Training for Adoptive Homes	Court Related Services: <ul style="list-style-type: none"> • Testimony (judicial hearings, court depositions & admin reviews) • Court Related Assistance (assist adoptive family & their attorney to complete consummation process) 	Adoption Service Plan
Adoption Preparation of the Child	Adoption Service Plan	Adoption Preparation of the Child
	Adoption Preparation of the Child	

PAL Life Skills Assessment and Training Pilot For Eligible Youth Served by St. Francis

St. Francis, the Single Source Continuum Contractor (SSCC) in Stage II for Region 1, will ensure the development and delivery of PAL Assessments and Life Skills Training for eligible youth:

- All youth placed in DFPS conservatorship within the catchment area in paid and non-paid placements (including kinship) and
- All youth from Region 1 catchment placed in paid and non-paid placements (including kinship) outside the catchment.

For eligible youth, please see policies [10211.1 Targeted Priority Population](#) and [10211.2 Additional Eligible Population](#).

As part of the delivery of PAL training, the SSCC will ensure the arrangement for the Casey Life Skills Assessments and its interpretation to be shared and discussed with the youth and caregiver. The SSCC will ensure that experiential and community- based learning is included in all PAL training and services.

Note: For youth in paid placement from the catchment area SFCS will follow the process outlines in their case management manual.

**Youth from Another Region (paid/non-paid placement)
Placed in Catchment Area**

Legal region PAL staff emails PAL staff at Txreg1pal@st-francis.org requesting services. Include Form 5501, name of PAL staff who has youth on workload. SFCS PAL staff completes the 2054.

Resource: SSCC SFCS (PAL)

SFCS ensures PAL services are available to eligible youth. On a monthly basis, SFCS PAL staff will provide legal region PAL staff with documentation of PAL services provided to the youth.

SFCS PAL staff tracks and ensures completion of PAL services, including providing PAL reports to legal region PAL as requested.

SFCS PAL staff are responsible for entering PAL services information into IMPACT.

- Youth's status, progress, and completion of PAL training
- Services provided to the youth to assist with their transition to adulthood
- Assistance provided to the youth with applying for and securing services to aid in their transition to adulthood

** In March and September of each year the form 5502 will be collected weekly due to federal reporting requirements.*

Aftercare and Other PAL Services for Eligible Served by SSCC's

PAL Aftercare Services					
CBC Stage	Who sends request to service provider	Who is the service provider on 2054	Who completes 2054	Where is 2054 sent	Who documents services in IMPACT
SSCC in Stage I	Placement Region DFPS PAL Staff make the request	DFPS contracted Aftercare provider for placement area	Placement Region DFPS PAL Staff	DFPS contracted Aftercare provider for placement area	Placement Region DFPS PAL Staff
SSCC in Stage II	SSCC PAL Staff	DFPS contracted Aftercare provider for placement area	SSCC PAL Staff	DFPS contracted Aftercare provider for placement area	SSCC PAL Staff
Other PAL Services Sent to 3 rd Party Claims Processor					
CBC Stage	Who sends request to service provider	Who is the service provider on 2054	Who completes 2054	Where is 2054 sent	Who documents services in IMPACT
SSCC in Stage I	Placement Region DFPS PAL Staff make the request	3 rd Party Claims Processor contract following existing procedures in PAL manual	Placement Region DFPS PAL Staff	3 rd Party Claims Processor contract following existing procedures in PAL manual	Placement Region DFPS PAL Staff
SSCC in Stage II	SSCC PAL Staff	3 rd Party Claims Processor contract following existing procedures in PAL manual	SSCC PAL Staff	3 rd Party Claims Processor contract following existing procedures in PAL manual	SSCC PAL Staff

Catchment Implementation Status:

Catchment Region 1 – Stage II

Catchment Region 2 – Stage II

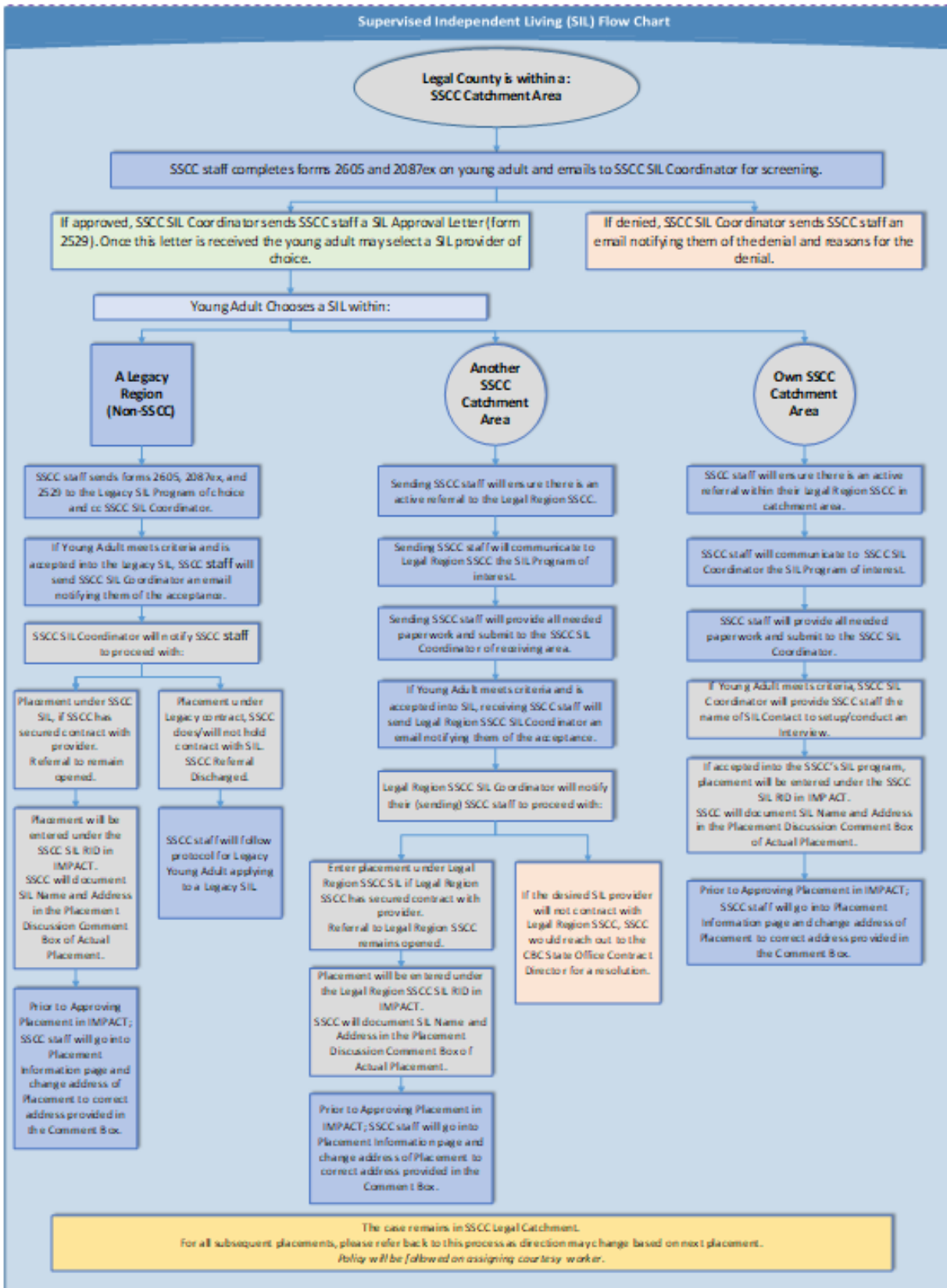
Catchment Region 3E- Stage I

Catchment 3b – Stage II

Catchment 8b - Region 8 (except Bexar County) – Stage II

Supervised Independent Living

Supervised Independent Living (SIL) Flow Chart



Subpoena Protocol for SSCC Employees

The [DFPS Subpoena Policy for Single Source Continuum Contractors](#) explains the procedures to be followed when a party:

- seeks information for the purpose of serving an SSCC employee or the custodian of records with a subpoena regarding a DFPS case; or
- has served an SSCC employee or custodian of records with a subpoena regarding a DFPS case.

