

POLICY VI-F: CASE REVIEW JUDICIAL HEARINGS FOR CHILDREN IN OUT-OF-HOME PLACEMENT

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Following a probable cause hearing, an adjudication hearing shall be held to determine whether the allegations in a petition are substantiated by a preponderance of the evidence. The dependency-neglect adjudication hearing shall be held within 30 days after the probable cause hearing under A.C.A. § 9-27-315. On motion of the court and parties for good cause shown, it may be continued for no more than 30 days following the first 30 days (i.e., up to 60 days after the probable cause hearing). However, if necessary and relevant evidence cannot be obtained in a timely manner the dependency-neglect adjudication hearing may be continued for up to an additional 30 days (i.e., up to 90 days after the probable cause hearing) upon motion of the court or any party.

In dependency-neglect cases, a written adjudication order shall be filed by the court within 30 days of the date of the hearing or prior to the next hearing, whichever is sooner. The Office of Chief Counsel (OCC) is responsible for drafting and filing court orders. The court can determine the case disposition at the adjudication or at a separate hearing. A disposition determines what actions the agency will take in the case.

A judicial determination as to whether reasonable efforts were made or were not required to prevent removal must be made no later than 60 days from the date the child is removed from the home. If a judicial determination concerning reasonable efforts to prevent removal is not made within the specified timeframe, the child will be ineligible for IV-E foster care maintenance payments for the duration of that stay in foster care.

The status of each child in out-of-home placement, including children placed out-of-state, shall be reviewed no less than every six months by a judicial review to:

- A. Determine the safety of the child and the continuing need for and appropriateness of the placement;
- B. Determine the extent of compliance with the case plan;
- C. Determine the extent of progress made toward alleviating or mitigating the causes necessitating the placement; and,
- D. Project a likely date by which the child may be returned and safely maintained at home or placed for adoption or legal guardianship.

Pertaining to title IV-E eligibility requirements, the judicial review is conducted by court review, not an administrative review process. During each six-month review, the court shall make determinations based upon the best interest of the child. The best interest of the child shall be paramount at every stage of the judicial process.

Each child in an out-of-home placement, including children placed out-of-state, shall have a permanency planning hearing no later than 12 months of the date the child is considered to have entered foster care and not less frequently than every 12 months thereafter during the continuation of foster care. A child will be considered to have entered foster care on the earlier of:

- the date of the first judicial finding that the child has been subjected to child abuse or neglect, or
- the date that is 60 days after the date on which the child is removed from the home.

In-state and out-of-state options, including interstate placement, if appropriate, will be considered when making reasonable efforts to place the child in a timely manner in accordance with the permanency plan. Reasonable efforts will be made to complete the steps necessary in order to finalize the legal permanent placement of the child. If the child is in an out-of-state placement at the time of the hearing, the court will determine whether the placement continues to be appropriate and is in the best interest of the child. When the court determines that reasonable efforts to return the child home are not required, the court shall hold a permanency planning hearing within 30 days of the determination in order to enter a new disposition in the

case to determine the child's future status. A permanency planning hearing shall also be held after a child has been in an out-of-home placement for 15 of the previous 22 months, excluding the time spent while the child is on a trial home placement and runaway status. The permanency planning hearing will be conducted by the court, not by an administrative body.

When it becomes necessary to transfer a case to another venue, the court will contact the judge in the other venue to confirm that the transfer will be accepted. After confirmation has been received, the transferring judge will enter a transfer order with the time and date of the next hearing and the location of the court in the new venue. The transferring judge will immediately transmit the order to the judge in the new venue. A copy of the order will be provided to all parties and attorneys to the case. The transferring court will copy and send all court records to the judge in the new venue.

The Division must obtain a judicial determination that reasonable efforts were made to finalize the permanency plan for the child no later than 12 months of the date the child entered foster care. If a child remains in an out-of-home placement after the initial permanency planning hearing, an annual permanency planning hearing shall be held to reassess the permanency goal selected for the child. If a judicial determination regarding reasonable efforts to finalize a permanency plan is not made, the child will be ineligible under title IV-E from the end of the 12th month following the date the child is considered to have entered foster care or the end of the 12th month following the month in which the most recent judicial determination of reasonable efforts to finalize a permanency plan was made, and remains ineligible until such a judicial determination is made.

Reasonable efforts to finalize an alternate permanency plan such as placing a child for adoption or with a legal guardian, including identifying appropriate in-State and out-of-State placements, should be made concurrently with reasonable efforts to reunify the child and family.

The permanency planning hearing shall determine the permanency goal for the child that includes, listed in order of preference:

- A. Returning the child home at the permanency planning hearing if it is in the best interest of the child and the child's health and safety can be adequately safeguarded if returned home.
- B. Authorizing a plan of reunification if the parent, guardian, or custodian is complying with the established case plan and orders of the court, making significant progress toward achieving goals established in case plan and diligently working toward reunification.

A parent's, guardian's, or custodian's resumption of contact or overtures toward participating in the case plan or following the orders of the court in the months or weeks immediately preceding the permanency hearing are insufficient grounds for authorizing a plan to return home as the permanency plan and the burden is on the parent, guardian, or custodian to demonstrate genuine, sustainable investment in completing the requirements of the case plan and following the orders of the court in order to authorize a plan to return home as the permanency goal.

- 2) The parent, guardian, or custodian is making significant and measurable progress toward remedying the conditions that caused the juvenile's removal and the juvenile's continued removal from the home and the return of the juvenile to the parent, guardian, or custodian shall occur within a time frame that is consistent with the juvenile's developmental needs but no later than three months from the date of the permanency planning hearing.
- C. Adoption with the Division filing a petition for TPR, unless:
 - 1) The child is being cared for by a relative, including a minor child in foster care caring for his or her own child who is in foster care, and TPR is not in the best interest of the child;
 - 2) The Division has documented in the case plan a compelling reason why filing a termination petition would not be in the best interest of the child and the court approves the compelling reason as documented in the case plan; or
 - 3) The Division has not provided services, consistent with the case plan, necessary for the safe return of the child to his home.

Termination of Parental Rights

At any time during the course of a case, DHS, the attorney ad litem, or the court can request a hearing on whether or not reunification services should be terminated. The requesting party shall provide notice to the parties at least 14 calendar days before the hearing. The notice shall identify the grounds for recommending termination of reunification services in sufficient detail to put the family on notice.

The requesting party shall present the case. The court shall conduct and complete a hearing on a "no reunification services" request within 50 days of the date of written notice to the defendants. However, upon good cause shown, the hearing may be continued for an additional 20 days.

The court shall determine whether reunification services shall be terminated and enter an order of that determination. If the court determines that reunification services shall be terminated, the court shall hold a permanency planning hearing within 30 days after the determination. If the court determines the permanency goal to be TPR, the Department shall file a petition to terminate parental rights within 30 days from the date of the entry of the order establishing such goal. The court shall conduct and complete a TPR hearing within 90 days from the date the termination of parental rights petition is filed, unless continued for good cause. After an order of termination of parental rights is filed, the court shall review the case at least every six months until permanency is achieved for the child. A permanency hearing shall be held each year following the initial hearing until permanency is achieved. (Refer to Policy VIII-C.) The court reviews continue, even if a case is on appeal.

The court may terminate parental rights on one parent and not the other parent if the court finds that it is in the best interest of the child.

Post-TPR Visits

If it is in the child's best interest, visits with siblings and with relatives may take place after TPR. Visitation after TPR will continue until an adoption placement is made or the Out-of-Home placement case is closed. Continuation of visits with relatives does not include the parents for whom the agency has obtained TPR.

- D. Legal guardianship - If the court grants legal guardianship no further services or periodic reviews are required. If a legal guardianship supported by a subsidy is put in place, the Division will conduct an annual review of the family's and child's circumstances and an annual report to the court will be filed.
- E. Permanent custody with a fit and willing relative - If the court grants permanent custody no further services or periodic reviews are required.
- F. Independence (see definition in Appendix I: Glossary), including an Another Planned Permanent Living Arrangement (APPLA). In the case of a child who has attained age 16, the permanency planning hearing will determine the services needed to assist the child to make the transition from foster care to successful adulthood. Independence shall be selected only if the Division has documented to the circuit court a compelling reason for determining that it would not be in the best interest of the child to follow one of the permanency plans above.

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If DHS concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency plan for a child is placement in another planned permanent living arrangement, DHS will document to the court the compelling reason for the alternate plan.

The Department may seek the services of the Federal Parent Locator Service to search for absent parents at any point in order to facilitate a permanency plan.

Notification of Hearings and Reviews

The Department shall provide the foster parent(s) of a child, and any pre-adoptive parent or relative providing care for the child with timely notice of, and the right to be heard in, permanency planning hearings and six-month periodic reviews held with respect to the child during the time the child is in the care of such foster

parent, pre-adoptive parent or relative caregiver. Notice of, and the right to be heard, does not include the right to standing as a party to the case.

In any permanency planning hearing, including any hearing regarding the transition of the child from foster care to independent living, procedural safeguards shall be applied to assure the court or administrative body conducting the hearing consults with age-appropriate children regarding the proposed permanency or transition plans. The hearing shall also address procedural safeguards with respect to parental rights pertaining to the removal of the child from the home of his or her parents, to a change in the child's placement, and to any determination affecting visitation privileges of parents.

Judicial determinations regarding "contrary to the welfare," reasonable efforts to prevent removal, and reasonable efforts to finalize the permanency plan in effect, including judicial determinations that reasonable efforts are not required, must be explicitly documented and made on a case-by-case basis and so stated in the court order.

Reasonable efforts are not required to prevent a child's removal from home or to reunify the child and family if

- A. The court has determined that the parent has subjected the child to aggravated circumstances (see Glossary);
- B. The court has determined that the parent has been convicted of:
 - 1) Murder of another child of the parent;
 - 2) Voluntary manslaughter of another child of the parent;
 - 3) Aiding or abetting, attempting, conspiring, or soliciting to commit such a murder or such a voluntary manslaughter; or
 - 4) A felony assault that results in serious bodily injury to the child or another child of the parent.
 - 5) Abandoned an infant as defined by A.C.A. § 12-18-103.
 - 6) Registered with a sex offender registry under the 2006 Adam Walsh Protection and Safety Act.
- C. The parental rights of the parent with respect to a sibling have been terminated involuntarily.

If reasonable efforts and "contrary to the welfare" judicial determinations are not included as required in the court orders, a transcript of the court proceedings is the only other documentation acceptable to verify that the required determinations have been made.

Neither affidavits nor nunc pro tunc orders will be acceptable as verification documentation in support of reasonable efforts and "contrary to the welfare" judicial determinations.

Court orders that reference state law to substantiate judicial determinations are not acceptable, even if state law provides that removal must be based on a judicial determination that remaining in the home would be contrary to the child's welfare or that removal can only be ordered after reasonable efforts have been made.

At any hearing in which the Department of Human Services is ordered by the court to provide services for a family, the court shall provide the Department with the opportunity to be heard. When DHS is not a party to the case, failure by the court to provide at least five working days' notice to DHS renders any part of the order pertaining to DHS void. Refer to Policy II-G for information related to FINS cases.

PROCEDURE VI-F1: Case Review Judicial Hearings for Children in Out-of-Home Placement

09/2011

The Family Service Worker will:

- A. Receive the confirmed court date from the OCC attorney.
- B. Provide the OCC attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Procedure II-D10.
- C. Provide notice to the parties at least 14 calendar days before the hearing, if DHS is the requesting party.
- D. Submit court report to supervisor for review and approval prior to review hearings.
- E. Complete a court report for all review hearings.
- F. Submit the CFS-6011: Court Report to the OCC Attorney within 14 days prior to the hearing.
- G. Submit the CFS-6024: Permanency Planning Hearing Court Report to OCC, CASA and all parties no later than 14 days before the scheduled Permanency Planning Hearing.
- H. Document distribution of court reports to all parties or their attorneys and CASA if applicable via the CFS-423: Certificate of Service.
- I. Make a recommendation to the court to allow visits between siblings and with appropriate relatives if this is in the child's best interest. Document the recommendation in the CFS-6024: Permanency Planning Hearing Court Report (This is only a recommendation. Relative visits after TPR must have court approval and cannot continue without court approval.).
- J. Invite the out-of-home placement provider to all hearings.
- K. Attend all hearings and be prepared to provide testimony regarding services offered or provided, progress and recommendations to the court.
- L. Bring case files to all hearings.
- M. Discuss orders of the court with the family.

The FSW Supervisor will:

- A. Review and approve all court reports prior to review hearings.
- B. Conference with and support FSW regarding permanency issues related to the case as necessary.

The court may order progress reports from the service provider whenever a child is placed out-of-home and in a setting other than a DHS foster home. The order shall set forth the schedule for the progress reports and shall identify the service provider responsible for submitting the progress report. The service provider shall be provided a copy of the written court order by certified mail, restricted delivery or by process server. Failure to follow the order of the court shall subject the service provider to contempt sanctions of the court.

The progress report shall include, but is not limited to:

- A. Reason for admission;
- B. Projected length of stay;
- C. Identified goals and objectives to be addressed during placement;
- D. Progress of the child in meeting goals and objectives;
- E. Barriers to progress;
- F. Significant behavioral disruptions and response of provider; and
- G. Recommendations upon the child's release.

The service provider shall immediately report any incidents concerning the juvenile's health or safety to the child's attorney or attorney ad.litem and the custodian of the child.

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case to determine the child's future status. A permanency planning hearing shall also be held after a child has been in an out-of-home placement for 15 of the previous 22 months, excluding the time spent while the child is on a trial home placement and runaway status. The permanency planning hearing will be conducted by the court, not by an administrative body.

When it becomes necessary to transfer a case to another venue, the court will contact the judge in the other venue to confirm that the transfer will be accepted. After confirmation has been received, the transferring judge will enter a transfer order with the time and date of the next hearing and the location of the court in the new venue. The transferring judge will immediately transmit the order to the judge in the new venue. A copy of the order will be provided to all parties and attorneys to the case. The transferring court will copy and send all court records to the judge in the new venue.

The Division must obtain a judicial determination that reasonable efforts were made to finalize the permanency plan for the child no later than 12 months of the date the child entered foster care. If a child remains in an out-of-home placement after the initial permanency planning hearing, an annual permanency planning hearing shall be held to reassess the permanency goal selected for the child. If a judicial determination regarding reasonable efforts to finalize a permanency plan is not made, the child will be ineligible under title IV-E from the end of the 12th month following the date the child is considered to have entered foster care or the end of the 12th month following the month in which the most recent judicial determination of reasonable efforts to finalize a permanency plan was made, and remains ineligible until such a judicial determination is made.

Reasonable efforts to finalize an alternate permanency plan such as placing a child for adoption or with a legal guardian, including identifying appropriate in-State and out-of-State placements, should be made concurrently with reasonable efforts to reunify the child and family.

The permanency planning hearing shall determine the permanency goal for the child that includes, listed in order of preference:

- A. Returning the child home at the permanency planning hearing if it is in the best interest of the child and the child's health and safety can be adequately safeguarded if returned home.
- B. Authorizing a plan of reunification if the parent, guardian, or custodian is complying with the established case plan and orders of the court, making significant progress toward achieving goals established in case plan and diligently working toward reunification.

A parent's, guardian's, or custodian's resumption of contact or overtures toward participating in the case plan or following the orders of the court in the months or weeks immediately preceding the permanency hearing are insufficient grounds for authorizing a plan to return home as the permanency plan and the burden is on the parent, guardian, or custodian to demonstrate genuine, sustainable investment in completing the requirements of the case plan and following the orders of the court in order to authorize a plan to return home as the permanency goal.

- 2) The parent, guardian, or custodian is making significant and measurable progress toward remedying the conditions that caused the juvenile's removal and the juvenile's continued removal from the home and the return of the juvenile to the parent, guardian, or custodian shall occur within a time frame that is consistent with the juvenile's developmental needs but no later than three months from the date of the permanency planning hearing.
- C. Adoption with the Division filing a petition for TPR, unless:
 - 1) The child is being cared for by a relative, including a minor child in foster care caring for his or her own child who is in foster care, and TPR is not in the best interest of the child;
 - 2) The Division has documented in the case plan a compelling reason why filing a termination petition would not be in the best interest of the child and the court approves the compelling reason as documented in the case plan; or
 - 3) The Division has not provided services, consistent with the case plan, necessary for the safe return of the child to his home.

Termination of Parental Rights

At any time during the course of a case, DHS, the attorney ad litem, or the court can request a hearing on whether or not reunification services should be terminated. The requesting party shall provide notice to the parties at least 14 calendar days before the hearing. The notice shall identify the grounds for recommending termination of reunification services in sufficient detail to put the family on notice.

The requesting party shall present the case. The court shall conduct and complete a hearing on a "no reunification services" request within 50 days of the date of written notice to the defendants. However, upon good cause shown, the hearing may be continued for an additional 20 days.

The court shall determine whether reunification services shall be terminated and enter an order of that determination. If the court determines that reunification services shall be terminated, the court shall hold a permanency planning hearing within 30 days after the determination. If the court determines the permanency goal to be TPR, the Department shall file a petition to terminate parental rights within 30 days from the date of the entry of the order establishing such goal. The court shall conduct and complete a TPR hearing within 90 days from the date the termination of parental rights petition is filed, unless continued for good cause. After an order of termination of parental rights is filed, the court shall review the case at least every six months until permanency is achieved for the child. A permanency hearing shall be held each year following the initial hearing until permanence is achieved. (Refer to Policy VIII-C.) The court reviews continue, even if a case is on appeal.

