ARKANSAS DEPARTMENT OF HUMAN SERVICES

DIVISION OF CHILDREN & FAMILY SERVICES

POLICY & PROCEDURE MANUAL

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DCFS Acronym Guide

AA: Alcoholics Anonymous
AAL: Attorney Ad Litem
AC: Alternative Compliance
ACF: Administration for Children and Families
ACH: Arkansas Children's Hospital
ACIC: Arkansas Crime Information Center
ACYF: Administration of Children, Youth, and Families
AD: Area Director
ADJ: Adjudication
ADC: Arkansas Department of Correction
ADE: Arkansas Department of Education
AFMC: Arkansas Foundation for Medical Care
AHELP: Arkansas Healthy Employee Lifestyle Program
AOC: Administrative Office of the Courts
APPLA: Another Planned Permanent Living Arrangement
APS: Adult Protective Services
APSR: Annual Progress and Service Report
AR BEST: Arkansas Building Effective Services for Trauma
ARCCC: Arkansas Creating Connections for Children
ASAP: Adolescent Sexual Adjustment Program
ASN: Arkansas Support Network
ASP: Arkansas State Police
ASVSP: Arkansas State Vehicle Safety Program
ATR: Access to Recovery
CAC: Child Advocacy Center
CACD: Crimes Against Children Division
The CALL: Children of Arkansas Loved for a Lifetime
CANS: Child and Adolescent Needs and Strengths
CASA: Court Appointed Special Advocate
CASSP: Child and Adolescent Service System Program
CB: Children's Bureau
CBC: Criminal Background Check
CCC: Care Coordinating Council
CCDF: Child Care Development Fund
CCRC: Child Case Review Committee
CES: Community Engagement Specialist
CFM: Contract Finance Management
CFSR: Children and Family Services Review
CHA: Comprehensive Health Assessment
CHRIS: Children's Reporting Information System

CMHC: Community Mental Health Center
CMS: Children's Medical Services
COBRA: Consolidated Omnibus Budget Reconciliation Act
CON: Certificate of Need
CPS: Child Protective Services
CQI: Continuous Quality Improvement
CWAL: Child Welfare Agency Licensing
CWARB: Child Welfare Agency Review Board
CWLA: Child Welfare League of America
DAAS: Division of Aging and Adult Services
DBHS: Division of Behavioral Health Sciences
DCCECE: Division of Child Care and Early Childhood Education
DCFS: Division of Children and Family Services
DCO: Division of County Operations
DCSNS: Division of Community Service and Nonprofit Support (formally known as Division of Volunteerism)
DDS: Division of Developmental Disabilities Services
DHS: Department of Human Services
DMS: Division of Medical Services
DN: Dependency-Neglect
DOB: Date of Birth
DR: Differential Response
DSB: Division of Services for the Blind
DUI: Driving Under the Influence
DV: Domestic Violence
DWI: Driving While Intoxicated
DYS: Division of Youth Services
EAP: Employee Assistance Program
EI: Early Intervention
EPSDT: Early and Periodic Screening, Diagnosis, and Treatment
FAPE: Free Appropriate Public Education
FAST: Family Advocacy and Support Tool
FBI: Federal Bureau of Investigation
FC: Foster Care
FERPA: Family Educational Rights and Privacy Act
FFSS: Foster Family Support System
FINS: Family In Need Of Services
FMLA: Family and Medical Leave Act
FSPP: Family Services Policy and Procedure Manual
FSW: Family Service Worker
HIPAA: Health Insurance Portability and Accountability Act
HSS: Health Services Specialist

HZA: Hornby Zeller Associates
ICAMA: Interstate Compact on Adoption and Medical Assistance
ICJ: Interstate Compact for Juveniles
ICPC: Interstate Compact on Placement of Children
ICWA: Indian Child Welfare Act
IDEA: Individuals with Disabilities Education Act Division of Children and Family Services FSPP
IEP: Individual Education Plan
IFS: Intensive Family Services
IFSP: Individualized Family Service Plan
IHC: In-Home Consultation (Visit)
IM: Information Memorandum
IRIS: Incident Report Information System
LEA: Local Education Authority
LLE: Local Law Enforcement
MAPS: Multi-Agency Plan of Services
MCVAR: Mutual Consent Voluntary Adoption Registry
MDT: Multidisciplinary Team
MEPA: Multiethnic Placement Act
MOA: Memorandum of Agreement
MOU: Memorandum of Understanding
MSW: Master of Social Work
NA: Narcotics Anonymous
Non-State CBC: Federal Criminal Background Check
NRE: No Reasonable Efforts
NST: New Staff Training
OCSE: Office of Child Support Enforcement
ODT: Organizational Development and Training
OFM: Office of Fiscal Management
OHR: Office of Human Resources
OJT: On-the-Job Training
OCC: Office of Chief Counsel
OT: Occupational Therapy or Overtime
PA: Program Assistant
PC: Probable Cause
PCP: Primary Care Physician
PI: Performance Indicator or Program Instruction
PIE: Provider Invoice Entry
PIP: Program Improvement Plan
PPES: Personnel Performance Evaluation System
PPH: Permanency Planning Hearing
PRFC: Person Responsible for Care

PRT: Permanency Roundtable
PS: Protective Services
QA: Quality Assurance (Unit)
QSPR: Quality Services Peer Review
RH: Review Hearing
RO: Regional Office
RR: Railroad Benefits
RW: Resource Worker
SACWIS: State Automated Child Welfare Information System
SAFE: Structured Analysis Family Evaluation
SDM: Structured Decision Making
SGR: State General Revenue
SIJS: Special Immigrant Juvenile Status
SNAP: Supplemental Nutrition Assistance Program
SOC: System of Care
SPU: Specialized Placement Unit
SS: Supportive Services
SSA: Social Security Administration
SSBG: Social Services Block Grant
SSI: Supplemental Security Insurance
SSN: Social Security Number
TANF: Temporary Assistance for Needy Families
TDM: Team Decision Making
TDT: Therapeutic Day Treatment
TEA: Transitional Employment Assistance
TFC: Therapeutic Foster Care
TPR: Termination of Parental Rights
TR: Travel Reimbursement
TYS: Transitional Youth Services
UAMS PACE: University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation
UTL: Unable to Locate
VA: Veterans Benefits

I. DIVISION OVERVIEW & GENERAL PROVISIONS

POLICY I-A: DIVISION MISSION, PRACTICE MODEL, POWERS & DUTIES

01/2013

MISSION STATEMENT
Our mission is to keep children safe and help families. DCFS will respectfully engage families and youth and use community-based services and supports to assist parents in successfully caring for their children. We will focus on the safety, permanency and well-being for all children and youth.

PRACTICE MODEL
The Arkansas child welfare practice model describes all of our efforts to renew our work with families and aligns us more readily with our division's mission. It reflects our goals, our principles, our casework process, our daily interactions, and our decisions. The practice model is the way our systems work together to serve children and families.

Our practice model unites our casework process with an approach that values and supports families at every step of a family's encounter with our system. The goals of our practice model are:

- **Safely keep children with their families.**
- **Enhance well-being in all of our practice with families.**
- **Ensure foster care and other placements support goals of permanency.**
- **Use permanent placement with relatives or other adults, when reunification is not possible, who have a close relationship to the child or children (preferred permanency option).**
- **Ensure adoptions, when that is the best permanency option, are timely, well-supported and lifelong.**
- **Ensure youth have access to an array of resources to help achieve successful transition to adulthood.**

Along with our goals, we support the practice model by looking for ways to incorporate the following principles into every encounter we have when working on behalf of families. We believe:

- **Behavior change and the work of change is a part of our daily challenge.**
- **Safety for children is achieved through positive protective relationships with caring family and community members.**
- **Meaningful decisions require close family participation in decision-making.**
- **Strengths of families and supporting these strengths contribute to life-long permanent relationships for children.**
- **Families' success depends on community involvement and shared problem solving.**
- **Practice with families is interrelated at every step of the casework process.**
- **Sustainable success with families is the work of a team**
- **The entire system must support frontline practice to achieve positive outcomes with families.**
- **Every staff position, role, and activity of the Division shows continuous effort to build and maintain professionalism.**
- **Skill-based training and consultation form the foundation for successful practice with families.**
- **Quality improvement and accountability guide all of our work.**
- **How we do the work is as important as the work we do.**

POWERS & DUTIES
DCFS performs the following functions and has the authority and responsibility to:

A. **Coordinate communication between various components of the child welfare system.**
B. **Provide services to dependent-neglected children and their families.**
C. **Investigate reports of child maltreatment and asses the health, safety, and well-being of children during investigations.**

D. **Provide services, when appropriate, designed to allow maltreated children to safely remain in their homes.**
E. **Protect children when remaining in their home presents an immediate danger to their health safety, or well-being.**
F. **Ensure placements support the goal of permanency for children when DCFS is responsible for the children's placement and care.**
G. **Ensure the health, safety, and well-being for children when DCFS is responsible for the children's placement and care.**
H. **Promulgate rules necessary to administer these powers and duties.**

POLICY I-B: CHILD WELFARE DELIVERY SYSTEM

10/2013

The Division of Children and Family Services purchases services from private and public agencies, universities and individuals, using state and federal funds. Programs and services of other Divisions within the Department of Human Services (DHS) may also be available to clients of DCFS. Delivery of services is coordinated with other Divisions administering TEA/TANF Medicaid, SNAP (Supplemental Nutrition Assistance Program), Social Services Block Grant, and other federal entitlement programs.

The services are authorized and funded in conjunction with various state and federal laws which govern the operation of the Division. The major federal laws governing service delivery, as amended, are:

- **Civil Rights Act: Titles 6, 7, 9**
- **Rehabilitation Act: Sections 503, 504**
- **Americans with Disabilities Act: Title II**
- **Social Security Act titles:**
  - **IV-A—Block Grants to States for Temporary Assistance for Needy Families (TANF)**
  - **IV-B—Child and Family Services**
  - **IV-E—Federal Payments for Foster Care and Adoption Assistance**
  - **XIX—Grants to States for Medical Assistance Programs**
  - **XX—Block Grants to States for Social Services**
- **Public Laws:**
  - **93-207—Child Abuse and Neglect**
  - **94-142—Handicapped Children Act**
  - **96-272—Adoption Assistance and Child Welfare Act of 1980**
  - **105-89—Adoption and Safe Families Act of 1997**

COMPLIANCE WITH CIVIL RIGHTS ACT

The Division complies with titles VI and VII of the Civil Rights Act and operates, manages, and delivers services without regard to race, color, religion, sex, age, national origin, mental or physical disability, veteran status, political affiliation or belief. DCFS is the designated state agency to administer and supervise all Child and Family Services (titles IV-B and IV-E of the Social Security Act).

COMPLIANCE WITH INDIAN CHILD WELFARE ACT

The Division of Children and Family Services is respectful of the varying cultures and heritages of the families it serves. To that end, DCFS complies with all mandates of the federal Indian Child Welfare Act (ICWA). ICWA is a federal law regulating placement proceedings involving children of Native American descent. ICWA mandates preventive services before removal to protect the best interest of Native American children and to promote the stability and security of Native American families and tribes. This includes preventing the unnecessary and arbitrary removal of Native American children from their families and tribes and placing a Native American child who must be removed in an available and safe home that reflects the unique values of the Native American culture.

If a child of Native American descent is transferred from the custody of DCFS to a Tribal IV-E agency or an Indian Tribe with a title IV-E agreement, DCFS will work in close consultation with the applicable Native American Tribe, to ensure the transfer of custody does not affect a child's eligibility for title IV-E or medical assistance under title XIX (Medicaid), receipt of services, or payment under title IV-E or Medicaid. The Division will determine, if the eligibility determination is not already completed, the child's IV-E eligibility at the time of the transfer of placement and responsibility of care of a child to a Tribal title IV-E agency or an Indian Tribe with a title IV-E agreement.

The Division will provide essential documents and information necessary to continue a child's eligibility under title IV-E and Medicaid programs under title XIX to the Tribal title IV-E agency, including, but not limited to providing:

A. All judicial determinations to the effect that continuation in the home from which the child was removed would be contrary to the welfare of the child and that reasonable efforts to prevent removal have been made.
B. Other documentation the Division has that relates to the child's title IV-E eligibility.
C. Information and documentation available to the Division regarding the child's eligibility or potential eligibility for other Federal benefits.
D. The case plan, including health and education records of the child; and,

E. Information and documentation of the child's placement settings, including a copy of the most recent provider's license or approval.

COMPLIANCE WITH MULTIETHNIC PLACEMENT ACT

The Division also complies with the Multiethnic Placement Act (MEPA) in making foster care and adoptive placements. The act provides for assessment of individual liability to staff for knowingly violating MEPA requirements.

The Multiethnic Placement Act prohibits delaying or denying the placement of a child for adoption or foster care on the basis of race, color, or national origin of the adoptive or foster parent or the child involved; and prohibits denying any individual the opportunity to become a foster or adoptive parent on the basis of the prospective parent's or the child's race, color, or national origin.

MEPA also requires that to remain eligible for federal assistance for their child welfare programs states must diligently recruit foster and adoptive parents who reflect the racial and ethnic diversity of the children in the state who need foster and adoptive homes.

Consideration of race, color, or national origin is permissible only when an individual determination is made that the facts and circumstances of a particular case require the consideration of race, color, or national origin in order to advance the best interests of the child in need of placement. The Division's compliance with the Indian Child Welfare Act of 1978 (P.L. 95-608) does not violate MEPA.

POLICY I-C: DIVISION VOLUNTEERS

04/2018

Because families' success depends on community involvement, DCFS volunteers are an integral part of the child welfare system working to improve outcomes for children and families. Division volunteers may serve in a variety of capacities based on their interests, skill-level, and training. Regardless of the role volunteers may play, all volunteers are responsible for ensuring the proper care, treatment, safety, and supervision of the children they serve. Volunteers must be at least 21 years of age with the exception of stipend and non-stipend interns who must be at least 18 years of age.

A County Office Volunteer Designee will be established in each DCFS county office to assist and support local volunteers. The DCFS Statewide Volunteer Coordinator in Central Office will help process volunteer applications and provide technical assistance to local County Office Volunteer Designees. The DCFS Statewide Volunteer Coordinator will also serve as the direct point of contact for community organizations that recruit volunteers to then support DCFS activities.

Community organizations (e.g., The CALL, Project Zero, etc.) that recruit their own volunteers to then provide assistance to DCFS staff and clients also play a vital role in supporting children and families and are valued DCFS partners. Each Community Organization Liaison will be responsible for submitting all required background checks and other application materials for their agency volunteers to the DCFS Statewide Volunteer Coordinator. After the background check results have been received and approved by DCFS, the Community Organization Liaison will also be responsible for updating these background checks every two years for those individuals who continue to serve as volunteers for that agency.

All prospective volunteers who have direct and unsupervised contact with children must be cleared through the Arkansas Child Maltreatment Central Registry and through a State Police Criminal Record Check. The Division will request any other state where the prospective volunteer has resided in the preceding five years to check its child abuse and neglect registry, if available, and in the person's state of employment, if different, for reports of child maltreatment, if available. Any prospective volunteer who has not lived in Arkansas continuously for the past five years must also clear an FBI fingerprint-based Criminal Background Check. A Vehicle Safety Check (i.e., driving record) and a copy of proof of auto insurance are also required for all prospective volunteers who will have direct and unsupervised contact with children and other clients. Once a volunteer is approved, all background checks will be run every two years thereafter as long as an individual remains a volunteer with DCFS.

Volunteers who will not have direct contact with children and clients are not required to complete background checks.

All volunteers will maintain confidentiality of children and families served by DCFS and will sign a confidentiality agreement to this effect. Confidentiality applies to verbal, written and/or electronic transmittal of information. Volunteers will not have unsupervised access to CHRIS.

Volunteers will be supervised by an appropriate staff person. A volunteer who works unsupervised and substitutes as staff must meet the qualifications required for a paid employee in that position.

Volunteers not serving in a foster or adoptive capacity are required to earn at least five hours of continuing education hours each year following the completion of their first year of volunteer service.

Volunteers approved by DHS to transport children in foster care or DHS clients or to supervise visits at the request of DHS shall not be liable to the children in foster care, DHS clients, or the parents or guardians of children in foster care for injuries to the children or clients caused by the acts or omissions of a volunteer unless the acts or omissions constitute malicious, willful, wanton, or grossly negligent conduct.

An approved volunteer who performs home studies without compensation shall have immunity from liability as provided for state officers and employees. While a home study volunteer may be recruited through any organization operating under a memorandum of understanding with DHS for the completion of home studies, only DHS will approve the home study volunteer.

If at any point during the volunteer application and assessment process the Division determines that an applicant does not meet the standards or any other criteria for a DCFS volunteer, then the Division will deny approval of the volunteer. If at any time during the course of an approved volunteer's service with DCFS it is determined that the volunteer poses a risk to children, then the Division will terminate the volunteer's services immediately.

In the interest of providing stability for children and families, DCFS recruits relatives and fictive kin as volunteers for their specific family members. Relative and fictive kin applicants must be cleared through the Arkansas Child Maltreatment Central Registry and through a State Police Criminal Record Check as well as meet driving requirements established by the Division. The Division will request any other state where the prospective volunteer has resided in the preceding five years to check its child abuse and neglect registry, if available, and in the person's state of employment, if different, for reports of child maltreatment, if available.

If approved, these relative and fictive kin volunteers are available to provide transportation for their family members and will not be allowed to participate as a volunteer for DCFS in any other manner. Because the relative and fictive kin volunteers will serve in a case specific role, DCFS will make exceptions to the volunteer application process, such as completing only the necessary background check forms rather than the entire volunteer packet, to expedite the availability of the relative and fictive kin volunteers to provide services for their family members.

PROCEDURE I-C1: Volunteer Application Process and Approval

04/2018

The DCFS County Office Volunteer Designee or Community Organization Liaison will:

A. Provide volunteer applicant with a Volunteer Packet and instructions on completion.
   1) The forms in the Volunteer Packet that the volunteer applicant will receive are:
      a) CFS-050-A: DCFS Volunteer Opportunities
      b) CFS-050-C: DCFS Volunteer Application
      c) CFS 050-D: DCFS Volunteer Confidentiality Statement
      d) CFS-050-E: Volunteer Agreement
      e) CFS-316: Request for Child Maltreatment Central Registry Check
      f) CFS-342: State Police Criminal Record Check
      g) FBI fingerprint card (if not using harvester) for any volunteer applicant who has not lived continuously in Arkansas for the past five years
      h) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
      i) VSP-001: Authorization to Operate State Vehicles and Private Vehicles on State Business
      j) VSP-002: Authorization to Obtain Traffic Violation Record
      k) Arkansas State Vehicle Safety Program Manual
   2) The forms in the Indirect Service Volunteer Packet that the volunteer applicant will receive are:
      a) CFS-050-C: Volunteer Application
      b) CFS-050-D: Confidentiality Statement
      c) CFS-050-E: Volunteer Agreement

B. Ask applicant to submit a W-9 if the volunteer plans to transport clients and wishes to be reimbursed for mileage.
C. Answer volunteer applicant questions, as applicable
D. Collect the Volunteer Packet forms listed above from the applicant once all forms have been completed including the volunteer applicant's W-9, if applicable.
E. Review Volunteer Packet forms submitted by volunteer applicant.
F. Call the references listed on the application to gather more information.
G. Complete Section A of CFS-050-B: DCFS Volunteer Checklist, as appropriate, to ensure that all documents required of volunteer applicant have been completed.
H. Forward the completed Volunteer Packet, including CFS-050-B: DCFS Volunteer Checklist, to DCFS Statewide Volunteer Coordinator, Slot S-565 for processing and approval.
I. Provide the transaction number (upon receipt from DCFS Volunteer Coordinator) to volunteer applicants who have not lived in Arkansas continuously for the past five years and who choose to use the harvester to conduct the FBI Fingerprint-based Criminal Background Check.
J. If approval of volunteer is received from the DCFS Statewide Volunteer Coordinator via completed CFS-050-B: DCFS Volunteer Checklist:
    1) Inform volunteer as soon as possible.
    2) Assign volunteer an appropriate point of contact in the county office prior to commencement of any volunteer activities.
    3) Provide DCFS orientation to volunteer prior to commencement of any volunteer activities, but preferably within two weeks of approval notification to volunteer.
    4) Establish mutually agreed upon schedule for volunteer.
    5) Complete Section C of CFS-050-B: DCFS Volunteer Checklist and file in volunteer record.
    6) Handle complaints as needed.
    7) Notify DCFS Statewide Volunteer Coordinator if volunteer quits or is asked to leave.
K. If approval of volunteer is not received from DCFS Statewide Volunteer Coordinator:
    1) Inform volunteer as soon as possible.
    2) Place copy of completed CFS-050-B: DCFS Volunteer Checklist in volunteer applicant record.

The DCFS Statewide Volunteer Coordinator will:

A. Review forms in the Volunteer Packet using CFS-050-B DCFS Volunteer as a guide to ensure all required volunteer applicant forms have been completed and submitted.
B. Mail a thank you post card to the volunteer applicant.
C. Route all background check request forms to the appropriate units.
    1) Submit the completed CFS-316: Request for Child Maltreatment Central Registry Check to the Central Registry Unit for each volunteer applicant. The CFS-316 must be notarized. The Child Maltreatment Central Registry Check shall be repeated every two years.
        a) Route each completed CFS-316 to the Central Registry Unit.
        b) Document results in CHRIS.
    2) Submit the completed CFS-342: State Police Criminal Record Check for each volunteer applicant. The CFS-342 must be notarized. The State Police Criminal Record Check shall be repeated every two years.
        a) Route each completed CFS-342 to the Criminal Records Unit.
        b) Document eligible or ineligible results in CHRIS.
    3) Submit the signed CFS-593, VSP-1, and VSP-2 to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each volunteer applicant.

a) Copy the front and back of the driver's license.
b) Document results in CHRIS.

4) For all volunteer applicants who have not lived in Arkansas continuously for the past five years, submit the appropriate paper work for an FBI fingerprint-based Criminal Background Check to the DCFS Criminal Records Unit to process this check and collaborate with the Criminal Background Check Unit accordingly. There are two options for processing the FBI check:
   a) Electronic Fingerprint Scanning
      i. Volunteer applicants do NOT need to fill out an FBI fingerprint card, as a request for electronic scanning will be done via CFS-342: State Police Criminal Record Check.
      ii. The Criminal Records Unit will use the CFS-342: State Police Criminal Record Check to get a transaction number from the State Police.
      iii. The Criminal Records Unit will forward the transaction number to the DCFS Statewide Volunteer Coordinator.
      iv. The DCFS Statewide Volunteer Coordinator will forward the transaction number to the DCFS County Volunteer Designee or Community Organization Liaison to then forward to the volunteer applicant.
      v. Applicants must go to an approved Electronic Harvester to have fingerprints scanned.
   b) Ink Fingerprint
      i. Volunteer applicants will complete CFS-342: State Police Criminal Record Check and the FBI fingerprint card with good, unsmudged prints. Take care not to staple through the fingerprints on the FBI fingerprint card.
      ii. If the prints are not readable, the volunteer will have to re-submit. Volunteer applicants may not use an Electronic Harvester if they have already submitted ink fingerprints and the attempt was unsuccessful.
      iii. If a legible set of fingerprints cannot be obtained after a minimum of two attempts, a name-based FBI check will be conducted instead.

D. Enter all other required volunteer data into the volunteer management spreadsheet or CHRIS, as applicable.
E. Maintain other records and correspondence with county office staff and Community Organization Liaisons regarding volunteers.
F. Notify County Office Volunteer Designee or Community Liaison, as appropriate, with approval or denial status of volunteer via completed CFS-050-B: DCFS Volunteer Checklist for record keeping purposes.
G. Maintain a copy of the CFS-050-B: DCFS Volunteer Checklist for record keeping purposes.
H. Assist county office staff and Community Organization Liaisons with orientations for new volunteers as needed/upon request.
I. Assist county office staff and Community Organization Liaisons with trouble-shooting volunteer-related issues.
J. Document in volunteer management spreadsheet or CHRIS, as applicable, when volunteer resigns or is asked to leave, as applicable.

PROCEDURE I-C2: Volunteer Background Check Renewals

04/2018

The DCFS Statewide Volunteer Coordinator will:

A. Mail the following to the volunteer's home address (as identified in CHRIS) at least 30 business days prior to the volunteer's two-year anniversary of his/her last processing of background checks:
   1) A cover letter:
      a) Thanking volunteer for his/her volunteer service
      b) Reminding the volunteer that he or she is required to earn five hours of continuing education credit annually following the completion of the first year of volunteer service
      c) Explaining that his/her background checks will expire soon and must be renewed
      d) Requesting volunteer to complete all enclosed background check forms and return them to the DCFS Central Office Policy Unit within two weeks of receipt
      e) Informing volunteer that if all enclosed background check forms are not completed and returned to the DCFS Statewide Volunteer Coordinator within the required timeframe, he or she will no longer be eligible to serve as a DCFS Volunteer
      f) Requesting volunteer to provide copies of his or her training completion certificates earned over the last year
   2) CFS-316: Request for Child Maltreatment Central Registry Check
   3) CFS-342: State Police Criminal Record Check

B. After mailing the information listed above, notify volunteer's County Office Volunteer Designee or Community Organization Liaison, as applicable, that volunteer's background checks must be renewed as soon as possible and that required forms have been mailed to the volunteer.

C. If volunteer does not return all completed background check forms and copies of training certificates within requested timeframes outlined in aforementioned cover letter:
   1) Contact volunteer by phone prior to his/her two-year anniversary of the last processing of background checks to request that he/she complete and return required background check forms within one week.
   2) Document conversation (or attempt to contact) with volunteer in the volunteer management spreadsheet or CHRIS, as applicable.
   3) If volunteer still does not return completed background checks and copies of training certificates within required timeframe:
      a) Document in the volunteer management spreadsheet or CHRIS, as applicable, that volunteer is no longer eligible to serve as a volunteer.
      b) Send a letter to the former volunteer informing him/her that he/she is no longer eligible to serve as a volunteer.
      c) Notify the volunteer's County Office Volunteer Designee via e-mail that the volunteer may no longer serve as a volunteer in the county office.
      d) Submit returned background check forms to applicable background check units for processing (see Procedure (I-D1 above).
      e) Notify County Office Volunteer Designee or Community Organization Liaison, as appropriate, with approval or denial status of volunteer based on the background check re-evaluation.

The County Office Volunteer Designee or Community Organization Liaison will:

A. Work with the DCFS Statewide Volunteer Coordinator and volunteer as needed to ensure that volunteer's background checks are renewed when required.
B. If volunteer does not renew required background checks in required timeframe, ensure he/she no longer provides services to/at the local county office or through the community organization that helps to support DCFS.