Subpoenas for DFPS Records in Open and Closed Cases:

When a subpoena is directed to a SSCC caseworker regarding a pending or closed CPS matter or concurrent criminal case, the caseworker follows the procedure described in Section 2000 of the [DFPS Subpoena Policy for Single Source Continuum Contractors](#).

These matters are highly time sensitive. Subpoenas must be sent to the Reg01subs@dfps.texas.gov mailbox within two (2) hours of receipt by the caseworker.

Subpoenas for Contractor Records

SSCC Contractors have separate records not maintained by DFPS. For subpoenas received by a contractor for personnel records or records maintained by the contractor, DFPS may give guidance as to how DFPS legal handles such requests generally but will then refer the contractor to their in-house counsel for specific instructions and legal advice.

Utilizing Background Checks Unit & DFPS Special Investigators

What is CBCU?

CBCU stands for Criminal Background Checks Unit. DFPS staff members within the Background Checks unit process background checks for the following populations:

- CPS Emergency Placements (FBI Exigent Checks)
- DFPS New Hires and Volunteers
- External Volunteers
- Purchased Client Services contractors
- General Public

How does the SSCC contact CBCU?

The SSCC can send an email to their mailbox (ASKBC@dfps.texas.gov) for questions or information. The SSCC can also visit the [DFPS Background Checks site](#)¹.

On the site, there are links and access to FINDRS information, Handbook, Training, CPS Background Checks, Resources, and a direct link to contact information.

What are SIs?

SI stands for Special Investigator. A Special Investigator performs advanced consultative protective services work in Child Protective Investigations (CPI), with an emphasis on forensic investigations. Work involves investigating cases that are of a

¹ http://intranet.dfps.txnet.state.tx.us/Operations/OSS/Background_Checks/resources.asp

high profile or high-risk nature or require joint investigation with law enforcement due to alleged criminal acts. A Special Investigator provides consultation and assistance regarding complex cases and issues, forensic investigation techniques, and investigation skills. A Special Investigator accompanies workers on cases and provides information on criminal statutes and law enforcement procedures when circumstances warrant. Special Investigators can assist the SSCC partner in the following activities:

- With sufficient notice, Special Investigators can attend meetings to train on best practices and how to utilize tools (e.g. Accurint) available to the SSCC for locating families and missing children.
- On certain cases, Special Investigators can support in emergencies to help track families and [locate missing youth from care](#)¹. Special Investigators would assess the request and consult with the SSCC requestor on recommended actions per available resources.
- Special Investigators can provide consultation/A\assessment/assistance on Human Trafficking related concerns.

How does the SSCC contact the DFPS SIs? AND What to expect when requesting Special Investigator assistance?