The court may terminate parental rights on one parent and not the other parent if the court finds that it is in the best interest of the child.

Post-TPR Visits

If it is in the child's best interest, visits with siblings and with relatives may take place after TPR. Visitation after TPR will continue until an adoption placement is made or the Out-of-Home placement case is closed. Continuation of visits with relatives does not include the parents for whom the agency has obtained TPR.

- D. Legal guardianship - If the court grants legal guardianship no further services or periodic reviews are required. If a legal guardianship supported by a subsidy is put in place, the Division will conduct an annual review of the family's and child's circumstances and an annual report to the court will be filed.
- E. Permanent custody with a fit and willing relative - If the court grants permanent custody no further services or periodic reviews are required.
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If DHS concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency plan for a child is placement in another planned permanent living arrangement, DHS will document to the court the compelling reason for the alternate plan.

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Reasonable efforts are not required to prevent a child's removal from home or to reunify the child and family if

- A. The court has determined that the parent has subjected the child to aggravated circumstances (see Glossary);
- B. The court has determined that the parent has been convicted of:
 - 1) Murder of another child of the parent;
 - 2) Voluntary manslaughter of another child of the parent;
 - 3) Aiding or abetting, attempting, conspiring, or soliciting to commit such a murder or such a voluntary manslaughter; or
 - 4) A felony assault that results in serious bodily injury to the child or another child of the parent.
 - 5) Abandoned an infant as defined by A.C.A. § 12-18-103.
 - 6) Registered with a sex offender registry under the 2006 Adam Walsh Protection and Safety Act.
- C. The parental rights of the parent with respect to a sibling have been terminated involuntarily.

If reasonable efforts and "contrary to the welfare" judicial determinations are not included as required in the court orders, a transcript of the court proceedings is the only other documentation acceptable to verify that the required determinations have been made.

Neither affidavits nor nunc pro tunc orders will be acceptable as verification documentation in support of reasonable efforts and "contrary to the welfare" judicial determinations.

Court orders that reference state law to substantiate judicial determinations are not acceptable, even if state law provides that removal must be based on a judicial determination that remaining in the home would be contrary to the child's welfare or that removal can only be ordered after reasonable efforts have been made.

At any hearing in which the Department of Human Services is ordered by the court to provide services for a family, the court shall provide the Department with the opportunity to be heard. When DHS is not a party to the case, failure by the court to provide at least five working days' notice to DHS renders any part of the order pertaining to DHS void. Refer to Policy II-G for information related to FINS cases.

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- C. Provide notice to the parties at least 14 calendar days before the hearing, if DHS is the requesting party.
- D. Submit court report to supervisor for review and approval prior to review hearings.
- E. Complete a court report for all review hearings.
- F. Submit the CFS-6011: Court Report to the OCC Attorney within 14 days prior to the hearing.
- G. Submit the CFS-6024: Permanency Planning Hearing Court Report to OCC, CASA and all parties no later than 14 days before the scheduled Permanency Planning Hearing.
- H. Document distribution of court reports to all parties or their attorneys and CASA, if applicable via the CFS-423: Certificate of Service.
- I. Make a recommendation to the court to allow visits between siblings and with appropriate relatives if this is in the child's best interest. Document the recommendation in the CFS-6024: Permanency Planning Hearing Court Report (This is only a recommendation. Relative visits after TPR must have court approval and cannot continue without court approval.).
- J. Invite the out-of-home placement provider to all hearings.
- K. Attend all hearings and be prepared to provide testimony regarding services offered or provided, progress and recommendations to the court.
- L. Bring case files to all hearings.
- M. Discuss orders of the court with the family.

The FSW Supervisor will:

- A. Review and approve all court reports prior to review hearings.
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The court may order progress reports from the service provider whenever a child is placed out-of-home and in a setting other than a DHS foster home. The order shall set forth the schedule for the progress reports and shall identify the service provider responsible for submitting the progress report. The service provider shall be provided a copy of the written court order by certified mail, restricted delivery or by process server. Failure to follow the order of the court shall subject the service provider to contempt sanctions of the court.

The progress report shall include, but is not limited to:

- A. Reason for admission;
- B. Projected length of stay;
- C. Identified goals and objectives to be addressed during placement;
- D. Progress of the child in meeting goals and objectives;
- E. Barriers to progress;
- F. Significant behavioral disruptions and response of provider; and
- G. Recommendations upon the child's release.

The service provider shall immediately report any incidents concerning the juvenile's health or safety to the child's attorney or attorney ad litem and the custodian of the child.



**Arkansas Department of Human Services
Division of Children and Family Services**

**Notice to Adult Relatives by Blood, Adoption or Marriage that a
Child Has Been Taken into DCFS Custody**

Deleted: or

To: _____
 Address: _____

 From: _____ Phone: _____
 Email: _____ Date: _____

Dear RELATIVE'S NAME :

You have been identified as a relative of CHILD'S NAME who is now in the custody of the Arkansas Department of Human Services' Division of Children and Family Services (DCFS). DCFS has removed or is removing the above-named child from the home of _____ We believe that relatives play an important role in the lives of children, especially children who must be temporarily cared for by someone other than their parents. Children do better when they can temporarily live with or stay connected in other ways to people who know and care about them.

We are contacting you to see if you are interested in being considered as a temporary home for or otherwise staying in contact with CHILD'S FIRST NAME while s/he is in custody. In the next few days, I or someone from my agency will call you to review your options for helping to care for CHILD'S FIRST NAME.

Pursuant to Arkansas Code Ann. §9-27-325, this is your notice that you have the option to (1) Participate in the care and placement of the child, (2) Become a provisional foster parent, and/or (3) Visit the child.

If you would like to bring the child into your home, you may ask to become a Provisional Foster Parent. DCFS may approve your home as a Provisional Foster Home after conducting (1) a health and safety check, which includes background checks, and (2) a visual inspection of your home. A Provisional Foster Home may remain as such for six months, after which time one of the following must take place:

1. You must be approved as a Regular Foster Home.
2. You must receive permanent custody of the child.
3. Your Provisional Foster Home must be closed and the child must be removed.

If your home is opened as a Provisional Foster Home, you will receive benefits for which you may become entitled after placement of the child in your home, such as Supplemental Nutrition Assistance Program (SNAP—formerly known as food stamps). If your home is approved as a Regular Foster Home within six months of becoming a Provisional Foster Home, DCFS will provide all services and supports available to every child in foster care, such as monthly board payments for each child and Medicaid.

If you are not able to provide a temporary home for CHILD'S FIRST NAME, there are other ways for you to stay involved in his/her life and maintain important family connections. You might visit regularly, arrange regular weekend or holiday visits at your home, or offer to transport CHILD'S FIRST NAME to and from school, medical appointments, or other activities.

We will call you in the next few days to explore your options, but feel free to contact me sooner. My phone and email are listed above. We need to communicate with you at your earliest convenience either by phone, mail, email, or in person, to determine if you are interested in (1) Participating in the care and placement of the child, (2) Becoming a provisional foster parent, or (3) Visiting the child. Contacting me will help ensure that you do not lose the opportunity to connect with CHILD'S FIRST NAME now or in the future.

Signature of Contact Person

Deleted: 02



**Arkansas Department of Human Services
Division of Children and Family Services**

**Notice to Adult Relatives by Blood, Adoption or Marriage that a
Child Has Been Taken into DCFS Custody**

To: _____

Address: _____

From: _____

Phone: _____

Email: _____

Date: _____

Dear RELATIVE'S NAME :

You have been identified as a relative of CHILD'S NAME who is now in the custody of the Arkansas Department of Human Services' Division of Children and Family Services (DCFS). DCFS has removed or is removing the above-named child from the home of _____ . We believe that relatives play an important role in the lives of children, especially children who must be temporarily cared for by someone other than their parents. Children do better when they can temporarily live with or stay connected in other ways to people who know and care about them.

We are contacting you to see if you are interested in being considered as a temporary home for or otherwise staying in contact with CHILD'S FIRST NAME while s/he is in custody. In the next few days, I or someone from my agency will call you to review your options for helping to care for CHILD'S FIRST NAME.

Pursuant to Arkansas Code Ann. §9-27-325, this is your notice that you have the option to (1) Participate in the care and placement of the child, (2) Become a provisional foster parent, and/or (3) Visit the child.

If you would like to bring the child into your home, you may ask to become a Provisional Foster Parent. DCFS may approve your home as a Provisional Foster Home after conducting (1) a health and safety check, which includes background checks, and (2) a visual inspection of your home. A Provisional Foster Home may remain as such for six months, after which time one of the following must take place:

1. You must be approved as a Regular Foster Home.
2. You must receive permanent custody of the child.
3. Your Provisional Foster Home must be closed and the child must be removed.

If your home is opened as a Provisional Foster Home, you will receive benefits for which you may become entitled after placement of the child in your home, such as Supplemental Nutrition Assistance Program (SNAP—formerly known as food stamps). If your home is approved as a Regular Foster Home within six months of becoming a Provisional Foster Home, DCFS will provide all services and supports available to every child in foster care, such as monthly board payments for each child and Medicaid.

If you are not able to provide a temporary home for CHILD'S FIRST NAME, there are other ways for you to stay involved in his/her life and maintain important family connections. You might visit regularly, arrange regular weekend or holiday visits at your home, or offer to transport CHILD'S FIRST NAME to and from school, medical appointments, or other activities.

We will call you in the next few days to explore your options, but feel free to contact me sooner. My phone and email are listed above. We need to communicate with you at your earliest convenience either by phone, mail, email, or in person, to determine if you are interested in (1) Participating in the care and placement of the child, (2) Becoming a provisional foster parent, or (3) Visiting the child. Contacting me will help ensure that you do not lose the opportunity to connect with CHILD'S FIRST NAME now or in the future.

Signature of Contact Person



**Arkansas Department of Human Services
Division of Children and Family Services**

**Notice to Fictive Kin that a
Child Has Been Taken into DCFS Custody**

Deleted: or Adult Relatives by Marriage

To: _____

Address: _____

From: _____

Phone: _____

Email: _____

Date: _____

Dear NAME OF FICTIVE KIN,

You have been identified as an individual having a strong, positive, emotional tie to CHILD'S NAME and a positive role in CHILD'S NAME's life. This child is now in the custody of the Arkansas Department of Human Services' Division of Children and Family Services (DCFS). DCFS has removed or is removing the above-named child from the home of _____. We believe that relatives and other individuals with whom a child shares a positive, meaningful relationship play an important role in a child's life, especially a child who must be temporarily cared for by someone other than a parent. Children do better when they can temporarily live with or stay connected in other ways to people who know and care about them.

Deleted: with
Deleted: meaningful relationship
Deleted: with
Deleted: who is

We are contacting you as someone who could offer services needed by CHILD'S NAME and/or his or her family such as offering a temporary home for or otherwise supporting CHILD'S FIRST NAME by staying in contact while he or she is in custody. In the next few days, I or someone from my agency will call you to review your options for helping to care for CHILD'S FIRST NAME.

Pursuant to Arkansas Code Ann. §9-27-325, this is your notice that you may have the option to (1) Participate in the care and placement of the child, (2) Become a foster parent, and/or (3) Visit the child.

If you would like to bring the child into your home and you meet the requirements of a Regular Foster Home, you may apply to become a Foster Parent. Requirements include background checks and a home assessment. If you become a Foster Parent, you will receive all services and supports available to every child in foster care, such as monthly board payments and Medicaid.

If you are not able to provide a temporary home for CHILD'S FIRST NAME, there are other ways for you to stay involved in his or her life and maintain important connections. You might visit regularly, arrange regular weekend or holiday visits at your home, or offer to transport CHILD'S FIRST NAME to and from school, medical appointments, or other activities.

We will call you in the next few days to explore your options, but feel free to contact me sooner. My phone number and email address are listed above. We need to communicate with you at your earliest convenience by phone, mail, email, or in person, to determine if you are interested in (1) Participating in the care and placement of the child, (2) Becoming a foster parent, and/or (3) Visiting the child. Contacting me will help ensure that you do not lose the opportunity to connect with CHILD'S FIRST NAME now or in the future.

Signature

Deleted: 02



Arkansas Department of Human Services
Division of Children and Family Services

Notice to Fictive Kin that a
Child Has Been Taken into DCFS Custody

To:
Address:
From:
Email:

Phone:
Date:

Dear NAME OF FICTIVE KIN,

You have been identified as an individual having a strong, positive, emotional tie to CHILD'S NAME and a positive role in CHILD'S NAME's life. This child is now in the custody of the Arkansas Department of Human Services' Division of Children and Family Services (DCFS). DCFS has removed or is removing the above-named child from the home of . We believe that relatives and other individuals with whom a child shares a positive, meaningful relationship play an important role in a child's life, especially a child who must be temporarily cared for by someone other than a parent. Children do better when they can temporarily live with or stay connected in other ways to people who know and care about them.

We are contacting you as someone who could offer services needed by CHILD'S NAME and/or his or her family such as offering a temporary home for or otherwise supporting CHILD'S FIRST NAME by staying in contact while he or she is in custody. In the next few days, I or someone from my agency will call you to review your options for helping to care for CHILD'S FIRST NAME.

Pursuant to Arkansas Code Ann. §9-27-325, this is your notice that you may have the option to (1) Participate in the care and placement of the child, (2) Become a foster parent, and/or (3) Visit the child.

If you would like to bring the child into your home and you meet the requirements of a Regular Foster Home, you may apply to become a Foster Parent. Requirements include background checks and a home assessment. If you become a Foster Parent, you will receive all services and supports available to every child in foster care, such as monthly board payments and Medicaid.

If you are not able to provide a temporary home for CHILD'S FIRST NAME, there are other ways for you to stay involved in his or her life and maintain important connections. You might visit regularly, arrange regular weekend or holiday visits at your home, or offer to transport CHILD'S FIRST NAME to and from school, medical appointments, or other activities.

We will call you in the next few days to explore your options, but feel free to contact me sooner. My phone number and email address are listed above. We need to communicate with you at your earliest convenience by phone, mail, email, or in person, to determine if you are interested in (1) Participating in the care and placement of the child, (2) Becoming a foster parent, and/or (3) Visiting the child. Contacting me will help ensure that you do not lose the opportunity to connect with CHILD'S FIRST NAME now or in the future.

Signature

POLICY VI-L: MENTAL HEALTH SERVICES FOR CHILDREN IN FOSTER CARE

11/2011

The Division of Children and Family Services is dedicated to ensuring that all children in foster care receive a full range of health care services including mental health services (assessment and treatment). All children ages 3 to 18 will be referred to a Community Mental Health Center (CMHC) within 5 days of entry into foster care. Children under 3 years of age will be referred for mental health services if the need is identified by a physician during the initial comprehensive health assessment or by the Family Service Worker (FSW), legal/biological parent, foster parent, or other involved party.

Urgent (requiring immediate action) or emergent (appearing for the first time) mental health treatment needs identified by the Primary Care Physician (PCP) during the initial health screening (within 24-72 hours of entering foster care) shall be referred immediately by the FSW to a CMHC.

Because mental health issues may appear at any time during foster care, the FSW will refer a child for mental health services at any time deemed appropriate during the child's stay in foster care, and immediately, whenever a traumatic event takes place in the life of a child in foster care. Mental health services include outpatient treatment, inpatient psychiatric residential treatment, and inpatient acute psychiatric treatment (see Procedure VI-L6 for a listing of mental health terms).

If a child or his or her family members are already receiving mental health services upon entry into foster care, DCFS will promote continuity of care by continuing clinically indicated mental health services. The FSW should encourage cooperation and coordination among service providers as well as encourage the PCP to refer without delay. While collaboration is essential to promote the best interest of the child, DCFS retains ultimate case planning and management responsibility for placement and permanency issues. The FSW will make every effort to expedite access to appropriate documents from previous treatment as this is critical to obtaining authorization of services from the Division of Medical Services (DMS/Medicaid), as well as the quality and timeliness of services.

DCFS values close family participation in decision making. Therefore, when a child's permanency goal is reunification, the FSW will ensure that the legal/biological parents are involved in their child's treatment, unless such involvement is not in the child's best interest. The mental health provider, in collaboration with DCFS, will determine if it is appropriate for the family to participate in the child's treatment. Additionally, the FSW will seek to fully engage the foster parents in the child's treatment.

PROCEDURE VI-L1: Outpatient Mental Health Services

11/2011

The Family Service Worker will:

- A. Refer all children ages 3-18 to a CMHC for a mental health assessment and services as indicated, within 5 days of their entry into foster care.
- B. Refer children younger than 3 years of age for mental health services when the need is identified by the physician, FSW, a foster parent, a legal/biological parent, or other involved party.
- C. Refer children in foster care with urgent or emergent mental health needs immediately to a local CMHC.
- D. Refer children in foster care for mental health services immediately, whenever a traumatic event occurs in the child's life.
- E. Obtain a PCP referral for outpatient mental health services.