PROCEDURE I-C3: Relative and Fictive Kin Volunteer Application and Process for Approval

04/2018

The FSW will:

A. Ensure that relatives and fictive kin who have already been approved as a provisional placement resource for a child under Policy VI-B are not referred for processing as a relative or fictive kin volunteer (individuals already approved as provisional placement resources may also transport the relative/fictive kin child).
B. If the relative or fictive kin transporter appears viable, interview the child, if age appropriate, to assess how the child may feel about routine contact with that person and make individualized decisions on a case-by-case basis in the best interest of the child.
C. Speak with the applicant and with the biological family to determine the current status of their relationship.
D. Provide volunteer applicant with a Volunteer Packet and instructions on completion. The forms in the Volunteer Packet that the relative/fictive kin volunteer applicant will receive are:
    1) CFS-316: Request for Child Maltreatment Central Registry Check
    2) CFS-342: State Police Criminal Record Check
    3) FBI fingerprint card (if not using harvester) for any volunteer applicant who has not lived continuously in Arkansas for the past five years
    4) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
        a) VSP-001: Authorization to Operate State Vehicles and Private Vehicles on State Business
        b) VSP-002: Authorization to Obtain Traffic Violation Record
    5) W-9 Form
B. Arkansas State Vehicle Safety Program Manual/Answer volunteer applicant questions, as applicable
C. Collect and review the Volunteer Packet forms listed above from the applicant once all forms have been completed.
D. Route all background check request forms to the appropriate units.
    1) Submit the completed CFS-316: Request for Child Maltreatment Central Registry Check to the Central Registry Unit for each volunteer applicant. The CFS-316 must be notarized. The Child Maltreatment Central Registry Check shall be repeated every two years.
        a) Route each completed CFS-316 to the Central Registry Unit.
        b) Document results in CHRIS relative volunteer tab of "collateral" screen.
    2) Submit the completed CFS-342: State Police Criminal Record Check for each volunteer applicant. The CFS-342 must be notarized. The State Police Criminal Record Check shall be repeated every two years.
        a) Route each completed CFS-342 to the Criminal Records Unit.

b) Document eligible or in-eligible results in CHRIS relative volunteer tab of "collateral" screen.

3) Submit the signed CFS-593, VSP-1, and VSP-2 to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each volunteer applicant.
   a) Copy front and back of driver's license.
   b) Document results in CHRIS relative volunteer tab of "collateral" screen.
4) Work with the DCFS Criminal Records Unit to process an FBI fingerprint-based Criminal Background Check for all volunteer applicants who have not lived in Arkansas continuously for the past five years. There are two options for processing the FBI check:
   a) Electronic Fingerprint Scanning
      i. Volunteer applicants do NOT need to fill out an FBI fingerprint card, as a request for electronic scanning will be done via CFS-342: State Police Criminal Record Check.
      ii. The DCFS County Supervisor or designee will route the completed CFS-342: State Police Criminal Record Check to the DCFS Criminal Records Unit.
      iii. The Criminal Records Unit will use the CFS-342: State Police Criminal Record Check to get a transaction number from the State Police.
      iv. The Criminal Records Unit will forward the transaction number to the DCFS County Supervisor or designee requesting the checks.
      v. The DCFS County Supervisor or designee will forward the transaction number to the relative/fictive kin volunteer applicant.
      vi. Applicants must go to an approved Electronic Harvester to have fingerprints scanned.
      vii. The DCFS County Supervisor or designee will document eligible or ineligible results in CHRIS.
   b) Ink Fingerprint
      i. Volunteer applicants will complete CFS-342: State Police Criminal Records Check and the FBI fingerprint card with good, un-smudged prints. Take care not to staple through fingerprints on the FBI fingerprint card.
      ii. If the prints are not readable, the volunteer will have to re-submit. Volunteer applicants may not use and Electronic Harvester if they have already submitted ink fingerprints and the attempt was unsuccessful.
      iii. If a legible set of fingerprints cannot be obtained after a minimum of two attempts, a name-based FBI check will be conducted instead.
      iv. The DCFS County Supervisor or designee will work with the Criminal Records Unit to process the check.
5) Enter all other required volunteer data in CHRIS relative and fictive kin tab of "collateral" screens.

E. Provide the transaction number (upon receipt from DCFS Central Office) to volunteer applicants who have not lived in Arkansas continuously for the past five years and who choose to use the harvester to conduct the FBI Fingerprint-based Criminal Background Check.

F. If approval of volunteer is received via conference with Supervisor (based on background check results and consultation about FSW's assessment of the volunteer's appropriateness for contact with the family):
   1) Inform volunteer as soon as possible.

2) Assign volunteer an appropriate point of contact in the county office prior to commencement of any volunteer activities.
3) Provide W-9 to area Financial Coordinator and work with Financial Coordinator to obtain the volunteer applicant's assigned ASSIS vendor number.
4) Provide DCFS orientation to volunteer prior to commencement of any volunteer activities, but preferably within two weeks of approval notification to volunteer.
    a) DCFS Travel Forms
    b) ASSIS vendor number for completion of travel reimbursement requests
    c) Case specific information pertaining to the location, frequency, duration and supervision requirements for parent-child or sibling visitation as appropriate.
5) Establish mutually agreed upon schedule for volunteer.
6) Handle complaints as needed.
7) Notify DCFS Central Office Foster Care Unit and Area Director if volunteer quits, concerns or issues arise or the volunteer is asked to leave.

G. If approval of volunteer is not received from Supervisor:
    1) Inform volunteer as soon as possible.

H. Document in CHRIS when volunteer resigns or is asked to leave, as applicable.

POLICY I-D: OFFICIAL RECORD KEEPING & ACCESS TO OFFICIAL RECORDS

05/2014

The official record of child welfare information for DCFS is maintained through the Children's Reporting Information System (CHRIS). CHRIS is a fully automated, worker-based child-welfare information system. Data input instructions for the CHRIS Applications are included throughout the Division of Children and Family Services Policy and Procedure Manual.

CHRIS is overseen by the Division of Administrative Services, Office of Technology (OST). OST is responsible for enhancements to the CHRIS Application, data monitoring, Help Desk function, and some specialized training.

In instances when information is not able to be entered into CHRIS, some hard copies (e.g., forms with signatures, medical records, education records, etc.) are also considered part of the official record. A hard copy file of case information will be maintained for data not in CHRIS. Hard copy files will be created, if necessary for case review.

DCFS employees with access to CHRIS are prohibited from accessing and/or viewing any CHRIS information regarding investigative reports and/or open cases to which he or she is not assigned unless:

A. Permission from his or her supervisor is granted to view the information; or,
B. The employee is the supervisor for that report and/or open case.

This prohibition extends to any DCFS employee or provider with access to CHRIS who is a "subject of the report" as defined in Child Maltreatment Act. This rule holds regardless of whether the information is restricted or not to the DCFS employee or provider.

DCFS supervisors are prohibited from accessing and/or viewing investigative report or open case information in CHRIS if the interest in the report or case is personal (i.e., not professionally related).

DCFS employees and providers are also prohibited from accessing and/or viewing any information in CHRIS if the interest in the investigation and/or case is personal (e.g., a friend, family member, present or former colleague, etc. is involved in the report or case).

RECORD RETENTION SCHEDULE

A. Retain all information in the automated data system indefinitely to assist the Department in assessing future risk and safety.

B. Records of all cases where allegations are determined to be true shall be retained by the Child Maltreatment Central Registry and all hard copy records with true determinations shall be retained forever.

C. Hard copy records of unsubstantiated reports are not part of the Child Maltreatment Central Registry. They will be destroyed by the investigating agency at the end of the month in which the determination is made.

D. Records of all cases where allegations are determined to be unsubstantiated shall not be included in the Child Maltreatment Central Registry.

E. Retain all child protective services, differential response, out-of-home placement services, and supportive services for five years after the youngest child turns 21 years old. Retain all other client files for five years after the file is closed or the last case activity.

F. Retain all foster and adoptive applicant files that are denied for three (3) years from the date that the applicant is informed of the decision.

G. Retain all foster and adoptive applicant files where no decision is rendered due to incomplete process for three (3) years from the date of the last documented communication with the applicant.

H. Retain all adoption records for 99 years.

I. Retain all rules until superseded. Superseded rules must be retained on as-needed basis.

J. Retain all records relating to a person or entity contracting with DHS for five years after the contract ends or is terminated.

K. Retain all administrative records including programmatic financial records for five years after the end of the biennium in which the records were produced.

POLICY I-E: CONFIDENTIALITY

01/2020

OVERVIEW

The Division of Children and Family Services (DCFS or Division) is committed to best practice in relation to respecting client confidentiality. Information is confidential if it is not intended to be disclosed to persons other than those to whom disclosure is allowed under the statute. All employees of the Division shall maintain the confidentiality of children and families served by DCFS. Confidentiality applies to verbal, written and/or electronic transmittal of information including information in CHRIS.

No DCFS employee may accept employment or engage in any activity while serving as a DCFS employee, which might reasonably be expected to require or induce the employee to disclose confidential information. In addition, no DCFS employee may disclose confidential information or use confidential information for the gain or benefit of the employee or person in a close, personal relationship to the employee.

INVESTIGATIVE RECORDS

Child maltreatment investigative data, records, reports, and documents are confidential and may only be disclosed as provided for in the Child Maltreatment Act codified at A.C.A. § 12-18-101 et seq.

If a DCFS employee wrongfully discloses confidential information, he or she is guilty of a Class A misdemeanor and can lose his or her job. For a Class A misdemeanor, the sentence shall not exceed one year in the county jail and a $1,000 fine. See A.C.A. §12-18-205.

IN-HOME AND FOSTER CARE CASE RECORDS

Reports, correspondence, memoranda, case histories, or other materials related to protective services and foster care records, shall be confidential and shall not be released or otherwise made available, except to the extent permitted by federal and state law and only as listed below. This includes protected health information compiled or received by a licensee or a state agency engaged in placing a child.

- **A. To the Director of the Child Welfare Agency Review Board as required by regulation;**
- **B. For adoptive placements, as provided by the Revised Uniform Adoption Act, § 9-9-201 et seq.;**
- **C. To multidisciplinary teams under A.C.A. § 12-18-106(a);**
- **D. To the child's parent, guardian, or custodian.**
  - **1) However, the licensee or state agency may redact information from the record such as the name or address of foster parents or providers when it is in the best interest of the child.**
  - **2) The licensee or state agency shall redact counseling records, psychological or psychiatric evaluations, examinations or records, drug screens or drug evaluations, or similar information concerning a parent if the other parent is requesting a copy of a record;**
- **E. To the child;**
- **F. To health care providers to assist in the care and treatment of the child at the discretion of the licensee or state agency and if deemed to be in the best interest of the child.**
  - **1) Health care providers include doctors, nurses, emergency medical technicians, counselors, therapists, mental health professionals, and dentists;**
- **G. To school personnel and child care centers caring for the child at the discretion of the licensee or state agency and if deemed to be in the best interest of the child;**
- **H. To foster parents, the foster care record for children in foster care currently placed in their home. 1)**
  - **1) However, information contained in records released by the Department to the foster parent about the parents or guardians and any siblings not in the foster home will not be re-disclosed by the foster parent and will only be used to assist the foster parent in the care of the child placed in the foster parent's home (see Policy VII-H: Providing Information to Foster Parents);**

I. **To the Child Welfare Agency Review Board. However, at any board meeting no information which identifies by name or address any protective services recipient or foster care child shall be orally disclosed or released in written form to the general public;**
J. **To the Division of Childhood and Early Childhood Education, including child welfare agency licensing specialists;**
K. **For any audit or similar activity conducted in connection with the administration of any such plan or program by any governmental agency which is authorized by law to conduct such audit or activity;**
L. **Upon presentation of an order of appointment, to a court-appointed special advocate;**
M. **To the attorney ad litem for the child;**
N. **For law enforcement or the prosecuting attorney upon request;**
O. **To circuit courts, as provided for in the Arkansas Juvenile Code of 1989, § 9-27-301 et seq.;**
P. **In a criminal or civil proceeding conducted in connection with the administration of any such plan or program;**
Q. **For purposes directly connected with the administration of any of the state plans as outlined;**
R. **For the administration of any other federal or federally assisted program which provides assistance, in cash or in kind, or services, directly to individuals on the basis of need; or**
S. **To individual federal and state representatives and senators in their official capacity, and their staff members, with no re-disclosure of information.**
    1) **No disclosure shall be made to any committee or legislative body of any information which identifies by name or address any recipient of services;**
T. **To a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury;**
U. **To a person, provider, or government entity identified by the licensee or the state agency as having services needed by the child or his/her family;**
V. **To volunteers authorized by the licensee or the state agency to provided support or services to the child or his/her family at the discretion of the licensee or the state agency and only to the extent information is needed to provide the support or services.**
W. **To a person, agency, or organization engaged in a bona fide research or evaluation project that is determined by the Division to have value for the evaluation or development of policies and programs within DCFS.**
    1) **Any confidential information provided for a research or evaluation project shall not be re-disclosed or published.**
X. **To a child fatality review panel as authorized by the Department of Human Services;**
Y. **To a Child Welfare Ombudsman.**

Any data, records, or documents described above that are released to a law enforcement agency, the prosecuting attorney, or a court by the Department of Human Services are confidential and shall be sealed and not re-disclosed without a protective order to ensure that items of evidence for which there is a reasonable expectation of privacy are not distributed to persons or institutions without a legitimate interest in the evidence.

FOSTER CARE AND ADOPTIVE RECORDS
Foster home and adoptive home records are confidential and shall not be released except:

A. **To the foster parents or adoptive parents;**
B. **For purposes of review or audit, by the appropriate federal or state agency;**
C. **Upon allegations of child maltreatment in the foster home or adoptive home, to the investigating agency**
D. **To the Child Welfare Agency Review Board;**
E. **To the Division of Children and Family Services of the Department of Human Services and the Department of Education, including child welfare agency licensing specialists;**
F. **To law enforcement or the prosecuting attorney, upon request;**
G. **To a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury;**

H. To individual federal and state representatives and senators in their official capacity, and their staff members with no re-disclosure of information;
I. No disclosure shall be made to any committee or legislative body of any information that identifies by name or address any recipient of services;
J. To the attorney ad litem and court appointed special advocate, the home study on adoptive family selected by the Department to adopt the juvenile.

Any person or agency to whom disclosure is made shall not disclose to any other person reports or other information obtained. Any person disclosing information in violation of A.C.A. §12-18-104 shall be guilty of a Class A misdemeanor. Nothing in this section shall be construed to prevent subsequent disclosure by the child or his/her parent or guardian.

The Family Service Worker may by law sign for releases of information for children in DHS custody.

The Family Service Worker must present a copy of the custody order to receive medical and school records.

The CFS-4000 or DHS 81: Consent for Release of Information must be signed by the parent to receive copies of parent's records; however, the parent's signature is not necessary for obtaining records for the child.

An attorney ad litem shall be provided access to all records relevant to the child's case, including, but not limited to, school records, medical records, juvenile court records and Department of Human Services records to the extent permitted by federal law.

ADOPTION RECORDS
Non-identifying information from finalized records can only be released by the Arkansas Mutual Consent Voluntary Adoption Registry. Identifying information from a finalized record can only be released by court order.

RELEASE OF INFORMATION REQUESTS REGARDING CHILD IN FOSTER CARE
When a release of information regarding a child is requested, the FSW shall take the necessary steps to guard the confidentiality of personal information. The steps include:

A. Assuring that no identifying or potentially harmful information on a child is released; and,
B. The consent shall be reviewed and approved by OCC.

Court orders that direct the release of specific information to specified offices, agencies or people will be construed as proper consent for release of information. No other consent is necessary. However, OCC will be informed whenever such a release of information is being made.

Children in foster care may appear in publications such as the school yearbook, school newspaper, youth group newsletter, and similar publications or platforms that would be considered normal and age-appropriate without a media release as long as they are not identified as being in foster care.

Requests for media releases that would not be considered normal and age appropriate includes requesting permission to release photographs, voice reproductions, slides, video tapes, movie films, promotional pamphlets, news releases, etc. The FSW will review the contents of such release along with OCC and make any necessary modifications. Consideration will be given to the protection of the child's identity and assurances that the contents of the material released will present the child in a light that would not be distasteful or negative to the child. The DCFS Director or designee swill be consulted in matters that may reflect on the Division. In cases of consents for coverage by news media, consultation will also be sought from the DHS Director of Communications and the child's attorney-ad-litem. The foster parents and other placement providers will be informed of these policies.

The Adoption Specialist must obtain documented consent from a child 12 years of age or older, to show photographs for recruitment of an adoptive family.

FREEDOM OF INFORMATION ACT

Personnel records can be disclosed to the public, unless to do so would clearly be an unwarranted invasion of privacy. Therefore, the Department can not release the Social Security Number, school transcripts, or PPES information of any staff unless that person has been suspended or terminated as a result of his/her PPES score. Grievance information becomes public record after the grievance process is completed if a grievance is appealed to the State Grievance Review Committee. If the grievance is not appealed to the state level, the discipline does not become public record. See A.C.A §25-19-105.

Any data, records, reports, or documents that are created, collected, or compiled by or on behalf of DHS, the Department of Arkansas State Police, or other entity authorized under A.C.A §12-18-101 et seq. to perform investigations or provide services to children, individuals, or families shall not be subject to disclosure under the Freedom of Information Act of 1967, A.C.A §25-19-101 et seq.

II. REFERRALS TO ASSESS FAMILY STRENGTHS and NEEDS

POLICY II-A: SUPPORTIVE SERVICES

02/2015

The Division shall accept referrals for children and families who need assistance in a wide range of problems based on family need. Such referrals will not come through the Child Abuse Hotline. Families who need assistance may accept services on a voluntary basis. If the family accepts, a Supportive Services case will be opened. Supportive Services are generally time-limited for a period of three months.

Supportive Services are intended to protect children, to help parents in their child-rearing role, to strengthen family functioning, and to promote the healthy development and social functioning of children. Services may be provided directly by DCFS staff or in combination with purchased services, or by referral to another appropriate agency.

PROCEDURE II-A1: Community and Self Referrals for Supportive Services

02/2015

The Family Service Worker will:

A. Accept referrals from families, community agencies, or other DHS Divisions via the DHS-3300: Information and Referral.
B. Collect and assess information about the family's strengths and needs utilizing the Family Advocacy and Support Tool (FAST).
C. Develop a supportive services case plan based on the needs and strengths identified via the FAST within 30 days of case opening.
D. Refer to other Divisions/agencies as appropriate via the DHS-3300.

POLICY II-B: DIFFERENTIAL RESPONSE

08/2015

OVERVIEW

Differential Response (DR) is a family engagement approach that allows the Division to respond to reports of specific, low risk allegations of child maltreatment with a Family Assessment (FA) rather than the traditional investigative response. The goals of Differential Response are to prevent removal from the home and strengthen the families involved. As with investigations, Differential Response is initiated through accepted Child Abuse Hotline reports and focuses on the safety and well-being of the child and promotes permanency. Having two different response options in the child welfare system recognizes that there are variations in the severity of the reported maltreatment and allows for a Differential Response or an investigation, whichever is most appropriate, to respond to reports of child neglect.

Investigations require the gathering of forensic evidence in order to formally determine whether there is a preponderance of evidence that child abuse or neglect has occurred. Differential Response is an approach that uses a non-adversarial, non-accusatory Family Assessment approach. With DR, there is no finding of "substantiated" or "unsubstantiated", and no one is identified as a perpetrator or offender. Community involvement and connecting families to informal, supportive resources in their local communities are crucial aspects to a successful intervention for all types of cases, but particularly for DR.

Differential Response is more likely to create situations where a family is receptive to services and is more likely to engage in those services. DR involves a comprehensive and collaborative Family Assessment that includes an assessment of:

- **A. The child's safety;**
- **B. Any underlying issues, needs, or additional child maltreatment concerns that may not have been identified in the original hotline report; and,**
- **C. The family's strengths.**

Differential Response also provides services to meet the family's identified needs, and support positive parenting. Services may include referrals, formal or informal services, and/or supports required to help meet the needs of the family and/or address the conditions or issues that resulted in the child maltreatment report.

The information obtained through the Family Assessment will be used to create a Family Plan, if applicable, which will be designed to strengthen protective factors within the family and mitigate any risk factors facing the family.

DIFFERENTIAL RESPONSE ELIGIBILITY CRITERIA

All of the following factors must be present for a report to be assigned to Differential Response:

- **A. Identifying information for the family members and their current address or a means to locate them is known at the time of the report;**
- **B. The alleged perpetrators are parents, birth or adoptive, legal guardians, custodians, or any person standing in loco parentis;**
- **C. The family has no pending investigation or open protective services or supportive services case;**
- **D. The alleged victims, siblings or other household members, are not currently in the care and custody of Arkansas Department of Children and Family Services or wards of the court;**
- **E. Protective custody of the children has not been taken or required in the current investigation; and,**
- **F. The reported allegations shall only include:**
  - **1) Inadequate Supervision**
  - **2) Inadequate Food**

3) **Inadequate Clothing**
4) **Inadequate Shelter**
5) **Educational Neglect**
6) **Environmental Neglect**
7) **Lock Out**
8) **Medical Neglect**
9) **Human bites**
10) **Sprains/dislocations**
11) **Striking a child age seven or older on the face**
12) **Striking a child with a closed fist**
13) **Throwing a child**

The following circumstances involving the allegations prohibit the report from being assigned to a Differential Response pathway:

A. **Inadequate Supervision reports involving a child or children under the age of five or a child five years of age and older with a physical or mental disability which limits his or her skills in the areas of communication, self-care, self-direction, and safety will be assigned the investigative pathway.**
B. **Educational Neglect reports involving a child that was never enrolled in an educational program.**
C. **Environmental Neglect reports involving a child or children under the age of three; and those situations in which the hotline assesses an immediate danger to the child's health or physical well-being based upon the severity.**
D. **Lock out reports involving a child or children under the age of ten; and those situations in which the hotline assesses an immediate danger to the child's health or physical well-being based upon the severity.**
E. **Medical Neglect reports involving a child or children under the age of 13 or a child with a severe medical condition that could become serious enough to cause long-term harm to the child if untreated will be assigned the investigative pathway.**
F. **Reports of human bites, sprains/dislocations, striking a child age seven or older on the face, striking a child with a closed fist, and throwing a child when these allegations occurred:**
    1) **Less than one year ago; and/or,**
    2) **If the caller to the hotline can verify an injury either through physical signs (e.g., scarring), medical information, dated photographs, etc.**

If upon initial DR contact with the family it is determined that there are additional children in the home who were not included in the hotline report and whose ages would, as outlined above, prohibit assignment to the Differential Response pathway, the DRT Supervisor and Specialist shall assess on a case by case basis whether a case will remain a DR case or be reassigned to the investigative pathway.

DIFFERENTIAL RESPONSE TIMEFRAMES

Face-to-face contact with the victim child(ren) and at least one (1) parent/caregiver involved in a Differential Response report must take place in the victim child(ren)'s home within 72 hours of receipt of the initial hotline report. All other household members must be seen face-to-face within five days of receipt of the initial hotline report. Differential Response cases are intended to be short-term lasting no longer than 30 days with the possibility of only two 15-day extensions if necessary. If a DR case is not closed by the end of 30 days or the allowed extension timeframes, then it will be closed or reassigned as a Supportive Services case or as an investigation as appropriate.

DIFFERENTIAL RESPONSE TEAM

Family Assessments will be conducted by specific Differential Response Teams (DCFS teams or contract provider teams) whose role is to assess for safety and strengths, identify service needs, and arrange for the services to be put in place. The local Differential Response Team (DRT) may consist of up to three primary roles:

A. DRT Supervisor - Provides management services including review and approval of assessments, case plans, and appropriateness of service referrals, case file documentation, service extensions, and requests to close family assessment cases.
B. DRT Specialist(s) - Initiates contact with family and assumes the role of the family's advocate and case manager.
C. DRT Program Assistant(s) – Provides support and assistance as needed to the DRT Specialist(s) and families involved in DR cases.

At minimum, a local Differential Response Team will be comprised of a DRT Supervisor and a DRT Specialist.

REASSIGNMENTS FROM DIFFERENTIAL RESPONSE TO INVESTIGATIONS

If DCFS is unable to conduct a Health and Safety Assessment and/or the case information indicates that a refusal to participate in the DR Family Assessment or associated services compromises a child's safety, the case will be reassigned to the investigative pathway. If DCFS conducts the Health and Safety Assessment and does not identify a safety factor, but a need is identified, a DR case will be opened in order to address the need with appropriate services. If neither a safety factor nor a need is identified, then the family may decline services.

If the family complies with the Family Plan, the services will continue to be provided through the DR case. If the family does not comply with the Family Plan, then the case will be reassigned to investigations.
If upon initial contact with the family an additional Priority II child maltreatment allegation (not related to the allegation connected to the DR referral provided by the Child Abuse Hotline) is identified by the DR Team, the DRT Specialist will contact the DCFS DR Coordinator or designee to add the additional Priority II allegation to the DR referral.

If upon initial contact with the family a Priority I child maltreatment allegation is identified by the DR Team, the DRT Specialist will immediately call the Child Abuse Hotline to the report the new Priority I allegation and then notify the DR Coordinator or designee of the new Priority I report.

If at any time during the DR service delivery period the DRT Specialist, contract provider, or other service provider has reasonable cause to believe that a safety factor is present and, as such, the child's health and/or physical well-being are in immediate danger (as related to the allegation(s) for which the initial DR referral was made), then the DRT Supervisor should contact the DCFS DR Coordinator or designee immediately for reassignment of the case to the investigative pathway.

If at any time during the DR service delivery period the DRT Specialist, contract provider, or other service provider identifies a new child maltreatment allegation (not related to the allegation connected to the DR referral) a call will be made immediately to the Child Abuse Hotline by the individual who suspects the new child maltreatment allegation.

REASSIGNMENTS FROM INVESTIGATIONS TO DIFFERENTIAL RESPONSE

If upon initial review of the hotline investigation referral it is determined that the referral is eligible for Differential Response, the local DCFS Supervisor may send an email request to the Child Abuse Hotline to assess for reassignment to the Differential Response pathway.

Procedure II-B1: Child Abuse Hotline Referral to Differential Response

01/2013

The Child Abuse Hotline Worker will:

A. Receive and document all child maltreatment allegation reports with sufficiently identifying information as defined by Arkansas law. Situations in which the hotline assesses as an immediate danger to the child's health and physical well-being based upon the severity of the allegations shall be excluded from the Differential Response pathway and referred to DCFS as an investigation.
B. Receive fax transmission in non-emergency situations by identified reporters who provide their name, phone number, and email address (for online reporting). Confirm receipt of fax transmission via a return fax transmission.
C. Conduct a history check on all reports unless call waiting to be answered by the hotline have been waiting for 15 minutes or longer. History checks wills be conducted on serious maltreatment allegations or allegations involving children three (3) years of age and younger regardless of wait time.
D. Attempt to secure all information requested in each screen within the Referral Section of CHRIS and elicit all information requested on the "Referral" and "Narrative" screens:
    1) Reason(s) the reporter suspects child maltreatment and how the reporter acquired the information;
    2) Current risk of harm to the child;
    3) Mental and physical condition of alleged offender;
    4) Potential danger to staff assessing the report;
    5) Identity and location of possible witnesses or persons knowledgeable about the alleged child maltreatment;
    6) Relevant addresses and directions;
    7) Licensing authority and facility involved (if applicable).
E. Prioritize the report by keying the "Ref. Accept" screen. Central Registry Search results is a mandatory field on this screen. Use the Child Maltreatment Assessment Protocol (PUB-357) as a guide.
F. If the referral meets the Differential Response eligibility criteria noted above, forward the report to the Differential Response Coordinator or designee for assessment along with any pertinent Central Registry information.
G. Inform the caller if the report does not constitute a report of child maltreatment and make appropriate referrals.
H. Notify each mandated reporter who makes a call to the hotline if the mandated reporter's call is not accepted or is screened out on a subsequent hotline supervisor review. Said notification should be made within 48 hours excluding weekends and holidays.