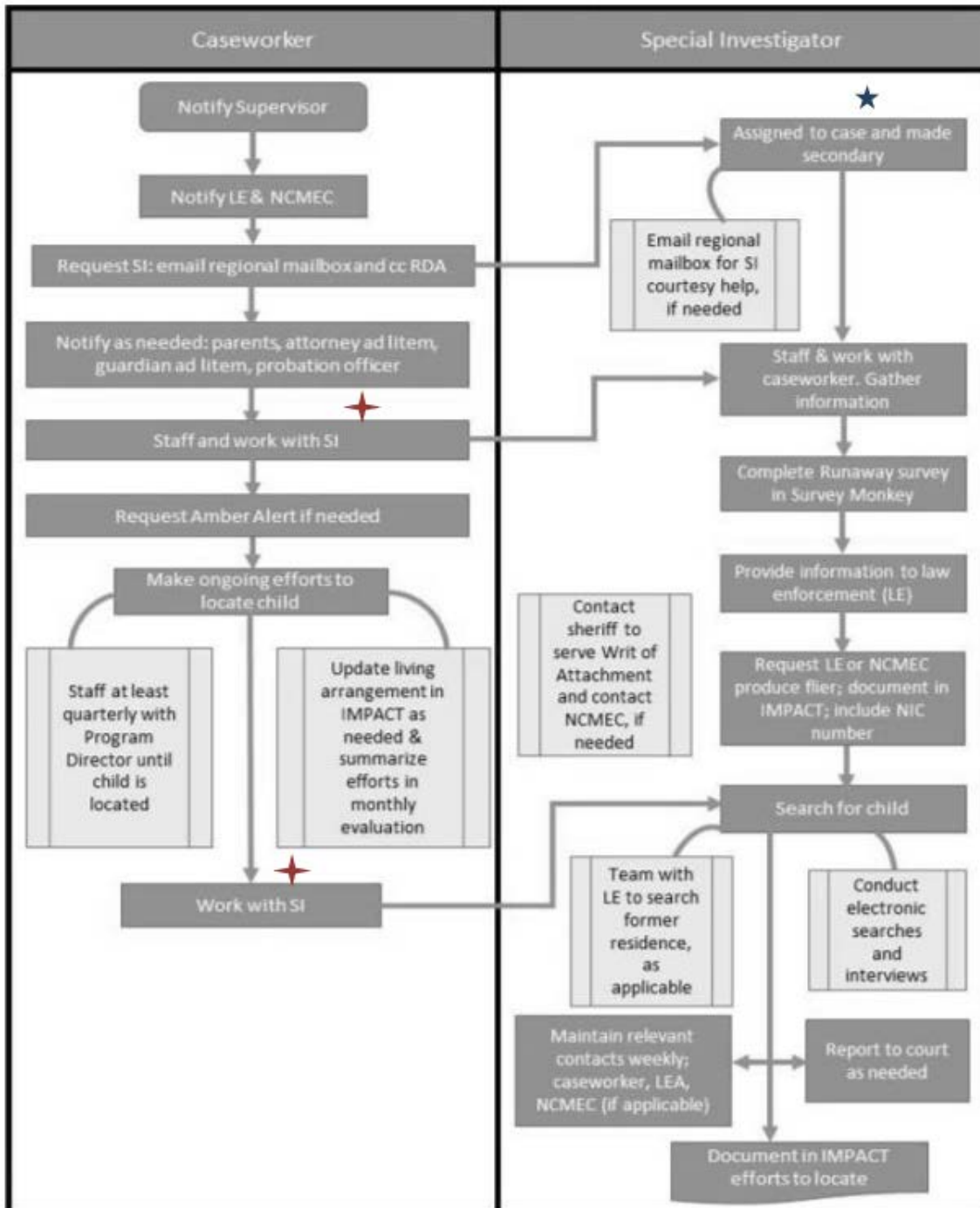
All requests for SI assistance should go through the SI regional mailbox. The mailboxes are monitored and are the method for routing assignments to Special Investigators. Only for emergencies (e.g. abduction) should the SI Program Director be contacted directly.

As soon as the caseworker finds the need to involve a Special Investigator, their supervisor must be notified and follow any protocols determined for the situation. Requests should be made to the Region of the child's legal custody, not the region of placement. For a search request such as running online searches for records and reports on persons of interest (e.g. TEA, Accurint, Location databases, Data Broker), include an [Information Request From-2005](#), detailing the need. Every region is different on an SI request, so consider creating an IMPACT 2.0 courtesy request². Courtesy requests for missing children also require the [CPS Missing Child Preliminary Sheet-4100](#)³ with a copy of the orders granting custody, and an email subject line "Missing Child Request for Assistance". As soon as the caseworker receives notification, via email or phone, on who's been assigned, the caseworker makes that Special Investigator secondary on the case (SUB stage). This flowchart for SSCC caseworker and special investigator steps when a child runs away or goes missing is an example of what the collaboration may look like.