- F. Refer a child in foster care for mental health services anytime the FSW, foster parent, legal/biological parent, etc. deems appropriate.
- G. Document the referral in the Medical Services Screen in CHRIS.
- H. Ensure that the referral to the CMHC is accompanied by the following at the time of the initial referral, or forwarded as soon as they become available:
 - 1) Authorization for treatment
 - 2) A copy of the current court order
 - 3) A copy of the medical history
 - 4) A copy of the case history information
- I. Follow the organization's referral procedures and provide any additional required documentation.
- J. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by DMS.
- K. Ensure adequate and appropriate participation in the assessment process:
 - 1) Attend, at a minimum, the first appointment with the child to sign consents and facilitate treatment and treatment planning.
 - 2) Ensure that the adults who have the most complete information about the child accompany the child to the assessment (e.g. foster parents, legal/biological parents), as appropriate.
- L. Establish a schedule regarding dates for assessment and treatment sessions with the mental health provider.
- M. Remain engaged in the treatment planning process and ongoing care.
- N. Work with the CMHC therapist to ensure adequate and appropriate involvement by the foster parents, biological parents, etc. in the treatment process.
- O. Ensure that adequate information is provided to the physician regarding behaviors, response to medications, side effects, and any other information necessary for the physician to effectively manage medications. *It is the FSW's responsibility to understand why medications are prescribed, the target symptoms the medications should impact, and both side effects and drug interactions as well as ensure that the foster parents, or responsible adult at the child's current placement, understand these issues.*
- P. Along with the foster parent, attend each appointment scheduled with the psychiatrist or physician, if possible. *When necessary, cancel appointments at least 24 hours in advance, except in genuine emergency situations such as illness, and reschedule as soon as possible.*
- Q. Review and sign all master treatment plans and updates.
- R. Document the child's mental health services in the Medical Services Screen in CHRIS.

DCFS can expect that the CMHC will:

- A. Offer routine assessment of the child within 5 working days from receipt of the DCFS referral, receipt of authorization for treatment, and a copy of the court order if applicable.
- B. If a complete psychiatric evaluation is needed, complete the evaluation within 45 working days.
- C. Evaluate, within 2 hours, any client who has a psychiatric crisis or an outpatient mental health emergency (See Appendix 1 Glossary for definitions) and offer triage/assessment by a mental health professional to the level deemed appropriate.
- D. Make a copy of the emergency assessment available to DCFS upon completion.
- E. Provide immediate verbal feedback regarding the child's mental health assessment to the FSW.
- F. Provide a copy of the child's written mental health assessment report to the FSW as soon as possible and in every case, within 5 business days.
- G. Offer counseling (individual, group, and/or family) and/or other appropriate treatment suited to the child's individual needs, if the assessment indicates that mental health services are needed.
- H. Assist DCFS in making referrals to other facilities if the CMHC does not have the specialized services required for the child.

Prior authorization requests, diagnostic assessments, master treatment plans, progress notes, and other documentation required by DMS may be utilized to impart information, in lieu of written reports to DCFS.

PROCEDURE VI-L2: Inpatient Psychiatric Residential Treatment

11/2011

The FSW will:

- A. Provide comprehensive and accurate information about the child during the assessment and admission phase to an inpatient residential facility.
- B. Attend the first appointment with the child to sign consents and facilitate treatment and treatment planning.
- C. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by DMS.
- D. Ensure that the adults with the most complete information about the child accompany him or her to the assessment. This may mean the FSW, foster parents, or legal/biological parents, as appropriate.
- E. Update the treatment team on changes of custody status and/or discharge plans.
- F. Take timely action to ensure the continuity of the PCP's referral.
- G. Once the child has been admitted to a residential facility, collaborate with the facility in the development of the Plan-of-Care:
 - 1) Establish a schedule regarding dates for treatment sessions with the inpatient residential provider.
 - 2) Remain engaged in the treatment process and determine with the therapist at the beginning of treatment the degree and methods of engagement (e.g., phone, conversation, written reports, conferences). *At a minimum, the FSW must maintain weekly phone contact with the child and document contact in CHRIS.*
 - 3) Ensure discharge planning begins at the time of admission and continue involvement in that planning.
 - 4) Ensure contact between the child and the appropriate adults.
 - 5) Determine in coordination with the therapist, which adults, if any, need to be involved in the child's treatment, including family therapy sessions.
- H. Attend each appointment scheduled with a psychiatrist or physician. Review and sign all master treatment plans and updates.
- I. Obtain a copy of the child's records including assessments, treatment plans, updates, and discharge plan.
- J. Coordinate after-care plans from the inpatient residential facility:
 - 1) Facilitate a timely discharge by identifying specific placement plans as early as possible to promote a positive transition from one level of care to another.
 - 2) Coordinate with the CMHC or other contracted outpatient provider before, during, and immediately following discharge from an inpatient residential facility.
 - 3) When appropriate, participate in a Child and Adolescent Service System Program (CASSP) staffing to complete a Multi-Agency Plan of Services (MAPS) Plan.
 - 4) When appropriate, participate in a System of Care team meeting to complete a wraparound plan.
 - 5) Obtain an outpatient appointment within 7 working days following discharge from an inpatient residential facility.
 - 6) Obtain a PCP referral to an outpatient provider if needed.
 - 7) Ensure compliance with all scheduled outpatient appointments. *When necessary, cancel appointments at least 24 hours in advance, except in genuine emergency situations such as illness, and reschedule as soon as possible.*

PROCEDURE VI-L3: Inpatient Acute Psychiatric Treatment

11/2011

The Family Service Worker will:

- A. Make a referral to the CMHC when a child needs mental health services (including any 24-hour services).
- B. In the case of an emergency, contact the CMHC immediately for an assessment.

- C. If the CMHC assessment indicates that the child needs acute psychiatric services, contact the county supervisor, or designee.

The county supervisor or designee will:

- A. Contact the Administrator On-Call at 501-538-7960 to obtain prior approval before a child is placed.
- B. Provide the Administrator On-Call with the information listed below: *The information may be conveyed by telephone but is also required via email the following business day.*
 - 1) An assessment by a licensed mental health professional from the local CMHC that recommends acute psychiatric services as the least restrictive level of care that can meet the child's needs. This recommendation should include a preliminary mental health diagnosis.
 - a. If child is in a therapeutic foster home, a licensed mental health professional employed by the TFC Provider may perform the mental health assessment and provide recommendation for acute inpatient services.
 - 2) Description of current behavior, emotional condition, and any precipitating events that could have contributed to the current condition of the child.
 - 3) Current medications and purpose for the prescriptions.
 - 4) Information about current placement and reasons the child cannot remain in that placement.
 - 5) Reason that outpatient evaluation, crisis intervention services, and community supports cannot meet the current needs.
 - 6) History of mental health services provided for the child and his or her family, including both outpatient and inpatient.
 - 7) Any other information deemed helpful in determining a disposition on the level of services needed.
- C. Inform the Area Director of the administrative case consultation and disposition within 24 hours.

If the FSW is approved to make a referral, he or she will:

- A. Provide comprehensive and accurate information about the child during the assessment and admission phase to the acute psychiatric treatment program.
- B. Attend the first appointment with the child to sign consents and facilitate treatment and treatment planning. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by DMS.
- C. Ensure that the adults with the most complete information about the child will accompany the child to the assessment. This may mean the FSW, foster parents, or legal/biological parents, as appropriate.
- D. Update the treatment team on changes of custody status and/or discharge plans.
- E. Take timely action to ensure the continuity of the PCP's referral.
- F. Once the child has been admitted to an acute psychiatric treatment program, collaborate with the facility in the development of the Plan of Care.
 - 1) Establish a schedule regarding dates for treatment sessions with the inpatient acute treatment provider.
 - 2) Remain engaged in the treatment process and determine with the therapist at the beginning of treatment the degree and methods of engagement (phone, conversation, written reports, and conferences). *At a minimum, the FSW must maintain weekly phone contact with the child.*
 - 3) Ensure discharge planning begins at the time of admission and continue involvement in that planning.
 - 4) Ensure contact between the child and the appropriate adults.
 - 5) Determine in coordination with the therapist, which adults, if any, need to accompany the child to treatment and/or be involved in the child's treatment, including family therapy sessions.
- G. Attend each appointment scheduled with a psychiatrist or physician.
- H. Review and sign all master treatment plans and updates.
- I. Obtain a copy of the child's records including assessments, treatment plans, updates, and discharge plan.
- J. Make contact with the child's clinical treatment team 3-5 times per week. This includes the primary therapist, case manager, and/or any other person on the clinical treatment team; in order to obtain information related to the child's progress, medication management and changes, recommendations for discharge planning, and other information that pertains to the child's treatment.

- K. Coordinate after care plans from the acute psychiatric treatment program:
- 1) Facilitate a timely discharge by identifying specific placement plans as early as possible to promote a positive transition from one level of care to another.
 - 2) Coordinate with the CMHC or other contracted outpatient provider before, during, and immediately following discharge from an acute psychiatric treatment program.
 - 3) When appropriate, participate in a CASSP staffing to complete a MAPS Plan.
 - 4) When appropriate, participate in a System of Care (SOC) team meeting to complete a wraparound plan.
 - 5) Obtain an outpatient appointment within 7 working days following discharge from an inpatient facility.
 - 6) Obtain a PCP referral to an outpatient provider if needed.
 - 7) Ensure compliance with all scheduled outpatient appointments. *When necessary, cancel appointments at least 24 hours in advance, except in genuine emergency situations such as illness, and reschedule as soon as possible.*

If the FSW is not approved to make a referral, a temporary crisis plan will be implemented by the FSW and County Supervisor or designee in collaboration with the Administrator On-Call. The crisis plan will involve other interested parties, such as foster parents, legal/biological parents, the CMHC, and any others involved in the care of the child. The crisis plan will be documented within 24 hours and communicated to all involved parties. Parts of the crisis plan may be incorporated into the child's case plan, as necessary. The crisis plan may include but is not limited to the following services and supports:

- 24-hour respite
- No-harm contract with the child
- Increased frequency of mental health services
- Medication changes
- Local phone numbers for emergency response to escalating behavior
- Behavioral interventions appropriate for the child's diagnosis and symptoms
- Safety plan

If the FSW, county supervisor, or foster parent feel that the child poses an immediate threat to him/herself or others, the child should be taken to the nearest emergency room for evaluation by a physician and a request should be made for an immediate assessment by the local CMHC for information that DCFS can use to determine the most appropriate placement. The Administrative Case Consultation is still required if the child is to be referred to an inpatient facility.

DCFS can expect that the CMHC will:

- A. Evaluate within 2 hours any client who has a psychiatric crisis or an outpatient mental health emergency (see Appendix I: Glossary for definitions) and offer triage/assessment by a mental health professional to the level deemed appropriate.
- B. Assist DCFS in making appropriate referrals to other facilities if the CMHC does not have the specialized services required for the child.
- C. Assist in securing appropriate mental health services in the DCFS Area.
- D. Assign a mental health clinician to coordinate mental health treatment for the child, including but not limited to coordination with other agencies, convening staffings, or assisting with the location of a 24-hour mental health placement.
- E. Work with DCFS to ensure that mental health services complement case planning, management, and the Wraparound Plan and/or MAPS Plan.
- F. Share information about past treatment and coordinate treatment services/discharge plans with inpatient/residential provider, providing the appropriate consent forms have been signed.

DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

PROCEDURE VI-L4: Ongoing Treatment

11/2011

The Family Service Worker will:

- A. Forward copies of all critical information that was not available at the time of the initial referral as it becomes available.
- B. Keep the mental health professional informed of any changes in the child's case or placement.
- C. Coordinate all casework with the mental health provider.
- D. Consult the mental health provider regarding permanency-planning decisions, in order to protect the child while engaging the family in a clinically appropriate manner.
- E. Invite the child's mental health professional to attend or otherwise participate in DCFS staffings.
- F. Provide a copy of the court order to the CMHC once the child has been discharged from DHS custody.
- G. Communicate with any other DHS divisions or contracted providers who are involved in the case.
- H. Communicate with the child's school regarding the child's treatment, needs, and progress.
- I. Invite school personnel to attend staffings, case conferences, and family-centered meetings, as appropriate.
- J. Document in the child's case plan in CHRIS if the child is receiving school-based mental health treatment.
- K. Document details about any responsibilities the mental health provider has regarding coordination of services.
- L. Arrange a staff meeting within 48 hours to discuss what services and assistance are needed to stabilize the foster placement when foster parents have requested that a child in foster care be removed from their home.
- M. Request that the licensed mental health professional from the CMHC or private mental health provider who is treating the child attend or otherwise participate in the required staffing to discuss removal of the child in foster care and options to support the placement.

DCFS can expect that the CMHC will:

- A. Assign a mental health professional to coordinate mental health treatment for the child, including but not limited to coordinating with other agencies, convening staffings, or assisting with the location of 24-hour mental health placement, when needed.
- B. Work with DCFS to ensure that mental health services complement case planning and management
- C. Make coordination services available after regular work hours.
- D. Make the recommendation for the most appropriate disposition with regard to medical necessity.
- E. Assist in securing appropriate mental health services in the Area.
- F. Coordinate the mental health services being delivered by the mental health provider with the FSW.

PROCEDURE VI-L5: DCFS/CMHC Collaboration

11/2011

DCFS will work with their local designated Community Mental Health Centers to ensure adequate mental health services are available to meet the needs of children and families. The DCFS Area Directors are responsible for working with the CMHC Directors and staff to establish an oversight process. The oversight process should include a review of current services and quality improvement measures; an identification of problem issues or barriers; and methods to resolve any issues or barriers.

The Area Director will:

- A. Hold an individual meeting, at least annually, with each CMHC in their Area to:
 - 1) Review the current status of the mental health services system for the Area.
 - 2) Identify barriers to implementation of mental health services.

- 3) Develop a plan to address the identified barriers in provision of services.

If CMHC staff believes that DCFS staff is not ensuring appropriate referrals and involvement in treatment, they will:

- A. Attempt to resolve the issue with the appropriate DCFS county supervisor.
- B. If the issue cannot be resolved at the county level, contact the appropriate Area Director.

If DCFS staff believes that CMHC staff are not providing adequate services, they will:

- A. Attempt to resolve the issue with the Children's Services Director or other designated staff at the CMHC.
- B. If the issue cannot be resolved, contact the CMHC Director.

If an issue cannot be resolved through the aforementioned processes, the parties will contact the following senior staff to resolve the issue:

- A. DCFS Assistant Director of Community Services
- B. DBHS Assistant Director for Children's Services
- C. DCFS Mental Health Specialist

The Community Mental Health Centers and DCFS operate independently of each other. All employees are expected to function in a manner that will not create any conflicts of interest.

PROCEDURE VI-L6: Mental Health Policy Terms

11/2011

The Family Service worker will know and understand the following terms:

- A. **Crisis Intervention**-Emergency short-term treatment services aimed at assisting individuals in a crisis situation experiencing a psychiatric or behavioral crisis. These services are designed to stabilize the person in crisis, prevent further deterioration, and provide immediate indicated treatment in the least restrictive setting.
- B. **Mental Health/Diagnostic Assessment**- The cultural, developmental, age and disability -relevant clinical evaluation and determination of a beneficiary's mental status; functioning in various life domains; and an axis five DSM diagnostic formulation for the purpose of developing a plan of care.
- C. **Discharge Plan**- Activities that facilitate a patient's movement from one health care setting to another, home, or other placement in the community. It is a multidisciplinary process involving physicians, nurses, social workers, and possibly other health professionals; its goal is to enhance continuity of care. The discharge begins on admission in higher levels of care and continues throughout the treatment process.
- D. **Inpatient Acute Psychiatric Treatment**- Short-term treatment designed to stabilize patients with significant behavioral health issues and begin the therapeutic process in a safe, supportive environment. This level of care is to be utilized only in circumstances when the client cannot be safely treated in a lesser restrictive environment.
- E. **Inpatient Psychiatric Residential Treatment**- Treatment for a psychiatric condition that is typically three to six months in a facility using multi-disciplinary approaches to return to a level of functioning that allows the client to return to community. The client should participate in individual, group, and family therapy in addition to attending educational classes. The length of stay should only be as long as necessary to move the client to a lesser restrictive level of care.
- F. **Psychiatric Crisis**- Behavioral health issues that are sudden in onset, requiring immediate assessment, crisis intervention and emergency treatment. A psychiatric crisis includes suicidal or homicidal thoughts with a valid plan of intent, psychosis or loss of ability to understand and interpret reality.

- G. **Master Treatment Plan**- Written document that outlines specific goals, objectives and interventions to address problems and issues related to the client's diagnosis, as identified in a diagnostic assessment.
- H. **Temporary Crisis Plan**- Clearly defined steps crafted in advance that detail how to manage a crisis when it occurs.
- I. **Treatment Team**- Group of professionals that work together to treat mental disorders. Treatment team members may include but are not limited to psychiatrists, psychologists, therapists, mental health technicians, case managers and social workers.
- J. **Wrap around Plan**- A course of action identified by a Wrap around team that includes local services and natural supports necessary to reduce out-of-home, school or community placements for families, children and youth with moderate to severe mental health needs.

NEW

POLICY VIII-L: SUBSIDIZED GUARDIANSHIP

11/2011

OVERVIEW

For children for whom a permanency goal of guardianship with a relative has been established, the Division offers a federal (title IV-E) Subsidized Guardianship Program to further promote permanency for those children (provided subsidized guardianship eligibility criteria are met). Any non-IV-E eligible child may enter into a subsidized guardianship supported by Arkansas State General Revenue if the Department determines that adequate funding is available and all other Subsidized Guardianship Program criteria are met. The monthly subsidized guardianship payment shall be used to help relative guardian(s) defray some costs of caring for the child's needs.