Procedure II-B2: Receipt and Assignment of Differential Response Referral

05/2014

Upon receipt of the DR referral from the Child Abuse Hotline, the DCFS Differential Response Coordinator (DRC) or designee will:

A. Determine if the referral meets the criteria for Differential Response by completing a child maltreatment history check on the family to determine if there is an open case or investigation.
B. Reassign the referral to the investigative pathway (hotline call not required) if the DR referral is determined to be ineligible.

C. Review and assign Differential Response reports to the appropriate county's DR Team or contract provider no later than two (2) hours after receipt of reports, excluding evenings, weekends, and holidays, provided initial face-to-face contact with the victim child(ren) and at least one parent/caregiver is made in the home within 72 hours of receipt of initial hotline report.

Procedure II-B3: Differential Response Initiation and Family Assessment

08/2015

The Differential Response Team (DRT) Supervisor will:

A. Assign each new report to a DRT Specialist within two hours of receipt from the DR Coordinator (or designee). Keep in mind that initial face-to-face contact with the victim child(ren) and at least one parent/caregiver must be made in the home within 72 hours of receipt of initial hotline report.
B. Conference with the DRT Specialist within 24 hours (excluding weekends and holidays in which case the conference will take place the next business day) after the DRT Specialist's initial face-to-face contact with the victim child(ren) and at least one parent/caregiver and identify a plan for the next steps to be taken.
C. Determine whether a transfer to investigation is appropriate:
   1) If a transfer is appropriate due to a safety factor being present for the same child maltreatment allegation for which the DR referral was made, or because the DRT Specialist was unable to conduct the Health and Safety Assessment, or because a need was identified and the family refused services, the DRT Supervisor will contact the DR Coordinator or designee to request reassignment of the DR referral to the investigative pathway; or;
   2) If a transfer is not appropriate, conference with DRT Specialist to review/discuss case information (i.e., allegation, risk/safety concerns, immediate needs, and other case specific information).
      a) Review and approve Family Assessments, Family Plans, and appropriateness of service referrals, case file documentation, and requests to close family assessment cases.
D. Document all supervisor activities in CHRIS within twenty-four hours of completion of each activity. (excluding weekends and holidays in which case information will be entered on the next business day).
E. Regarding families with whom the DRT Specialist cannot make face-to-face contact, assess information and determine whether DRT Specialist has met due diligence no later than the seventh day after case assignment.
F. Provide consultation to the DRT Specialist as appropriate.

The Differential Response Team (DRT) Specialist will:

A. Prepare for meeting the family by completing the following activities prior to making initial face-to-face contact with the family:
   1) Interview other persons, including the individual(s) who called the report into the hotline, with information listed on the report;
   2) Conduct a Division of County Operations (DCO) records check of members of the household;
   3) Conduct a CHRIS history search prior to contacting the family unless the report is received after hours or during the weekend or a holiday; and,
   4) Contact the family by phone within 24 hours of case assignment, if a phone number is provided in the report and/or if appropriate considering initiation timeframe requirements to:
      a) Explain Differential Response;
      b) Schedule the initial in-home family visit that will include at least the victim child(ren) and one parent/caretaker; and,
      c) Verify the names and dates of birth of all family members and other persons living in the household.
B. Consider the DR report initiated when:

1) The health and safety of victim child(ren) in the family's home has been assessed within 72 hours from the time the referral was received from the Child Abuse Hotline, and the DRT Specialist has also met with at least one parent/caregiver in the home within 72 hours from the time the referral was received at the Child Abuse Hotline (based on the reported needs and/or safety issues of the family, DRT Supervisor may require that the initial contact with the family occur sooner than 72 hours).
2) A health and safety assessment of the victim child(ren) could not be made but due diligence has been exercised and documented within 72 hours of receipt of the hotline referral.
   a) Due diligence must include making an announced (or unannounced, if needed) visit to the child's home at least three times at different times of the day or on different days (provided the three visits are within the appropriate DR initiation timeframes) in an attempt to assess the health and safety of the victim child(ren).
   b) In addition, completion of as many of the following activities necessary is required as part of meeting due diligence in establishing face-to-face contact with the victim child(ren) and at least one parent/caretaker:
      i. Contacting the reporter again if the reporter is known;
      ii. Visiting or contacting the child's school, child care facility, and all other places where the child is said to be located;
      iii. Sending a certified letter to the location given by the reporter, if attempts to locate the child have failed;
      iv. Contacting appropriate local Division of County Operations staff and requesting research of the AASIS and ANSWER systems and other files to obtain another address.
      v. Asking the local, county, and state law enforcement agencies to check their records for information that may locate the child and family.
      vi. Asking relatives and friends of the subjects to provide information to help locate the subjects.
      vii. Contacting the local post office, utility companies, and schools to request a check of their records.
      viii. Conducting Lexis Nexis search to attempt to locate the family.
   c) If after completion of all the due diligence activities listed above, no contact is made with the family by the sixth business day after case assignment, document information on a case contact *(DRT Supervisor will assess the information and determine whether due diligence has been met, no later than the seventh day after case assignment).*
   d) If DRT Supervisor deems that due diligence has been met:
      i. Close assessment as Unable to Locate; or,
      ii. In certain cases, where the severity of the allegation and/or other known conditions warrant a reassignment to the investigative pathway, contact the DR Coordinator or designee to determine whether such a reassignment should be made.
         (1) If it is determined that a reassignment to investigations is needed, ask the DR Coordinator to reassign to the investigative pathway.
         (2) If it is determined that a reassignment to investigations is not needed, close assessment as Unable to Locate.

C. Provide the following information to the parent/caregiver and other household members during the initial in-home visit:
   1) Explanation of Differential Response including the disclosure that the DRT Specialist must assess the safety of the child(ren) as well as the need for services, and that the Division must address any safety factors or needs as appropriate.
      a) If the family will not allow the worker access to the child or children, the family has declined family assessment services (see Procedure II-C4: Management of Family's Refusal to Participate for more information);

2) PUB-85: Differential Response: A Family-Centered Response to Strengthen and Support Families;
3) CFS-100: Differential Response Program Authorization for Release of Information (to be completed by family).

D. Gather information during the initial in-home visit through the activities listed below:
1) Identify information and legal relationships of all household members.
a) If it is discovered that there are additional children in the home who were not included in the hotline report and whose ages would prohibit assignment to the DR pathway, conference with DRT Supervisor to assess on a case-by-case basis whether a case will remain a DR case or be reassigned to the investigative pathway.
2) Obtain the names and addresses of any non-custodial parents.
3) Obtain DHS-81: DHS Consent for Release of information signed by a family member with the authority to give consent.
4) Complete a Health and Safety Assessment for the family.
a) If the Health and Safety Assessment identifies safety factors, the DR Specialist will contact the DRT Supervisor to determine whether a call to the Child Abuse Hotline and/or notification to the DR Coordinator or designee is appropriate.

E. Request a supervisor conference to review/discuss case information (i.e., allegation, risk/safety concerns, immediate needs, and other case specific information).

F. Document all activities, including the Health and Safety Assessment, in CHRIS within 24 hours after they are completed (excluding weekends and holidays in which case all activities will be documented on the next business day).

G. Visit with all other household members within five days from the time the referral was received at the child abuse hotline.

H. Update the Health and Safety Assessment in CHRIS for the family after all household members have been contacted.

DR Coordinator or designee will:

A. Conference with DRT Supervisor and Specialist regarding cases in which no contact with the family can be made to determine if the assessment should be closed as Unable to Locate or reassigned to the investigative pathway.
1) If it is determined that the assessment should be reassigned, reassign the referral to the investigative pathway.

Procedure II-B4: Management of Family's Refusal to Participate

08/2015

When working with a family who refuses to participate, the DRT Specialist will:

A. If the DRT Specialist has been unable to conduct a Health and Safety Assessment and/or is unable to assess underlying issues or additional child maltreatment concerns that may not have been identified in the original hotline report, inform the family that the DRT Specialist must refer the case to the investigative pathway.
1) Conference with DRT Supervisor immediately and contact DR Coordinator for reassignment of case to the investigative pathway.

B. If the DRT Specialist is able to conduct a Health and Safety Assessment and an assessment of underlying issues or additional child maltreatment concerns not identified in the original hotline report, but there is

neither a safety factor nor a need identified but the family does not otherwise want to participate in a DR case, ask the family to contact the DRT Specialist within 24 hours of the denial if the family members reconsider and decide to participate in the Family Assessment or related services.

1) Contact the DRT Supervisor within one hour of completion of the initial contact with the family to discuss case information and possible referral to the investigative pathway. Information to be discussed should include:
   a) Referral;
   b) Information obtained from available collaterals;
   c) Observations made during the initial family contact;
   d) Health and Safety Assessment; and,
   e) Other pertinent information.
2) If the DRT Supervisor determines that:
   a) Safety factors exist that are related to the child maltreatment allegation for which the DR referral was made:
      i. No other action is required of the DRT Specialist. The DRT Supervisor will contact the DCFS DR Coordinator or designee immediately to request that the report be reassigned to the investigative pathway.
   b) Safety factors exist but they are new child maltreatment allegations that were not included in the initial DR referral:
      i. The DRT Specialist will contact the Child Abuse Hotline immediately to report the new allegations and notify the DRT Supervisor or designee of the new suspected allegation(s).
   c) No safety factors exist but needs are identified and the family refuses to participate in DR services:
      i. The DRT Supervisor will contact the DCFS DR Coordinator or designee immediately to request that the report be reassigned to the investigative pathway.
   d) There are no safety factors and no needs identified:
      i. Close the case in CHRIS.

C. If, after reconsideration, the family ultimately contacts the DRT Specialist to request participation in a DR case and an investigation has not been opened on the family:
   1) Continue the DR case in CHRIS if the DR report/case has not yet been closed; or,
   2) Open a Supportive Services case in CHRIS if the DR report/case has already been closed in CHRIS.

The DRT Supervisor will:

A. Discuss and assess case information and possible referral to the investigative pathway with the DRT Specialist. See above for information to be discussed.
B. If it is determined that:
   1) Safety factors exist that are related to the child maltreatment allegation for which the DR referral was made:
      a) Contact the DCFS DR Coordinator or designee immediately to request that the report be reassigned to the investigative pathway.
   2) Safety factors exist but are new child maltreatment allegations that were not included in the initial DR referral:
      a) Conference with the DRT Specialist regarding safety factor(s).
      b) Notify the DR Coordinator or designee of the new suspected allegation(s) and that the DRT Specialist has made a new call to the Child Abuse Hotline/need for an investigation.

3) There are no safety factors:
   a) Instruct the DRT Specialist to close the case in CHRIS.

The DRT Coordinator will:

A. Reassign any DR case in which the DRT Specialist is unable to conduct a Health and Safety Assessment to the investigative pathway.

Procedure II-B5: Differential Response Services Management

08/2015

The DRT Specialist will:

A. Engage the parents in a comprehensive and collaborative Family Assessment of the family's strengths and needs (and gather other relevant, corresponding information) within 14 days of receipt of referral from the Child Abuse Hotline. The Family Assessment may include:
   1) Family's financial status;
   2) Basic educational screening for the children;
   3) Physical health, mental health and behavioral health screening for all family members;
   4) Names and addresses of those persons who provide a support system for the family; and,
   5) Names and addresses of any service providers that have been or are currently involved in providing services to the family.
B. Initiate services to meet any immediate needs of the family, including food, shelter, and clothing.
C. Place a copy of the Family Assessment in the family record.
D. Maintain a minimum of twice weekly contacts with the family, which must include contact with the children as appropriate in the household, unless the DRT Supervisor and the family determine that the contacts should occur more frequently.
   1) While the initial home visit/contact must be conducted by the DRT Specialist and include face-to-face contact with at least the victim child(ren) and one parent/caregiver, the DRT Specialist may ask the DRT Program Assistant to make subsequent contacts with the family provided the majority of the face-to-face contacts are conducted by the DRT Specialist.
   2) Children do not necessarily have to be seen at each subsequent face-to-face family contact if primary purpose of a specific contact is to discuss issues and/or services relating directly to the parent(s) and provided DRT Specialist has assessed, based on previous contacts and other information, that children's safety is ensured for the time being and will be reassessed at a subsequent face-to-face contact with the children.
E. Establish a Family Plan with input from the family. The Family Plan will be completed within 14 days of receipt of referral to the hotline. The Family Plan can be modified and revised as needed.
F. Identify and implement services to address the issues that resulted in the hotline report as well as any additional child maltreatment concern that may not have been identified in the original hotline report.
G. Assess the family's reasonable progress in resolving the issue that brought them to the attention of the Division.
H. Maintain ongoing contact with the involved service providers as appropriate.
I. Create and maintain community partnerships that will benefit DR client outcomes.
J. Establish an Aftercare Plan with input from the family.
K. Submit the following documents to the DRT Supervisor before formalizing case closure with the family.
   1) Case Closing Summary

2) Child and Family Service Aftercare Plan
3) Case note documentation of interviews, contacts and activities
4) Provider treatment reports
5) Updated FSNA and Health and Safety Assessment

L. Participate in a closure staffing with the DRT Supervisor to discuss the closure request.
M. Close the case in CHRIS upon receiving DRT Supervisor approval for case closure.

The DRT Program Assistant will:

A. Help ensure clients are meeting the Family Plan goals in a DR case.
B. Assist with referrals to services identified in the Family Plan.
C. Provide transportation for clients as needed.
D. Assist DRT Specialist in maintaining contact with the family provided the DRT Specialist conducts the initial face-to-face contact and the majority of subsequent family contacts. Some PA contacts may be made by phone provided documentation supports that health and safety of children will still be ensured.
E. Conference with DRT Specialist on family progress.
F. Create and maintain community partnerships that will benefit DR client outcomes.
G. Document all activities in CHRIS within 24 hours of completion (excluding weekends and holidays in which case activities will be documented the next business day).

The DRT Supervisor will:

A. Conference with the DRT Specialist and DRT Program assistant as needed regarding the family's Differential Response case and associated services.
B. Review and approve Family Assessments, Family Plans, and appropriateness of service referrals.
C. Review DR case closure request including:
   1) Case Closing Summary
   2) Child and Family Service Aftercare Plan
   3) Case note documentation of interviews, contacts and activities
   4) Provider treatment reports
   5) Updated FSNA and Health and Safety Assessment
D. Hold a closure staffing with the DRT Specialist to discuss the closure request and determine if the request will be approved or denied.
E. Approve or deny case closure request as appropriate.

Procedure II-B6: Service Extensions

01/2015

If a family involved in a Differential Response case will not be able to complete the Family Plan within 30 days, the DRT Specialist will:

A. Conference with DRT Supervisor regarding reason(s) for which Family Plan cannot be completed.
B. Obtain approval for 15-day extension from DRT Supervisor if appropriate (note: an extension cannot be approved earlier than the 25th day from the day the initial referral was opened).
C. Document approval of 15-day extension in CHRIS.
D. Revise Family Plan (if appropriate) with input from family for family to complete within 15 days.
E. Obtain approval for extended Family Plan (if applicable) from DRT Supervisor.
F. Assist family with implementation of extended Family Plan as appropriate/applicable.

G. Monitor progress of extended Family Plan including maintaining a minimum of twice weekly contacts with the family, which will include contact with the children in the home.
H. If family:
    1) Successfully meets extended Family Plan:
        a) Establish an Aftercare Plan with input from the family.
        b) Submit the following documents to the DRT Supervisor before formalizing case closure with the family.
            i. Case Closing Summary
            ii. Child and Family Service Aftercare Plan
            iii. Case note documentation of interviews, contacts and activities
            iv. Provider treatment reports
            v. Updated FSNA and Health and Safety Assessment
        c) Close the case in CHRIS upon receiving DRT Supervisor approval for case closure.
    2) Does not complete extended Family Plan:
        a) Conference with DRT Supervisor regarding reasons for which plan is not completed.
        b) Obtain approval from DRT Supervisor for another 15-day extension if appropriate.
        c) Document approval of second 15-day extension in CHRIS.
        d) Revise Family Plan (if appropriate) with input from family for family to complete within 15 days.
        e) Obtain extended Family Plan approval (if applicable) from DRT Supervisor.
        f) Assist family with implementation of Family Plan as appropriate.
        g) Monitor progress of Family Plan including maintaining a minimum of twice weekly contacts with the family, which will include contact with the children in the home.
        h) If family:
            i. Successfully meets extended Family Plan:
                (1) Follow Aftercare Plan and case closure procedure as outlined above.
            ii. Does not successfully meet extended Family Plan:
                (1) Conference with DRT Supervisor and DR Coordinator (or designee) to determine if case should be closed, reassigned as a Supportive Services case, or reassigned as an investigation.
                (2) Close case in CHRIS or reassign as a supportive services or an investigation as appropriate.

If a family involved in a Differential Response case will not be able to complete the Family Plan within 30 days, the DRT Supervisor will:

A. Conference with DRT Specialist regarding reason(s) for which Family Plan cannot be completed.
B. Conference with DRT Specialist regarding monitoring of extended and/or revised Family Plan as applicable.
C. If family:
    1) Successfully meets extended Family Plan:
        a) Review DR case closure request including:
            i. Case Closing Summary
            ii. Child and Family Service Aftercare Plan
            iii. Case note documentation of interviews, contacts and activities
            iv. Provider treatment reports
            v. Updated FSNA and Health and Safety Assessment
        b) Approve or deny case closure request as appropriate.

2) Does not successfully meet extended Family Plan:
   a) Conference with DRT Specialist and Program Assistant regarding reasons for which plan is not completed.
   b) If appropriate, request second 15-day extension from DR Coordinator (or designee) at least 3 days prior to the expiration of the first extension.
   c) Conference with DRT Specialist regarding monitoring of extended Family Plans as appropriate.
   d) If family:
      i. Successfully meets second extended Family Plan:
         (1) Follow case closure procedure as outlined above.
      ii. Does not meet second extended Family Plan:
         (1) Conference with DRT Specialist and DR Coordinator (or designee) to determine if case should be closed, reassigned as a supportive services case, or reassigned as an investigation.

DR Coordinator or designee will:

A. Conference with DRT Supervisor regarding reasons for second extension request.
B. Approve or deny second 15-day extension requests as appropriate.
C. Conference with Differential Response Team regarding DR cases that have already been granted two (2) 15-day extensions to determine most appropriate course of action (i.e., case closure, reassignment to supportive services case, or reassignment to an investigation).

DRT Program Assistant will:

A. Help ensure clients are meeting the revised Family Plan goals.
B. Assist with referrals to services identified in revised Family.
C. Conference with DRT Specialist on family progress.
D. Provide transportation for clients as needed.

Document all activities in CHRIS within 24 hours of completion (excluding weekends and holidays in which case activities will be documented on the next business day).

POLICY II-C: CHILD ABUSE HOTLINE FOR CHILD MALTREATMENT REPORTS

01/2020

Pursuant to Act 1240 of 1997, the Department of Human Services and the Arkansas State Police entered into an agreement for the Arkansas State Police Crimes Against Children Division to assume responsibility for the administration of the Child Abuse Hotline.

All child maltreatment allegations are to be reported to the Child Abuse Hotline. No privilege, or contract, shall prevent anyone from reporting child maltreatment when the person is a mandated reporter (see Appendix I: Glossary for more information).

No privilege shall prevent anyone, except between a client and his lawyer or minister or Christian Scientist practitioner, and any person confessing to or being counseled by the minister, from testifying concerning child maltreatment.

The Arkansas Child Abuse Hotline must accept reports of alleged maltreatment when either the child or his family is present in Arkansas or the incident occurred in Arkansas. Another state may also conduct an investigation in Arkansas that results in the offender being named in a true report in that state and placed that state's Child Maltreatment Central Registry.

PROCEDURE II-C1: Child Abuse Hotline Acceptance and Assignment of Maltreatment Reports

02/2020

The Child Abuse Hotline Worker will:

A. Receive and document all child maltreatment allegation reports with sufficiently identifying information as defined by Arkansas law.
B. Receive fax transmission in non-emergency situations by identified reporters who provide their name, phone, number and email address (for online reporting). Confirm receipt of fax transmission via a return fax transmission.
C. Conduct a history check on all reports unless call waiting to be answered by the hotline have been waiting for 15 minutes or longer. History checks will be conducted on serious maltreatment allegations or allegations involving children three (3) years of age and younger regardless of wait time.
D. Attempt to secure all information requested in each screen within the Referral Section of CHRIS and elicit all information requested on the "Referral" and "Narrative" screens:
    1) Reason(s) the reporter suspects child maltreatment and how the reporter acquired the information,
    2) Current risk of harm to the child,
    3) Mental and physical condition of alleged offender,
    4) Potential danger to staff assessing the report,
    5) Identity and location of possible witnesses or persons knowledgeable about the alleged child maltreatment,
    6) Relevant addresses and directions,
    7) Licensing authority and facility involved (if applicable).
E. Prioritize and determine the appropriate investigating agency (either CACD or DCFS) as outlined in the Arkansas Department of Human Services and Arkansas State Police Agreement, to include, pursuant to A.C.A. §12-18-303, a referral to the DCFS Prevention and Reunification Unit for a secondary review of an accepted report that contains no reporter information and collateral information as outlined in the Arkansas Department of Human Services and Arkansas State Police Agreement.

F. Forward report to appropriate investigating agency (either CACD or DCFS) for investigation with any pertinent Central Registry information, and DCFS may refer for assessment.
G. Inform the caller if the report does not constitute a report of child maltreatment and make appropriate referrals.
H. Notify each mandated reporter who makes a call to the hotline if the mandated reporter's call is not accepted or is screened out on a subsequent hotline supervisor review. Said notification should be made within 48 business hours.
I. Notify on-call DCFS or CACD staff by telephone for any Priority I report received after business hours or on holidays.
J. Provide local law enforcement with the name and contact information for the appropriate on-call staff employee at DCFS if local law enforcement contacts the hotline due to a 72 hour hold initiated on a child or if a hold needs to be taken on a child to protect the child.
K. If at any time the system should be inoperable or the respective entities do not have access to the computerized entry, maltreatment reports shall be forwarded by telephone.

The Child Abuse Hotline Supervisor will:

A. Ensure that each Child Abuse Hotline worker has access to a comprehensive and current listing of on-call Family Service Workers.

The DCFS Prevention and Reunification Unit will:

A. Review accepted reports that flagged for secondary review by the Child Abuse Hotline due to the report not containing reporter information or collateral information as outlined in the Arkansas Department of Human Services and Arkansas State Police Agreement and make determinations based on the following considerations:
    1) Review of the report to ensure it meets all acceptance requirements under A.C.A. §12-18-303-310.
    2) Review of all relevant information pertaining to the report, to include, but not limited to:
        a) Current report to ensure:
            i. Information is otherwise sufficient for the Department to make contact with the alleged victim;
            ii. The current allegations are not identical to a previous report that has had a prior preliminary investigation within the past six months and was administratively closed;
        b) Previous investigations of child maltreatment pertaining to the current alleged offender;
        c) Previous case history in CHRIS.
B. After secondary review of the accepted child maltreatment report:
    1) Assign credibly accepted reports to the appropriate county office investigative or differential response pathway; or,
    2) Complete steps to screen out the accepted referral under A.C.A. §12-18-303.

PROCEDURE II-C2: County Office Interaction with Child Abuse Hotline

The County Supervisor or designee will:

A. Take the information on child maltreatment as directed in Procedure II-C1 if a reporter contacts the county office and refuses to call or has been unable to contact the Child Abuse Hotline.
B. Determine whether the report is a valid report of maltreatment by using the Child Maltreatment Assessment Protocol (PUB-357).
C. Tell the reporter if the report is not an allegation of child maltreatment.
D. Call the Child Abuse Hotline if the report is accepted.
    The Child Abuse Hotline will prioritize the report and refer for assessment by entering the report into the "Referral" section of CHRIS. Once a report is entered in CHRIS, workers with proper security will have access to referral, investigative, and case information. County Office staff are strictly prohibited from entering

reports into CHRIS. Any unauthorized use or altering of this information is also strictly prohibited. Please see DHS Policy 1084, "Employee Discipline" on information related offenses.

E. Check the computer at least once in the A.M. and once in the P.M. for child maltreatment report transmissions.
F. Acknowledge receipt of Priority I transmissions within two working hours and receipt of Priority II transmissions within three working hours.
G. Advise the Child Abuse Hotline promptly of after-hours on-call Family Service Workers' names by entering information into the "Organization" screens in CHRIS.
H. Establish procedures to ensure the security and confidentiality of reports at the local level and the Child Maltreatment Assessment files when not in use.
I. Notify Prosecuting Attorney by letter of any failure by a mandated reporter to report suspected child maltreatment.
J. Notify Prosecuting Attorney by letter when a reporter makes a report without good cause.

PROCEDURE II-C3: County Office Secondary Review Requests from DCFS Central Office and Requests for Clearance of Other Reports from Child Abuse Hotline

02/2020

The FSW Investigative Supervisor or County Supervisor will:

A. Determine if an accepted report meets the following secondary review request criteria:
   1) Report does not contain sufficient information for the Department to make contact with the alleged victim; or
   2) The allegations are identical to a previous report that has had a prior preliminary investigation within the past six months and was administratively closed.
B. If an accepted report meets one of the secondary review request criteria above, forward the request with pertinent information to the DCFS Prevention and Reunification Unit for a secondary review.
C. If the accepted report does not meet one of the secondary review request criteria, but there is otherwise reason to believe a registered report does not warrant assignment for investigation, contact a Child Abuse Hotline Supervisor for a review before the report is initiated and cite at least one of the following reasons:
   1) The allegations would not constitute child maltreatment as defined in the Child Maltreatment Act.
   2) The same incident involving identical alleged offenders and victims has already been assessed.