¹ http://intranet.dfps.txnet.state.tx.us/CPI/Missing_Children/default.asp

² http://intranet/CPI/Courtesy_and_Transfer_List/default.asp

³ <http://intranet.dfps.txnet.state.tx.us/Forms/CPS/Conservatorship/default.asp>



★ SSCC must assign SI secondary on the SUB stage immediately upon notification of who's assigned to the case.

★ Complete missing event in IMPACT and coordinate with SI to complete recovery event in IMPACT if the SI completed the recovery interview.

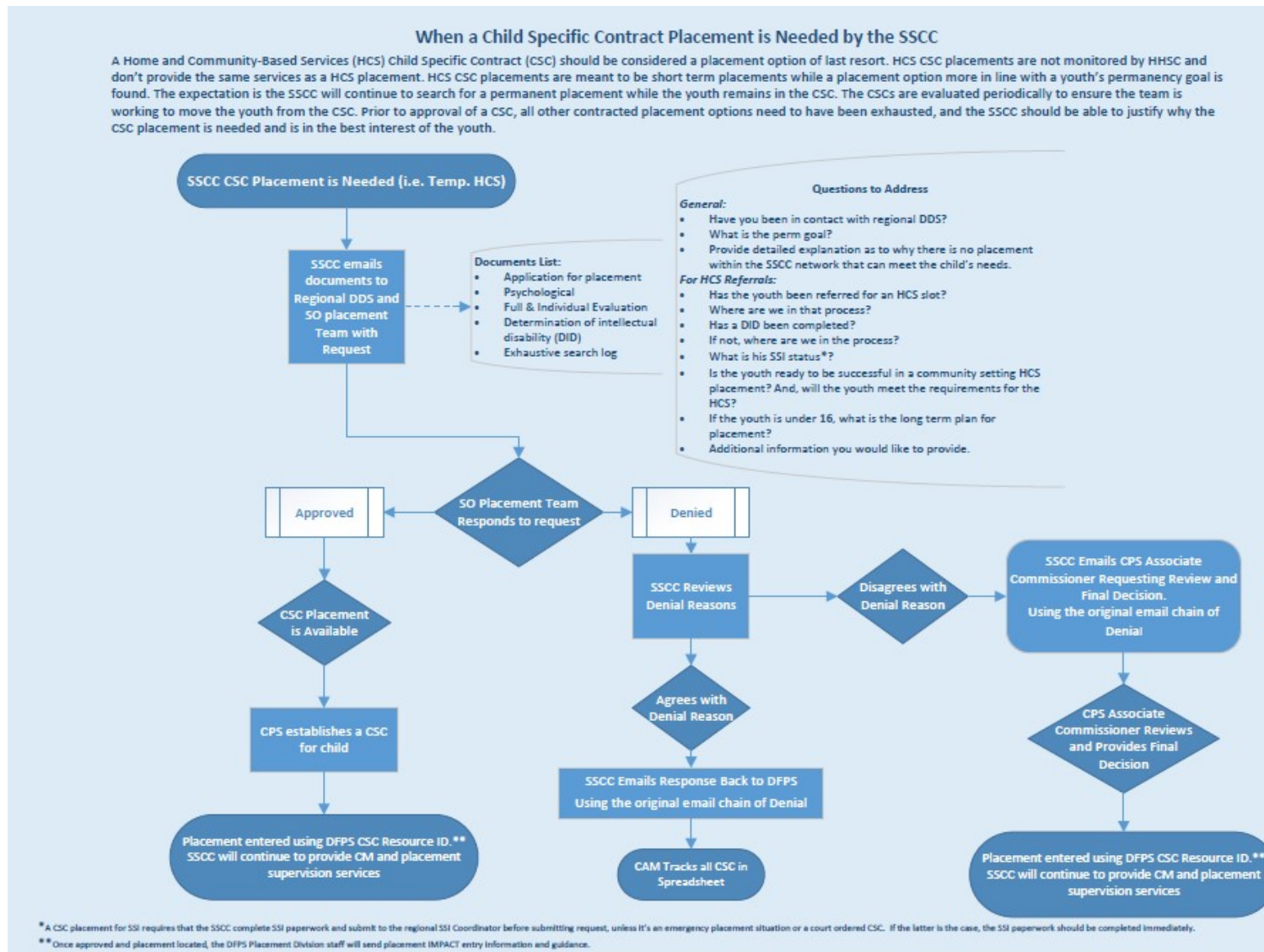
Child Specific Contract Placement is needed by SFCS