During permanency planning staffings guardianship should be explored as a potential permanency option. If it is determined at the permanency planning hearing that a guardianship arrangement with relatives is in the child's best interest and the child's permanency goal is changed to legal guardianship, the Division shall then determine if a specific guardianship arrangement may be supported by a subsidy through the Division's Subsidized Guardianship Program. Only relative guardians may apply for a guardianship subsidy. Relative is defined as a person within the fifth degree of kinship by virtue of blood or adoption (A.C.A. § 9-28-108). The fifth degree is calculated according to the child.

When it is in the best interest of each of the children, the Division shall attempt to place siblings together in the same guardianship arrangement. Siblings may be related by biological, marital, or legal ties. A child who meets the eligibility criteria for a subsidized guardianship will qualify his or her siblings for subsidized guardianship as well provided the siblings are placed in the same relative home. The child who qualifies for a guardianship subsidy does not necessarily have to be placed prior to his or her siblings in the relative home. The guardianships for each child in the same relative home do not need to be finalized in any particular sequence.

ELIGIBILITY CRITERIA FOR SUBSIDIZED GUARDIANSHIP

A child is eligible for a subsidized guardianship in Arkansas if the Division determines that:

- A. The child has been removed from his or her home pursuant to a judicial determination that continuation in the home would be contrary to the welfare of the child and, as such, the child has been placed in DHS custody per judicial order;
- B. The child has resided for at least six consecutive months in the fully approved foster home of the prospective relative guardian(s) (i.e., the prospective relative guardian's home is no longer a provisional foster home and has been serving as a fully approved foster home to the child seeking a legal guardianship arrangement for at least six consecutive months) (see POLICY VII: Development of Foster Homes). Any disruption in placement with the prospective relative guardian that is less than 14 days will not affect the six consecutive month qualifying period;
- C. Being returned home to the person from whom he or she was removed or being adopted are not appropriate permanency options for the child, the guardianship arrangement is in the child's best interest, and documentation supporting these determinations is provided;
- D. The child demonstrates a strong attachment to the prospective relative guardian(s) and the guardian(s) has a strong commitment to caring permanently for the child/youth;
- E. Each child is consulted regarding the guardianship arrangement; and,
- F. Youth 12 and older sign a consent to guardianship if he or she agrees to the guardianship arrangement, and it is agreed that procedures to finalize the guardianship should be initiated (unless the court determines it is in the minor's best interest to dispense with the minor's consent).

CASE PLAN REQUIREMENTS FOR SUBSIDIZED GUARDIANSHIP

If legal guardianship with a relative is the intended permanency goal for a child and the relative guardian(s) intend to apply for a guardianship subsidy, the child's case plan shall include a description of the ways in which the child meets the eligibility requirements for a subsidized guardianship arrangement to include:

- A. The steps that the agency has taken to determine that it is not appropriate for the child to be returned home or adopted;
- B. The reasons for any separation of siblings during placement and description of the efforts made to place currently separated siblings together, the efforts made to provide frequent visitation or other ongoing interaction between siblings; and efforts to reunify separated siblings;
- C. The reasons why a permanent placement with an appropriate and willing relative supported by a subsidized guardianship arrangement is in the child's best interest;
- D. The efforts that the Division has made to discuss adoption by the child's relative foster parent as a more permanent alternative to legal guardianship and, in the case of a relative foster parent who has chosen not to pursue adoption, documentation of the reasons;
- E. The efforts made by the Division to discuss with the child's parent(s) the guardianship arrangement; or the reasons why the efforts were not made;
- F. The process in place to allow for a successor guardian in the event that the relative guardian of the child dies or is no longer able to care for the child; and,
- G. Any appropriate transitional youth services for those youth who exit foster care and enter into a guardianship arrangement supported by a subsidy after the age of 16.

SUBSIDIZED GUARDIANSHIP PAYMENTS

The Division will provide subsidized guardianship payments on behalf of eligible children and their siblings (when placed in the same relative home) to approved relatives who assume legal guardianship of the youth for whom they have cared as fully approved foster parents. Subsidized guardianship payments cannot be made prior to the transfer of guardianship. The prospective relative guardians will receive foster care board payments until the transfer of guardianship occurs.

For an eligible child entering a subsidized guardianship arrangement prior to reaching the age of 16 (and their siblings placed in the same home prior to the age of 16), the subsidized guardianship payment will cease when the child reaches the age of 18.

Any eligible child in foster care entering a subsidized guardianship arrangement at the age of 16 or older (and his or her siblings in the same home at 16 or older) is eligible for subsidized guardianship until he or she reaches 21 years of age provided at least one of the following criteria are met:

- A. The child is completing secondary education or a program leading to an equivalent credential; or,
- B. The child is enrolled in an institution which provides post-secondary or vocational education; or,
- C. The child is participating in a program or activity designed to promote, or remove barriers to, employment; or,
- D. The child is employed for at least 80 hours per month; or,
- E. The child is incapable of doing any of the above described activities due to a medical condition.

The Division will ensure that the relatives receiving a subsidized guardianship payment on behalf of a child past the age of 18 provide documentation annually that the child meets the employment or education requirements listed above up to the age of 21. If a child is incapable of meeting the above referenced education or employment requirements due to a medical condition, the reason for which the child is incapable of meeting the education or employment requirements must be documented by a medical professional and updated annually until the child reaches 21 years of age.

When siblings are placed together in a subsidized guardianship arrangement, the subsidized guardianship payments will be paid on behalf of each of the siblings regardless of the siblings' subsidized guardianship eligibility criteria.

When determining the amount of each subsidized guardianship payment the following shall be considered:

- A. The needs of the child as supported by accompanying documentation (the rate should not be linked to the means of the prospective relative guardians);**
- B. The subsidized guardianship payment shall not exceed the foster care board payment that would have been paid on that child's behalf if he or she had remained in a foster family home. Only if special circumstances related to the child's care requirements exist may a special subsidy greater than the amount of the child's foster care board payment be requested.**
- C. The relative guardians may not draw both an SSI payment and a subsidized guardianship payment. The relatives shall determine which form of assistance best meets the needs of the child.**
- D. The relative guardians may draw both a Title II SSA payment and a subsidized guardianship payment but the total amount of the combined payments may not exceed the child's foster care board payment.**
- E. Any conserved funds in a child's trust account shall not affect a child's subsidized guardianship eligibility or payments. However, the DCFS Eligibility Unit shall close any trust account(s) when a child exits care. The administering agency of the trust account will redistribute the funds per its respective regulations after any board payments, contract reimbursements, and/or overpayments are deducted from the account balance prior to close out.**

In addition to the monthly subsidized guardianship payments, approved relative guardian(s) of a child eligible for the Subsidized Guardianship Program will also receive funding for the total cost of non-recurring expenses related to obtaining legal guardianship up to \$2,000 per child. The majority of legal services should be provided by the DHS Office of Chief Counsel (OCC) which would not incur legal fees upon the relative guardians.

The relative guardian(s) are required to inform the Division of circumstances that would make them ineligible for subsidized guardianship payments or eligible for payments in a different amount (e.g., if the child becomes eligible for and begins receiving SSA payments). The relative guardian(s) must also notify the Division of any change of address. Any subsidized guardianship payment will remain in effect without regard to the State of residence of the relative guardian(s).

MEDICAL COVERAGE FOR SUBSIDIZED GUARDIANSHIP ARRANGEMENTS

The Division will ensure health insurance coverage under Medicaid Title XIX for any IV-E eligible child (and their IV-E eligible siblings when placed in the same relative home) who enters a subsidized guardianship arrangement. The subsidized guardianship agreement will indicate Medicaid coverage for IV-E eligible children.

A non-IV-E eligible child may qualify for certain Medicaid categories depending on the needs of the child. The relative guardian of a non-IV-E eligible child may apply for health insurance (e.g., AR Kids First) for the child through their local DHS county office. Coverage through the local DHS county office is not guaranteed and may only extend until the time the child reaches 19 years of age.

SUBSIDIZED GUARDIANSHIP PROGRAM DETERMINATION

The child's permanency planning staffing shall be the forum in which the determination regarding whether a guardianship arrangement is in the child's best interest (and his or her siblings if applicable).

If the child's permanency planning hearing results in a permanency goal of a legal guardianship with a specific relative, the Division shall then determine if the child (and his or her siblings if applicable) and prospective relative guardian(s) may qualify for a subsidized guardianship. If the child's FSW believes the child and relative guardians may qualify based on the subsidized guardianship eligibility and case plan criteria, he or she will make a referral to the DCFS Permanency Specialist or designee.

If the DCFS Permanency Specialist or designee agrees that the family is a candidate for subsidized guardianship, a family-centered subsidized guardianship determination meeting will be held. The purpose of the meeting is to explain the Subsidized Guardianship Program to the prospective relative guardian(s) and ensure that eligibility and case plan criteria for the program are met. The DCFS Permanency Specialist or designee will facilitate the family-centered subsidized guardianship determination meetings.

If it is determined that all Subsidized Guardianship Program eligibility and case plan criteria are satisfied, the decision shall be relayed to the Subsidized Guardianship Oversight Committee via the DCFS Permanency Specialist or designee. The Subsidized Guardianship Oversight Committee serves as an auditing entity to ensure all eligibility and case plan requirements have been met.

The Subsidized Guardianship Oversight Committee shall include, but is not limited to:

- A. DCFS Permanency Specialist or designee
- B. DCFS Foster Care Manager or designee
- C. DCFS Adoption Manager or designee
- D. DCFS Director or designee in cases involving special subsidy requests

If the Subsidized Guardianship Oversight Committee verifies that all Subsidized Guardianship Program eligibility and case plan criteria have been met, DHS may then petition the court for a guardianship hearing to finalize of the guardianship and subsidized guardianship agreement.

SUBSIDIZED GUARDIANSHIP AGREEMENT

Once guardianship with a specific relative has been established as the child's permanency goal and then after the Division has determined that the guardianship may be supported by a guardianship subsidy, the family and the Division will finalize the subsidized guardianship agreement. A subsidized guardianship agreement, a written, binding agreement negotiated between the relative guardian(s), the Division and other relevant agencies, must be in place prior to the finalization of the legal guardianship supported by a subsidy. The prospective relative guardian(s) shall receive a copy of the agreement.

The subsidized guardianship agreement will specify:

- A. The amount of, and manner in which, each subsidized guardianship payment will be provided under the agreement (subsidized guardianship payment should not exceed the amount of the child's foster care board payment unless special circumstances related to the child's care warrant a special subsidy rate);
- B. That (and the manner in which) the payment may be adjusted periodically, in consultation with the relative guardian(s), based on the circumstances of the relative guardian and the needs of the child;
- C. The additional services and assistance that the child and relative guardian(s) will be eligible for under the agreement including Medicaid coverage that may be available through the DCFS Eligibility Unit or, in the case of non-IV-E children, through the local DHS county office;
- D. The procedure by which the relative guardian(s) may apply for additional services needed;
- E. That the Division will pay the total cost of nonrecurring expenses associated with obtaining legal guardianship of the child/youth up to \$2,000;
- F. That the child shall retain eligibility for federal adoption assistance payments under Title IV-E, provided he or she was eligible when the subsidized guardianship agreement was negotiated, if the guardian later decides to adopt the child;
- G. That the agreement will become effective upon the entering of a court order granting guardianship of the child to the guardian(s);
- H. That the agreement shall remain in effect without regard to State residency of the relative guardian;
- I. That the relative guardian(s) are required to respond to annual review requests from the Division;
- J. That OCC will file an annual report with the court;
- K. A designated successor guardian, if desired, for the child in the event that the current relative guardian is no longer able to fulfill guardianship responsibilities. A successor guardian and all household members within that individual's home must clear any applicable Child Maltreatment Central Registry Checks, State Police Criminal Record Checks, and a Vehicle Safety Check before being identified as a potential successor guardian in the subsidized guardianship agreement.

Identification of a successor guardian in the subsidized guardianship agreement will not guarantee an automatic transfer of guardianship in the event that the current relative guardian is no longer able to fulfill guardianship responsibilities. In order for the successor guardian to assume guardianship, he or

she must follow all policies and procedures regarding subsidized guardianship arrangements. This includes becoming an approved DCFS foster home placement for the child (if appropriate at that point in time) prior to exploring legal guardianship supported by a guardianship subsidy as a permanency option.

ANNUAL REVIEW of SUBSIDIZED GUARDIANSHIP AGREEMENT

A review of the subsidized guardianship agreement is required annually in order for subsidized guardianship payments of any amount or payment rate to continue. This review shall be conducted by the Division of Family Services (DCFS) Permanency Specialist or designee. Documentation of continued eligibility is required for the review. The subsidized guardianship payments granted at the time of review will reflect the child's current, documented level of need.

REVISION OR TERMINATION of SUBSIDIZED GUARDIANSHIP AGREEMENT

Revisions to the subsidized guardianship agreement and/or payments may be requested any time there is a significant change in the child's circumstance and the relative guardian can provide the required and/or requested documentation. To request a revision to the subsidized guardianship agreement and/or payments, the family shall contact the DCFS Permanency Specialist or designee.

The subsidized guardianship agreement and, consequently the subsidized guardianship payments, shall be revised or terminated as appropriate:

- A. If the child is absent from the relative guardian home for more than 14 days in a month (in such an event, the child will be eligible for only a portion of the month that he or she was in the relative guardian home) excluding when a child 18 or older lives in an approved independent living situation outside of the home (e.g., college dorm); or,
- B. When the terms of the subsidized guardianship agreement are fulfilled; or,
- C. If the child begins receiving SSI, SSA, or any other source of income excluding any income that the child may earn from his or her own employment (the relative guardian is responsible for notifying the Division if the child begins receiving other sources of income);
- D. If the child has attained the age of 18 for those who entered into the subsidized guardianship arrangement prior to the age of 16; or,
- E. If the child has attained the age of 21 for those who entered into the subsidized guardianship arrangement at the age of 16 or older; or,
- F. If the child who has an extended subsidy (i.e., up to age 21) does not meet the education or employment conditions outlined above in the Subsidized Guardianship Payments section; or,
- G. If the child becomes an emancipated minor; or,
- H. If the child marries; or,
- I. If the child enlists in the military; or,
- J. If the relative guardian(s) are no longer legally or financially responsible for the support of the child; or,
- K. If the guardian(s) die; or,
- L. If the guardianship is vacated; or,
- M. If the child dies.

Subsidized guardianship payments may continue to be paid on behalf of the child if the child moves out of the relative guardian's home or otherwise lives independently of the guardian(s) as long as the guardian(s) continue to provide support to the child.

If a child whose relatives are receiving subsidized guardianship payments on his or her behalf re-enters DHS custody, the subsidized guardianship agreement will be terminated until such time that the child is reunified with the relative guardian(s), or, in certain cases until such time that a legal guardianship with the successor guardian is determined to be in the child's best interest, it is determined that the child and successor guardian qualify for a subsidized guardianship, and a new subsidized guardianship agreement with the successor guardian is finalized. A successor guardian is not entitled to any payments that would have been made to the initial guardian during the time a child spends in DHS custody. The successor guardian may only receive subsidized

guardianship payments once the court has formally appointed the successor guardian as the child's legal guardian and the subsidized guardianship agreement is in effect.

APPEALS

Relative guardian(s) may appeal the Division's decision to deny, terminate, or modify their child's subsidized guardianship agreement and/or payments in accordance with the rules and procedures of the State's fair hearing and appeal process per DHS Policy 1098. The relative guardian(s) must appeal an adverse decision within thirty (30) calendar days of written notice of the adverse action. Subsidized guardianship payments will be suspended pending the determination of all appeals. Families receiving a favorable ruling in their hearing may be entitled to assistance (back payment) that had been suspended.

PROCEDURE VIII-L1: Initial Subsidized Guardianship Program Determination

11/2011

If a guardianship with a relative has been determined to be in the child's best interest, the FSW will:

- A. Gather and review all relevant documentation to determine the child's eligibility for the Subsidized Guardianship Program.
- B. Complete CFS-435-A: Subsidized Guardianship Program Application and Checklist with the child (if age appropriate), prospective relative guardians, and child's biological parents (if appropriate) to make the initial determination that the child and prospective relative guardians meet all subsidized guardianship eligibility requirements.
- C. Submit the completed CFS-435-A to the FSW Supervisor for review and approval.
- D. If the FSW Supervisor
 - 1) Denies moving forward with the subsidized guardianship arrangement, proceed to Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement.
 - 2) Approves moving forward with the subsidized guardianship arrangement:
 - a) Update the child's case plan in CHRIS to describe the ways in which the child meets the eligibility requirements for a subsidized guardianship arrangement to include:
 - i. steps the agency has taken to determine that it is not appropriate for the child to be returned home or adopted;
 - ii. reasons for any separation of siblings during placement; the efforts made to place currently separated siblings together, the efforts made to provide frequent visitation or other ongoing interaction between siblings not placed together; and efforts to reunify separated siblings in the same home;
 - iii. reasons why a permanent placement with an appropriate and willing relative through a Subsidized Guardianship arrangement is in the child's best interest;
 - iv. efforts that the Division has made to discuss adoption by the child's relative foster parent as a more permanent alternative to legal guardianship and, in the case of a relative foster parent who has chosen not to pursue adoption, documentation of those reasons;
 - v. efforts made by the Division to discuss with the child's parent(s) subsidized guardianship arrangement, or the reasons why the efforts were not made;
 - vi. process in place to allow for a successor guardian in the event that the relative guardian of the child dies or is no longer able to care for the child;
 - vii. any appropriate transitional youth services for those youth who exit foster care at or after the age of 16; and,
 - b) Notify the child's biological parents (if appropriate), attorney ad litem, OCC representative, parent counsel (if applicable), and DCFS Permanency Specialist or designee that the child and prospective relative guardians would like to proceed with the subsidized guardianship arrangement.
 - c) Provide the DCFS Permanency Specialist or designee with all pertinent documentation including:

- i. Copy of CFS-435-A: Subsidized Guardianship Program Application and Checklist
- ii. Copy of CFS-404: General Medical Report for each relative guardian and all appropriate household members
- iii. Copy of prospective relative guardian's CFS-446: In Home Consultation Visit Report
- iv. Copy of prospective relative guardian's SAFE Home Study
- d) If the DCFS Permanency Specialist or designee determines that:
 - i. All initial eligibility and case plan criteria have been met, notify the FSW to proceed with subsidized guardianship determination meeting arrangements to discuss the Subsidized Guardianship Program (per Procedure VIII-L3: Subsidized Guardianship Determination Meeting); or,
 - ii. All eligibility and case plan criteria have not been met, then discuss with the DCFS Permanency Specialist or designee how to meet said criteria and/or other possible permanency options or proceed to Procedure VIII-L2: Denial of Subsidized Guardianship arrangement, as applicable.