Regarding reports that meet secondary review criteria, the DCFS Prevention and Reunification Unit will:

A. Review the report and make determinations based on the following considerations:
   1) Review of the report to ensure it meets all acceptance requirements under A.C.A. §12-18-303-310.
   2) Review of all relevant information pertaining to the report, to include, but not limited to:
      a) Current report to ensure:
         i. Reporter or collateral information is available;
         ii. Information is sufficient for the Department to make contact with the alleged victim;
         iii. The current allegations are not identical to a previous report that has had a prior preliminary investigation within the past six months and was administratively closed;
      b) Previous investigations of child maltreatment pertaining to the current alleged offender;
      c) Previous case history in CHRIS.
   3) Call to reporter (if known) to ascertain additional information on the allegation and related information to determine if report warrants assignment to field for investigation.
B. After secondary review of the accepted child maltreatment report:
   1) Assign credibly accepted reports to the appropriate county office investigative or differential response pathway; or,
   2) Complete steps to screen out the accepted referral under A.C.A. §12-18-303.

Regarding reports that do not meet secondary review criteria but otherwise does not warrant assignment for investigation, the Child Abuse Hotline Supervisor and appropriate Hotline Staff will:

A. Determine whether to screen out the report.
B. Notify the CPS Manager and County Supervisor if the report is screened out.

PROCEDURE II-C4: Child Maltreatment Reports Involving Allegations Taking Place in Other States or Countries

09/2011

The Child Abuse Hotline Worker will:

A. If the alleged offender resides in another state and the suspected maltreatment occurred in another state or country:
   1) Document receipt of the report.
   2) Forward the report to the Child Abuse Hotline of the state or country where the alleged offender resides or the incident occurred.
   3) If child protection is an issue, forward the report to the Department of Human Services or the equivalent governmental agency of the state or country where the alleged offender resides.
B. If the alleged maltreatment occurred in another state, but the alleged offender is a resident of Arkansas AND the report of child maltreatment or suspected maltreatment in the other state or country would also be child maltreatment in Arkansas at the time the incident occurred, refer the report to DCFS or CACD as appropriate.

DCFS or CACD will:

A. Contact the other state and advise them of Arkansas's willingness to assist its investigation.
B. Interview the alleged offender in an effort to assist the investigative agency from the other state or country; however, the investigative agency from the other state or country must take responsibility for the investigation.
C. Notify the alleged offender that if the allegation is determined to be true, the offender's name will be placed in the Arkansas Child Maltreatment Central Registry.

PROCEDURE II-C5: Child Maltreatment Reports Involving Allegations Taking Place in Arkansas with Alleged Parties to the Report Living Outside of Arkansas

09/2011

The Child Abuse Hotline Worker will:

A. If the alleged maltreatment occurred in Arkansas, but the victim, the parents, and/or the alleged offender no longer reside here, accept the report.

DCFS will:

A. Contact the other state.
B. Request courtesy interviews with the out-of-state subjects of the report.

POLICY II-D: Investigation of Child Maltreatment Reports

02/2020

OVERVIEW

All reports of known or suspected child maltreatment are promptly investigated and immediate steps are taken to protect a maltreated child and any other child under the care of the same alleged offender who may also be in danger of maltreatment. The health and safety of the child are always of paramount concern.

While the Department of Human Services (DHS or department), Division of Children and Family Services (DCFS or Division) is responsible for ensuring the health and safety of children in Arkansas, the Arkansas State Police Crimes Against Children Division (CACD) collaborates with DCFS to conduct investigations of child maltreatment allegations. DCFS and CACD will assess Priority I and Priority II referrals as outlined in the "Agreement Between the Department of Human Services and the Arkansas State Police," which is posted on CHRIS Net and is subject to renewal annually. To determine the individual responsibilities and operational protocol of the two agencies, see the specifics of the agreement. The agreement is written in accordance with Act 586 of 2007, the Governor's Executive Order, and all applicable federal and state laws.

DCFS and CACD, as appropriate, will issue notices regarding child maltreatment allegations to all persons pursuant to § A.C.A 12-18-501 et seq. The Division will issue notices in such a way as to ensure the rights to due process of the alleged offender and to protect others who may be at risk of harm from the alleged offender. For more information on child maltreatment notices, see Policy XIV-A: Notices Regarding Child Maltreatment and related procedures.

INVESTIGATION INITIATION TIMEFRAMES

All Priority I investigations will begin no later than 24 hours after receipt of a report by the Hotline, excluding:

- **A. An allegation of sexual abuse if the most recent allegation of sexual abuse was more than one year ago; or,**
- **B. An allegation of sexual abuse if alleged victim does not currently have contact with the alleged offender; or**
- **C. An allegation of abandonment and the child is in a facility or,**
- **D. An allegation of cuts, welts, bruises, or suffocation if the most recent allegation was more than one year ago and the alleged victim is in the custody of the Department of Human Services; or**
- **E. The alleged victim is in a facility and does not currently have contact with the alleged offender.**

While an allegation that a child has been subjected to neglect as defined by Garrett's Law § 12-18-103(14)(B) is defined as a Priority II investigation, all Garrett's Law investigations must be initiated within 24 hours after receipt of a report by the Hotline per A.C.A. § 12-18-602(b)(2)(B).

All other child maltreatment investigations reports will begin within 72 hours after receipt of a report by the Hotline. Investigations are considered initiated when, as age appropriate, the investigator conducts a face-to-face interview with the alleged victim outside the presence of the alleged offender or observes the alleged victim outside the presence of the alleged offender, or the investigator has otherwise met due diligence (see Procedure II-D3 for more information). Once the investigation has begun, the primary focus will be to determine whether or not the alleged offender has access to the child and whether the child or any other children as well as any elderly persons or individuals with a disability or mental illness with whom the alleged offender works are at risk such that they need to be protected.

NOTICE OF ALLEGATION

The investigative agency at the local level is responsible for providing the notice of allegation to all applicable parties as outlined in Procedure XIV-A1: Notices of Allegations of Child Maltreatment.

AT RISK DETERMINATIONS UPON INITIATION

Upon initiation the investigative agency must determine:

- **A. Alleged offender's employer, including the physical address;**
- **B. Alleged offender's job duties at his employment; and,**
- **C. Alleged offender's supervisor.**

In addition to gathering the information above, the investigative agency must also gather any other necessary information to determine if the alleged offender:

- **A. Works with children or is otherwise engaged in paid or volunteer child-related activities;**
- **B. Works with the elderly;**
- **C. Works with an individual with a disability or mental illness; or,**
- **D. Is a juvenile (and therefore has access to other juveniles in a school or similar setting).**

If so, the investigative agency must immediately ascertain the name and address of the person in charge of those activities. The investigative agency must then immediately determine whether or not children, the elderly, or individuals with disabilities or mental illness under the care of the alleged offender appear to be at risk of maltreatment by the alleged offender.

The investigative agency supervisor and Area Director (as applicable) may consult with the Office of Chief Counsel (OCC) as necessary, prior to making a determination as to whether children, the elderly, or individuals with disabilities or mental illness appear to be at risk. If the investigative agency determines children, the elderly, or individuals with disabilities or mental illness under the care of the alleged offender are at risk of maltreatment by the alleged offender, then the investigative agency may notify the people and entities listed below of the hotline report if the DCFS Director or designee approves the at risk determination and gives written approval to the investigative agency to provide notifications of the at risk determination to:

- **A. The alleged offender's employer;**
- **B. The school superintendent, principal, or a person in an equivalent position where the alleged offender is employed;**
- **C. The person in charge of a paid or volunteer activity; and,**
- **D. The appropriate licensing or registering authority to the extent necessary to carry out its official responsibilities.**

See Procedure XIV-A2 for number of notification form and other specific instructions regarding providing at risk notifications to the persons and entities listed above.

The "at risk" determination will be changed immediately if, upon further investigation, it is determined the children under the care of the alleged offender are not at risk. See Procedure XIV-A3 for more information.

OVERALL INVESTIGATION GOALS

During the investigation of an allegation of child maltreatment, and if the alleged offender is a family member, or lives in the home of the alleged victim, the assigned investigative agency will conduct an investigation to determine:

- **A. The existence, cause, nature and extent of child maltreatment with particular attention to any of the Arkansas Health and Safety factors that may be present. The Arkansas Health and Safety Factors are:**
  - **1) Caretaker's behavior toward child is violent or out of control.**
  - **2) Caretaker describes or acts towards the child in predominantly negative terms or has extremely unrealistic expectations.**
  - **3) Caretaker caused serious physical injury to child or made plausible threat to cause severe physical injury.**
  - **4) Caretaker's explanation for injury is unconvincing.**

5) **Family refuses access to child there is reason to believe that family is about to flee, or child's whereabouts cannot be ascertained.**
6) **Caretaker has not, cannot, or will not provide supervision necessary to protect child from potentially dangerous harm.**
7) **Caretaker is unwilling or unable to meet child's needs for food, clothing, shelter, or medical or mental health care.**
8) **Child is fearful of caretaker, other family members, or other people living in or having access to the home.**
9) **Child's physical living conditions are hazardous and immediately threatening, based on child's age and developmental status.**
10) **Child sexual abuse is suspected, and circumstances suggest that child safety may be an immediate concern.**
11) **Caretaker's current substance use seriously affects his/her ability to supervise, protect, or care for the child.**
12) **Caretaker fails to protect child from serious physical or threatened harm.**
13) **Caretaker's emotional stability seriously affects current ability to supervise, protect, or care for child.**
14) **Caretaker has previously maltreated a child and severity of maltreatment or caretaker's response to previous incidents suggest child safety may be an immediate concern.**

B. **The existence and extent of previous injuries; and,**
C. **The names and conditions of other children in the home.**

If the alleged offender is not a family member or does not live in the home of the alleged victim, the assigned investigative agency will conduct an investigation to determine:

A. **The existence, cause, nature, and extent of child maltreatment with particular attention to any of the Arkansas Health and Safety Factors that may be present (see above for list of the fourteen Arkansas Health and Safety Factors);**
B. **The identity of the person responsible for the maltreatment; and,**
C. **The existence and extent of previous maltreatment perpetrated by the alleged offender.**

In addition to the other information described in this section (i.e., Overall Investigation Goals), the assigned investigative agency will also attempt to determine:

A. **The identity of the person responsible for the maltreatment;**
B. **The relationship of the children with the parents or caretakers and their circumstances;**
C. **The child's environment in terms of risk and protective factors; and,**
D. **All other pertinent information.**

Ultimately, the information described above that is collected during the fact-finding phase of the child maltreatment investigation allows the Division to determine:

A. **If services are necessary to assist the family and allow the child to remain safely at home (per A.C.A. §12-18-604, the Department has the authority to make referrals or provide services during the course of the child maltreatment investigation);**
B. **If separation of the child from the family is necessary to protect the health and safety of the child; and,**
C. **Whether there is a preponderance of the evidence (see Appendix I: Glossary) to support the report.**

If at any time before or during an investigation it is determined that the alleged offender is not a caretaker of a child and the alleged victim has reached 18 years of age prior to notification the child maltreatment investigation shall be closed, notwithstanding any criminal investigation.

REASONABLE EFFORTS TO PREVENT REMOVAL

Throughout the investigation the Division will ensure reasonable efforts are made to preserve the family and to prevent the need to remove the child from the home unless the health and safety of the child warrant immediate removal for the protection of the child. When the investigative agency's first contact with the family has occurred during an emergency in which the child could not safely remain at home, even with reasonable services being provided, the Division will be deemed to have made reasonable efforts to prevent or eliminate the need for removal.

INVESTIGATION COMPONENTS

The child maltreatment investigation will consist of, but is not limited to, completion of a Health and Safety Assessment and interviews with:

- **A. Alleged victim;**
- **B. Parents, both custodial and non-custodial;**
- **C. If neither parent is the alleged offender, the alleged offender;**
- **D. Any siblings of the victim or other children under the care of the alleged offender;**
- **E. Current or past healthcare providers when the allegation of child maltreatment was reported by a healthcare provider; and,**
- **F. Any other relevant collaterals.**

DCFS staff are encouraged to bring child victims of Priority I reports involving sexual abuse, physical abuse, neglect, and witness to violence to the nearest Child Safety Center for the interview whenever available and appropriate. In some cases, it may also be appropriate to bring child victims of certain Priority II maltreatment reports to the nearest Child Safety Center for the interview.

The Health and Safety Assessment is designed to:

- **A. Identify Arkansas Health and Safety Factors in the home which affect the child's immediate health and physical well-being.**
- **B. Guide the Family Service Worker (FSW) in determining whether or not the child can remain safely in the home.**
- **C. Serve as a structured decision-making tool. For example, information collected on the Health and Safety Assessment can be used to document reasonable efforts or aggravated circumstances. It can also be used to assist in completing the court report, and at important case decision points, or when there are major changes in case circumstances.**
- **D. Assess the child's health and safety at placement changes if the child is removed from the home.**

If the alleged offender is identified as a parent or primary caregiver, the Health and Safety Assessment in the Children's Reporting Information System (CHRIS) will be completed based on the conditions present when the child and the parent or primary caregiver are together in the home. Children ages 0-6, children with developmental disabilities or children who have been repeatedly victimized shall be considered especially vulnerable.

Information to complete the Health and Safety Assessment will be gathered during the child maltreatment interviews. All interviews and the entirety of the Health and Safety Assessment must be completed by the investigator within 30 calendar days of the receipt of the child maltreatment report. The Health and Safety Assessment must be approved by the FSW Supervisor within 45 calendar days of the receipt of the child maltreatment report.

The Health and Safety Assessment is comprised of three components:

- **A. Health and Safety Checklist**
- **B. Safety Planning**
- **C. Investigation Risk Assessment**

The Health and Safety Assessment cannot be closed until both the Health and Safety Checklist and Safety Planning screens are completed.

A description of each of the Health and Safety Assessment sections and their associated actions during an investigation follows:

Health and Safety Checklist

The Health and Safety Checklist is the first component of the Health and Safety Assessment. It contains the fourteen Arkansas Health and Safety Factors (hereinafter referred to as "safety factors"). Upon the investigation initiation, the primary investigative agency will assess whether or not any of the fourteen safety factors are present. The presence or absence of safety factors must be documented by the primary investigative agency in the Health and Safety Checklist screen in CHRIS within two business days of the investigation initiation. Every subsequent contact with the family should also include an assessment for any safety factors; however, the Health and Safety Checklist is only completed again in the event that additional safety factors are identified or facts change.

If CACD is assigned primary on an investigation and, after interviewing the alleged victim, identifies the need for DCFS to complete a safety assessment, the CACD Investigator will immediately contact DCFS to conduct the Health and Safety Assessment (Safety Planning and Investigation Risk Assessment) as appropriate. DCFS will then be assigned as the secondary investigator on that particular investigation.

If CACD is assigned primary on an investigation and does not identify the need for DCFS to conduct a safety assessment, the CACD Investigator is responsible for completing the Investigation Risk Assessment if the allegation is found true and an in-home or out-of-home case will be opened.

If DCFS is assigned primary on an investigation, DCFS will complete all components of the Health and Safety Assessment as appropriate regardless of whether safety factors are identified. The identification of the presence or absence of safety factors is critical to safety planning.

Safety Planning

Safety Planning is the second component of the Health and Safety Assessment. Safety planning requires specific actions to be taken to ensure a child's safety during the course of an investigation. If a safety factor is identified, there are only two options to implement during the safety planning process:

A. Develop a protection plan to mitigate the identified safety factors to allow the child remain safely in the home; or,
B. Remove the child from the home and take protective custody.

These two options are described below:

1) Protection Plans

Protection Plan Development and Content

When any safety factors are present, a protection plan must be developed to address each identified safety factor if the child will remain in the home. A protection plan is a written plan developed by DCFS staff in conjunction with the family to address identified safety factors. The actions and any services needed to address safety factors contained in a protection plan will depend on the dynamics of a particular investigation (or case) and the family involved. This documentation describing the actual use or consideration of using protecting interventions establishes reasonable efforts to prevent removal of the child from the home.

Regardless of the actions included in a protection plan, protection planning is a process that occurs with the family and may include the family's selected support network. Protection planning and oversight on the part of the Division continues throughout involvement with the family as long as safety factors are present. The plan must be sufficient to manage and control safety factors based on a high degree of confidence that it can be implemented, sustained, and closely monitored by DCFS (see below for more information). The Division will assure that the roles and responsibilities of the protection plan are clearly described to and discussed with the person providing those services.

A protection plan must be developed and receive DCFS supervisory approval prior to DCFS staff leaving the home. The protection plan serves as a written agreement between the Division and the family. As such, a copy of the plan will be provided to the caregiver and to other members participating in the plan prior to the investigator leaving the home.

However, protection plans may not:

a) **Make a change to the current physical or legal custody arrangement of the child; or,**
b) **Otherwise limit the right of a parent or legal custodian to visit/have access to his or her child, including supervised visits,**

***unless* a dependency-neglect petition is first filed with the court to address identified safety factors and a corresponding court order is obtained to make a change to the current custody arrangements or otherwise limit the right of a parent or legal custodian to have access to his or her child. An alternate method of ensuring child safety must be implemented until the required court order is issued to alter custody or visitation arrangements.**

To file a dependency-neglect petition to ensure a child's safety in the home, the FSW will contact OCC immediately (or at the start of the next business day if the safety assessment occurred after hours or on the weekend) to request OCC to file the appropriate petition. It is crucial that the FSW Investigator, with support from his or her supervisor, determines exactly what the Division is requesting the court to order, if applicable, to address the identified dependency-neglect issues (i.e., safety factors).

If the requested court order is issued, the FSW Investigator will then craft a corresponding protection plan that reflects the orders of the court as well as any other actions or information that need to be included in the protection plan to ensure child safety. The FSW Investigator will then thoroughly explain the contents of the protection plan to the caregivers and other individuals who may be a part of the protection plan.

Order of Less Than Custody

An order of less than custody is one action that could potentially be included in a protection plan (once the order is issued), if appropriate. An order of less than custody legally restricts the alleged offender from contact with the child while allowing the child to remain in the home with the non-offending custodian (if the non-offending custodian is already a legal custodian of the child) as part of the protection plan.

In addition to the situation above in which the non-offending custodian is the legal custodian of the child and wants to restrict the alleged offender's access to the child, orders of less than custody may also be applicable to situations in which:

a) **The legal custodian placed or otherwise allowed the child to reside with another person for more than six months; and,**
b) **The legal custodian is named as an alleged offender in the investigation; and,**
c) **The child's current caretaker and DCFS assess that the legal custodian's (who is also the alleged offender) access to the child poses an immediate danger to the child's health or physical well-being; and,**

d) **DCFS has no immediate health or physical well-being concerns with the current placement; and,**
e) **DCFS has determined that specific safeguards in the court order will ensure the child's immediate health and physical well-being while remaining in the current home.**

The Division will thoroughly assess for safety factors (to be documented in the Health and Safety Checklist) to ensure that a protection plan is in place for a child before leaving that child in a home where DCFS has petitioned the court for an order of less than custody.

To file a dependency-neglect petition to obtain an order of less than custody, the FSW will contact OCC immediately to request OCC to file the appropriate petition.

Protection Plan Documentation
The Safety Planning screen in CHRIS documents the actions taken to ensure a child's safety during the course of an investigation. If a protection plan is developed, it must be documented in the Safety Planning screen in CHRIS within two business days of the investigation initiation.

If any other actions were taken or services put in place to ensure safety of the child victim or other children in the home, then these activities must also be documented in the Safety Planning screen in CHRIS within two business days.

Protection Plan Monitoring and Assessment
All protection plans will be monitored via an initial face-to-face contact with the family (to include alleged victim(s), alleged offender(s), and any other children in the home) within at least 72 hours and then via a minimum of weekly face-to-face contact for the remaining life of the protection plan.

While the health and safety of the child is always assessed each time the Division comes into contact with the child, per A.C.A. 12-18-1001(d)(2)(A)-(B), the health and safety of the child and any corresponding protection plan will be formally reassessed within 30 days of the date on which the protection plan was implemented. If after this formal reassessment is performed, the Division determines that a substantial risk of harm to the health and safety of the child remains and that the protection plan must stay in place to ensure the health and safety of the child, then the Division will file a petition for dependency-neglect (however, note that the Division may file a petition for dependency-neglect at any point to if needed to ensure the health and safety of the child) unless the parent, guardian or custodian is not:
a) **The alleged offender; or,**
b) **Alleged to have failed to protect the juvenile.**

If a case connect has already occurred, then the assigned FSW Caseworker and FSW Investigator who implemented the protection plan will collaborate to reassess the protection plan and provide the affidavit and a copy of the CFS-200: Protection Plan to OCC to file any necessary petitions for dependency-neglect at 30 days.

Case Opening, Assessment, and Case Plan as a Result of a Protection Plan Filed with the Court
For a petition filed as the result of a protection plan, a corresponding case plan will be filed with the court within 30 days per A.C.A. § 9-27-402.

The assigned FSW will continue to monitor the protection plan until it is no longer needed. The assigned FSW will complete the Family Advocacy and Support Tool (FAST) in collaboration with the family, FSW Investigator, and other appropriate stakeholders (see Policy IV-A: Family Assessments for more information regarding the FAST). The FSW Caseworker will also have the primary responsibility of developing the case plan with the family and ensuring the implementation of the case plan (see Policy IV-B: Services Case Plans for more information).

If a reasonable protection plan cannot be developed, then the child must be removed and placed in an approved placement (see below for more information regarding protective custody). Removal must also be documented in the Safety Planning screen in CHRIS within two business days of the act of removal of the child.

If there are risk factors or evidence that maltreatment has occurred, but no safety factors are present, then neither a protection plan nor removal of the child is necessary at that point in time. When no safety factors are present, per A.C.A. § 12-18-1009, the parents retain the right to keep the child at home or to place the child outside the home. However, as appropriate, the FSW Investigator may make referrals or provide services during the course of the child maltreatment investigation to address any risk factors. All referrals made or services provided during the course of the child maltreatment investigation shall be documented in the Investigation Finding screen in CHRIS.

2) Protective Custody

If a safety factor is identified in the home and it cannot be mitigated with the implementation of a protection plan, the Division must remove the child from the home and take protective custody. This requirement applies to any point during a child maltreatment investigation or open case when the health and physical well-being of a child are in immediate danger. When a child is taken into protective custody, the child shall be placed in an appropriate licensed or approved placement. This may include an identified relative or fictive kin (fictive kin means a person selected by the Division of Children and Family Services who is not related to the child by blood or marriage, and has a strong, positive, and emotional tie or role in the child's life or the child's parent's life if the child is an infant) home if it is in the best interest of the child and all criteria for opening a provisional foster home and placing the specific child for whom the provisional foster home was opened have been met (see Policy VI-B: Consideration of Relatives and Fictive Kin for Children in Foster Care and Policy VII: Development of Foster Homes for more information).

The Division may file a motion to transfer any other prior or subsequent legal proceeding concerning the juvenile (e.g., if a relative of the child taken into custody attempts to obtain guardianship or custody of the juvenile) to the court that is hearing the dependency-neglect petition if the Division:

a) Takes a 72-hour hold; or,
b) Files a petition for ex parte emergency order; or,
c) Files a petition for dependency-neglect.

See Procedure II-D11: Protective Custody of a Child in Immediate Danger for information regarding how to proceed when a child is taken into protective custody by a non-DCFS stakeholder.

Investigation Risk Assessment

The Investigation Risk Assessment is the third component of the Health and Safety Assessment. It is designed to:

A. Assess the family's level of risk during the child maltreatment investigation.
B. Establish a baseline level of risk for a family.
C. Identify the factors and circumstances that indicate the child may be at risk of future abuse or neglect.
D. Indicate the necessary level of involvement to assure the child's well-being.
E. Provide a structured decision-making tool in case planning (the investigation risk assessment informs the case plan if a case is opened after the completion of the investigation).

The Investigation Risk Assessment in CHRIS will be completed on all cases with a child maltreatment determination of "True." As such, the Investigation Risk Assessment must be completed by the investigator within 30 calendar days of receipt of the hotline report and must receive supervisory approval within 45 calendar days of receipt of the hotline report.

Levels of risk are classified as intensive, high, moderate, and low. The higher the score, the higher the risk of future harm. The level of risk determined during the Investigation Risk Assessment will be considered the baseline level of risk for any subsequent case that is opened, if applicable.

Overrides to Risk Levels have been established to assist the FSW in ensuring that the level of risk for a case accurately reflects the risk level for the children. A supervisor is allowed to make discretionary policy overrides when a unique circumstance warrants a higher risk level than assigned by the risk level chart.

The discretionary Risk Level Override options are listed below and require the supervisor to upgrade the risk level to Intensive at the initial investigation, regardless of the risk scale score.

A. Sexual abuse cases where the perpetrator is likely to have access to the victim child.
B. Cases with non-accidental physical injury to an infant.
C. Serious non-accidental physical injury requiring hospital or medical treatment.
D. Death (previous or current) of a sibling as a result of abuse or neglect.

Risk Level Overrides must be reassessed when the case plan is updated.

RIGHTS OF INVESTIGATOR

The investigator has the right to obtain a criminal background check, including a fingerprint-based check in any national crime database, on any subject of the report. The results of the criminal background check will not be disclosed outside of the Department except as permitted under A.C.A. §12-18-612.

In accordance with A.C.A. § 12-18-613, on request by the investigating agency, any school, child care center, child care facility, residential facility, residential treatment facility, or similar institution shall provide the investigator with the name, date of birth, Social Security number, and last known address and phone number of any alleged offender if the alleged maltreatment occurred at that school, center, or facility. Any school, child care facility, residential facility, or similar institution shall also provide the person conducting the investigation with the name and address of any witness to the alleged child maltreatment if the alleged child maltreatment occurred at that school, center, or facility.

The FSW or CACD Investigator conducting the child maltreatment investigation also has the right to enter into the home, school, or other place for the purpose of conducting an interview or completing the investigation. The investigator also has the right to request accompaniment by a law enforcement agent while conducting the investigation. If the investigator is denied access into the home, school, or other place for investigative purposes, then the investigator must prepare an affidavit to submit to OCC in order to request an Order of Investigation. If the investigator is denied access into the home, school, or other place and has reason to believe a child's health or safety are in immediate danger, the investigator will call local law enforcement immediately (if not already accompanied by LLE) in order to help gain access into the home.

No publicly supported school, facility, or institution may deny access to any person conducting a child maltreatment investigation. DCFS, CACD, and law enforcement shall be allowed access to the child's public and private school records during the course of the child maltreatment investigation. School district staff shall not provide notification if a request is made to interview a student during the course of an investigation of suspected child maltreatment and a parent, guardian, custodian, or person standing in place of a child's parent is named as an alleged offender and the interviewer requests that the school personnel does not make said notification.

Per A.C.A. § 12-18-604, DHS may petition a circuit court to allow an investigator to access the controlled substance database if the investigator demonstrates probable cause that the alleged offender has one or more prescription drugs, and the baby or the alleged offender tested positive for prescription drugs at the time of the birth of the baby.

The investigator will have the discretion, in the child's best interest, to limit the persons allowed to be present when a child is being interviewed concerning an allegation of child maltreatment. The investigator will determine when a child or any other children residing in the home should be referred to a physician, psychologist, or psychiatrist for a medical or psychological examination. While DCFS staff may conduct drug screens on teenagers when necessary, all children younger than 13 should be referred to a physician or medical facility for drug screening if needed.