A Home and Community-Based Services (HCS) Child Specific Contract (CSC) should be considered a placement option of last resort. HCS CSC placements are not monitored by HHSC and don't provide the same services as a HCS placement. HCS CSC placements are meant to be short term placements while a placement option more in line with a youth's permanency goal is found.

Prior to approval of a CSC, all other contracted placement options need to have been exhausted, and the

SSCC should be able to justify why the CSC placement is needed and is in the best interest of the youth. The expectation is the SSCC will continue to search for a permanent placement while the youth remains in the CSC. The CSCs are evaluated periodically to ensure the SSCC is working to move the youth from the CSC.

It is important to emphasize that a CSC for SSI entails that the requester, in this case the SSCC, complete all SSI paperwork (application for SSI benefits and supporting documentation) and submit to the regional SSI coordinator before submitting the CSC placement request, unless it is an emergency placement situation or a court ordered CSC. If the latter is the case, the SSI paperwork should be completed immediately upon request. Please review the attached process flowchart for guidance on CSC requests.



OCA Child Fatality Review Process

OCA Child Fatality Review

The Office of Consumer Affairs (OCA) conducts reviews on cases when a child fatality has occurred and the case involves the following criteria:

1. The cause of death is suspected to be caused by abuse and/or neglect
2. There is an open or closed (CPI, CVS, FBSS, Kinship) within the last year.

OCA will conduct a review of the open Investigation regarding the child fatality with the most up-to-date information as the Investigation may still be ongoing and review any open and closed family cases within the last two (2) years. This review will identify staff involved, child safety concerns, policies associated with the concerns, trends, and patterns.

Critical Case Report is sent to DFPS Executive Leadership Team, Governors Office and external parties.

OCA Child Fatality Review is sent to the CPI Director of Investigations, CPS Director of Field, CPS Regional Director, and SSCC

The SSCC will review the cases OCA reviewed and other cases from the program area where the child fatality occurred. The SSCC will identify and list the steps and efforts to address issues noted in the OCA Child Fatality Review and their review of other cases on the Region Response to OCA Case Review Form.

The SSCC will review their findings with the CPS Regional Director and submit the Region Response to OCA Case Review Form to the CPS Director of Field and OCA within 30 days of the child fatality.

There will be times when OCA may identify cases for a Critical Case Meeting (CCM). The SSCC will receive a notification for when the CCM will occur. In lieu of providing the Regional Response for Cases Reviewed, the SSCC shall prepare to discuss any similar issues and policies affecting child safety as those listed in the OCA Child Fatality Review. SSCCs should be ready to provide updates on surviving children, who may be in care, or information relevant to SSCC oversight.

Kinship Home Study Service Authorization Step by Step Guide For Caregivers in CBC Catchment Areas:

1. For Region, you enter the region where the caregiver resides.

Resource Search Criteria

* Region:	02 Region 2	←	* County:	
* Category:			* Effective:	
* Service:				Select Resource

2. Enter the county where the caregiver resides.

Resource Search Criteria

* Region:	02 Region 2		* County:	BROWN	→
* Category:			* Effective:		
* Service:				Select Resource	

3. For Category select "Other".

Resource Search Criteria

* Region:	02 Region 2		* County:	BROWN	
* Category:	Other	←	* Effective:		
* Service:				Select Resource	