The FSW Supervisor will:

- A. Conference with the FSW as to the appropriateness of a guardianship arrangement supported by a subsidy for the child with the prospective relative guardians.
- B. Review the completed CFS-435-A: Subsidized Guardianship Application and Checklist.
- C. Notify FSW of approval or denial to move forward with the subsidized guardianship arrangement.
- D. Notify the Area Director of any approval or denial to move forward with a subsidized guardianship arrangement.

The DCFS Permanency Specialist or designee will:

- A. Review each submitted CFS-435-A: Subsidized Guardianship Program Application and Checklist and other supporting documentation to determine if the family meets the initial eligibility and case plan criteria to further pursue a subsidized guardianship arrangement.
- B. Make the determination as to whether it is appropriate to continue pursuing the subsidized guardianship arrangement and either:
 - 1) Notify the FSW, FSW Supervisor, and Area Director to proceed to Procedure VIII-L3, if the subsidized guardianship arrangement is appropriate; or,
 - 2) Notify the FSW, FSW Supervisor, and Area Director that a subsidized guardianship arrangement is not currently appropriate and
 - a) Discuss how to meet needed criteria;
 - b) Discuss other possible permanency options; or
 - c) Instruct FSW to proceed to Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement.

PROCEDURE VIII-L2: Denial of Subsidized Guardianship Arrangement

11/2011

If at any point in time it is determined in consultation with the FSW supervisor and/or DCFS Permanency Specialist or designee that a legal guardianship supported by a subsidy is not appropriate for the child and/or relative guardian applicant, the FSW will:

- A. Complete and provide to the relative guardian applicant CFS-435-B: Notification of Subsidized Guardianship Program Denial.
- B. File a copy of CFS-435-B in the provider record.
- C. Note in CHRIS contacts screen reason for subsidized guardianship denial.

PROCEDURE VIII-L3: Subsidized Guardianship Determination Meeting

11/2011

The FSW will:

- A. Coordinate the subsidized guardianship determination meeting to discuss the potential subsidized guardianship arrangement and agreement within 14 days of receiving notification from the DCFS Permanency Specialist or designee to move forward with pursuing a Subsidized Guardianship arrangement.
- B. Arrange a date for the following participants to attend the family centered-meeting with a preference of at least 7 days notice before the meeting date (though the meeting may take place earlier if all participants agree to an earlier date):
 - 1) Child, if age appropriate
 - 2) Prospective relative guardians
 - 3) Child's biological parents, if appropriate
 - 4) Any grandparent who is entitled to notice based on the conditions listed in Procedure II-D8
 - 5) Child's FSW
 - 6) FSW Supervisor
 - 7) Adoption Representative (if Adoption Representative did not participate in permanency planning staffing)
 - 8) DCFS Permanency Specialist or designee

The following shall be invited to the meeting but attendance is not required:

- 1) Area Director or designee
 - 2) Child's attorney ad litem
 - 3) Child's CASA (if applicable)
 - 4) OCC representative
 - 5) Parent counsel (if applicable)
- C. If it is determined during the meeting that it is not appropriate for the family to move forward with the legal guardianship supported by a guardianship subsidy, see Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement.

The FSW Supervisor will:

- A. Conference with the FSW as needed.
- B. Participate in the subsidized guardianship determination meeting.
- C. Inform the Area Director of issues related to pursuing the subsidized guardianship arrangement for the child.

The DCFS Permanency Specialist or designee will:

- A. Facilitate the subsidized guardianship determination meeting.
- B. Provide an overview of subsidized guardianship to ensure that all participants have a thorough understanding of the intent and requirements of the program.
- C. Discuss the subsidy rate with the prospective relative guardians. The subsidy rate should not exceed the child's current foster care board payment.
- D. If the prospective relative guardians inquire about a special subsidy rate (i.e., more than the child's current foster care board payment) due to special circumstances related to the youth's care, ask them to complete CFS-435-C: Subsidized Guardianship Special Subsidy Request and to provide the Division with a written statement from the child's physician or treatment professional that provides:
 - 1) Child's diagnosis
 - 2) Child's prognosis
 - 3) Identification of any current treatment being provided; and,
 - 4) Reasoning as to why the preceding information would warrant a special subsidy rate.

- D. Inform the prospective relative guardians that any approved guardianship subsidy will be paid according to the terms outlined in the CFS-435-F: Subsidized Guardianship Agreement (which will not be effective until the court enters an order of guardianship) and may be modified at the annual review based on changes in policy or significant changes in the child's circumstances.
- E. If determined during the subsidized guardianship determination meeting that it is appropriate for the family to move forward with the legal guardianship supported by a guardianship subsidy:
 - 1) Notify the Subsidized Guardianship Oversight Committee within 48 hours of the staffing of the family's intent to move forward;
 - 2) Submit all related forms and supporting documentation to the committee within 48 hours of the staffing of the family's intent to move forward.
 - 3) Arrange a meeting with the Subsidized Guardianship Oversight Committee with a preference of at least 7 calendar days notice of the meeting date (though the meeting may take place earlier if all parties agree to an earlier date).

PROCEDURE VIII-L4: Subsidized Guardianship Oversight Committee Review

11/2011

The Subsidized Guardianship Oversight Committee will:

- A. Meet to review and discuss all subsidized guardianship forms and supporting documentation within 14 calendar days of receiving the information from the DCFS Permanency Specialist. This includes review of CFS-435-C: Subsidized Guardianship Special Subsidy Request and any documentation received from the family that would support the need for a special subsidy rate.
- B. Verify that all subsidized guardianship eligibility and case plan criteria have been met.
- C. Determine if a special subsidy rate is warranted, if requested.

The DCFS Permanency Specialist or designee will:

- A. Facilitate the Subsidized Guardianship Oversight Committee meeting.
- B. Notify the FSW, FSW Supervisor, and Area Director of the Subsidized Guardianship Oversight Committee's verification regarding the subsidized guardianship arrangement and any special subsidy rate determination (if applicable):
 - 1) If the Subsidized Guardianship Oversight Committee verifies that the subsidized guardianship arrangement should move forward and court date has not already been set for the guardianship hearing, ask the FSW to work with the local OCC attorney to petition the court for a guardianship hearing to finalize the guardianship arrangement and subsidized guardianship agreement and proceed to procedure VIII-L5: Subsidized Guardianship Agreement Finalization.
 - 2) If the Subsidized Guardianship Oversight Committee cannot verify that the subsidized guardianship arrangement should move forward, tell the FSW to
 - a) Work with the family to meet any needed adjustments determined by the Subsidized Guardianship Oversight Committee that may qualify them to move forward with a subsidized guardianship arrangement at a later date; or,
 - b) See Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement, if appropriate.

The FSW will:

- A. If moving forward with the subsidized guardianship arrangement, request that the local OCC attorney petition the court for a guardianship hearing to finalize the guardianship and the subsidized guardianship agreement (if the guardianship hearing date has not previously been set).
- B. If not moving forward with the subsidized guardianship arrangement:
 - 1) Work with the family to meet any needed adjustments determined by the Subsidized Guardianship Oversight Committee that may qualify them to move forward with a subsidized guardianship arrangement at a later date, if applicable; or,
 - 2) See Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement, if applicable.

The FSW Supervisor will:

- A. Conference with the FSW as needed.
- B. Inform the Area Director of issues related to pursuing the subsidized guardianship arrangement for the child.

PROCEDURE VIII-L5: Subsidized Guardianship Agreement Finalization

11/2011

The DCFS Permanency Specialist or designee will:

- A. Draft and complete the CFS-435-F: Subsidized Guardianship Agreement with the prospective guardians and FSW prior to the guardianship hearing.
- B. Submit the CFS-435-F to the Foster Care Manager or designee for review and approval.
- C. Sign the CFS-435-F.

The Foster Care Manager or designee will:

- A. Review the CFS-435-F: Subsidized Guardianship Agreement and approve or deny as appropriate.
- B. Inform the DCFS Permanency Specialist or designee of approval or denial.

The FSW will:

- A. Assist the DCFS Permanency Specialist or designee in completing the CFS-435-F: Subsidized Guardianship Agreement with the prospective guardian(s) prior to the guardianship hearing.
- B. Ensure all signatures required on the CFS-435-F are obtained.

The FSW Supervisor will:

- A. Conference with the FSW regarding decisions related to and preparation for the finalization of the subsidized guardianship agreement.
- B. Inform the Area Director of issues related to pursuing the subsidized guardianship arrangement for the child.

PROCEDURE VIII-L6: Guardianship Hearing for Subsidized Guardianship

11/2011

The FSW will:

- A. Receive the confirmed guardianship hearing court date from the OCC attorney (if guardianship hearing date was not previously set).
- B. Provide notice to the parties and participants at least 14 calendar days before the guardianship hearing.
- C. If siblings will not also be placed in the subsidized guardianship arrangement, make a recommendation to the court to allow visits between siblings and with other relatives (if in the best interest of the children). Document the recommendation in the court report.
- D. Complete court report for the guardianship hearing and submit to supervisor for review.
- E. Submit the CFS-6011: Court Report to the OCC Attorney within 14 calendar days prior to the hearing.
- F. Document distribution of court reports to all parties or their attorneys and CASA, if applicable via the CFS-423: Certificate of Service.
- G. Attend the hearing with the case file and be prepared to provide testimony regarding services offered or provided, progress, and recommendations to the court.
- H. Present the completed CFS-435-F: Subsidized Guardianship Agreement to the court.
- I. Once the court finalizes legal guardianship and the subsidized guardianship agreement with the relative guardians:

- 1) Discuss the court orders with the family.
- 2) File the CFS-435-F in the provider record.
- 3) Provide a copy of the CFS-435-F to the relative guardian(s). Once approved (i.e., once the court enters an order granting guardianship), the subsidized guardianship agreement will remain in effect without regard to the state residency of the legal relative guardian as long as the guardianship remains in effect or has not been terminated.
- 4) For IV-E eligible children, provide the DCFS Eligibility Unit a copy of the finalized court decree indicating the legal guardianship and a copy of the finalized CFS-435-F: Subsidized Guardianship Agreement in order to continue Medicaid coverage for the child.
- 5) For non-IV-E eligible children, instruct the relative guardian(s) to apply for health care coverage at their local DHS county office.
- 6) Exit the child out of foster care and into a subsidized guardianship arrangement supported by a guardianship subsidy in CHRIS.
- 7) Notify the relative guardian Resource Worker that legal guardianship has been granted.

The FSW Supervisor will:

- A. Conference with the FSW as needed.
- B. Review and approve CFS-6011: Court Report.
- C. Attend the guardianship hearing.
- D. Inform the Area Director of issues related to the subsidized guardianship arrangement for the child.

The Resource Worker will:

- A. End date the Foster Family Service on the Provider Service Tab selecting the appropriate Reason for End Date in CHRIS noting in the comment box on the Provider Services Tab that home was closed due to the parent(s) assuming legal guardianship of the child supported by guardianship subsidy.

The DCFS Eligibility Unit will:

- A. Process the copy of the child's court decree and copy of the finalized CFS-435-F to ensure continued Medicaid coverage for IV-E eligible children.
- B. Close any trust account(s) when any child exits foster care.

PROCEDURE VIII-L7: Annual Subsidized Guardianship Review

11/2011

The DCFS Permanency Specialist or designee will:

- A. Mail the relative guardians the CFS-435-G: Subsidized Guardianship Agreement Review at least 60 calendar days before the anniversary date of the finalization of the family's Subsidized Guardianship Agreement with instructions to return in the provided SASE:
 - 1) The completed CFS-435-G; and,
 - 2) Required documentation:
 - a) For non-school-age children, documentation must include:
 - i. Up-to-date immunization records; and,
 - ii. A typed statement on letterhead from the child's Early Intervention Services provider indicating the child's participation and progress, if applicable; and,
 - iii. A typed statement on letterhead from the child's daycare provider confirming enrollment, if applicable.
 - b) For school-age children, documentation must include:
 - i. Up-to-date immunization records; and,
 - ii. A written confirmation on letterhead from the child's Arkansas Department of Education accredited school or home school program verifying enrollment and regular attendance; and,

- iii. A copy of the child's up-to-date Individualized Education Plan (IEP), if applicable.
- c) For children ages 18 up to the age of 21, documentation must include:
 - i. A current transcript from the child's secondary education, post-secondary, or vocational education program, as applicable; or,
 - ii. A typed statement on letterhead from the person responsible for managing the child's program or activity designed to promote, or remove barriers to, employment confirming the child's enrollment and participation; or,
 - iii. The most recent pay stubs from the child's employer indicating that the child is working at least 80 hours per month for that particular employer; or,
 - iv. A typed statement on letterhead from the child's medical professional stating the reason for which the child is incapable of meeting the education or employment requirements listed above.
- B. For all children who are approved for a special guardianship subsidy, the relative guardian must attach current documentation received from the service provider outlining:
 - 1) Current diagnosis, prognosis, and summary of treatment services for the previous year.
 - 2) An estimated expense summary of services which will be necessary to meet the special needs of the child and/or a description of any high-level care routine provided by the relative(s) to meet the child's special needs.
- C. Review requests for special rates. The subsidy will remain the same until the special subsidy is approved. Approval is not guaranteed.
- D. Review the completed CFS-435-G: Subsidized Guardianship Agreement Review and related supporting documentation prior to the anniversary date of finalization of the family's subsidized guardianship agreement at the annual review.
 - 1) If the supporting documentation shows that the child's condition has not changed, send confirmation to the family noting that the subsidized guardianship agreement will continue unchanged for the forthcoming year and make appropriate updates in CHRIS.
 - 2) If the supporting documentation shows that the child's condition has improved, schedule a family-centered staffing or meeting with the relative guardians and Foster Care Manager or designee to renegotiate the subsidized guardianship agreement to the age appropriate guardianship subsidy and complete a new CFS-435-F: Subsidized Guardianship Agreement.
 - 3) If the supporting documentation shows that the child's condition or status within the home has changed such that another type of revision of the subsidized guardianship agreement is needed or termination of that agreement is warranted:
 - a) Schedule a meeting with the relative guardians and Foster Care Manager or designee to discuss needed revisions or termination.
 - b) Revise CFS-435-F: Subsidized Guardianship Agreement as appropriate or complete CFS-435-H: Subsidized Guardianship Agreement Termination, if appropriate.
 - c) File appropriate form in relative guardian's record.
 - d) Enter necessary CHRIS updates.
 - 4) If relative guardian(s) does not submit CFS-435-G and/or requested documentation within the required timeframe, send the family a copy of the completed CFS-435-H indicating termination of the agreement and associated payments and benefits. File the original CFS-435-H in the provider record.

The Foster Care Manager or designee will:

- A. Conference with the DCFS Permanency Specialist or designee as needed regarding decisions related to annual reviews of subsidized guardianship arrangements.
- B. Participate in meetings with the relative guardians and DCFS Permanency Specialist or designee when discussing revisions to a subsidized guardianship agreement.
- C. Submit any requests for an increase in a guardianship subsidy to the DCFS Director or designee for review.

The DCFS Director will:

- A. Review requests for increases in subsidized guardianship payments and approve or deny as appropriate.

PROCEDURE VIII-L8: Placement with Successor Guardian

11/2011

If a child whose relatives are receiving a guardianship subsidy on his or her behalf re-enters DHS custody, the Area Director or designee will:

- A. Notify the DCFS Permanency Specialist that the child has re-entered care.
- B. Consult with the DCFS Permanency Specialist or designee and appropriate FSW supervisor as to whether:
 - 1) It is appropriate for the child to work toward reunification with the initial relative guardians; or,
 - 2) If guardianship with the successor guardian is in the child's best interest and, if so, if the identified successor guardian and child meet requirements the eligibility criteria for the Subsidized Guardianship Program; or,
 - 3) If another permanency option is more appropriate.
- C. If a subsidized guardianship arrangement with the successor guardian is determined to be appropriate, assign the appropriate Resource Worker to open the successor guardian's home as a provisional foster home per Policy VII: Development of Foster Homes.
- D. If the successor guardian is determined not be an appropriate placement at that point in time, have the assigned FSW find an appropriate approved or licensed placement for the child per A.C.A. § 9-28-402.