DCFS will fully cooperate and participate in multidisciplinary child maltreatment response teams. All information except the name of the reporter may be disclosed to the teams.

INTERPRETER SERVICES

At any point during the course of a child maltreatment investigation, when the person being interviewed cannot clearly communicate in English, the investigator shall arrange for an interpreter before continuing the interview. The interpreter must be trained and appropriately certified to translate the specific language needed.

If at any point during the course of a child maltreatment investigation, the investigator cannot determine whether the person being interviewed can clearly and effectively communicate in English, the interviewer shall end the interview. The interview shall recommence when a determination is made that the person can or cannot clearly communicate in English, and when necessary, a translator certified to translate the specific language has been obtained to facilitate clear communication. Family members should never serve as interpreters for an investigator conducting an interview.

If any delay in obtaining investigation or investigative information from having to make a determination about language and clear communication results in or creates a situation in which the alleged victim child's health or physical well-being will be put in immediate danger, the child will be placed in 72-hour protective custody.

INVESTIGATION COMPLETION TIMEFRAMES AND EXTENSIONS

Regardless of whether the child maltreatment investigation is conducted by DCFS, CACD, or local law enforcement, the supervisor approved investigative determination shall be made within 45 calendar days.

The Area Director or designee may request an extension of an additional 15 calendar days (for a total investigative timeframe of 60 calendar days) to complete the investigation and make a determination if good cause for the requested extension is shown. Circumstances that meet the definition of good cause, as it pertains to requesting and granting a 15-day extension to make an investigative determination, include but are not limited to:

- **A. The Prosecuting Attorney or law enforcement officials have requested that DCFS postpone the determination due to a pending criminal investigation;**
- **B. Medical, crime lab, or autopsy reports needed to make a determination have not been received;**
- **C. The report involves some out-of-state subjects and interview write-ups have not been received;**
- **D. Conflicting medical opinions have been received, requiring further analysis; or,**
- **E. Multiple alleged offenders or victims are involved, requiring additional time to conduct interviews and gather evidence.**

Documentation supporting the request for the extension must be submitted with the request.

All extension requests must be submitted to and approved by the Assistant Director of Community Services or designee.

INVESTIGATION CLOSURES AND DETERMINATIONS AND RESULTING REFERRALS AND CASE OPENINGS
Within the appropriate timeframes outlined above and utilizing PUB-357: Child Maltreatment Assessment Protocol as a guide where applicable, the Department will either:

- **A. Administratively close an investigation of a child maltreatment report pursuant to A.C.A. §12-18-601 without a determination of whether the allegation is unsubstantiated, true, true but exempted, or inactive (see Procedure II-D14 for administrative closure criteria and related requirements); or**
- **B. Close the investigation with a determination that the allegations of child maltreatment are either:**
  - **1) Unsubstantiated; or**
  - **2) True; or**
  - **3) True but exempted for:**
    - **1) Neglect as defined by A.C.A. § 12-18-103(14)(B) (i.e, Garrett's Law)**
    - **2) Religious beliefs**
    - **3) Underaged juvenile offenders; or,**
  - **4) Inactive.**

Criteria for the administratively closed investigations and child maltreatment determinations are as follows:

Administratively Closed
A child maltreatment investigation will be administratively closed without further action or determination if:

- **A. A preliminary investigation has been completed, to include:**
  - **1) Interview with the alleged victim outside the presence of the alleged offender.**
  - **2) Assessment of the alleged victim's home environment, as appropriate.**
  - **3) Interview of a collateral witness;**
  - **4) Review prior history of child maltreatment related to the family of the child and to the alleged offender.**
- **B. There has not been an additional report of abuse or neglect that has been committed by the alleged offender who is the subject of the current report; and,**
- **C. The health and safety of the child can be assured without further investigation by DCFS based on review of prior child maltreatment history;**
- **D. There is a determination that abuse or neglect of the child did not occur; and at least one of the following criteria are met:**
  - **1) There are indications of malicious reporting; or,**
  - **2) Details of the allegations are insufficient to investigate; or,**
  - **3) Reporter was anonymous, and no evidence exists to corroborate the report; or,**
  - **4) There is no available evidence to support or refute the allegation(s) due to the passage of time between the alleged occurrence of the maltreatment and the time the report was made; and,**

The DCFS Director or designee approves the administrative closure of an investigation conducted by DCFS.
The criteria for each of these determinations are as follows:

Unsubstantiated Determination
A child maltreatment investigation will be determined unsubstantiated in the event that:

- **A. The allegation of child maltreatment is not supported by a preponderance of the evidence following an investigation by Division staff.**
- **B. The investigation concludes the injuries were the result of reasonable and moderate physical discipline inflicted by a parent or guardian for the purpose of restraining or correcting the child.**

True Determination
A child maltreatment investigation will be determined true in the event of:

- **A. An admission of the fact of maltreatment by persons responsible;**
- **B. An adjudication of dependency-neglect;**

C. A determination of the existence of maltreatment by Division staff, based on a preponderance of the evidence;
D. A medical diagnosis of failure to thrive. The Family Service Worker should, however, complete the Child Maltreatment Investigation in accordance with the procedures included to determine the identity of the caretaker and to conduct an investigation of the family for the purposes of determining appropriate service delivery;
E. Any other medical or legal form of confirmation deemed valid by the Division.

If a report is determined to be true, the names and conditions of any minor children of the alleged offender, and whether these children have been maltreated, or are at risk of maltreatment, will also be determined unless the investigating agency has determined that there is no indication of risk to the children. If the report is determined to be true, and is a report of sexual abuse, sexual contact, or sexual exploitation, an assessment of any other children previously or currently under care of the alleged offender, to the extent practical, and whether these children have been maltreated, or are at risk of maltreatment, will be conducted unless the investigating agency has determined that there is no indication of risk to the children. The worker conducting the investigation shall also seek to ascertain all other relevant data.

If a report is determined to be true and involves any children under the age of three, those children must be referred to the Division of Developmental Disabilities Children's Services for an early intervention screening per the Child Abuse and Prevention Treatment Act (CAPTA) if the children were not already referred during the course of the investigation (see Policy II-I: Early Intervention Referrals and Services and related procedures for more information).

If a report of sexual abuse is determined to be true and the alleged offender is under the age of 18 at the time the act or omission occurred, the parents or legal guardians of the alleged juvenile or underaged juvenile offender and victim shall be provided with a list of mental health professionals or agencies available to evaluate and treat the alleged juvenile offender or underaged juvenile offender and victim, if necessary. Providing this information does not necessarily require the Division to pay for the mental health evaluation or any subsequent mental health treatment or services.

If a child maltreatment report is determined to be true, the Division will then also determine the risk level of the offender and any vulnerable population to which the offender may pose a risk of maltreatment, including without limitation children, the elderly, persons with a disability, and persons with a mental health illness. The following factors will be considered when determining whether an offender poses a risk of maltreatment to a vulnerable population:

A. The severity of the child maltreatment;
B. The nature and severity of an injury or other adverse impact caused by the child maltreatment;
C. The current or future access the offender has or could have to a vulnerable population;
D. Offender's previous child maltreatment history and whether there are similar fact patterns related to current offense and past child maltreatment history;
E. Subsequent reports of child maltreatment against the offender;
F. Criminal history of the offender; and,
G. Risk assessment tool rating.

If the Division determines the offender poses a risk to a vulnerable population, the investigative determination will continue to be documented as True, and the offender's name will be placed in the Child Maltreatment Central Registry. If the Division determines the offender does not pose a risk to a vulnerable population, the investigation determination will be documented in CHRIS as Exempted-No Risk. The DCFS Director or designee will approve determinations for true but exempted for no risk to vulnerable populations.

True but Exempted Determination

A determination of true but exempted, which means the offender's name will not be placed in the Child Maltreatment Central Registry, will be entered for the reasons listed below. The following circumstances do not require a consideration of the risk level of the offender and any vulnerable population to which the offender may pose a risk of maltreatment as these conditions warrant a determination of True But Exempted pursuant to A.C.A. § 12-18-702. The Division may open a protective services case (i.e., in home or foster care as appropriate based on the dynamics of a particular family) for any investigative determination of true but exempted.

Garrett's Law Exemptions

A child maltreatment investigation that documents the presence of an illegal substance in either the bodily fluids or bodily substances in the mother or child at the time of birth resulting from the mother knowingly using any illegal substance (i.e., Garrett's Law case) will be found true but exempted and will not be placed on the child maltreatment registry. A protective services case shall be opened to establish a plan of safe care.

If the FSW determines on an individual basis the child's health or physical well-being is in immediate danger, he or she should take the newborn into protective custody. The FSW must also assess any siblings of the newborn or other children under the care of the alleged offender. If it is determined that there is an immediate danger to the siblings' (or any other children under the care of the alleged offender) health or physical well-being, then they must also be brought into emergency 72-hour protective custody.

"Acceptable" reporters include any one of the following mandated reporters, who have reasonable cause to suspect that a newborn has been subjected to an illegal substance before birth or the mother had an illegal substance in her bodily fluids or bodily substances at the time of the birth:

- **licensed nurse;**
- **osteopath;**
- **physician;**
- **medical resident or intern;**
- **surgeon;**
- **hospital social worker;**
- **or, any medical personnel who may be engaged in the admission, examination, care or treatment of persons in hospitals or similar medical settings.**

During the course of an investigation, or when DCFS has custody, if the mother or newborn has tested positive for the presence of an illegal substance in the bodily fluids or bodily substances, and the mother indicates that she wants to place the newborn for adoption through a private agency or private entity, the Family Service Worker must contact OCC immediately. If the infant is placed with a private adoption agency, then do not open a Protective Services case.

Religious Belief Exemptions

A child maltreatment investigation will be determined to be true but exempted due to religious beliefs exemption in the event that the Family Service Worker (FSW) determines that the parent's decision to withhold medical treatment was based solely upon a religious belief, choosing instead to furnish the child with prayer and spiritual treatment in accordance with a recognized religious method of healing by an accredited practitioner.

An FSW will place a child whose health or physical well-being is in immediate danger in a safe environment in DHS custody regardless of the beliefs of the parents. The religious exemption does not preclude the FSW's right and responsibility to take appropriate action, including petitions to the court, to obtain necessary medical services.

Underaged Juvenile Offender Exemptions

A child maltreatment investigation will have an individual finding of true but exempted for underaged juvenile offenders if there is an overall true finding of sexual abuse by a child under the age of 14 to another child.

Juvenile is Less than Fourteen Years of Age Exemption
A child maltreatment investigation will have an individual finding of true but exempted if an offender is a juvenile less than fourteen years of age.

Inactive Determination
Per A.C.A. § 12-18-619, a Child Maltreatment Investigation will be determined inactive if at any time before or during the investigation the Department is unable to locate or identify the alleged offender because the alleged child maltreatment occurred:

A. More than 5 years ago; or,
B. In another state.

Failure to complete the investigation within the required 45 days is NOT a reason to place a case on inactive status. The report MUST document why the investigation could not be completed. A case will remain on inactive status for one year, at which time it will be expunged.

INVESTIGATIVE DETERMINATION NOTICES
The Division Children and Family Services Central Office Notifications Unit will issue notices regarding the child maltreatment investigative determination whether true or unsubstantiated to all persons pursuant to A.C.A. § 12-18-703 et seq. The Division will issue notices in such a way as to ensure the rights to due process of the alleged offender and to protect others who may be at risk of harm from the alleged offender (see Policy XIV-A: Notices Regarding Child Maltreatment and related procedures for more information and specific instructions). The Central Office Notifications Unit will also handle all notices related to administrative hearing decisions and placement on the Child Maltreatment Central Registry.

PROCEDURE II-D1: Assignment of Child Abuse Hotline Investigation Reports

01/2020

The FSW Supervisor or designee will:

A. Assign the report to a Family Service Worker(s) or a Unit Group, as applicable, who will conduct the investigation when a report is received in the CHRIS county in-box.

PROCEDURE II-D2: Preparation for Investigation Initiation

01/2020

The FSW will:

A. Conduct a CHRIS history search prior to initiation of investigation unless the report is received after hours or during the weekend or a holiday.
B. If the reporter is named in the report, attempt to contact the reporter to gain additional information regarding the allegation prior to initiation unless the report is received after hours (inability to reach the reporter shall not prevent the investigator from initiating the investigation).
C. Make immediate telephone notification to the Prosecuting Attorney and law enforcement on Priority I reports.

PROCEDURE II-D3: Investigation Initiation

01/2020

The FSW will:

A. Initiate the child maltreatment investigation:
   1) Immediately and no later than 24 hours after receipt of a report from the Child Abuse Hotline for Priority I allegations, excluding an allegation of sexual abuse if the most recent allegation of sexual abuse was more than one year ago or the alleged victim does not currently have contact with the alleged offender
   2) Immediately and no later than 24 hours after receipt of a report from the Child Abuse Hotline for allegations that a child has been subjected to neglect as defined by Garrett's Law § 12-18-103(14)(B).
   3) Within 72 hours of receipt of all other reports (i.e., Priority II allegations that are not diverted to the Differential Response pathway) from the Child Abuse Hotline.
B. Consider the investigation initiated:
   1) By interviewing or observing, when appropriate, the alleged victim child outside the presence of the alleged offender; or,
   2) If after exercising and documenting due diligence, an interview or examination of the child could not be made. Due diligence includes, but is not limited to:
      a) Making an unannounced visit to the child's home at least three (3) times at different times of the day or on different days (provided the three visits are within the appropriate investigation initiation timeframes) in an attempt to interview the child;
      b) Contacting the reporter again if the reporter is known;
      c) Visiting or contacting the child's school, child care facility, and all other places where the child is said to be located;
      d) Sending a certified letter to the location given by the reporter, if attempts to locate the child have failed;
      e) Contacting appropriate local Division of County Operations staff and requesting research of the AASIS and ANSWER systems and other files to obtain another address.
C. Document initiation activities within two business days.
D. Submit the record to the supervisor for approval of due diligence to locate and interview the child after all these efforts have been made.
E. Document initiation activities within two business days.

The FSW Supervisor will:

A. Conduct a supervisory conference with investigator within 72 hours of investigator initiating the investigation.

PROCEDURE II-D4: Child Maltreatment Report Investigation Interviews

01/2020

The FSW will:

A. Prepare for interviews by reviewing intake report and any prior child maltreatment reports, etc. See "Gathering Information" practice guide series for more information.
B. Conduct a separate interview with the alleged victim outside the presence of the alleged offender and the alleged offender's attorney in reports involving both in-home and out-of-home offenders. Exceptions must be approved by a supervisor.
   1) If not age appropriate for an interview, observe alleged victim outside the presence of the alleged offender and the alleged offender's attorney.

C. Interview any siblings of the alleged victim and any other children under the care of the alleged offender (including during investigations with alleged out-of-home offenders) as the siblings and other children under the care of the alleged offender may have collateral information or have been within access of the alleged offender. Exceptions must be approved by a supervisor.
   1) Interview all siblings and other children under the care of the alleged offender outside the presence of the alleged offender and the alleged offender's attorney.
      a) If not age appropriate for an interview, observe all siblings and other children under the care of the alleged offender outside the presence of the alleged offender and the offender's attorney.
   2) Considering the best interest of the child, limit, as appropriate, other persons allowed to be present when a child is interviewed concerning allegations of child maltreatment.
D. Conduct a cursory physical examination of children in the least invasive manner possible during the interview. A cursory physical examination is the observation of a child's external, physical condition which may require that the child's clothing be removed or rearranged.
   1) If the child is under the age of five (5), conduct the exam with the assistance of the parent/caretaker.
E. Complete CFS-327a: Physical Documentation--Body Diagram when applicable and if a medical provider has not already completed CFS-327-A *or* similar diagram specific to the current allegation.
F. Photograph visible injuries; label and date photos.
G. Interview the custodial and non-custodial parent of the alleged victim child and inform them of DCFS responsibility to assess.
H. Interview alleged offender.
   1) In addition to gathering information about the alleged maltreatment, ascertain the alleged offender's:
      a) Employer, including the physical address;
      b) Job duties at place of employment; and,
      c) Supervisor's name.
I. Interview collateral sources, as appropriate, including teachers, neighbors, witnesses, and the person making the report.
J. When interviewing a child at school, provide the principal or designee with a copy of CFS-213-A: School District Prohibition from Notifying Parent, Guardian, or Custodian of a Child Maltreatment Investigation.
K. Enter interview notes within 48 hours of completion of interviews.
L. If it is discovered that any interviewee is an unlicensed child care provider (i.e., caring for more than five children including an individual's own pre-school children), notify the Division of Child Care and Early Childhood Education.
M. Assist the investigative supervisor with the coordination of interviews when primary (i.e., where the child is currently located) and secondary counties are involved.
   1) The FSW of the primary county will:
      a) Interview all applicable subjects in his or her county within required timeframes;
      b) Complete the Health and Safety Assessment (including Health and Safety Checklist, Safety Planning, and Investigation Risk Assessment) in CHRIS with information obtained during primary investigator interviews and information obtained from secondary investigator from secondary's interviews.
   2) The FSW of the secondary county will:
      a) Contact the primary county by phone no later than 24 hours after interviews are conducted to discuss:
         i. Any identified safety factors and supporting documentation (e.g., statements made by children, observations of children, caregiver statements, etc.);
         ii. Determination of any additional children, elderly persons, or individuals with a disability or mental illness who may be at risk;
         iii. Provisions of the protection plan if one has been implemented;
         iv. Other persons interviewed, their relationship to the family and how information provided was obtained (e.g., first-hand, hearsay, investigator observations, etc.);

v. Verification of identity of persons interviewed;
vi. Projected completion date for secondary investigation if it is not completed at time of phone conference.

b) Forward any hard copy information to the primary investigator within 72 hours after receipt.

N. Reinitiate the investigation in the second county within 24-72 hours when an investigation is transferred from one county to another and the victim or any other children believed to reside in the home where the report originated have not been seen (see PUB-357: Child Maltreatment Investigation Protocol for more information).

O. Complete and document all interviews within 30 calendar days of the receipt of the child maltreatment report.

If any parties required to be interviewed (parents, children, alleged victim child, or alleged perpetrator) cannot be located or are unable to communicate, the FSW will, after exercising due diligence, document efforts to locate or communicate with required parties and proceed with the child maltreatment investigation.

The Investigative Supervisor will:

A. Take the lead in coordinating the investigation when multiple counties are involved;
   1) If a secondary assignment is required, complete as soon as possible but no later than 24 hours after receipt of referral the summary section in the CHRIS assignment screens describing:
      a) the reason(s) for the request;
      b) any special instructions;
      c) updated locations and telephone numbers of subjects to be seen.
   2) Forward the request to the appropriate investigative team.
   3) Verbally alert the receiving team supervisor of the secondary investigation request to:
      a) Verify receipt of report when a secondary team investigator will initiate the investigations;
      b) Clarify any issues involving the secondary investigation request;
      c) Coordinate team responsibilities with the Prosecuting Attorney, law enforcement, and hospital staff, as applicable.

B. Participate in phone conferences with primary and secondary investigators and any other staff involved in the investigation, as applicable.

C. Conference with the FSW investigator and any other staff involved from other counties as appropriate and document any consultations in CHRIS.

D. Ensure that counties otherwise communicate and complete the investigation within 45 calendar days.

PROCEDURE II-D5: Discovery of New Victims or Allegations in an Ongoing Investigation

01/2020

When at any point during the course of an ongoing investigation the FSW investigator discovers new victims or new allegations of child maltreatment, the following actions will be taken:

The FSW Investigator will:

A. Call the Child Abuse Hotline to report the new allegation only under the following conditions:
   1) The existing allegation is a Priority II and the new allegation is a Priority I.
   2) The new allegation involves an alleged offender outside of the home.

   Otherwise, any other new allegation(s) should be added to the investigator's existing report.

B. Update the information in "Collected During Investigation" in the "Abuse/Neglect" screen in CHRIS.

C. Update the "Abuse/Neglect" screen with the addition of the new allegations or new victims, as applicable.

D. When there is a new victim, change the role of the child from "non-victim" to "victim" in the "Role in Referral" in each child's "General Information" screen in CHRIS.

E. Document the additional information and the date the update was made on the "Notes" screen in the investigation.

PROCEDURE II-D6: Medical/Psychological Evaluation Required During Investigation

08/2013

The FSW Investigator will:

A. Confer with the supervisor concerning a complete examination/evaluation by a mental health professional if a child has one of the following:
   1) Impairment of the intellectual, emotional, or psychological development as evidenced by observable and substantial reduction in the child's ability to function within a normal range of performance and behavior.
   2) Suffered a substantial impairment in the ability to function as a result of a specific, non-accidental action or interaction committed by a parent or caretaker.
B. Refer for a medical examination or consultation with a physician in the following cases unless the Area Director allows an exception:
   1) Burns, fractures or dislocations in children under three years of age;
   2) Burns, fractures or dislocations in children of any age if unexplained or implausibly explained;
   3) Burns, bruises, or fractures in non-ambulatory children;
   4) Reasonable suspicion that vaginal or oral penetration has occurred;
   5) Cases involving sexually transmitted diseases in prepubescent children;
   6) Cases of malnutrition and failure to thrive;
   7) Cases of serious medical neglect;
   8) Cases of alleged head and abdominal injuries (regardless of presence of visible injury);
   9) Reports in which the child has an observable injury, the caretaker admits responsibility for the injury and there is reason to believe that there are internal injuries or other injuries which have occurred in the past.
C. Involve the parent, legal guardian, or legal custodian of the child whenever possible, if during the investigation, a medical examination is needed to determine the existence of abuse or neglect.
D. Verify that the parent, legal guardian, or legal custodian has exhausted all other resources before requesting DHS funds for payment.
E. Consider the following, listed in order of preference, in all cases in which a medical examination is required:
   1) Have the child examined at a Child Safety Center when available and appropriate (i.e., consider distance of Child Safety Center, whether nearest Child Safety Center has medical services on site, and if the investigation is regarding a report of alleged sexual abuse or alleged severe maltreatment).
   2) Have the child examined by the child's Primary Care Physician (PCP).
   3) Have the child examined by a pediatrician if the PCP is unavailable. The investigator must advise the pediatrician whether the PCP, although not physically available, is available by telephone for consultation.
   4) Take the child to the emergency room of the nearest hospital.

The physical examination of children alleged to be sexually abused must be conducted by a physician or other medical personnel, not the investigator.

PROCEDURE II-D7: Other Child Maltreatment Investigation Actions

08/2013

The FSW Investigator will:

A. Use CFS-317: Off-Site Worker's Safety Log during the child maltreatment investigation for all off-site visits away from his/her primary work site.
    1) If worker will return to the primary work site more than one hour after the initial "Planned Return Date/Time," he/she will contact his/her immediate supervisor or designee with a revised anticipated return date/time.
B. Give the family and alleged offender (if alleged offender resides outside of the home) PUB-52: Child Protective Services—A Caretaker's Guide during the first contact and explain, as appropriate, to help the family/alleged offender understand its contents.
C. Conduct a home visit to assess the safety, risk, and protective factors of the environment where the child resides and determine the names and conditions of other children in the home. The home visit may or may not be conducted during the course of interviews with the alleged victim; however, anytime there is an open investigation involving a child in the hospital (e.g., Garrett's Law report, child admitted to hospital for injuries or other health issues associated with child abuse or neglect), a home visit will be conducted prior to the child being discharged from the hospital.
D. Contact the DHS attorney to petition the court for an ex parte order of investigation to allow access if the parents, caretakers, or others deny access to any place where the child may be.
E. Exercise due diligence in locating the non-custodial parent of the victim child. Examples of due diligence include, but are not limited to, seeking information from relatives or using information from the alleged victim child's birth certificate to identify and locate the non-custodial parent.
F. Document all efforts at reasonable diligence, if unable to locate the non-custodial parent to ensure completion of the investigation within 30 calendar days.
G. Make notifications of child maltreatment allegations to the appropriate parties according to Procedure XIV-A1.
H. Obtain X-rays, photographs, radiology procedures, drug test results, medical records, other pertinent records (e.g., school records, or videos from mandated reporters).
I. If at any time it is determined that the alleged offender is not a caretaker of the alleged victim child, excluding investigations of sexual abuse:
    1) Refer the matter to the appropriate law enforcement agency via CFS-321: Referral for Investigation.
    2) Close the investigation.
    3) Forward a copy of the findings to the appropriate law enforcement agency for the agency's use in any criminal investigation.
    4) Reopen and continue the investigation IF the appropriate law enforcement agency subsequently determines that the alleged offender is a caretaker and notifies the Division of its determination.
J. If the family moves to another county before the investigation is complete, notify other county supervisor and request a transfer to that county inbox.
K. If the family moves to another state, notify that state's Child Protective Services Division and follow instructions from that state.
L. Ensure that all the information gathered during the investigation is contained within the DCFS file whether or not the information supports the investigative determination.
M. Key all screens in the "Investigation" section of CHRIS including screens listed under the "Interview" and "Client" sections within 30 days of receipt of the hotline report.
N. Complete and print CFS-6003: Report to Prosecuting Attorney within 30 days of the initial report of severe maltreatment (Priority I reports) and send to Prosecuting Attorney and law enforcement unless the Prosecuting Attorney and/or law enforcement has provided written notice to the Division that the Division does not need to provide notice of the investigative determination.

The FSW Supervisor will:

A. If the family moves to another county before the investigation is complete, transfer investigation to the new county inbox upon receiving notification from the FSW/CACD investigator of the move.

B. Conduct a supervisory conference with the investigator 14 days following receipt of report (or the next business day) to assess progress of the investigation up to that point.
C. In addition to 14-day supervisory conference, discuss investigation with the investigator as appropriate/needed throughout the investigation.
D. Complete CFS-299: Investigation Checklist for Supervisors throughout the course of the investigation.
E. Make entries on the "Inv. Notes" as the investigation is conducted (e.g., documentation of supervisory conferences with investigator).

PROCEDURE II-D8: Health & Safety Checklist

01/2019

The FSW Investigator or the (CACD) Investigator (depending on which agency is assigned as primary) will:

A. Identify any safety factors that may contribute to the immediate danger of the child's health or physical well-being.
    1) If CACD is assigned primary and after interviewing the alleged victim identifies one or more safety factors, contact the DCFS supervisor or designee immediately to conduct a Health and Safety Assessment (i.e., Safety Planning and Investigative Risk Assessment).
        a) If after completing the Health and Safety Assessment as requested by CACD, the FSW Investigator assesses that there is not a safety factor involved, the FSW Investigator will:
            i. Document in an investigation contact why the FSW Investigator determined there was not a safety factor and, as such, why the FSW Investigator did not select to implement a protection plan or remove the child.
            ii. Communicate with the CACD Investigator regarding both the CACD initiation and the DCFS safety assessment including why the FSW Investigator determined there was not a safety factor present.
            iii. Document the communication between CACD and DCFS in an investigations contact.
B. Complete the Health and Safety Checklist for each child in the family by identifying the presence or absence of any safety factors by checking "yes" or "no", respectively within two business days.
C. Provide narrative documentation on the Health and Safety Checklist for each safety factor identified.