4. Enter effective start date.

Resource Search Criteria

* Region:	02 Region 2		* County:	BROWN	
* Category:	Other		* Effective:	05/13/2021	→
* Service:				Select Resource	

5. For Service select "68A Reltv/Othr Caregvr-HM Assmnt".

Resource Search Criteria

* Region: 02 Region 2 * County: BROWN

* Category: Other * Effective: 05/13/2021

* Service: 68A Reltv/Othr Caregvr-Hm Assmnt  [Select Resource](#)

6. Select the Resource for the SSCC that correlates with the region the caregiver resides in.

	Resource Name	Resource ID	Status	C	Resource Type
<input type="radio"/>	Covenant Kids Inc.- Region 2	25175911		✓	
<input type="radio"/>	Sscc 2ingage R2 (adoption)	26096704		✓	
<input type="radio"/>	Sscc Ach 3b Adoption	25207541		✓	

Do not be alarmed it says “ADOPTION”

For this example, we will select “SSCC SFCS R2 (adoption).”

7. Example of final criteria once all information has been entered.

Resource Search Criteria

* Region: 02 Region 2 * County: BROWN

* Category: Other * Effective: 05/13/2021

* Service: Reltv/Othr Caregvr-Hm Assmnt [Select Resource](#)

Resource Information

Resource Name: Sscc 2ingage R2 (adoption) [Complete](#)

Resource ID: 26096704

Operation Manual Version Tracking

Version (Published Date)	Section Topics Affected	Change Details
February 2022 V.1	NA	
April 2022	Courtesy Supervision email address	Corrected email address
	Administrative	Added section of Other Miscellaneous Administrative Items and added Forms and Publications to that section.
	Appendix: CBC Flow Charts RCCI Screener Email Notification Process Map	Updated RCCI Screener Email Notification Process Map to include SFCS Regional Compliance Mailbox and SFCS RD Asst. Equivalent.
	Kinship Placement and Case Management Referral	Removed incorrect supervisor
	Volunteer and Community Engagement, Access to Resource Rooms	Correct phone numbers for contacts.
	SSCC Exceptional Care Flow Chart	Updated to latest version includes edits related to the OCBCT Office and Placement team contacts.
	Title	Added area name in addition to region to title.
May 2022	New Paid Placement and Case Management Referrals	Change initial primary assignment from Placement Coordinator to Permanency Specialist
	Referrals When Placement is Not Needed Immediately but DFPS Has obtained Conservatorship	Change initial primary assignment from Placement Coordinator to Permanency Specialist
	Region 1 Removal Checklist	Correct link to Region 1 Removal Checklist
April 2023	Operating Policies and Rules	Updated CBCA information
	Legal basis for CPS and Single Source Continuum	Updated catchment areas
	Child Sexual Aggression Designation	Replaced Child Sexual Aggression Resource Guide with Sexual Incident Resource Guide.
	Signature Requirements for Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification	Updated chart to reflect "Unauthorized Home" setting.

		Updated chart under “Other Facilities” section
	New Paid Placement and Case Management Referrals	Wording changed to clarify sentence
	Placing Children in Certain Institutions	Added information about reestablishing the SSCC child referral after placement is complete.
	Placement at Casa Esperanza (Hope House), Mission Road	Process was updated
	State Office Divisions Collaboration	Added In-State, Out-of-State and Out-of-Country travel section
	Administrative Related	Replaced “Director of Community Engagement” with “Director of Human Resources”
	Records Management	Added that records should be requested through OneCase unless they fit one of the exceptions listed.
	SSCC Exceptional Care Process Update	Link to Exceptional Care Rate Resource Guide added
	ICPC Flow Chart	ICPC Flow Chart added to the appendix
	SIL Flow Chart	SIL Flow Chart Updated
September 2023	CSA Designee	Updated point of contact for CSA matters
	3-day medical	Additions made for new 3-day policy
	Abortion	Pregnancy section replaced previous Abortion section.
	External Documentation	Section updated
	Payment for Temporary Absences from Paid Placement	Section Added