The Resource Worker will:

- A. If notified by the Area Director or designee, open the successor guardian's home as a provisional foster home per Policy VII: Development of Foster Homes.
- B. Collaborate with the FSW to evaluate:
 - 1) How the other children and adults in the home will affect the successful development of the child; and,
 - 2) How the child will impact the other members of the home.
- C. Support the relative throughout the process of becoming a provisional and regular DCFS foster home.
- D. If and when legal guardianship is granted to the successor guardian, end date the Foster Family Service on the Provider Service Tab selecting the appropriate Reason for End Date in CHRIS noting in the comment box on the Provider Services Tab that home was closed due to the parent(s) assuming legal guardianship of the child supported by a guardianship subsidy.

The FSW Supervisor will:

- A. Consult with the FSW, Area Director, and DCFS Permanency Specialist as to whether a subsidized guardianship arrangement with the initial relative guardians (i.e., reunification) or with the successor guardian is in the child's best interest or if another permanency option is more appropriate.
- B. Conference with the FSW on decisions regarding the child.

The FSW will:

- A. Consult with the FSW Supervisor, Area Director and DCFS Permanency Specialist as to whether a subsidized guardianship arrangement with the initial relative guardians (i.e., reunification) or the successor guardian is in the child's best interest or if another permanency option is more appropriate.
- B. If appropriate, request that the OCC attorney petition the court for a permanency planning hearing to review the child's case plan goal of legal guardianship supported by a guardianship subsidy with the successor guardian.
- C. Follow Procedure VIII-L5: Subsidized Guardianship Agreement Finalization and Procedure VIII-L6: Guardianship Hearing for Subsidized Guardianship.

The DCFS Permanency Specialist or designee will:

- A. Consult with the FSW, FSW Supervisor, and Area Director as to whether a subsidized guardianship arrangement with the initial relative guardians (i.e., reunification) or the successor guardian is in the child's best interest or if another permanency option is more appropriate.
- B. Follow Procedure VIII-L5: Subsidized Guardianship Agreement Finalization, Procedure VIII-L6: Guardianship Hearing for Subsidized Guardianship and VIII-L7: Annual Subsidized Guardianship Program Review as appropriate.

PROCEDURE VIII-L9: Appeals

11/2011

If the family wishes to appeal a decision regarding their subsidized guardianship agreement, the DCFS Permanency Specialist or designee will:

- A. Direct the family to DHS Policy 1098 for information on administrative hearings if questions from the family are received (instructions regarding how to request an administrative hearing are included on CFS-435-H).
- B. Keep the family and Foster Care Manager or designee informed to any further proceedings related to the appeal request.

NEW



ARKANSAS DEPARTMENT OF HUMAN SERVICES
Division of Children and Family Services

Subsidized Guardianship Program Application & Checklist

(Must be completed prior to the permanency planning staffing in which legal guardianship supported by a guardianship subsidy is discussed)

I (we) hereby apply to the Division of Children and Family Services for the Subsidized Guardianship Program for the following child:

Child's Full Name IV-E Eligible Non IV-E Eligible

Child's CHRIS ID Child's Date of Birth

Prospective Relative Guardian/ Current Relative Foster Parent CHRIS Provider ID

Prospective Relative Guardian/Current Relative Foster Parent CHRIS Provider ID

Address City/State/Zip Code Telephone

The following eligibility criteria have been met:

- The child has been removed from his or her home pursuant to a judicial determination that continuation in the home would be contrary to the welfare of the child/youth and, as such, the child/youth has been placed in DHS custody per judicial order;
- The child has resided for at least 6 consecutive months in the fully approved foster home of the prospective relative guardian(s) (i.e., the prospective relative guardian's home is no longer a provisional foster home and has been a fully approved foster home to the child seeking Subsidized Guardianship Program approval for at least 6 consecutive months);
- Being returned home or adopted are not appropriate permanency options for the child and the Subsidized Guardianship arrangement is in the child's best interest;
- The child demonstrates a strong attachment to the prospective relative guardian(s) and the guardian(s) has a strong commitment to caring permanently for the child;
- Each child is consulted regarding the Subsidized Guardianship arrangement; and,
- Youth consent to guardianship if he or she agrees to the Subsidized Guardianship arrangement and it is agreed that procedures for the arrangement should be initiated (unless the court in the best interest of the minor dispenses with the minor's consent).

The following information describing the ways in which the child meets eligibility requirements for Subsidized Guardianship is included in the case plan:

- The steps that the agency has taken to determine that it is not appropriate for the child to be returned home or adopted;
- The reasons for any separation of siblings during placement and description of the efforts made to place currently separated siblings together, the efforts made to provide frequent visitation or other ongoing interaction between siblings; and efforts to reunify separated siblings;
- The reasons why a permanent placement with an appropriate and willing relative through a Subsidized Guardianship arrangement is in the child's best interest;
- The efforts that the Division has made to discuss adoption by the child's relative foster parent as a more permanent alternative to legal guardianship and, in the case of a relative foster parent who has chosen not to pursue adoption, documentation of those reasons;
- The efforts made by the Division to discuss with the child's parent(s) the Subsidized Guardianship arrangement; or the reasons why the efforts were not made; and,

I (We) _____, the prospective relative guardian(s) do hereby confirm that I (we) intend to pursue legal guardianship supported by a guardianship subsidy for _____ which includes, but is not limited to, participation in the permanency planning activities, subsidized guardianship determination meetings, and the development of an agreement, provided all other necessary parties agree that Subsidized Guardianship is in this child's best interest and all eligibility requirements have been met. I (We) understand that the Subsidized Guardianship arrangement is not yet final and that the process may be terminated at any point on grounds that Subsidized Guardianship is not in the child's best interest or that eligibility requirements have not been met.

I (We) understand and agree that an evaluation of eligibility for this subsidy will be made upon filing of this application and that if the subsidy is approved, a review of continued need will be made annually or as necessary (for all but non-recurring Subsidized Guardianship expense subsidy). The determination will be based on information currently available regarding the child.

I (We) certify that all of the information contained in this declaration is true and correct to the best of my (our) knowledge and that the child named in this document is dependent upon me (us).

Prospective Relative Guardian Signature

Date

Prospective Relative Guardian Signature

Date

Family Service Worker Signature

Date

To be completed by Permanency Specialist or designee:

Upon review of the information contained in this document, I have determined that:

- All initial eligibility and case plan criteria for the child and relative foster parents named in this document have been met. The child's FSW shall proceed with permanency planning/staffing arrangements (per DCFS Procedure VIII-L3: Subsidized Guardianship Determination Meeting).
- All eligibility and case plan criteria have not been met. The child's FSW:
 - may contact the Permanency Specialist or designee to discuss how to meet said criteria and/or other possible permanency options; or,
 - shall deny the family participation in the Subsidized Guardianship Program per DCFS Procedure VIII-L2: Denial of Subsidized Guardianship Arrangement.

Permanency Specialist or designee Signature

Date



ARKANSAS DEPARTMENT OF HUMAN SERVICES
Division of Children and Family Services
Notification of Subsidized Guardianship Program Denial

Date

Name of Relative Foster Parent(s)

Address

Dear :

This letter is to notify you of the denial of your application to the Subsidized Guardianship Program for

Child's Name

It has been determined by the Division of Children and Family Services that you or the child has **not** met the following eligibility criteria for the Subsidized Guardianship Program:

- The child has been removed from his or her home pursuant to a judicial determination that continuation in the home would be contrary to the welfare of the child/youth and, as such, the child has been placed in DHS custody per judicial order;
- The child has resided for at least 6 consecutive months in the fully approved foster home of the prospective relative guardian(s);
- Being returned home or adopted are not appropriate permanency options for the child and the Subsidized Guardianship arrangement is in the child's best interest;
- The child demonstrates a strong attachment to the prospective relative guardian(s) and the guardian(s) has a strong commitment to caring permanently for the child;
- Each child is consulted regarding the Subsidized Guardianship arrangement; and,
- Youth 12 and older shall sign consent to guardianship if he or she agrees to the Subsidized Guardianship arrangement and it is agreed that procedures to finalize the guardianship should be initiated (unless the court in the best interest of the minor dispenses with the minor's consent).

You may contact the DCFS Permanency Specialist at 501-682-1585 to discuss this matter further. You also have a right to appeal this decision within 30 calendar days of receiving this notice. To request an administrative hearing, you must mail a copy of this form along with your request to:

Office of Appeals & Hearings
Slot N 401, P.O. Box 1437
Little Rock, AR 72203

Administrative hearings are conducted telephonically, unless you ask that the hearing be held in person. The request for an in-person hearing must be noted on your request for an administrative hearing.

Respectfully,

Family Service Worker Name

Family Service Worker Supervisor

Family Service Worker Signature

Family Service Worker Supervisor Signature

REVOKED



ARKANSAS DEPARTMENT OF HUMAN SERVICES
 Division of Children and Family Services
Subsidized Guardianship Program Special Subsidy Request
 (To be completed by the relative foster parents or relative guardians)

Child's Name

SSN

Date of Birth

Name of Legal Guardian

Child's FSW or Adoption Specialist

For Special Subsidy Requests (i.e., for a guardianship subsidy request that is greater than the child's current foster care board payment or current guardianship subsidy), please describe the child's unique medical, emotional, or behavioral condition which requires special and additional care of supervision, beyond that of a typical child. Please be specific and provide an estimated expense summary of services which is necessary to meet the special needs of the child and/or a description of any high-level care routine provided by the relative(s) to meet the child's special needs. Attach supporting documents as applicable.

Relative Foster Parent or Legal Guardian's Signature

Date

Relative Foster Parent or Legal Guardian's Signature

Date



ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES

Subsidized Guardianship Agreement

The following Agreement has been entered into by and between:

Arkansas Department of Human Services, Division of Children and Family Services, P.O. Box 1437, Slot S 565, Little Rock, Arkansas 72203 and

(Guardian Full Name(s))

(Address)

(Telephone #)

Hereafter called the "guardian(s)," for the purpose of facilitating the legal guardianship of and:

(Child's Full Name)

(Social Security Number)

(Date of Birth)

To aid the guardians in providing proper care for this child, hereafter referred to as "the child" in this Agreement.

This document is the:

Initial Agreement: The prospective guardian(s) agree(s) that he/she intends to provide guardianship to the child and has signed this document prior to finalization of guardianship for the purposes of receiving Subsidized Guardianship payments and/or services for the child under Titles XIX and XX from the time of placement.

This Agreement will become effective upon entering of a court order granting guardianship of the child to the guardians and, unless termination of the Agreement occurs as a result of one or more conditions set forth in Section IV (Revision or Termination) of this Agreement, this Agreement will remain in effect until:

- the child's eighteenth (18th) birthday if the agreement is finalized prior to the child reaching 16 years of age; or
the child's twenty-first (21st) birthday if the agreement is finalized after the child has reached 16 years of age but before the child has reached 18 years of age and if the child meets at least one of the following criteria from the age of 18 until the age of 21:
The child is completing secondary education or a program leading to an equivalent credential; or
The child is enrolled in an institution which provides post-secondary or vocational education; or
The child is participating in a program or activity designed to promote, or remove barriers to, employment; or
The child is employed for at least 80 hours per month; or
The child is incapable of doing any of the above described activities due to a medical condition.

The Agreement will remain in effect without regard to State residency of the relative guardian.

Date of Guardianship Finalization

Amended Agreement: This is an amendment of the Subsidized Guardianship Agreement for the child placed on (Date)

This Agreement will be effective (Date) and remain in effect until (Date)

PROVISIONS OF AGREEMENT

I. Relative Guardian Roles and Responsibilities

We/I, the relative guardian(s) agree(s):

- A. To continue to provide normal day to day care for the child who is placed with us.
- B. To accept this child as a member of our family with full understanding of his/her needs.
- C. To cooperate with DCFS and keep the DCFS Permanency Specialist aware of adjustment issues.
- D. To continue regular visitation and/or contact with the designated siblings and relatives (when applicable).
- E. To understand that accepting, we are accepting one of a sibling group and that should disruption of placement occur with any of the siblings, we will not attempt to separate them by requesting to keep any one child (when applicable).
- F. To complete and submit, annually, CFS-435-G to the DCFS Permanency Specialist within twenty (20) business days of receipt of CFS-435-G.
- G. To adhere to all other provisions outlined in this Agreement.

II. DCFS Roles and Responsibilities

DCFS agrees:

- A. To provide the current foster home board payment until transfer of permanent guardianship at which time the monthly Subsidized Guardianship payment will be provided.
- B. To provide necessary documents at the appropriate time and process those documents in a timely fashion.
- C. To ensure that an annual report to the court is filed by the Office of Chief Counsel on behalf of the guardian(s) and child.
- D. To keep the relative guardian(s) informed of any changes or other information impacting their Subsidized Guardianship Agreement and/or payments.
- E. To adhere to all provisions outlined in this Agreement.

III. Guardianship Assistance Benefits

A. Monthly Cash Payment: Yes No

\$ _____ For _____ months

Yearly Total \$ _____

The payment will be mailed to the relative guardian(s) each month.

The amount of this monthly cash payment (Subsidized Guardianship) is based on the needs of the child and the circumstances of the guardian(s) and has been determined by mutual Agreement between the guardian(s) and the Division. The amount of the payment cannot exceed the foster care maintenance payment for the child if he/she were in a foster family home in the State of Arkansas.

Adjustments in Subsidized Guardianship payments may be made based upon changes in the needs of the child, changes in the circumstances of the guardian(s), or changes in the maximum allowable Subsidized Guardianship payment. Documentation of changes in the child's needs or family's circumstances will be required.

The Division will pay the total cost of non-reoccurring expenses associated with obtaining legal guardianship (supported by Subsidized Guardianship) of the child up to \$2,000.

B. Medical Coverage

- 1. Medical benefits as provided under Title XIX of the Social Security Act (Medicaid) will be available to any IV-E eligible child in accordance with the procedure of the State in which the child resides.
- 2. Guardians of a non-IV-E eligible child may apply for Medicaid through his or her local county office. Medical benefits will not be provided as part of this Agreement.

C. Social Services

1. Social Services as provided under Title XX of the Social Security Act will be available to the child in accordance with the procedures of the State in which the child resides.
2. Social Services will be provided as appropriate by the State of Arkansas, if not provided by Title XX, regardless of the State in which the child resides.
3. Contact your local Department of Human Services county office to access Title XX services.

D. Transitional Services

1. Appropriate Transitional Youth Services are available to children who enter into a Subsidized Guardianship arrangement after attaining 16 years of age but prior to reaching 18 years of age. The purpose of Transitional Youth Services (TYS) is to better prepare youth for successful transition to adulthood and to ensure that youth have access to an array of resources.
2. Contact your local Department of Human Services county office to learn more about Transitional Youth Services.

E. Procedures to be Followed when Moving from the State of Arkansas

Guardian(s) must follow these procedures in order to receive guardianship assistance medical coverage and social services when moving to or living in a state other than Arkansas.

1. Medical Coverage
 - a) At least ten (10) days prior to the planned move the guardian(s) should contact the DCFS Permanency Specialist in the Arkansas DHS/DCFS Foster Care Unit.
 - b) Upon arrival in the new resident state contact the local state Medicaid office to surrender the Medicaid card issued by the State of Arkansas and make application for Medicaid in the new resident state.
 - c) Take a copy of this Agreement with you.
2. Social Services
 - a) Contact the state agency responsible for the provision of social services in your new resident state as appropriate.
 - b) Take a copy of this Agreement with you.
3. Transitional Services
 - a) Contact the state agency responsible for the provision of transitional services in your new resident state.
 - b) Take a copy of this Agreement with you.

II. Notification of Change to the Guardianship Assistance Agreement and/or Payments

- A. The guardian(s) will notify the Division, in writing, within five (5) days if guardian(s) is/are no longer legally responsible for the support of the child or is/are no longer supporting the child. A written statement is required.
- B. The amount of the subsidy may be adjusted automatically due to increases in age of the child. These are system-generated adjustments and no notice will be sent.
- C. Guardian(s) shall notify the Division of changes of address at least ten (10) days prior to the move.

III. Annual Subsidized Guardianship Agreement Review and Subsidy Eligibility

For Subsidized Guardianships, verification of circumstances to continue the subsidy must be documented annually via CFS-435-G: Subsidized Guardianship Agreement Review. The DCFS Permanency Specialist will send this form to the guardian(s) each year that this Agreement is in place approximately 60 business days prior to the anniversary date of the finalization of the family's current Subsidized Guardianship Agreement. The guardians will return the completed CFS-435-G and any supporting documentation requested within 20 business days of receipt of the CFS-435-G.