In cases involving CACD as primary and DCFS as secondary, both agencies will collaborate to ensure that DCFS has all relevant information needed to conduct the Health and Safety Assessment (i.e., Safety Planning and Investigation Risk Assessment; see Procedures II-D9 and II-D10, respectively, for more information).

PROCEDURE II-D9: Safety Planning

01/2019

The FSW investigator will:

A. Make the appropriate child protecting decisions if the child's health or physical well-being are in immediate danger.
B. If a safety factor is not identified on the Health and Safety Checklist, but it is determined that services or other actions can be put in place to address risk factors or otherwise strengthen the family during the course of the investigation:
    1) Implement the services or other actions accordingly.
    2) Document services provided or other actions taken in the Service Log and investigation contact screen in CHRIS.
        a) If all of the statements on the Health and Safety Checklist screen are selected "no," then the default decision on the Safety Planning screen will be "safe" indicating that there are no

children whose health or physical well-being are likely to be in immediate danger. As such, the FSW will not have to enter any information in the Safety Planning screen.

C. If a safety factor(s) is/are identified, establish the appropriate protecting intervention for each identified safety factor.
   1) If a protection plan can be put into place to mitigate the identified safety factor(s):
      a) Determine the suitability of the person or persons responsible for carrying out the protection actions by assuring that those persons:
         i. Are present and participate in the development of the protection plan;
         ii. Are fully informed about the safety factors and concerns;
         iii. Understand and accept their responsibility to protect the child;
         iv. Accept and believe that the safety factors and potential dangers exist;
         v. Are available in terms of time and accessibility;
         vi. Are aligned with and responsive to DCFS;
         vii. Are trustworthy, dependable and have no substance use, mental health issues, or other major life issues that may prevent them from meeting their responsibilities in the plan; and,
         viii. Provide a home that is suitable and safe if the child will be staying there.
      b) Assure that the protection plan is sufficient to manage and control identified safety factors and prevent subsequent dangers to the child by meeting the following criteria:
         i. Does not rely on promises from caregivers or court orders prohibiting behaviors;
         ii. Focuses on enhancing caregiver protective capacities as the highest priority for change;
         iii. Includes immediate supports and/or services that have an impact on controlling identified safety factors;
         iv. Is individualized to the needs and dynamics of the family and the specific safety factor(s) identified;
         v. Has a mechanism for ongoing oversight and monitoring by the FSW that allows FSW to provide feedback to the family and problem solve with the family as needed; and,
         vi. Is time limited noting when each activity must be completed or in place and when the plan should expire.
      c) If applicable, inform the non-offending caretaker of the right to file a petition in accordance with the "Domestic Abuse Act," Ark. Code Ann. § 9-15-101 et seq. in Circuit Court to have the offender removed from the home as part of the protection plan.
      d) Before leaving the home, obtain supervisory approval of the protection plan developed with the family.
      e) Provide a copy of the protection plan with the family via CFS-200: Protection Plan before leaving the home.
      f) Refer the family to the local TDM Facilitator for a Team Decision Making (TDM) meeting within two hours of putting a protection plan in place, if applicable (i.e., if working in a county in which TDM has been implemented; see Policy II-F: Team Decision Making for more information).
         i. If a TDM Meeting will be held regarding the protection plan, and it is determined a petition for dependency-neglect is needed in association with the protection plan, then the affidavit (to include information from the TDM Meeting Summary Report) must be submitted to the local OCC attorney in order to file the petition with the court within two business days following the TDM Meeting.
      g) Document the protection plan in CHRIS on the Safety Planning screen and otherwise complete the Safety Planning screen in CHRIS for any safety factors that have been identified within two business days of investigation initiation.

h) For investigations remaining open longer than 30 days, formally reassess the health and safety of the child within thirty (30) days of the date on which the protection plan was implemented;
   i. If the formal reassessment determines that a substantial risk of harm to the health and safety of the child remains, then submit the affidavit and a copy of the CFS-200: Protection Plan to OCC to file a petition for dependency-neglect.

i) If at any point a petition for dependency-neglect is filed in relation to a protection plan, then within five days of the petition being filed, accompany the assigned FSW caseworker to the family's home to begin the Family Advocacy Support Tool (FAST) assessment.

2) If a protection plan cannot be put into place to mitigate the identified safety factor(s), then the children must be removed from the home and placed in an approved placement.

3) For all safety factors with a "yes" response, there should be corresponding documentation in the Safety Planning screen indicating if:
   a) A written, supervisor-approved protection plan was developed with and provided to the family via CFS-200: Protection Plan thereby allowing the child to remain safely in the home (select the appropriate radio button on the first question in the Safety Planning screen);
      i. The safety decision on the Safety Planning screen will then be "Conditionally Safe," meaning a protection plan has been implemented and interventions outlined in the protection plan have resolved the unsafe situation for the present time.
   b) The child was removed from the home.
      i. The safety decision on the Safety Planning screen will then be *"Unsafe"* meaning a protection plan could not be established so removal is the only protecting intervention for the children (i.e., without it, the children's health or physical well-being are likely to be in immediate danger).

D. Document in CHRIS all other FSW activities, services, and/or contacts associated with the investigation.

E. Monitor family's implementation of Protection Plan, if one has been put in place, via face-to-face contact with family within at least 72 hours and a minimum of weekly face-to-face contact while the plan continues to be necessary to protect the health and safety of the juvenile.

F. If during the course of an investigation a protection plan is put into place by DCFS, but the investigation is ultimately unsubstantiated and/or the court dismisses the petition associated with the protection plan, the FSW investigator will ensure the protection plan is reassessed with the family and communicates with other involved DCFS staff as applicable.

Note: While a protection plan must be developed during the course of an investigation if a safety factor is identified and the child is to be left in the home, protection plans will also be amended as necessary and/or developed after a protective services case is opened if a safety factor is identified.

The FSW Supervisor will:

A. Conference with the FSW investigator regarding the protection plan as needed.

B. Approve the protection plan, as appropriate, prior to the FSW investigator leaving the home.

C. Communicate as necessary with other DCFS staff to ensure an FSW caseworker is assigned to families for whom a protection plan has been implemented that has an accompanying court order for dependency-neglect.

D. Approve the Safety Planning screen as appropriate within 45 days of receipt of the hotline report.

E. Communicate as necessary with DCFS staff to ensure that the protection plan is formally reassessed at thirty (30) days, and, if needed due to a substantial risk of harm to the child's health and safety remaining, a petition for dependency-neglect is filed.

When a protection plan that has an accompanying dependency-neglect petition filed with the court has been put into place, the assigned FSW caseworker will:

A. Accompany the FSW investigator to the family's home within five days of the filing of the petition to begin completing the Family Advocacy Support Tool with the family and FSW Investigator.
B. Ensure other appropriate stakeholders provide input when completing the FAST (see Policy IV-A: Family Assessments for more information).
C. Develop a case plan with the family based on the ratings of the FAST (see Policy IV-B: Services Case Plan for more information (within 30 days of the dependency-neglect petition being filed.
D. Update CHRIS contacts as needed.

PROCEDURE II-D10: Investigation Risk Assessment

08/2013

The Primary Investigator (including CACD when CACD is primary) will:

A. Complete the Investigation Risk Assessment on each child within 30 days of receipt of the hotline report to help determine the likelihood of future abuse when there is an overall true finding.
B. Complete both the abuse and neglect scale of the "Investigation Risk Assessment" screen in CHRIS for all "True" child maltreatment findings.
C. Establish the level of risk (i.e., intensive, high, moderate, or low).

The FSW Supervisor will:

A. Review the completed Investigation Risk Assessment.
B. Determine if an override is necessary due to a unique circumstance warranting a higher level of risk than assigned by the risk level chart.
    1) Select appropriate policy override action in CHRIS if needed.

PROCEDURE II-D11: Protective Custody of Child in Immediate Danger

01/2020

The FSW Investigator or On-Call Worker will:

A. Take a child into protective custody for up to 72 hours if:
    a) The circumstances present an immediate danger to the child's health or physical well-being; or,
    b) The child is neglected as defined under Garrett's Law pursuant to A.C.A. §12-18-103(14)(B), and the FSW investigator determines that the child and any other children, including siblings, are at substantial risk of serious harm such that the children need to be removed from the custody or care of the parent/legal guardian (see Appendix I: Glossary, for definition of "neglect"); or,
    c) Any child who is dependent as defined at A.C.A. §9-27-301 et. seq. (see Appendix I: Glossary, for definition of "dependent").
B. If a police officer, law enforcement, a juvenile division of circuit court judge during proceedings concerning the child or sibling of the child, a designated employee of the Department of Human Services, any person in charge of a hospital or similar institution, or any physician treating a child has taken a child into protective custody pursuant to A.C.A. §12-18-1001, assume custody of the child and assess the health and safety of each child to determine whether to continue or release custody of the child.
    1) Release custody of a child who is taken into custody pursuant to A.C.A. §12-18-1001 if the FSW Investigator in consultation with his or her supervisor determines that custody is no longer required; and
    2) Notify the circuit court if the department releases custody of a child whom the circuit court has taken into custody.
C. When a child upon whom a 72-hour hold has been placed is currently located in a school, residential facility, hospital, or similar institution, the FSW will notify the institution. The FSW will be aware that the institution is obliged to do the following upon receiving notice, in accordance with A.C.A. §12-18-1005:

1) Retain the child until the Division takes a hold on the child;
2) Not notify the parent until the child has been removed by the Division; and,
3) Provide the parent or guardian with the name and contact information of the Division employee regarding the hold on the child.

D. Notify the OCC attorney immediately that protective custody was exercised and request an ex parte emergency order from the court.

E. If a minor child's safety is a concern, contact OCC immediately to request that DCFS petition the court for an order of less than custody. Thoroughly review the Health and Safety Checklist and Investigation Risk Assessment and ensure that a protection plan is in place for a child before leaving a child in a home where an order of protection has been filed or DCFS has petitioned the court for an order of less than custody.

F. Determine whether to recommend to the court that reunification services should or should not be provided to reunite the child with his family (see Policy VI-A).

G. Determine whether the grandparents have the right to notice and right to be heard. In a child custody or dependency-neglect case, grandparents have this right if all the following conditions are present ("Grandparent does not mean a parent of a putative father of a child for the purpose of this determination):
1) The grandchild resided with the grandparent for at least six consecutive months prior to the child's first birthday or lived with the grandparent for at least one continuous year regardless of age;
2) The grandparent was the primary financial caregiver during the time the child resided with the grandparent; and,
3) The continuous custody occurred within one year of the initiation of the custody proceeding.

H. Provide the OCC attorney with the name and address of any grandparent who is entitled to notice based on the above conditions.

I. Prepare an affidavit immediately and submit it to the OCC attorney (CACD shall prepare affidavits containing facts obtained during the course of their child maltreatment investigation).

J. Arrange for a physician to examine the child thoroughly within 24 hours of removal for allegations of severe maltreatment under A.C.A. §12-18-602 or if the allegation is that a child has been subjected to neglect as defined in A.C.A. §12-18-103(14)(B) (Garrett's Law) and arrange for a physician to examine the child thoroughly within 72 hours of removal for all other children who enter the custody of DHS.
1) The FSW or Health Services Specialist (HSS) must sign the consent for treatment prior to the child receiving medical and dental services during protective custody. The FSW or HSS may:
a) Go to the medical or dental office where treatment is to be provided and sign the consent for treatment forms; or,
b) Have the form faxed, sign the form, and fax it back to the service provider; or,
c) If the provider allows phone consent, they may provide consent via the telephone.

This should be completed prior to the foster parent accompanying the child for treatment. In emergency situations, the on-call FSW will be available to sign for medical or dental treatment.

K. Place the child in an appropriate licensed or approved placement.

L. If a provisional placement will be pursued:
1) Notify the area Resource Worker Supervisor by email within twenty-four hours of removal that children have been removed and a potential provisional placement has been identified.
a) In the notification email provide the area Resource Worker Supervisor with:
i. Names and ages of the children who have been removed;
ii. Name(s)of potential provisional placement;
iii. Relationship of potential provisional placement to children;
iv. Contact information for potential provisional placement;
v. Any other information collected regarding potential provisional placement (see CFS-450: Prospective Provisional Foster Parent Information and Questionnaire for more information).
2) Interview the child(ren), if age appropriate, to assess how the child may feel about placement with a specific relative.

3) See Policy VI-B: Consideration of Relatives for Children in Foster Care for further information on provisional placements.

M. Complete and route CFS-323: Protective Custody/Parental Notification.
N. Open an Out-of-Home Placement case within one business day.
O. Return the child to the legal custodian if the emergency necessitating protective custody passes or if the judge does not grant custody to the Department. Protective custody cannot be extended.
P. Complete the CFS-336: Expiration of Protective Custody/Parental Notification and provide to the parent.
Q. If the parent refuses to accept custody of the child, file an emergency petition.

PROCEDURE II-D12: Using Interpreter Services During an Investigation

01/2020

Both verbal language interpreter services and American Sign Language (ASL) interpreter services are available statewide and require, when possible, a 24-hour notice. Language interpretation may be provided over the phone as well as in person.

Spoken Interpreter Services
The FSW Investigator will:

A. If the service is needed during regular work hours:
   1) Contact the area financial coordinator to request interpreter services if the service is needed during regular work hours.
   2) Provide the financial coordinator with:
      a) Date, time, and location that the service is needed.
      b) The language (including ASL) for which the service is needed.
      c) Whether in person interpretation services or telephonic interpretation services are needed.
      d) Notification if the appointment must be cancelled.
   3) If in person language interpretation is provided:
      a) Sign the service verification form provided by the interpreter after service is rendered. The signature verifies that the service was provided.
      b) Return the signed verification form to the interpreter.
   4) If interpretation services are provided over the phone, there will not be a verification form to sign.
B. If the service is needed after hours or on weekends:
   1) Contact the appropriate vendor directly to schedule the appointment.
   2) Notify the provider if the appointment must be cancelled.
   3) Sign the service verification form provided by the interpreter after service is rendered. The signature verifies that the service was provided.
   4) Return the signed verification form to the interpreter.

The Financial Coordinator will:

A. During regular work hours, contact the vendor and schedule the appointment.

Written Translation Services
DCFS staff member needing the service will:

A. Attain supervisor approval for the translation request.
B. If approval is attained, send document needing translation to the DCFS Community Services designee and Policy Unit designee.
C. Advise Community Services designee and Policy Unit designee of the translated language that is needed.

DCFS Central Office will:

A. Forward the document to the provider for an estimate.

B. Approve or deny the estimate.
C. If estimate approved, sign the estimate document and fax back to the vendor.
D. Forward the translated document to the DCFS staff member who made the request.

PROCEDURE II-D13: Request for Investigative Timeframe Extension

08/2013

If the FSW investigator is unable to make a supervisor approved investigative determination within 45 calendar days of receipt of the child maltreatment report due to good cause, then the FSW investigator will:

A. Conference with his/her supervisor regarding the need for extension.
B. By no later than the 40th day of the investigation, request his/her supervisor to submit the completed CFS-217: Request for Investigation Timeframe Extension via CHRIS.

The FSW Supervisor will:

A. Review and discuss the request and associated investigative file with the investigator within 24 hours of the request.
B. If it is determined that:
    1) An extension is warranted:
        a) Immediately forward the CFS-217: Request for Investigation Timeframe Extension via CHRIS (level 9 security required) and any supporting documentation to the Area Director or designee.
    2) An extension is not warranted:
        a) Deny the request in CHRIS;
        b) Conference with investigator as to how to ensure a supervisor approved investigation determination is made within 45 days of the receipt of the child maltreatment report from the hotline.

The Area Director or designee will:

A. Review and discuss the request and associated investigative file with the investigator within 24 hours of the request.
B. If it is determined that:
    1) An extension is warranted:
        a) Immediately forward the CFS-217: Request for Investigation Timeframe Extension via CHRIS and any supporting documentation to the Assistant Director of Community Services or designee.
    2) An extension is not warranted,
        a) Deny the request in CHRIS:
        b) Conference with FSW Supervisor as to how to ensure a supervisor approved investigation determination is made within 45 days of the receipt of the child maltreatment report from the hotline.

The Assistant Director of Community Services or designee will:

A. Review and respond to any extension request within 24 hours of receipt of request via CHRIS.

PROCEDURE II-D14: Child Maltreatment Investigation Closures and Determinations

02/2020

Within 45 calendar days of receipt of a report from the Child Abuse Hotline (or within 60 calendar days for those investigations for which an extension was granted as outlined above) a child maltreatment investigation will be either administratively closed pursuant to A.C.A. §12-18-601 without a determination, or closed with a determination of either:

A. Unsubstantiated
B. True
C. True but exempted for:
    1) Neglect as defined by A.C.A. § 12-18-103(13)(B) (i.e., Garrett's Law)
    2) Religious beliefs
    3) Underaged juvenile offenders
    4) Juvenile offenders less than fourteen (14) years of age; or,
D. Inactive.

ADMINISTRATIVE CLOSURES

In order to conduct an administrative closure, the FSW will:

A. Initiate the investigation by interviewing the alleged victim outside the presence of the alleged offender.
B. Complete an assessment of the alleged victim's home environment, as appropriate.
C. Interview a collateral witness.
D. Review prior history of child maltreatment related to the family of the child and to the alleged offender.
E. After preliminary investigation steps above have occurred, submit a request for administrative closure if:
    1) There has not been an additional report of abuse or neglect that has been committed by the alleged offender who is the subject of the current report; and,
    2) FSW has determined based on review of prior child maltreatment history that the health and safety of the child can be assured without further investigation by DCFS; and,
    3) FSW determines that abuse or neglect of the child did not occur; and at least one of the following criteria are met:
        a) There are indications of malicious reporting; or,
        b) Details of the allegations are insufficient to investigate; or,
        c) Reporter was anonymous, and no evidence exists to corroborate the report; or,
        d) There is no available evidence to support or refute the allegation(s) due to the passage of time between the alleged occurrence of the maltreatment and the time the report was made.

The FSW Supervisor will:

A. Review the request for administrative closure to ensure:
    1) The victim child was interviewed outside the presence of the alleged offender;
    2) The home environment of the victim child was assessed, as appropriate given the maltreatment allegation; and,
    3) Collateral witness interview(s) occurred.
B. Determine if the request meets criteria for administrative closure and within two (2) business days of receipt:
    1) Submit for three tier closure approval if criteria are met; or,
    2) If criteria for administrative closure are not met:
        a) Deny request for administrative closure; and
        b) Complete a case consultation with FSW to discuss the reasons for denial of administrative closure request and develop a plan for completion of the investigation.

The DCFS Director or designee will:

A. Determine if the request meets criteria for administrative closure within two (2) business days of receipt and:
   1) Approve administrative closure request if criteria have been met; or,
   2) Deny request for administrative closure adding details of denial in the comments section.

EXEMPTED NO RISK SELECTIONS

When considering whether the offender named in an investigation with the determination of true may pose a risk to vulnerable populations, the FSW will:

A. Consider the following factors:
   1) The severity of the child maltreatment;
   2) The nature and severity of an injury or other adverse impact caused by the child maltreatment;
   3) The current or future access the offender has or could have to a vulnerable population;
   4) Offender's previous child maltreatment history and whether there are similar fact patterns related to current offense and past child maltreatment history;
   5) Subsequent reports of child maltreatment against the offender;
   6) Criminal history of the offender; and,
   7) Risk assessment tool rating.
B. Participate in a case consultation with direct supervisor to determine if the offender may pose a risk of maltreatment to a vulnerable population.
C. Enter explanation of risk to a vulnerable population decision in the CHRIS Findings Recommendation Screen.
D. If there is a decision that the offender does not pose a risk to a vulnerable population, select 'Exempt-No Risk' from the findings dropdown menu and submit for 3-tier approval.

When considering whether the offender may pose a risk to vulnerable populations, the FSW Supervisor will:

A. Review 'Exempt-No Risk' selections because the recommendation from the FSW Investigator is that the offender does not pose a risk to a vulnerable population. This will include a review of the narrative in CHRIS Findings Recommendation Screen and associated information in the investigation to ensure appropriate selection has been recommended and:
   1) If approving based on review, submit 'Exempt-No Risk' for third tier approval.
   2) If denying based on review:
      a) Deny request and enter comments regarding the denial in the denial comments; and,
      b) Complete a consultation with FSW regarding denial.

When considering whether the offender may pose a risk to vulnerable populations, the DCFS Director or designee will:

A. Determine if 'Exempt-No Risk' is appropriate based on review of the narrative in the CHRIS Findings Recommendation Screen and associated information in the investigation and:
   1) Approve request if appropriate; or,
   2) Deny request adding details of denial in the comments section.

OTHER DETERMINATIONS

For all other determinations, the FSW Investigator will:

A. Document the investigative determination on the "Investigation Finding" screen. CHRIS will automatically populate the Overall Finding (unsubstantiated, true, true but exempted, or inactive) based on the individual findings.
   1) For true but exempted determinations involving underaged juvenile offenders with sexual abuse allegations:
      a) Select the "Alleged Juvenile Offender–Under Age Fourteen" in the Role in Referral Select box on the Abuse/Neglect Screen in Referral or Investigation in CHRIS.

b) Select "Exempted from Finding (Underaged Juvenile Offender)" as the individual finding in the Investigation Findings screen in CHRIS.
c) When "Exempted from Finding (Underaged Juvenile Offender)" appears in the individual finding, the overall finding for the investigation will be Exempted (Underage Juvenile Offender at Time of Incident) provided that there are no other allegations associated with the report. If True is selected for another allegation in the Investigation the Overall Finding will be changed to True. If the Individual Findings for any other allegations in the investigation are Unsubstantiated and the Individual Finding is "Exempted (Underage Juvenile Offender at Time of Incident)" for the sexual abuse allegation with the underage juvenile offender, the Overall Finding will be "Exempted (Underage Juvenile Offender at Time of Incident)".

B. Document any additional information deemed necessary pertaining to the investigation/determination on the "Investigation Closure" screen and request supervisory approval of the determination. The request for approval will automatically go to the worker's supervisor's box for approval.
C. Ensure child maltreatment investigative determination notices, whether true or unsubstantiated, are issued to all persons pursuant to A.C.A. §12-18-703 et seq. See Policy XIV-A: Notices Regarding Child Maltreatment and related procedures.

The FSW Supervisor will:

A. Conference with the FSW investigator as needed regarding the determination.
B. Review the investigative determination and other pertinent screens in CHRIS.
C. Approve the investigation closure as appropriate on the "Investigation Closure" screen.
D. For substantiated investigation, complete/approve the "Investigation Case Connect" screen as appropriate and assign and open a case if appropriate.

PROCEDURE II-D15: Referrals and Case Openings Based on Investigative Findings

08/2013

The FSW Investigator will:

A. For reports of sexual abuse determined to be true and involving an alleged offender under 18 years of age at the time the act or omission occurred, refer the alleged offender and victim for mental health services by:
   1) Providing the parents or legal guardians of the alleged offender and victim with a list of mental health professionals or agencies available to evaluate and treat the alleged offender and victim, if necessary; and,
   2) Assisting the parents or legal guardians of the alleged offender and victim with a referral for a mental health evaluation, if necessary.
B. For true reports regardless of allegation type, open a protective services or foster care case as appropriate and/or make referrals as appropriate.
   1) If a protective services or foster care case will not be opened on a true report, supervisor and Area Director approval are required in CHRIS.
   2) If a protective services or foster care case will not be opened on a true report involving any children in the home under the age of three (3), make a referral to the DHS Division of Developmental Disabilities Services Children's Services for an early intervention screening via DHS-3300 in CHRIS (see Policy II-I: Early Intervention Referrals and Services and related procedures for more information).
C. For unsubstantiated reports, open a supportive services case if the family needs and agrees to services.

The FSW Supervisor will:

A. Assist FSW Investigator, as appropriate/needed, with any referrals.
B. Complete/approve the "Investigation Case Connect" screen as appropriate and assign and open a case if appropriate.

However, when CACD is assigned as the primary investigator and the determination is unsubstantiated, CACD will:

A. Complete/approve the "Investigation Case Connect" screen.

PROCEDURE II-D16: DCFS and Law Enforcement Interfaces and Responses

01/2020

When a custodian is arrested and can no longer care for his/her children, law enforcement often contacts DCFS. The DCFS response depends upon whether the arrest of the parent is related to a child maltreatment or non-child maltreatment offense as well as other factors that must be assessed by DCFS. Some situations and appropriate DCFS responses include the following:

CHILD MALTREATMENT RELATED CHARGE WITHOUT IMMEDIATE DCFS NOTIFICATION

When law enforcement arrests a custodian on a child maltreatment related charge, (e.g., driving drunk with the child) and does not notify DCFS prior to placing the child with an appropriate relative or fictive kin, but DCFS learns of the placement at a later point in time, the FSW will:

A. Call the Child Abuse Hotline to make a report.
B. Assess whether child can safely remain in the custody of the relative or fictive kin to whom law enforcement released the child (if the child has not already been returned to his or her legal parent(s)).
    1) To determine safety and appropriateness of placement, conduct:
        a) Child Maltreatment Central Registry Check;
        b) Arkansas State Police Criminal Background Check;
        c) Vehicle Safety Program (DMV) Check;
        d) Individual interview with each child involved; and,
        e) Visual inspection of the identified home.
            i. If results of these background checks and the visual inspection of the home indicate the placement is safe and appropriate, then the FSW will:
                (1) Allow child to remain with that relative or fictive kin;
                (2) Seek, if appropriate, an order of less than custody prohibiting the parent or legal guardian from removing the child from the relative.
            ii. If the results of these background checks and visual inspection of the home do not indicate the placement is safe and appropriate, then the FSW will:
                (1) Take a 72-hour hold on the child and place the child in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined by A.C.A. §9-28-402.
                (2) Initiate a dependency-neglect action by completing the affidavit and notifying the Office of Chief Counsel.
                (3) Determine if there is a non-custodial parent, other appropriate relative, or fictive kin who is not involved in the arrest and is willing and able to care for the child. If so:
                (a) For relatives and fictive kin to the child, discuss the option of opening as a provisional home (see Procedure VI-B1 for more information).
                (b) If the relative or fictive kin declines the option of opening as a provisional home, discuss with the individual the option of assuming custody of the child (see Procedure VI-B3 for more information).

CHILD MALTREATMENT RELATED CHARGE WITH IMMEDIATE DCFS NOTIFICATION

When law enforcement arrests a custodian on a child maltreatment related charge, (e.g., driving drunk with the child) and notifies DCFS, the FSW will:

A. Ensure the Child Abuse Hotline has been called regarding the incident.
B. Take a 72-hour hold and place the child in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined by A.C.A. §9-28-402.
C. Initiate a dependency-neglect action by completing the affidavit and notifying the Office of Chief Counsel.
D. Determine if there is a non-custodial parent, other appropriate relative, or fictive kin who is not involved in the arrest and is willing and able to care of the child. If so:
    1) For a non-custodial parent, discuss the option of a trial home placement (see Policy VI-B and Procedure VI-B1 for more information);
    2) For relatives or fictive kin, discuss the option of opening as a provisional foster home (see Procedure VI-B2 for more information);
    3) If the relative or fictive kin declines the option of opening as a provisional, discuss with the individual the option of assuming custody of the child (see Procedure VI-B3 for more information);
    4) The child must remain in approved out-of-home placement until the relative or fictive kin is opened as a provisional home or until the court grants custody to the non-custodial parent, relative, or fictive kin.