IV. Revision or Termination

The Subsidized Guardianship Agreement and, consequently the Subsidized Guardianship payments, shall be terminated or modified:

- A. If the child is absent from the relative guardian home for more than 14 days in a month (in such an event, the child will be eligible for only a portion of the month that he or she was in the relative guardian home) excluding when a child 18 or older lives in an approved independent living situation outside of the home (e.g., college dorm); or,
- B. When the terms of the Subsidized Guardianship Agreement are fulfilled; or,
- C. If the child begins receiving SSI, SSA, or any other source of income (the relative guardian is responsible for notifying the Division if the child begins receiving other sources of income) excluding any income that the child may earn from his or her own employment;
- D. If the child has attained the age of 18 for those who entered into the Subsidized Guardianship arrangement prior to the age of 16; or,
- E. If the child has attained the age of 21 for those who entered into the Subsidized Guardianship arrangement at the age of 16 or older; or,
- F. If the child who has an extended subsidy (i.e., up to age 21) does not meet the education or employment conditions outlined on page 1 of this agreement; or,
- G. If the child becomes an emancipated minor; or,
- H. If the child marries; or,
- I. If the child enlists in the military; or,
- J. If the relative guardian(s) are no longer legally or financially responsible for the support of the child; or,
- K. If the guardian(s) die; or,
- L. If the guardianship is vacated; or,
- M. If the child dies.

In addition, if a youth is receiving Subsidized Guardianship payments and re-enters DHS custody, the Subsidized Guardianship Agreement will be terminated until such time that the child is reunified with the relative guardian(s).

Subsidized Guardianship payments may continue to be paid on behalf of the youth if the youth moves out of the relative guardianship's home or otherwise lives independently of the guardian (s) as long as the guardian(s) continue to provide support to the youth as evidenced by supporting documentation requested by the DHS/DCFS Foster Care Unit.

V. Adoption

The child/youth shall retain eligibility for federal adoption assistance payments under the Title IV-E, provided he or she was eligible for federal adoption assistance payments when the Subsidized Guardianship Agreement was negotiated, if the guardian later decides to adopt the child.

VI. Successor Guardian

In the event that the relative guardian(s) of the child dies or is no longer able to care for the child, the relative guardian(s) may identify in this Agreement a successor guardian to potentially assist in expediting permanency for the child if and when the relative guardian can no longer fulfill guardianship responsibilities.

A successor guardian and all household members within that individual's home must clear applicable Child Maltreatment Central Registry checks, applicable State Police Criminal Record checks, and a Vehicle Safety Check before being identified as a potential successor guardian in the Subsidized Guardianship Agreement or in any amendments to the Subsidized Guardianship Agreement.

Identification of a successor guardian in the Subsidized Guardianship Agreement will not guarantee an automatic transfer of guardianship in the event that the current relative guardian is no longer able to fulfill guardianship responsibilities. In order for the successor guardian to assume guardianship, he or she must follow all policies and procedures regarding Subsidized Guardianship arrangements. This includes becoming an approved DCFS foster home placement for the child (if appropriate at that point in time) prior to exploring legal guardianship supported by the Subsidized Guardianship Program.

If the above successor guardian requirements have been met and all supporting documentation is filed in the provider record, please enter the successor guardian information below:

Successor Guardian Full Name(s)

(Address)

_____-_____
(Telephone #)

VII. Appeal

Guardian(s) may appeal the Division's decision to deny, terminate, or modify their child's Subsidized Guardianship Agreement and/or payments in accordance with the rules and procedures of the State's fair hearing and appeal process. The relative guardian(s) must appeal an adverse decision within (30) calendar days of written notice of adverse action. To request an administrative hearing, the relative guardian(s) must mail a copy of the form notifying them of adverse action along with the request to:

Office of Appeals & Hearings
Slot N401, P.O. Box 1437
Little Rock, AR 72203

Guardianship Assistance payments will not continue pending the determination of an appeal. Families who receive a favorable ruling in their hearing may be entitled to assistance that had been suspended.

Effective date for Titles XIX and XX: **UPON FINALIZATION OF GUARDIANSHIP**

Director's Signature
Division of Children and Family Services

Date

Guardian's Signature

Date

Guardian's Signature

Date

Successor Guardian's Signature (if identified in Section VI)

Date

Successor Guardian's Signature (if identified in Section VI)

Date

Signed copy of the Subsidized Guardianship Agreement given/sent to relative guardian(s) on _____
Date



ARKANSAS DEPARTMENT OF HUMAN SERVICES
 Division of Children and Family Services
Annual Subsidized Guardianship Agreement Review

Instructions:

Sections A, B and D are to be completed by the guardian regardless of the age of the child in his or her care.

Section C is to be completed by a guardian of a child who is receiving an extended Subsidized Guardianship (i.e., up to the age of 21 due to the initial Subsidized Guardianship Agreement being finalized after the child attained the age of 16.

Section E is to be completed by the DCFS Permanency Specialist who will return a copy of this completed form to the family.

Section A: Requested Subsidized Guardianship Agreement Action

Guardian's Name _____ Address _____ City /State/Zip Code _____

- I/We request renewal of the current Subsidized Guardianship Agreement.
- I/We request a conference with staff to discuss possible changes in the Subsidized Guardianship Agreement because the conditions outlined in the most recent agreement have changed and/or the level of care required for the child has changed.
- I/We request termination of Subsidized Guardianship Agreement & payments.

Section B: Subsidized Guardianship Review

I/We certify and assure the Arkansas Department of Human Services that the following is current and accurate and has been so since eligibility was last certified (please check all that apply):

- The child is presently in our/my care and custody, and that the condition(s) for which he/she was initially determined eligible for Subsidized Guardianship Program benefits remain the same.
- I/We have been and continue to be legally responsible for the child.
- I/We have been and continue to be financially responsible for the child.
- There has **NOT** been a change of name, or change in marital status for the child, nor has the child enlisted in the military, married or otherwise been emancipated.
- My child is not of school age.
- My child is attending public or private school and the school name is _____.
- My child is home schooled in accordance with state law.

- My child is incapable of attending school due to a medical condition documented by a physician.
- Our address and/or phone number has changed.

(If applicable, please enter new address including city, state, and zip code and/or new phone number)

Section C: Extended Guardianship Assistance Review

To be eligible for extended Subsidized Guardianship, the guardian had to have entered into the Subsidized Guardianship Agreement on or after the child's 16th birthday. In order for the youth to remain eligible for Subsidized Guardianship through age 21 at least one of the following criteria must be met (please check all that apply for the child in your care):

- The child is completing secondary education or a program leading to an equivalent credential; or,
- The child is enrolled in an institution which provides post-secondary or vocational education; or,
- The child is participating in a program or activity designed to promote, or remove barriers to, employment; or,
- The child is employed for at least 80 hours per month; or,
- The child is incapable of doing any of the above described activities due to a medical condition.

Section D: Signatures and Notarization

- I/We understand that if we knowingly provide false information with regard to this statement or any information that we/I provide to the Department regarding the Subsidized Guardianship Arrangement, could result in our/my having to repay funds to the Department or termination of the Subsidized Guardianship Agreement.

(Signature of Legal Guardian) Date _____

(Signature of Legal Guardian) Date _____

Sworn to and subscribed before me this _____ day of, _____ 20_____.

My commission expires _____
Notary Public

Section E: Approval (to be completed by the DCFS Permanency Specialist)

Support documentation received: Yes No

Comments:

Approval time frame of this renewal _____ to _____
(Effective Start Date) (End Date)

The daily rate for this renewal is \$ _____

The next renewal is due by the _____ day of _____, 20____ provided there is no revision.

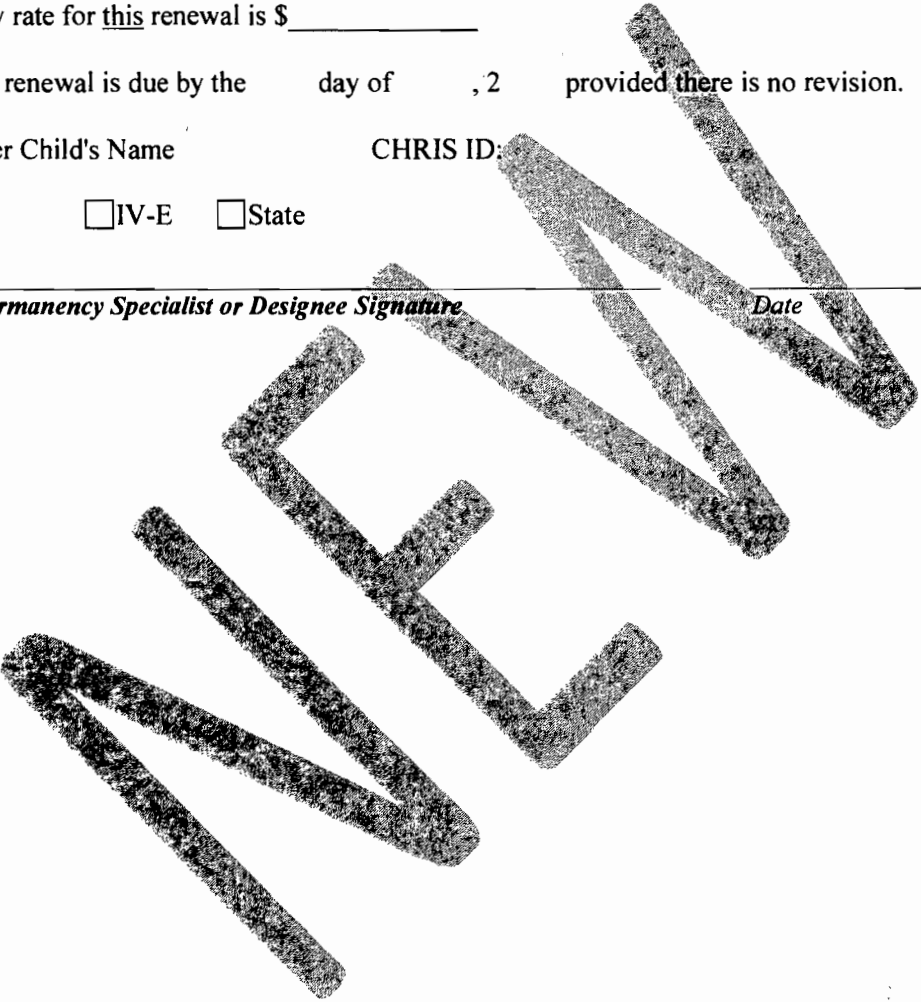
For: Enter Child's Name

CHRIS ID: _____

Funding: IV-E State

DCFS Permanency Specialist or Designee Signature

Date





ARKANSAS DEPARTMENT OF HUMAN SERVICES
Division of Children and Family Services
**Notice of Modification or Termination to
Subsidized Guardianship Agreement**

Date

Guardian's Name:

Address

City/State/Zip

This is to notify you that as of _____ the Subsidized Guardianship Agreement and benefits paid under the agreement on behalf of _____ have been:

Modified

(Please provide description of modification)

Terminated

The Subsidized Guardianship Agreement and associated payments have been modified or terminated for the following reason(s):

- Changes in the child's circumstances have altered the level of care required for the child.
- Changes to the child's income have necessitated a revision to the guardianship subsidy.
- You are no longer legally responsible for the child's care due to a change in the legal status of the child prior to reaching the age of 18;
- You are no longer providing any care and/or financial support to the child;
- You did not submit 435-G: Annual Subsidized Guardianship Review and/or required supporting documentation when requested and as outlined in your Subsidized Guardianship Agreement.
- We have received notification that an annual report was not submitted to the court as outlined in your Subsidized Guardianship Agreement.
- You did not adhere to other provisions outlined in your Subsidized Guardianship Agreement.
- The child is over the age of 18 and receiving extended Subsidized Guardianship benefits and no longer meets, or the parents fail to submit documentation sufficient to demonstrate, that the child meets the educational or vocational requirements of this Agreement.
- The child was mistakenly determined eligible for benefits;
- You have requested termination of the Subsidized Guardianship Agreement and associated benefits;

Other

Additional Permanency Specialist comments:

You have a right to appeal this decision within 30 calendar days of receiving this notice. To request an administrative hearing, you must mail a copy of this form along with your request to:

Office of Appeals & Hearings
Slot N 401, P.O. Box 1437
Little Rock, AR 72203

Administrative hearings are conducted telephonically, unless you ask that the hearing be held in person. The request for an in-person hearing must be noted on your request for an administrative hearing. You have the right to an attorney; if you cannot afford one you should contact Legal Services.

For more information, please contact the DCFS Permanency Specialist at 501-682-1585.

Permanency Specialist Signature

Date

Foster Care Manager or Designee Signature

Date

POLICY VI-L: MENTAL HEALTH SERVICES FOR CHILDREN IN FOSTER CARE

The Division of Children and Family Services is dedicated to ensuring that all children in foster care receive a full range of health care services including mental health services (evaluation and treatment). School age children (5 to 18 years old) who need mental health services will be referred to a Community Mental Health Center (CMHC) within five days of entry into foster care. Children under five years of age will be referred for mental health services if the need is identified by a physician during the UAMS comprehensive health assessment or by the DCFS worker or foster parent.

Urgent (requiring immediate action) or emergent (appearing for the first time) mental health treatment needs identified by the Primary Care Physician (PCP) during the initial health screening (24-72 hours of entering foster care) shall be referred immediately by the DCFS worker to a CMHC.

Mental health problems can manifest themselves at any time during foster care. Therefore, DCFS workers will refer a child in foster care for mental health services at any time during the child's stay in foster care when they think it is appropriate, and immediately whenever a traumatic event takes place in the life of a child in foster care.

Continuity of care is extremely important. Consequently, if a child or any family members are already receiving mental health services when the child enters the foster care system, DCFS will continue mental health services clinically indicated by the current provider, unless there is a compelling reason to change providers. Other ways the DCFS worker can help promote continuity of care include encouraging cooperation and coordination between service providers. Additionally, the DCFS worker can encourage the PCP to act without delay. Finally, the DCFS worker will provide the CMHC with a copy of the court order whenever custody changes.

When possible, the DCFS worker will make every effort to expedite access to appropriate documents from previous treatment as this can be critical to successful authorization of services by the Division of Medical Services (DMS), as well as the quality and timeliness of services.

PROCEDURE VI-L1: Referral for Mental Health Assessment

The Family Service Worker will:

- A. Refer children in foster care in need of mental health services, ages 5-18 years old, to a CMHC for routine mental health services within five days of their entry into foster care. Need may be determined by a physician, mental health professional, FSW or the foster parent. The FSW should –
 - 1) Contact the closest CMHC and follow their specific referral procedures;
 - 2) Provide required referral documentation (See Procedure VI-M3).
- B. Refer children under 5 years old for mental health services when the need is identified by the physician during the UAMS comprehensive health assessment or by the DCFS worker or foster parent. Follow the CMHC's referral procedures and provide any necessary documentation.
- C. Refer children in foster care with urgent or emergent mental health needs identified by the Primary Care Physician during the initial health screening, immediately to a local CMHC. Follow the organization's referral procedures and provide any required documentation.
- D. Refer a child in foster care for mental health services immediately whenever a traumatic event occurs in the life of a child in foster care. Follow the referral procedures and provide any required documentation.
- E. Refer a child in foster care for mental health services anytime the FSW thinks appropriate. Follow the organization's referral procedures and provide any required documentation.
- F. Promote continuity of care by –
 - 1) Continuing clinically indicated mental health services the child in foster care or family members were receiving prior to entering foster care.
 - 2) Take timely action to ensure the continuity of the Primary Care Physician's referral.
 - 3) DCFS will provide the CMHC a copy of the court order when custody changes.

- G. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by the Division of Medical Services.

PROCEDURE VI-L2: Comprehensive Health Assessment by University Of Arkansas for Medical Sciences UAMS

The Family Service Worker will:

- A. Ensure that the child in foster care receives a comprehensive health assessment by UAMS within 60 days of the child's entry into foster care.
- B. Ensure that a hard copy of the Community Mental Health Center's mental health assessment is sent to UAMS with the child's medical records.
- C. Share the results of the comprehensive health assessment with the child in foster care's mental health professional.

PROCEDURE VI-L3: Mental Health Assessment and Evaluation

The Family Service Worker will:

- A. Refer the child in foster care to the CMHC and document the referral in the Medical Services screen in CHRIS.
- B. Ensure the referral to the CMHC is accompanied by:
 - 1) Authorization for treatment,
 - 2) A copy of the current court order,
 - 3) A copy of the medical history,
 - 4) A copy of the case history information.

If any of the above information is not available at the time of the initial referral, DCFS will forward those documents as soon as they become available. The CMHC needs this information for effective treatment and to obtain prior authorization from Medicaid.

- C. Assure adequate and appropriate participation in the assessment process by:
 - 1) Attending the first appointment with the child to sign consents and facilitate treatment and treatment planning.
 - 2) Ensuring that the adult(s) who have the most complete information about the child will accompany the child to the assessment/evaluation. This may mean the Family Service Worker, foster parent and/or parents, as appropriate.
- D. Ensure that the foster parent receives a copy of the child's mental health assessment.
- E. Establish a schedule regarding dates for evaluation and treatment sessions with the mental health provider.
- F. DCFS understands the Community Mental Health Center will:
 - 1) Offer routine assessment or evaluation of the child within five working days from receipt of the DCFS referral, receipt of authorization for treatment and a copy of the court order.
 - 2) If a complete psychiatric evaluation is needed, the CMHC has 45 working days to complete the evaluation.
 - 3) Immediately evaluate any client who presents as a psychiatric crisis or an outpatient mental health emergency (See Glossary for definitions) and offer triage/assessment by a Mental Health Professional to the level deemed appropriate.

The CMHC will make a copy of the emergency assessment or evaluation available immediately through the Center's emergency services.

- G. Provide immediate verbal feedback regarding the child's mental health evaluation to the DCFS worker.
- H. Provide a copy of the child's written mental health assessment report to the DCFS worker as soon as possible, and in every case within five business days.