NON-CHILD MALTREATMENT RELATED CHARGE WITH IMMEDIATE DCFS NOTIFICATION

When law enforcement arrests a custodian for reasons not related to child maltreatment (e.g., writing hot checks, outstanding warrant unrelated to child abuse or neglect, etc.) the FSW will:

A. Determine via phone if law enforcement is aware of whether parents have made or are attempting to make child care arrangements.
    1) If the parents cannot make child care arrangements:
        a) Take a 72-hour hold and place the child in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined by A.C.A. §9-28-402.
        b) Initiate a dependency-neglect action by completing the affidavit and notifying the Office of Chief Counsel.
        c) Determine if there is a non-custodial parent, other appropriate relative, or fictive kin who is not involved in the arrest and is willing and able to care for the child. If so:
            i. For a non-custodial parent, discuss the option of a trial home placement (see Policy VI-B and Procedure VI-B1 for more information).
            ii. For relatives or fictive kin, discuss the option of opening as a provisional home (see Procedure VI-B2 for more information).
            iii. If the relative or fictive declines the option of opening as a provisional home or the person identified is fictive kin, discuss with the individual the option of assuming custody of the child (see Procedure VI-B3 for more information).
    2) If the parents are making or have made child care arrangements, then determine:
        a) Identity of prospective caretaker;
        b) Whether prospective caretaker is assumed to be an appropriate caregiver;
        c) When prospective caretaker is expected to arrive;
        d) Whether child may wait with or without DCFS representative at present location until caretaker arrives.
            i. If child may wait at present location and identified caretaker is a custodian with equal or joint custody (divorced custodian must show proof of equal or joint custody), allow child to remain with that custodial parent with no further action from DCFS.
            ii. If child may wait at present location and identified caretaker is not custodian with equal or joint custody but:
                (1) Is/has been approved by the parent, and,

(2) Arrives in timely manner; and,

(3) Is otherwise appropriate; then,

Allow child to go with identified caregiver with no further action from DCFS.

iii. If child may remain at present location but identified caretaker:

(1) Is NOT/has NOT been approved by the parent; or,

(2) Does NOT arrive in timely manner; or,

(3) Is otherwise inappropriate; then,

FSW will take a 72-hour hold and place the child in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined by A.C.A. §9-28-402.

iv. If the caretaker is a non-custodial parent, other appropriate relative, or fictive kin who is not involved in the arrest and is willing and able to care for the child:

(1) For a non-custodial parent, discuss the option of a trial home placement (see Policy VI-B and Procedure VI-B1 for more information).

(2) For relatives and fictive kin, discuss the option of opening as a provisional home (see Procedure VI-B2 for more information).

(3) If a relative or fictive declines the option of opening as a provisional home or the person identified is fictive kin, discuss with the individual the option of assuming custody of the child (see Procedure VI-B3 for more information).

POLICY II-E: MEDICAL NEGLECT OF AN INFANT WITH DISABILITIES

09/2011

The Division of Children and Family Services shall maintain sufficient contact with health care facilities to facilitate communication between those facilities and the Division in order to enable the health care facilities to report suspected medical neglect of an infant with disabilities.

PROCEDURE II-E1: Medical Neglect of an Infant with Disabilities

The Family Service Worker will:

A. Make telephone inquiry to the health care facility immediately upon receipt of an allegation of suspected medical neglect of an infant with disabilities to determine if:
   1) The infant has a life-threatening condition,
   2) The parents have refused to consent to treatment,
   3) The treating physician recommended treatment, and
   4) The facility's infant care review committee has analyzed the child's health and family circumstances.

B. Contact the Child Protective Services Field Assistance Unit immediately to arrange an assessment by the contracted physician.

C. Contact OCC if a parent will not sign a release to allow DCFS to examine medical records or obtain an independent medical examination of the infant.

POLICY II-F: SUBSTANCE EXPOSED INFANT REFERRAL AND ASSESSMENTS

01/2020

The Division of Children and Family Services (DCFS) believes in coordinating with other state agencies and community partners to help strengthen and support families in an effort to prevent child abuse and neglect. The goal of prevention of child abuse and neglect extends to all families. However, as guided by the Comprehensive Addiction and Recovery Act (CARA), along with the Child Abuse Prevention and Treatment Act (CAPTA) it amended, the Division is specifically tasked with collaborating across systems to address the needs of substance exposed infants to prevent future child maltreatment of this vulnerable population.

DCFS, in coordination with other state agencies and community partners, strives to address the needs of substance exposed infants primarily through two (2) approaches:

- **A. Addressing the needs of substance exposed infants who are defined as neglected pursuant to A.C.A. 12-18-103(14)(B)(i)(a)-(b) (i.e., Garrett's Law referrals) and the needs of their families via an investigative response. For more information regarding this approach, please see Policy II-D: Investigation of Child Maltreatment Reports.**
- **B. Implementing a referral process for healthcare providers involved in the delivery and care of infants to report, for the purpose of an assessment not related to a child maltreatment investigation, infants who have not been neglected as defined in A.C.A. 12-18-103(14)(B)(i)(a)-(b), but who are born with and affected by:**
  1) **A Fetal Alcohol Spectrum Disorder (FASD);**
  2) **Maternal substance abuse resulting in prenatal drug exposure to an illegal or legal substance; or**
  3) **Withdrawal symptoms resulting from prenatal drug exposure to an illegal or a legal substance.**

  "Affected by" means:
  1) **An infant exhibits a condition or conditions associated with the mother's use of alcohol during pregnancy or a healthcare provider has an articulated concern that the infant suffers from a fetal alcohol spectrum disorder;**
  2) **An adverse effect or effects in physical appearance or functioning that are either diagnosed or otherwise observed and are a result of the mother's use of a legal or illegal substance during pregnancy; or**
  3) **An infant exhibits withdrawal symptoms in physical appearance or functioning as a result of the mother's use of a legal or illegal substance during pregnancy.**

  "Infant" means any child thirty (30) days old or less.

The remainder of this policy and related procedures are specific to approach B, herein after referred to collectively as prenatal substance exposure referrals and assessments.

Healthcare providers involved in delivery or care of infants are required to make prenatal substance exposure referrals to the Arkansas Child Abuse Hotline. The Arkansas Child Abuse Hotline will accept prenatal substance exposure referrals. Upon receipt of a prenatal substance exposure referral from a health care provider, the Arkansas Child Abuse Hotline will assign the referral to DCFS for a Referral and Assessment (R and A). The Request for DCFS Assessment Screen accommodates instances where an individual is not reporting maltreatment but is requesting an assessment and appropriate services for the family based on an assessment of the family's strengths and needs.

Prenatal substance exposure referrals will be assigned to the appropriate county-level Differential Response (DR) staff (though prenatal substance exposure referrals are separate and apart from differential response allegations). For a prenatal substance exposure referral to be considered initiated, DR staff must make face-to-face contact with the infant or at least one (1) parent of the infant within seventy-two (72) hours of receipt of the referral from

the hotline. If the infant and parent/caregiver are not seen together at the initiation, then DR staff must make face-to-face contact with the individual not seen at initiation within five (5) calendar days of receipt of the referral as well any other adult household members within the same five (5) calendar day timeframe. During each contact with the parent(s)/caregiver(s), DR staff are responsible for engaging the family in an assessment of strengths and needs and developing a plan of safe care for the family. The plan of safe care will be designed to ensure the safety and well-being of an infant following the release of the infant from the care of a healthcare provider and include content that addresses the health and substance use disorder treatment needs of the infant and affected family or caregiver.

PROCEDURE II-F1: Prenatal Substance Exposure Referrals

01/2020

The Child Abuse Hotline Worker will:

A. Receive and document prenatal substance exposure referrals from health care providers involved in the delivery and care of infants with sufficiently identifying information as defined by Arkansas law.
B. Conduct a history check on all reports unless call waiting to be answered by the hotline have been waiting for fifteen (15) minutes or longer.
C. If the report qualifies as a prenatal substance exposure referral, select “Refer to DCFS for Assessment” from the Request for DCFS Assessment screen.
D. Inform the caller if the report does not constitute a prenatal substance exposure referral.

PROCEDURE II-F2: Receipt and Assignment of Prenatal Substance Exposure Referrals

01/2020

The Differential Response Supervisor or designee will:

A. Check CHRIS inbox at least one (1) time in the morning and one (1) time in the afternoon each business day.
B. Assign each new referral to a DRT Specialist within four (4) hours of receipt excluding evenings, weekends, and holidays.

PROCEDURE II-F3: Prenatal Substance Exposure Assessment and Plan of Safe Care

01/2020

The Differential Response Supervisor or designee will:

A. Conference with the DRT Specialist within one (1) business day after the DRT Specialist’s initial face-to-face contact with the infant and at least one (1) parent/caregiver and discuss development of CFS-101: Plan of Safe Care.
B. Document all supervisor activities in CHRIS within one (1) business day of completion of each activity.
C. Regarding families with whom the DRT Specialist cannot make face-to-face contact, assess information and determine whether DRT Specialist has met due diligence no later than the seventh day after assignment.
D. Provide consultation to the DRT Specialist as appropriate.

The Differential Response Team (DRT) Specialist will:

A. Prepare for meeting the family by completing the following activities prior to making initial face-to-face contact with the family:
   1) Interview other persons, including the individual(s) who called the report into the hotline, with information listed on the referral;
   2) Conduct a Division of County Operations (DCO) records check of members of the household;
   3) Conduct a CHRIS history search prior to contacting the family unless the report is received after hours or during the weekend or a holiday; and,
   4) Contact the family by phone within twenty-four (24) hours of assignment, if a phone number is provided in the report or if appropriate considering initiation timeframe requirements to:
      a) Explain prenatal substance exposure assessments and plan of safe care;
      b) Schedule the initial family visit that will include at least the infant or one (1) parent/caretaker.
B. Consider the prenatal substance exposure referral initiated when:
   1) The health and safety of the infant has been assessed within seventy-two (72) hours from the time the referral was received from the Child Abuse Hotline, or the DRT Specialist has met with at least one (1) parent/caregiver within seventy-two (72) hours from the time the referral was received at the Child Abuse Hotline (based on the reported needs or safety issues of the family, DRT Supervisor may require that the initial contact with the family occur sooner than seventy-two (72) hours); or,
   2) Neither a health and safety assessment of the infant nor face-to-face contact with at least one (1) parent/caregiver could be made but due diligence has been exercised and documented within seventy-two (72) hours of receipt of the hotline referral. Due diligence must include:
      a) Making an announced (or unannounced, if needed) visit to the family at least three (3) times at different times of the day or on different days (provided the three (3) visits are within the appropriate initiation timeframes) in an attempt to assess the health and safety of the infant and develop a plan of safe care with the parent/caregiver; and,
      b) If a contact is not made via the efforts described in a) above, completing as many of the following activities necessary to establish face-to-face contact with the infant or at least one (1) parent/caretaker (note: efforts below may be done concurrently with activities described in item a) above):
         i. Contacting the reporter again if the reporter is known;
         ii. Contacting appropriate local DCO staff and requesting research of their record systems and other files to obtain another address;
         iii. Contacting the local post office and utility companies to request a check of their records;
         iv. Conducting Lexis Nexis search to attempt to locate the family;
      c) If after completion of all the due diligence activities listed above, no contact is made with the infant or a parent/caregiver by the sixth business day after assignment, document information on a case contact *(DRT Supervisor will assess the information and determine whether due diligence has been met, no later than the seventh day after case assignment)*;
      d) If DRT Supervisor deems that due diligence has been met, close referral.
C. Explain to the parent/caregiver prenatal substance exposure referrals including the development of the CFS-101: Plan of Safe Care, and that the Division must address any safety factors or needs as appropriate, to include report to the Child Abuse Hotline if child maltreatment is identified or there is reasonable cause to suspect maltreatment.
D. If the infant and parent/caregiver are not seen together at the initiation, then make face-to-face contact with the individual not seen at initiation within five (5) calendar days of receipt of the referral as well any other adult household members within the same five (5) calendar day timeframe.
E. Develop CFS-101: Plan of Safe Care with the family within fourteen (14) calendar days of receipt of the referral and ask the family if they are interested in continuing services with DCFS through a supportive services case.

1) If the family accepts continued services through a supportive services case, see Policy II-A: Supportive Services and related procedures using the CFS-101: Plan of Safe Care to inform the development of the case plan of the supportive services case that will be opened.
2) If the family declines continued services through a supportive services case,
   a) Make any referrals noted on the CFS-101: Plan of Safe Care; and,
   b) Within the close button on the Request for DCFS Assessment screen, document completion of the assessment and the plan of safe care.

F. Request a supervisor conference to review/discuss case information (i.e., allegation, risk/safety concerns, immediate needs, and other case specific information).
G. Document all activities in CHRIS within one (1) business day after they are completed.

POLICY II-G: TEAM DECISION MAKING

1/2020

The policy and related procedures in this section only apply to those counties in which Team Decision Making has been implemented.

OVERVIEW

Team Decision Making (TDM) provides a facilitated forum for families, community members, and DCFS to collaboratively problem solve and make decisions regarding children's safety and placement using the most information possible. TDM has proven to be an effective intervention in ensuring that all placement decisions are a shared responsibility and in the best interest of children. TDM also assists in establishing a network of support for children and the adults who care for them. As such, the consistent and effective use of Team Decision Making promotes family engagement and helps to maintain safe family relationships that are crucial to minimizing trauma to children.

TEAM DECISION MAKING INITIATION AND REFERRAL

A Team Decision Making (TDM) meeting is held within three business days of the establishment of a protection plan due to a safety factor (see Appendix IX: Arkansas Health and Safety Factors) being identified in the home and always before the case is brought to court. However, a dependency-neglect petition related to a protection plan may be filed with the court when necessary. The protection plan will be filed with the court within 30 days of an initial protection plan being put in place if a dependency-neglect petition was not previously filed in association with the protection plan, and it is assessed that a substantial risk of harm to the health and safety of the child remains and that the protection plan must stay in place to ensure the health and safety of the child. TDM meetings referrals are made by the DCFS FSW who put the protection plan in place to the area DCFS Facilitator. If the area DCFS Facilitator is unavailable, the DCFS FSW who put the protection plan in place will contact the DCFS Facilitator Supervisor. The DCFS Facilitator Supervisor will then make a referral to a back-up facilitator who can facilitate the TDM meeting within three business days of the establishment of a protection plan.

A TDM meeting is also held within three business days of receipt of any Garrett's law allegation – regardless of whether the child is left in the home or removed – to the hotline and always before the case is brought to court. However, if a protection plan is put into place at the initiation of an investigation involving a Garrett's Law report, a dependency-neglect petition may be filed with the court in association with that protection plan as necessary. The protection plan will be filed with the court within 30 days of an initial protection plan if a dependency-neglect petition was not previously filed in association with the protection plan, and it is assessed that a substantial risk of harm to the health and safety of the child remains and that the protection plan must stay in place to ensure the health and safety of the child. TDM meeting referrals related to Garrett's Law allegations are made by the primary DCFS FSW investigator to the area DCFS Facilitator. If the area DCFS Facilitator is unavailable, the primary DCFS FSW investigator will contact the DCFS Facilitator Supervisor. The DCFS Facilitator Supervisor will then make a referral to a back-up facilitator who can facilitate the TDM meeting within three business days of an accepted report of a Garrett's Law allegation to the hotline.

The TDM Supervisor may waive the TDM Meeting requirement for extenuating circumstances that render a TDM Meeting unnecessary (e.g., a foster care case is already opened, a hotline referral involving a child death with no siblings or other children under the care of the alleged offender, a Garrett's Law referral in which the biological mother is already working with the Office of Chief Counsel to put the infant up for adoption, etc.).

TEAM DECISION MAKING PREPARATION

All Team Decision Making meetings will be held outside of the DHS county office in an effort to conduct the meetings in a more family-friendly environment. Only the TDM Supervisor may approve for a TDM meeting to be held in the DHS county office for special circumstances such as safety concerns, inclement weather, etc.

Prior to the Team Decision Making meeting, the FSW and the FSW Supervisor who approved the initial protection plan or the primary FSW investigator involving a Garrett's Law allegation and that FSW's Supervisor will conference with the Facilitator who will moderate the TDM meeting in order to prepare for the TDM. This conference will allow these Division staff members to review the TDM process as necessary and review information gathered at that point in time regarding the family with particular attention to the identified safety factors and/or other information gathered during the investigation involving a Garrett's Law allegation. During this meeting DCFS staff will assess whether the children involved in the protection plan and/or the children involved in an investigation involving a Garrett's Law allegation should be present at the TDM meeting based on the children's preferences and the children's ability to handle the emotional impact of the meeting.

A safety check-in meeting will also occur per TDM protocols with the biological parent(s) and children who plan to participate in TDM prior to the TDM meeting. The safety check-in is conducted to learn about any safety concerns the parents and/or children may have regarding the meeting proceedings and/or other participants. If safety concerns exist, DCFS will ensure the appropriate precautions are put in place.

TEAM DECISION MAKING PARTICIPANTS

Concerted efforts shall be made by DCFS to engage the biological parents (or other person responsible for care, as applicable) and support their attendance at the Team Decision Making meeting. Children are also encouraged to participate in the meeting when deemed appropriate according to their age, developmental status, emotional condition, and trauma-related needs and responses. The FSW who put the protection plan into place and/or the primary FSW investigator involving a Garrett's Law allegation and the Facilitator must participate in the TDM meeting.

The FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation is also required to participate in the TDM meeting. If necessary, the FSW Supervisor may participate by phone with prior approval from the Area Director. If an emergency arises and the FSW Supervisor is unable to participate even by phone, then the Area Director is responsible for ensuring another supervisor, preferably the county supervisor, participate in the TDM meeting in order to better support the FSW. For TDMs involving protection plans, the FSW's direct supervisor (if different from the FSW Supervisor who approved the protection plan) is encouraged, but not required, to attend the TDM meeting. Any other supervisor is welcome to attend the TDM meeting if desired.

The biological parents (or other person responsible for care, as applicable) and children are recognized as the experts regarding their family's needs and strengths. The FSW serves as the representative to speak to the protection plan and/or his/her initial assessment of family functioning for those families involved in an investigation with a Garrett's Law allegation. The Facilitator is a trained process expert with extensive knowledge of agency history, policies, procedures, and best practices. He or she works with everyone present at the TDM meeting to lead that group through solution-focused discussion that provides all participants with opportunities to voice their thoughts, concerns, and suggestions.

With a parent's (or other person responsible for care, as applicable) consent, additional efforts to include relatives, natural support persons, and current service providers will be made. The Division will be mindful about the balance of staff or professionals to family members and their natural supports. The more family-supportive individuals involved in the decision-making process, the more likely the resulting plan will be customized to meet the unique needs of the family. TDM participants may include, but are not limited to:

A. Extended family and/or fictive kin invited by parents to support, assist, and/or serve as a resource.
B. Current caregivers (if not the biological parents) so they may assist in providing information regarding children's needs and in developing ideas and reaching decisions.
C. Community partners who are defined as such by the family or the Division, whether based on neighborhood, faith/religion, or other connection, to provide support, resource expertise, and external perspective in decision-making.

D. **Service providers who are currently involved with family and can provide insight regarding family functioning and assist in problem solving.**
E. **Other public agency staff such as representatives from Division of Behavioral Health Services, Division of Developmental Disabilities Services, Division of Youth Services, Department of Education, Department of Workforce Services, Public Housing Authority, etc. to provide expertise and information.**

TEAM DECISION MAKING MEETING GOALS AND PROCESSES

During the Team Decision Making meeting the group:

A. **Engages the family to discuss family's needs and strengths;**
B. **Reviews the family's protection plan, as applicable;**
C. **Assesses the effectiveness of the protection plan thus far, as applicable;**
D. **Assesses any risk factors;**
E. **Determines if any changes to the protection plan are needed, as applicable;**
F. **Decides if other appropriate services and supports are available to strengthen the family; and,**
G. **Reaches consensus regarding the child's placement that protects the child and preserves the family.**

For TDM meetings involving protection plans, the original protection plan that the FSW put into place via the CFS-200: Protection Plan will be documented on the Safety Planning Screen of the Health and Safety Assessment. If the protection plan is updated or otherwise enhanced during the course of the TDM meeting, any pieces of the initial protection plan (documented on CFS-200: Protection Plan) that will remain in the updated version must also be documented on CFS-355: Team Decision Making Meeting Summary Report. In addition, any new information or requirements to which the team agrees during the TDM meeting will also be included on the CFS-355: Team Decision Making Meeting Summary Report. The information and requirements outlined in the TDM Action Plan that all participants agree to by signing the CFS-355 replaces the original protection plan for the family.

For TDM meetings involving allegations of Garrett's Law for which no protection plan was put into place during the investigation, the CFS-355: Team Decision Making Meeting Summary Report signed by all participants will serve as the TDM Action Plan for that family. As per the CFS-355, each person's signature on that form means that he or she understands and agrees to the actions steps outlined on the CFS-355.

Privacy and respect are valued and practiced during TDM meetings. However, information from the meeting may be used, as applicable, for future case planning, in subsequent court proceedings, and/or in the investigation of any new allegations of abuse or neglect.

The Division maintains the legal responsibility to make decisions regarding children's placement and safety at all times. If the entire group involved in the TDM meeting cannot reach consensus, the Facilitator must at least ensure the Division staff involved in the TDM meeting reach consensus.

TEAM DECISION MAKING REVIEW PROCESS

A review process is available if Division staff members believe the decision puts the child at serious risk of harm or violates law or policy. A Division staff member who requests a review process must notify the group of his/her intent to seek review before the Team Decision Making meeting adjourns. The TDM Review will be conducted immediately by either a DCFS County Supervisor or the Area Director, as appropriate, prior to participants leaving. The TDM Review may be conducted in-person or by phone conference. The final decision is made by the TDM Reviewer after hearing summaries of the meeting and reason for review. Division personnel are responsible to implement the final decision and demonstrate full support.

TEAM DECISION MAKING FOLLOW-UP

Following all Team Decision Making meetings, the FSW, FSW Supervisor who approved the protection plan or supervisor of the primary FSW investigator involving a Garrett's Law allegation, and Facilitator will meet or conference call within 24 hours to debrief the TDM meeting. The debriefing meeting serves as a learning tool for Division staff by allowing them to give each other feedback regarding their interactions in the meeting specific to processes and roles. The debriefing meeting is not a time to revisit the content of the discussion or reconsider the decision made during the TDM meeting.

The DCFS Facilitator will enter all required TDM data elements into CHRIS within three business days of the TDM meeting. If a back-up Facilitator participated in the meeting, that back-up Facilitator must provide all data elements to the DCFS Facilitator within three business days. The DCFS Facilitator will enter the TDM data elements into CHRIS within three business days of receipt of the data elements from the back-up Facilitator.

The FSW who put the protection plan into place will continue to be responsible for monitoring the protection plan and any other elements necessary, as determined during the TDM meeting, throughout the completion of the investigation.

For Garrett's Law referrals involving two counties (e.g., parents reside in one county but give birth to the infant in a neighboring county), the secondary FSW investigator who initiates the investigation will also interview any other collaterals available at the time of initiation in the county where the infant was born (if applicable) based on when infant was discharged from the hospital and when the hotline report is accepted.

The primary FSW investigator in the county where the family resides will conduct a home visit before the TDM meeting takes place, if possible. However, the primary FSW investigator must conduct a home visit prior to the infant's discharge from hospital (if applicable depending on when hotline report was made). If the home visit is conducted before the TDM meeting occurs *and* prior to the infant's discharge from the hospital, then that home visit will meet the requirement for both. The primary FSW investigator will also interview all other necessary collaterals who were not interviewed during the investigation initiation.

The primary and secondary investigators must share all information regarding the investigation prior to the TDM meeting. The secondary investigator is not required to attend the TDM meeting but is encouraged to do so. The primary investigator must attend the TDM meeting.

If a protective services or foster care case is subsequently opened, the FSW who initially put the protection plan into place and participated in the TDM meeting will communicate all information regarding the plan and TDM meeting to the appropriate FSW caseworker. The newly assigned FSW caseworker will then have the primary responsibility of monitoring the protection plan, any other associated elements, and case plan (i.e., the case plan is separate from the protection plan).

Procedure II-G1: Team Decision Making Initiation and Referral

1/2020

After establishing a protection plan and/or initiating an investigation involving a Garrett's Law allegation (regardless of whether the child is left in the home or removed), the FSW will:

A. Inform parents (or person responsible for care, as applicable) and youth (as appropriate) of:
   1) The purpose of a Team Decision Making (TDM) meeting;
   2) That they will be required to attend the next scheduled TDM meeting; and,
   3) What will be expected of them during the TDM meeting (e.g., to share their understanding of the safety and risk issues as well as strengths in their home, their understanding of the protection plan as applicable, etc.).

B. Tell the parents (or person responsible for care, as applicable) that, if they would like, the assigned facilitator can also contact the family by the next business day to explain more about the process.

C. Ask parents (or person responsible for care, as applicable) and youth (as appropriate) to identify extended family members, fictive kin, or community partners who they would like to attend the upcoming TDM and ask the family to contact those individuals with information about the upcoming TDM meeting.
   1) Collect names, phone numbers, and addresses of family identified team members.

D. Leave PUB-35: "What is Team Decision Making?" with the family.

E. Discuss whether family will need assistance with transportation and help coordinate transportation as appropriate.

F. Contact the area DCFS Facilitator by phone or email within two hours of putting the protection plan in place and/or within two hours of initiating an investigation involving a Garrett's Law allegation to refer the family for a Team Decision Making meeting.
   1) When the FSW emails or leaves a voicemail referral with the area TDM Facilitator during normal business hours and has not heard back from the facilitator by 4:00 p.m. that same business day, then the FSW will contact the DCFS Facilitator Supervisor by phone or email with the referral information.
   2) If TDM referral is made after hours, on the weekend, or during a holiday, an email must be sent or a voicemail must be left to make the referral.
      a) When the FSW emails or leaves a voicemail with the area TDM Facilitator after hours and has not heard back from that facilitator by 9:00 a.m. the next business day, then the FSW will contact the DCFS Facilitator Supervisor by phone or email with the referral information.
   3) Provide the DCFS Facilitator (or DCFS Facilitator Supervisor, as applicable) with:
      a) Names of family members
      b) Family address and phone number
      c) Dates of birth of family members
      d) Protection plan, if applicable
      e) Any special information or needs regarding safety (e.g., domestic violence issues), language interpretation, physical accommodations, child care for very young children, etc.
      f) Contact information and family request to be contacted by the facilitator to provide more information about the TDM process, if applicable.