It is understood and agreed that prior authorization requests, diagnostic assessments, master treatment plans, progress notes and other documentation required by the Division of Medical Services may be utilized to impart information, in lieu of written reports to DCFS.

PROCEDURE VI-L4: Outpatient Therapy and Treatment

If the assessment/evaluation indicates that mental health services are needed, the Family Service Worker can expect the Community Mental Health Center to:

- A. Offer counseling (individual, group and/or family) and/or other appropriate treatments suited to the individual child's needs.
- B. Treatment will be offered within five working days of the referral (or in emergency situations within 24 hours).
- C. Assist DCFS in making appropriate referrals to other facilities if the CMHC does not have the specialized services required for the child.

If copies of the current court order and other information (e.g. case history), necessary for the CMHC to offer treatment services, are not initially available, the DCFS Family Service Worker will:

- A. Forward those documents to the CMHC as soon as they become available. The CMHC needs this information to provide effective treatment and to obtain prior authorization from Medicaid. The Medicaid prior authorization process may affect the deadlines mentioned above.
- B. Remain engaged in the counseling process and will determine with the Center's therapist at the beginning of counseling the degree and methods of the DCFS worker's engagement (e.g. phone conversations, written reports, conferences).
- C. Will determine, in coordination with the CMHC therapist, which adults, if any, need to accompany the child to treatment and/or be involved in the child's treatment.
- D. Will assure adequate and appropriate participation in the treatment process.
- E. Will, along with the foster parent, attend each appointment scheduled with the psychiatrist, if possible.
- F. Review and sign all master treatment plans and updates.
- G. Document the child's mental health services in the Medical Services screen in CHRIS.

PROCEDURE VI-L5: Inpatient and Other Residential Treatment Programs

7/09

DCFS understands the Community Mental Health Center will:

- A. Immediately evaluate any client who presents as a psychiatric crisis or an outpatient emergency (see Glossary for definitions) and offer triage/assessment by a mental health professional to the level deemed appropriate.
- B. Assist DCFS in making appropriate referrals to other facilities if the CMHC does not have the specialized services required for the child.
- C. Assist in securing appropriate mental health services within its catchment area.
- D. Assign a mental health clinician to coordinate mental health treatment for the child, including but not limited to coordination with other agencies, convening staffings, or assisting with the location of 24-hour mental health placement.
- E. Work with DCFS to ensure that mental health services compliment case planning, management, and the Multi-Agency Plan of Services (MAPS) Plan. MAPS is a process in which the parent/caregiver and child meet with a multi-agency service team for individualized service planning. The child is assigned a MAPS case manager.

- F. Share information about past treatment and coordinate treatment services/discharge plans with inpatient/residential provider, providing the appropriate consent forms have been signed.
- G. DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

If the DCFS service area has a Placement Coordinator designated by the Area Director. The Placement Coordinators may:

- A. Be familiar with all mental health placement resources available within Arkansas and become aware of new placement resources as they develop.
- B. Know what documentation is required in placement packets submitted to providers with whom placement is considered.
- C. Understand the Child Case Review Committee (CCRC) process and be able to articulate that information to the courts.
- D. Attend court hearings to:
 - 1) Explain the current status of the case being addressed.
 - 2) Identify which placements have been pursued.
 - 3) Explain why specific placements have not been made.
 - 4) Respond to any questions regarding the CCRC process and/or the state law requirements that must be met before a child in DHS/DCFS custody may be sent out of state for treatment.
- E. Receive the placement packet from the Family Service Worker and use it to:
 - 1) Check for completeness and coordinate with the Family Service Worker to acquire any missing information.
 - 2) Ensure that a packet is complete before forwarding it to the Specialized Placement Unit (SPU). Incomplete packets will be returned immediately to the Placement Coordinator.
 - 3) Review the child's needs and make recommendations for possible appropriate placements.
- F. Consult with the SPU Manager to determine which placement programs have slots and/or funds available.
- G. Act as a conduit for communication between the county staff and SPU.
- H. Keep a monthly log containing information about:
 - 1) Which children were referred for placement.
 - 2) The county staff member responsible for case management,
 - 3) The current status of a case and pending actions,
 - 4) The length of stay in a placement.
- I. Monitor the Medicaid Certificate of Need approval.
- J. Be involved in discharge planning, and assure discharge planning begins when the child is admitted.

The Family Service Worker will:

- A. Make a referral to the Community Mental Health Clinic's Clinical Director or his designee when a child needs intensive mental health services (including any 24-hour services).
- B. When a referral is made for Inpatient/Residential services the worker will assure adequate and appropriate participation in the Inpatient/Residential evaluation/intake process by:
 - 1) Providing comprehensive and accurate information about the child during the assessment and admission phase to an inpatient or residential facility.
 - 2) Attending the first appointment with the child to sign consents and facilitate treatment and treatment planning. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by the Division of Medical Services.
- C. Obtain prior authorization from the DCFS Administrator On-Call in the case of a child in foster care and under the age of 10 being placed in an acute or comprehensive residential treatment program:
 - 1) The FSW/adoption specialist will contact the DCFS County Supervisor or designee, who is then responsible for calling the Administrator On-Call at phone number 501-538-7960. The County Supervisor or designee is also responsible for apprising the Area Director of the administrative case consultation and disposition within 24 hours.

- 2) The information that must be made available to the Administrator On-Call includes but is not limited to the following. The information may be conveyed by telephone but may also be required via fax the following business day.
 - a. An assessment or evaluation by a licensed mental health professional from the local Community Mental Health Center that recommends acute or residential inpatient services as the least restrictive level of care that can meet the child's needs. This recommendation should include a preliminary mental health diagnosis of the DCFS procedures VI-L1, VI-L3 and VI-L5.
 - i. If the foster child is in a therapeutic foster home, a licensed mental health professional employed by the Therapeutic Foster Provider may perform the mental health assessment and provide recommendation for acute or residential inpatient services.
 - b. Description of current behavior, emotional condition and any precipitating events that could have contributed to the current condition of the child.
 - c. Current medications and purpose for the prescription.
 - d. Information about current placement and reasons the child cannot remain in that placement.
 - e. Reason that outpatient evaluation, crisis intervention services and community supports cannot meet the current needs.
 - f. Supports and services provided for the foster child and foster family to assist in de-escalating the situation.
 - g. History of mental health services provided for the child and his or her family, including both outpatient and inpatient.
 - h. Information contained in the latest psychosocial, psychological, and psychiatric evaluations, including the PACE evaluation.
 - i. Wraparound plan, if available
 - j. Any other information deemed helpful in determining a disposition on the level of services needed.
 - 3) The Administrator On-Call will provide disposition of the Administrative Case Consultation verbally, if after hours, followed by written confirmation within 24 hours.
 - 4) If authorization is denied, a temporary crisis plan will be implemented by the FSW /adoption specialist and County Supervisor, in collaboration with the Administrator On-Call. The crisis plan will involve other interested parties, such as Foster Parents, the Community Mental Health Center, and any others involved in the care of the child. The crisis plan will be documented within 24 hours in a Microsoft Word Document and distributed to all involved parties. Parts of the crisis plan may be incorporated into the child's case plan as necessary. It shall include but is not limited to the following services and supports:
 - a. 24-hour respite plan
 - b. No-harm contract with the child
 - c. Daily mental health services scheduled
 - d. Medication changes
 - e. Local phone numbers for emergency response to escalating behavior
 - f. Behavioral interventions appropriate for the child's diagnosis and symptoms
 - 5) If the FSW, County Administrator, or Foster Parent feels that the child poses an immediate threat to him/herself or others then the child should be taken to the nearest emergency room for evaluation by a physician and a request made for an immediate assessment by the local Community Mental Health Center for information that DCFS can use to determine the most appropriate placement. The Administrative Case Consultation is still required, however, if the child is to be referred for inpatient mental health acute or residential treatment.
- D. If copies of the current court order and other information (e.g., case history) necessary for the CMHC to offer treatment services are not initially available, the DCFS Family Service Worker will:
- 1) Forward those documents to the inpatient/residential provider as soon as they become available.
 - 2) NOTE: The CMHC needs this information to provide effective treatment and to obtain prior authorization from Medicaid. The Medicaid prior authorization process may affect the deadlines mentioned above.

- E. Ensure that the adults who have the most complete information about the child will accompany the child to the assessment/evaluation. This may mean the Family Service Worker, foster parent, and/or parents, as appropriate.
- F. Update the treatment team on changes of custody status and/or discharge plans and availability.
- G. Take timely action to ensure the continuity of the Primary Care Physician's referral.
- H. Once the child has been admitted to a residential facility, the Worker will collaborate with the facility in the development of the Plan-of-Care by:
 - 1) Establishing a schedule regarding dates for treatment sessions with the inpatient/residential provider.
 - 2) Remaining engaged in the treatment process and will determine with the therapist at the beginning of treatment the degree and methods of the DCFS worker's engagement (phone, conversation, written reports, conferences).
 - 3) Assure discharge planning begins on admission and the FSW is involved in that planning.
 - 4) Assure contact by FSW and other appropriate adults with the child.
 - 5) Will determine in coordination with the therapist, which adults, if any, need to accompany the child to treatment and/or be involved in the child's treatment, including family therapy sessions.
- I. Will, along with the foster parent, attend each appointment scheduled with a psychiatrist.
- J. Review and sign all master treatment plans and updates.
- K. Ensure that he/she receives a copy of the child's records including evaluations, treatment plans, updates and discharge plan.
- L. Coordinate after care plans post discharge from the inpatient or residential facility by:
 - 1) Facilitating a timely discharge by identifying specific placement plans as early as possible to promote a positive transition from one level of care to another.
 - 2) Coordinating with the CMHC or other contracted outpatient provider before, during and immediately following discharge from an inpatient or residential facility.
 - 3) Participating in a CASSP staffing to complete a MAPS (Multi-Agency Plan of Service).
 - 4) Obtaining an outpatient appointment immediately following discharge from an inpatient facility.
 - 5) Obtaining a PCP referral to an outpatient provider if needed.
 - 6) Making sure of compliance with all scheduled outpatient appointments.

If other DHS agencies and/or their contracted providers are involved in the case, full coordination extends to them as well.

PROCEDURE VI-L6: Responsible and Appropriate Adult Participation

The Family Service Worker will:

- A. Assure the adequate and appropriate participation in the assessment and treatment process by the adult(s) who knows the child best (e.g., family member(s) [unless reunification is not the plan or their involvement is contraindicated], the child's DCFS worker and/or foster parent(s)).
- B. Make all reasonable efforts to enable the child's parent(s) to comply with the court's orders and the approved case plan.
- C. Appropriately document if and when the mental health professional recommends a cessation of parental involvement in the child's assessment and/or treatment and share the recommendation with the court for final disposition.

The main goal of foster care is to achieve a permanent plan for the child. However, in some cases, parental involvement in the child's treatment can be counter-therapeutic and not in the child's best interest.

The professional mental health provider will determine if it is appropriate for the family to participate in the child's treatment. This will protect the child from victimization by family members who are unable or unwilling to take an appropriate role in the child's treatment

Whenever necessary or appropriate, the court of jurisdiction should be advised of the mental health professional's recommendations so it can enforce parental compliance.

PROCEDURE VI-L7: Treatment Planning

The Family Service Worker will:

- A. Make a referral to the Community Mental Health Clinic's Clinical Director or his designee when a child needs mental health services (including any 24-hour services).
- B. Ensure the referral includes all the information necessary for treatment planning (e.g., authorization for treatment, current court order, case history and information about previous treatment) if the CMHC does not already have the information or if there is a change in mental health providers.
- C. Forward copies of all critical information that was not available at the time of the initial referral as it becomes available.
- D. Keep the mental health professional apprised of any changes in the child's case or placement.
- E. Coordinate all casework being done in the case with the mental health provider through phone calls, correspondence, email, meetings, joint staffing or case conferences, as discussed and agreed to with the mental health provider.
- F. Consult the mental health provider regarding permanency-planning decisions primarily to protect the child while engaging the family in a clinically appropriate manner.
- G. Invite the mental health professional serving the child to attend or otherwise participate in DCFS staffings.
- H. Provide a copy of the court order to the CMHC once the child in foster care has been discharged from DHS custody.

If other DHS agencies and/or their contracted providers are involved in the case, full coordination extends to them as well. Keep the child's school advised about the mental health treatment being received, as well as informed about the child's needs and progress. This coordination will help ensure the effectiveness of the treatment.

- I. Invite school personnel to attend staffings, case conferences, and family centered meetings, as appropriate.
- J. Document in the child's case plan if the child is receiving school-based mental health treatment. Also document details about any responsibilities the mental health provider has regarding coordination of services.
- K. DCFS can expect the Community Mental Health Center to:
 - 1) Assign a mental health professional to coordinate mental health treatment for the child including but not limited to coordination with other agencies, convening staffings, or assisting with the location of 24-hour mental health placement, when needed.
 - 2) Work with DCFS to ensure that mental health services complement case planning and management.

DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

- L. Make coordination services available after regular work hours.
- M. Make the recommendation for the most appropriate disposition with regard to medical necessity.
- N. Assist in securing appropriate mental health services within its catchment area.
- O. Coordinate the mental health services being delivered by the mental health provider with the DCFS worker through phone calls, correspondence, email, meeting, joint staffing or case conferences as previously discussed and agreed to.

In accordance with Arkansas Code § 9-27-358 Placement – Staffing and planning (a)(1), the DCFS Family Service Worker will:

- A. Arrange a staff meeting within 48 hours to discuss what services or assistance is needed to stabilize the foster placement when foster parents have requested that a child in foster care be removed from their home.
- B. Request that the licensed mental health professional from the CMHC or private mental health provider who is treating the child attend or otherwise participate in the required staffing to discuss removal of the child in foster care and options to supporting the placement.

PROCEDURE VI-L8: Promote Continuity of Care

If a child is receiving mental health services upon entry into the foster care system, the Family Service Worker will continue clinically indicated mental health services with the provider who is already delivering those services, unless there is a compelling reason to change providers

If the current mental health provider must be changed (e.g., child placement in another part of the state) the FSW will request that the old and new mental health providers will:

- A. Share information about past treatment.
- B. Coordinate treatment services provided the appropriate consent forms have been signed and are in place.

PROCEDURE VI-L9: Participation in the Child and Adolescent Service System Program (CASSP) at the Local, Regional and State Levels

When a child requires intensive mental health services and inter-agency involvement on service plans, the DCFS Family Service Worker will:

- A. Refer the child to the CASSP Service Team (after the initial mental health assessment is completed), in coordination with the CMHC therapist.

If the referral is appropriate, according to CASSP guidelines, the CASSP Service Team will:

- 1) Develop and oversee the individual service plan.
- 2) Define and develop an interagency individualized service plan to serve the child and family.

The plan will reflect integrated service delivery and will specify services or programs with the funding to be provided by each agency. DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

- B. Follow the Procedure VI-L12 (Resolution of Issues Encountered) if attempts to resolve disagreements locally are unsuccessful.
- C. Refer disagreements about case management for an individual child to the Regional CASSP Service Team to be addressed at its next regularly scheduled meeting.

Identified systems issues such as gaps in services and services needed with no identified funding source will be addressed by the Regional CASSP Planning Team with regional recommendations forwarded to the State CASSP Coordinating Council.

PROCEDURE VI-L10: Communication

If any party needs to cancel an appointment, that cancellation will be done at least 24 hours in advance, except in genuine emergency situations such as illness.

PROCEDURE VI-L11: Implementation of Agreements Monitoring

DCFS has agreements (informal) and/or contracts (legally binding agreements) with most community mental health centers and with other mental health providers. The DCFS Area Director is responsible for working with the Community Mental Health Center (CMHC) Directors to establish an oversight process and create a DCFS/CMHC

Oversight Team. The Area-wide DCFS/CMHC Oversight Team will work closely with the CASSP Regional Team and community stakeholders to ensure the quality and effectiveness of the mental health services provided.

The Division of Children and Family Services will:

- A. Comply with all joint agreements/contracts with mental health service providers.
- B. Hold an initial joint meeting in each catchment area to:
 - 1) Review the agreements,
 - 2) Assess implementation of the agreements to date,
 - 3) Identify barriers to implementation of the plan,
 - 4) Develop a plan to address the identified barriers.
- C. Hold a biannual joint meeting (following the initial joint meeting) in each catchment area to review the four topics listed above and any other pertinent issues.

PROCEDURE VI-L12: Resolution of Issues Encountered During Implementation of Agreements

If CMHC staff believes that DCFS staff is not following the terms of the provider agreement, they will:

- A. Attempt to resolve the issue with the appropriate DCFS County Supervisor.
- B. Contact the appropriate Area Director if the issue cannot be resolved at the county level.

If DCFS staff believes that CMHC staff is not following the terms of the provider agreement, they will:

- A. Attempt to resolve the issue with the Children's Services Director or other designated staff at the CMHC.
- B. Contact the CMHC Director if the issue cannot be resolved at the lower level.

If an issue cannot be resolved through the above processes, the parties will contact the following senior staff to resolve the issue:

- A. The DCFS Assistant Director of Community Services,
- B. The Division of Mental Health Assistant Director for Children's Services.

The Community Mental Health Centers and DCFS agree that neither shall have nor exercise any control or direction over the methods by which the other's employees perform their clinical functions and that no relationship of employer and employee or of joint venture between the parties is created by this agreement.