G. Work with the assigned facilitator and family to confirm exact date, time, and location of TDM meeting within twenty-four hours of establishing protection plan and/or within twenty-four hours of initiating an investigation involving a Garrett's Law allegation.
H. Enter family's demographic information into CHRIS within twenty-four hours of receiving referral.
I. Document date and time family is informed of agreed-upon TDM meeting date, time, and location in CHRIS.

The FSW Supervisor who approved the protection plan and/or the supervisor of the primary FSW investigator involving a Garrett's Law allegation will:
Conference with FSW as needed.

The Facilitator will:
Work with FSW to confirm exact date, time, and location of meeting.

The Facilitator Supervisor will:
A. Conference with the DCFS Facilitator as needed.
B. Make any needed TDM referrals to the back-up facilitator by the next business day.

Procedure II-G2: Team Decision Making Preparation

01/2020

The FSW will:
A. Conference with the FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation, as applicable, and facilitator to prepare for the TDM meeting.
B. Conduct the safety check-in meeting as appropriate/assigned with the biological parent(s) (or other persons responsible for care, if applicable) and any children who plan to attend the TDM meeting.

The FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation will:
A. Conference with the FSW and facilitator to prepare for the TDM meeting.
B. Determine whether or not children involved in the investigation will attend the TDM meeting.
C. Assign the FSW, facilitator, or self as appropriate, to conduct the safety check-in meeting with the biological parent(s) (or other persons responsible for care, if applicable) and any children who plan to attend the meeting.
D. Conduct the safety check-in meeting as appropriate/assigned with the biological parent(s) (or other persons responsible for care, if applicable) and any children who plan to attend the TDM meeting.

The Facilitator will:
A. Review the protection plan, if applicable.
B. Contact the family who will participate in the TDM meeting, if the family requested that the facilitator call to provide more information about the TDM process.
C. Invite service providers or other public agency staff, including language interpreters, if needed, to TDM meeting as appropriate.

D. Document date and time any service providers or other public agency staff are informed of TDM meeting date, time, and location in CHRIS.
E. Conference with the FSW and FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation to prepare for the TDM meeting.
F. Conduct the safety check-in meeting as appropriate/assigned with the biological parent(s) (or other persons responsible for care, if applicable) and any children who plan to attend the TDM meeting.

Procedure II-G3: Team Decision Making Meeting

01/2020

The Facilitator will:

A. Open the TDM meeting by
    1) Welcoming all participants
    2) Explaining purpose of TDM
    3) Asking all participants to complete CFS-354: Team Decision Making Meeting Sign-in Sheet and Privacy Statement
    4) Inviting all participants to introduce themselves
    5) Asking Division employees or other service providers to explain their respective roles as they relate to TDM
B. Ask the immediate family (including age appropriate children and youth) to describe their:
    1) Understanding of the safety and/or risk issues in their home;
    2) Understanding of the protection plan, if applicable;
    3) Their perceived strengths that can be used as protective factors in addressing the specific harm or danger to the child; and,
    4) Any other relevant information.
C. Ask the FSW to describe:
    1) Identified safety factors in the home;
    2) Family's strengths that can be used as protective factors in addressing the specific harm or danger to the child; and,
    3) Established protection plan, if applicable.
D. Continue to facilitate the meeting per TDM protocols to help the TDM group to:
    1) Assess if family is adequately following established protection plan, if applicable;
    2) Decide whether changes are needed to make the protection plan more effective or better ensure child's safety, if applicable;
    3) Determine if current placement decision ensures the child's safety;
    4) Identify ways in which TDM members may support the family;
    5) Assist the group in moving toward consensus.
E. Complete CFS-355: Team Decision Making Meeting Summary Report.
    1) The CFS-355: Team Decision Making Meeting Summary Report must include the timeframe in which DCFS will conduct the next home visit with the family.
F. Provide a copy of the CFS-355: Team Decision Making Meeting Summary to the family prior to adjourning the meeting.

The FSW will:

A. Assist family with transportation as appropriate.

B. Share information regarding identified safety issues, family strengths, and established protection plan, if applicable.
C. Actively participate in problem solving and decision-making processes throughout the TDM meeting and remain open to revisions to the initial protection plan, if applicable.

FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation will:

A. Attend TDM when possible.
B. Conference with FSW and facilitator as needed.

Procedure II-G4: Team Decision Making Review

01/2020

The requesting Division staff member will:

A. Notify the entire TDM team of his/her intent to seek a review prior to the end of the TDM meeting.
B. Present summary of the meeting and reason for review to the TDM Reviewer.

The Facilitator will:

A. Notify the appropriate on-call TDM Reviewer and supervisor.
B. Explain the review process to the TDM group.

The Division staff member requesting the review will:

A. Present summary of the meeting and reason for review to the TDM Reviewer.

The TDM Reviewer (either the DCFS County Supervisor or Area Director, as appropriate) will:

A. Join the TDM meeting either in person or by conference call before participants leave.
B. Listen to both summaries.
C. Determine whether adjustments need to be made to the decision and/or if an interim safety plan is necessary.

Procedure II-G5: Team Decision Making Follow-Up

01/2020

The FSW will:

A. Meet or conference call with the Facilitator and FSW Supervisor who approved the protection plan or supervisor of the primary FSW investigator involving a Garrett's Law allegation within 24 hours of the conclusion of the TDM meeting.
B. If applicable, provide OCC with a copy of the protection plan and corresponding Team Decision Making Meeting Summary Report and request OCC to file a dependency-neglect petition with the court that will accompany the protection plan.
C. Continue to monitor family's progress until the investigation is completed.
D. Share all relevant information regarding the family's protection plan, if applicable, and progress with the FSW assigned to the family's protective or foster care case, if applicable.

The FSW Supervisor who approved the protection plan or the supervisor of the primary FSW investigator involving a Garrett's Law allegation will:
Meet or conference call with the FSW and facilitator within 24 hours of the conclusion of the TDM meeting and as needed.

The DCFS Facilitator will:

A. Meet or conference call with the FSW and FSW Supervisor within 24 hours of the conclusion of the TDM meeting.
B. Enter all required TDM data elements into CHRIS within three business days of the conclusion of the TDM meeting and within three business days of receipt of TDM data elements from the contracted facilitator when the TDM meeting is facilitated by a contract provider.
C. Provide copies of the Team Decision Making Meeting Summary Report printout from CHRIS to all participants, including the family, as soon as possible following the TDM meeting.
    1) DCFS Facilitator is also responsible for providing copies of the Team Decision Making Meeting Summary Report printout from CHRIS to all participants, including the family, as soon as possible following the TDM meeting when that TDM meeting was facilitated by a back-up facilitator.

The back-up facilitator (if applicable) will:
Provide the TDM data elements to the area DCFS Facilitator within three business days of the conclusion of the TDM meeting.

The Facilitator Supervisor will:
Conference with the DCFS facilitator as needed.

POLICY II-H: COMMUNITY NOTIFICATION OF SEX OFFENDERS

01/2020

Upon notification to DCFS by law enforcement of the presence of a sex offender, the Division is responsible to notify foster parents and families with whom the Division has active cases, if an offender moves into their neighborhood.

No child may be home schooled if any person residing in the home with the child is required to register as a sex offender. Upon petition to the sentencing court from the child's parent or guardian, the sentencing court may enter a written order specifically waiving this restriction. This restriction shall not apply if the child to be home schooled is the person registered as the offender.

PROCEDURE II-H1: Notification of Sex Offenders

Upon notification, the Family Service Worker will:

A. Notify foster parents or families with whom DCFS has active cases that an offender has moved into their neighborhood.
B. Document in the case record that notification has been provided either by giving the foster parent or family with whom DCFS has an active case a copy of the flyer provided by law enforcement, or by verbally providing the information contained in the flyer that an offender has moved into their neighborhood.
C. Make a report to the Child Abuse Hotline of substantial possibility of severe maltreatment if it is alleged that the offender is living in the home with children or otherwise being allowed unsupervised access. In such instances, confirmation must be obtained from law enforcement that this person is indeed a registered sexual offender against children before the report will be considered valid. Lack of supervision reports will not be handled any differently due to the presence of an offender in the neighborhood.
D. File a 20-day petition to bring the matter to the attention of the court if it is confirmed that the offender is living in a home with children or otherwise has unsupervised access to them, unless the parent agrees to steps outlined by DCFS to protect the children, regardless of whether a disclosure of sexual abuse is obtained. Some examples of steps outlined to protect the children would be to remove the children from the home, request that the offender leave the home or cease allowing the sexual offender access to the children.
E. Notify the offender's probation or parole officer that the offender is living in a home with children or has unsupervised access to them.
F. Document in court-ordered and Interstate Compact home studies, the presence of a sex offender in the neighborhood, along with a statement that the family is aware of the offender's presence and is fully informed regarding any possible risks to children in the community.

POLICY II-I: FAMILY IN NEED OF SERVICES

01/2020

A.C.A. §9-27-303 defines "Family in Need of Services" (FINS) as any family whose juvenile evidences behavior which includes, but is not limited to, the following:

A. Being habitually and without justification absent from school while subject to compulsory school attendance;
B. Being habitually disobedient to the reasonable and lawful commands of his parent, guardian, or custodian; or
C. Having absented himself from the juvenile's home without sufficient cause, permission, or justification.

Family services are provided in order to:

A. Prevent a juvenile from being removed from a parent, guardian, or custodian;
B. Reunite the juvenile with the parent, guardian, or custodian from whom the juvenile has been removed; or
C. Implement a permanent plan or adoption, guardianship, or rehabilitation of the juvenile.

Family Services Provided to a Juvenile or the Family
Services should be designed to address the issues that resulted in the FINS case and may include, but are not limited to:

- **Child care**
- **Homemaker services**
- **Crisis counseling**
- **Cash assistance**
- **Transportation**
- **Family therapy**
- **Physical, psychiatric, or psychological evaluation**
- **Counseling**
- **Treatment.**

Disposition-Family in Need of Services
If a family is found to be in need of services, the circuit court may enter an order making one of the following dispositions:

A. Order family services - To rehabilitate the juvenile and his or her family. If the Department of Human Services is the provider for family services, the family services shall be limited to those services available by the Department's community-based providers or contractors, excluding the contractors with the Division of Children and Family Services of the Department of Human Services, and Department services for which the family applies and is determined eligible; and, to prevent removal when the Department is the provider for family services, the court shall make written findings outlining how each service is intended to prevent removal.
B. Removal - If it is in the best interest of the juvenile and because of acts or omissions by the parent, guardian or custodian, removal is necessary to protect the juvenile's health and safety, transfer custody to the Department. *This action may serve to reduce the number of foster care entries based solely of juveniles who are truant when acts or omissions of their parents is not a factor.*

At least five (5) working days prior to ordering DHS, excluding community-based providers, to provide or pay for family services, the court shall fax a written notice of intent to the Director of the Department of Human Services and to the attorney of the local Office of Chief Counsel of the Department of Human Services.

The court shall not specify a particular provider for placement or family services, when DHS is the payer or provider. A court may order a child to be placed into a licensed approved placement (i.e., no child shall be placed or remain in a placement in a foster home that has been closed or suspended by a child placement agency) after a hearing where the court makes a finding that it is in the best interest of the child based on bona fide consideration of evidence and recommendations from all the parties. The court may also order a child to remain in a placement if the court finds the placement is in the best interest of the child after hearing evidence from all parties.

If the health or welfare of a child is in immediate danger while in a court-ordered placement the Division may immediately remove the child from the court-ordered placement. If the Division must move a child from a court-ordered placement due to the health or welfare of a child being in immediate danger, the Division shall notify all parties within 24 hours of the change in placement. Regarding this type of placement change, a hearing may be requested by a party to the case, and the hearing shall be held within five business days of receiving the request.

In all cases in which family services are ordered, the court shall determine the parent's, guardian's, or custodian's ability to pay, in whole or in part, for these services. This determination and the evidence supporting it shall be made in writing in the court order ordering family services. If the court determines that the parent, guardian, or custodian is able to pay, in whole or part, for the services, the court shall enter a written order setting forth the amounts the parent, guardian, or custodian can pay for the family services ordered and ordering the parent, guardian, or custodian to pay the amount periodically to the provider from whom family services are received.

DCFS can ONLY be ordered to provide family services in a FINS case when the court finds that services are needed to prevent removal of the child from the home because of child maltreatment. The Juvenile Code grants the court the power to order family services without specifying the type of service, i.e., protective services or supportive services. The court will issue an order for family services, and DCFS is to provide those services. If there is not a finding of child maltreatment on the family, and the court determines that the family needs preventative services due to a risk of child maltreatment, open a supportive services case. If there is a true finding of child maltreatment, open a protective services case.

Removal of Juvenile
Before a juvenile court may order any dependent-neglected juvenile or FINS juvenile removed from the custody of his or her parent, guardian, or custodian and placed with the Department of Human Services or other licensed agency responsible for the care of juveniles or with a relative or other individual, the court shall order family services appropriate to prevent removal, unless the health and safety of the juvenile warrant immediate removal for the protection of the juvenile.

When the court orders a dependent-neglected or FINS juvenile removed from the custody of a parent, guardian, or custodian and placed in the custody of the Department or other licensed agency responsible for the care of juveniles or with a relative or other individual, the court shall make these specific findings in the order:

In the initial order of removal, the court must find:

A. Whether it is contrary to the welfare of the juvenile to remain at home;
B. Whether the removal of the juvenile is necessary to protect the health and safety of the juvenile, and the reasons for the removal; and,
C. Whether the removal is in the best interest of the juvenile.

Within 60 days of removal, the court must find:

A. Which family services were made available to the family before the removal of the juvenile;
B. What efforts were made to provide those family services relevant to the needs of the family before the removal of the juvenile, taking into consideration whether or not the juvenile could safely remain at home while family services were provided;

C. Why efforts made to provide the family services described did not prevent the removal of the juvenile; and,
D. Whether efforts made to prevent the removal of the juvenile were reasonable, based upon the needs of the family and the juvenile.

If and when an order of permanent custody disrupts, the initial legal action will be to set aside the permanent order of custody regardless of where the child resides. If parental rights have not been terminated, parents must be notified of the action and an immediate hearing to determine the new permanency plan for the juvenile will take place.

If a juvenile has been detained and is in the custody of the Department pursuant to a FINS or dependency-neglect petition *and* the court does not keep the juvenile in detention, then any issues regarding placement shall be addressed only in the FINS or dependency-neglect case. The issues regarding placement shall not be addressed, nor any orders entered, in the delinquency case. Within ten (10) days of entry of any order in the delinquency case, the prosecuting attorney shall file a copy of the order in the juvenile's FINS or dependency-neglect case.

Where the state agency's first contact with the family has occurred during an emergency in which the juvenile could not safely remain at home, even with reasonable services being provided, DCFS shall be deemed to have made reasonable efforts to prevent or eliminate the need for removal.

Where the court finds the Department's preventive or reunification efforts have not been reasonable, but further preventive or reunification efforts could not permit the juvenile to remain safely at home, the court may authorize or continue the removal of the juvenile but shall note the failure by the Department in the record of the case.

In all instances of removal of a juvenile from the home of his parent, guardian, or custodian by a court, the court shall set forth in a written order:
A. The evidence supporting the decision to remove;
B. The facts regarding the need for removal; and,
C. The findings as mentioned above.

The written findings and order shall be filed by the court or by a party or party's attorney as designated by the court within 30 days of the date of the hearing at which removal is ordered or prior to the next hearing, whichever is sooner.

The court may provide that any violation of its orders shall subject the parent, both parents, the juvenile, custodian or guardian to contempt sanctions.

Custody of a juvenile shall not be transferred to the Department when a delinquency petition or case is converted to a FINS petition or case.

The Department shall not recommend that the court split custody of a juvenile, that is, grant legal custody to one person or agency and physical custody to another person or agency. When the juvenile is removed from the custody of a relative or other person and placed in the custody of the Department, the juvenile shall not remain or be returned to the home while in the custody of the Department.

PROCEDURE II-I1: Family in Need of Services

The OCC Attorney will:

A. Fax the County Supervisor the written notice of intent from the court. *The court must fax written notice of intent five (5) working days prior to ordering DHS, excluding community-based providers, to provide or pay for family services.*

The FSW Supervisor will:

A. Assign the FINS case to the appropriate FSW.

The Family Service Worker will:

A. Determine the appropriate case that should be opened to provide services.
B. Open the appropriate case for service (see Policy III-A: Services Case Opening and Reevaluation). Make a request for OCC to file a 20-day petition if the family is resistant.

POLICY II-J: EARLY INTERVENTION REFERRALS AND SERVICES

01/2020

For children who have or are at risk of a developmental delay, appropriate early intervention services are essential. Early intervention services are designed to lessen the effects of any potential or existing developmental delay. Ultimately early intervention services help the child learn and reach his or her individual potential with the support and involvement of the child's family, as appropriate. It is important for such services to begin as early as possible and for biological parents to be involved in decisions related to early intervention services.

REFERRALS TO DIVISION OF DEVELOPMENTAL DISABILITIES FOR EARLY INTERVENTION SERVICES SCREENING
When a child maltreatment investigation involving any children in the home under the age of three (3) is initiated, the Division will consider referring as appropriate all children in the home under the age of three (3) to the Division of Developmental Disabilities Services' (DDS) Children's Services for an early intervention (i.e., First Connections; this program is not the same as the waiver program) screening in an effort to enhance the well-being of these children. Any children under the age of three (3) involved in a substantiated case of child maltreatment (regardless of whether all of the children are named as alleged victims) must be referred to DDS Children's Services for an early intervention screening if not already referred while the investigation was pending. This will not only ensure DCFS compliance with the Child Abuse Prevention and Treatment Act (CAPTA) regarding substantiated cases of child abuse and neglect involving children under the age of three (3), but will further promote the well-being of this population.

DDS Children's Services will screen all of the children under the age of three (3) who have been referred to First Connections to determine their need and eligibility for early intervention services. If the results of the screening determine that a child will benefit from DDS early intervention services, the person serving as the parent (e.g., biological parent in a protective services case; other individual legally caring for the child involved in a protective services or foster care case including foster parents) must consent to allow his or her child to participate before services are initiated.

For children under the age of three (3), eligibility for DDS Children's Services will be determined by a screening assessment to determine the need for additional evaluations (if a child referred to DDS Children's Services is within 45 days or less of his or her third birthday, then DDS Children's services may forward the referral to the Arkansas Department of Education, Special Education (Part B)).

If warranted, a developmental evaluation for children under age three (3) will be completed in the areas of cognition, communication, social/emotional, physical, and adaptive as available and appropriate. Based upon the developmental evaluation results, a speech, occupational, and/or physical therapy evaluation may be conducted as available and appropriate. All evaluation results as well as medical information, professional informed clinical opinion(s), and information gathered from biological parents and DCFS will be utilized to determine early intervention eligibility.

While a referral for early intervention services is encouraged for all children under three (3) when an investigation is initiated and is required for children under the age of three in substantiated cases of child maltreatment, a referral for early intervention services on behalf of any child suspected of having a developmental delay or disability may be sent at any time.

DDS EARLY INTERVENTION INDIVIDUALIZED FAMILY SERVICE PLANNING

If a child is determined to be eligible for services and the person acting as a parent on behalf of the child (e.g., biological parent involved in a protective services case; other individual legally caring for the child in a protective services or foster care case including foster parents) consents to services, Individualized Family Service Plan

(IFSP) meetings will be held to develop an appropriate service plan for the child. IFSP activities and services must be added to the child's case plan.

Adult participation in the IFSP meetings and related decision-making on the child's behalf is required. If the child is involved in a protective services case or if a child in foster care has a goal of reunification, the child's biological parent(s) should be invited and encouraged to attend the IFSP meetings to make decisions related to Individualized Family Service Planning and early intervention services for his or her child.

However, another adult who is legally caring for the child on a daily basis may serve in place of the biological parent if:

- **A. The court orders that the child's parent/guardian shall have no involvement in the child's educational planning; or,**
- **B. The child's parents cannot be located; or,**
- **C. The goal is not reunification for those children involved in foster care cases.**

If for one of the reasons listed above or if for any other reason the biological parent(s) is unable or unwilling to attend IFSP meetings and make the decisions related to early intervention services for his or her child, one of the following may serve as the parent to make decisions regarding early intervention planning and services for the child (provided the court has not issued a no contact order for the person selected to act in place of the parent):

- **A. Foster parent;**
- **B. Guardian, generally authorized to act as the child's parent (but not the state if the child is a ward of the state; i.e., FSW may act as the liaison between DDS and the parent or surrogate parent, but the FSW may not be the sole contact and/or decision-maker for a child);**
- **C. An individual otherwise acting in place of a biological parent (e.g., grandparent, step-parent, or any other relative with whom the child lives);**
- **D. An individual who is legally responsible for the child's welfare;**

For any individual serving in place of the parent in the child's early intervention process, support in the form of DDS Surrogate Parent Training is available but not required. The local DDS Service Coordinator or designee can assist in coordinating the DDS Surrogate Parent Training. After an individual has completed the DDS Surrogate Parent Training, they may serve as a surrogate parent for any child.

However, an appointed DDS certified surrogate may be assigned by the lead Part C agency (i.e., DDS) to represent the child during the IFSP if there is no adult (as listed in items A-D above) available to represent the interests of the child. An appointed DDS surrogate parent is generally the least preferred option since this person does not have daily interaction with the child. Furthermore, a DDS certified surrogate parent will usually only be appointed in the event that the child's parent, foster parent, etc. is unable or unwilling to participate in the child's early intervention process and IFSP meetings.

In any situation in which an individual other than the biological parent (e.g., foster parent, relative, etc.) is acting on behalf of the child, that individual will be discharged when the child's biological parent is ready and able to resume involvement.

REFERRALS FOR FETAL ALCOHOL SYNDROME DISORDERS (FASD) SCREENING

Fetal Alcohol Syndrome Disorders is an umbrella term used to describe the range of effects or disorders that can occur in an individual whose mother consumed alcohol during pregnancy. All health care providers involved in the delivery or care of infants must contact DHS regarding an infant born with and affected by a Fetal Alcohol Spectrum Disorder (FASD) as well as infants born with and affected by maternal substance abuse resulting in prenatal drug exposure to an illegal or a legal substance or withdrawal symptoms resulting from prenatal drug exposure to an illegal or a legal substance. A plan of safe care must also be developed for any infant born with

and affected by a FASD, maternal substance abuse resulting in prenatal drug exposure to an illegal or a legal substance, or withdrawal symptoms resulting from prenatal drug exposure to an illegal or a legal substance who is referred to the Division by a healthcare provider via the Child Abuse Hotline. Please see Policy II-F: Substance Exposed Infant Referral and Assessments and related procedures for more information.

In addition, DCFS FSWs and Health Service Workers (HSW) will refer children who have known prenatal alcohol exposure or exhibit FASD symptoms or behaviors to the local Resource Unit. The Resource Unit will collaborate with the child's FSW and HSW to help determine if early intervention programs or other services specific to FASD are needed and connect the child and placement provider to such programs and services in an effort to better support the child and the placement provider.

As part of this process, the FSW and/or HSW will gather information regarding the child's in utero and birth history. Depending on the information collected, a referral for an FASD screening or diagnosis may be provided. Regardless of an FASD diagnosis, the following services may be offered to the family as available and appropriate:

- **Referral to DDS (early intervention or DDS waiver), if applicable and available;**
- **Referral to specialized day care, if applicable;**
- **Referral to FASD family support group (available to biological, foster, and adoptive families), if available;**
- **FASD parenting classes (available to biological, foster, and adoptive families).**

PROCEDURE II-J1: DDS Early Intervention Services Referrals

01/2020

When children under the age of three are involved in a substantiated case of child maltreatment, but a case is not opened, the investigator will:

A. Provide an overview of the benefits of early intervention services to the parent/guardian.
B. Make a referral to DDS for each child in the home (victims and non-victims) under age three (3).
    1) Complete form DHS-3300 available in CHRIS.
        a) The DHS-3300 can be accessed in the Information and Referral Screen (Investigate/Services/Ref Services; Select child who is being referred and then select add button).
        b) When the button "DCO-3350/DHS-3300" is selected, a dialogue box will open so that staff can select the form to be completed.
        c) Select the "OK" button to open the DHS-3300.
        d) Select "Developmental Disabilities" as the Receiving Agency.
        e) Select "Other" in the "Services Requested and Codes" section and enter "Early Intervention Screening Referral" in the specification box.
        f) Note in the comments box that a case will not be opened, so DCFS will have no further involvement.
        g) Complete the remainder DHS-3300 with as much information as possible.
            i. At minimum, the child's name, child's date of birth OR Social Security number, and FSW contact information must be entered.
    2) Print the completed DHS-3300 to either scan and email or fax to the local DDS Services Coordinator.
C. Inform the parent/guardian that their child(ren) will be referred to DDS Children's Services to assess the child(ren)'s need and eligibility for early intervention services that may help the child learn and reach his or her individual potential.

When children under the age of three (3) are involved in a substantiated case of child maltreatment and a protective services or foster care case is subsequently opened, the FSW caseworker (either protective services or foster care, as applicable) will:

A. Provide an overview of the benefits of early intervention services to the parent/guardian.
B. Make a referral to DDS for each child in the home (victims and non-victims) under age three.
    1) Complete form DHS-3300 available in CHRIS.
        a) The DHS-3300 can be accessed in the Information and Referral Screen (Case/Services/Ref Services; Select child who is being referred and then select add button).
        b) When the button "DCO-3350/DHS-3300" is selected, a dialogue box will open so that staff can select the form to be completed.
        c) Select the "OK" button to open the DHS-3300.
        d) Select "Developmental Disabilities" as the Receiving Agency.
        e) Select "Other" in the "Services Requested and Codes" section and enter "Early Intervention Screening Referral" in the specification box.
        f) Complete the remainder DHS-3300 with as much information as possible.
            i. At minimum, the child's name, child's date of birth OR Social Security number, and FSW contact information must be entered.
C. Print the completed DHS-3300 to either scan and email or fax to the local DDS Services Coordinator.
D. Inform the parent/guardian that their child(ren) will be referred to DDS Children's Services to assess the child(ren)'s need and eligibility for early intervention services.
E. Prior to the early intervention services intake meeting, provide the local DDS Services Coordinator with:
    1) Court-order, if applicable
    2) Copy of Social Security Card or number
    3) Copy of Medicaid Card or number, if applicable
    4) Any other pertinent information related to the request for the early intervention screening
    5) Copy of EPSDT, if available (parent must obtain)
    6) Copy of all evaluations, if applicable
G. Coordinate remaining paperwork and services, as applicable, with the local DDS Service Coordinator. This includes but is not limited to:
    1) Coordinating the completion of DMS-800: Authorization for Children's Medical Services if the early intervention intake meeting determines the child is eligible for DDS Children's Medical Services
    2) Providing a copy of the Family Advocacy and Support Tool (FAST) for any child involved in an in-home services case or a copy of the Child and Adolescent Needs and Strengths (CANS) functional assessment for any child involved in an out-of-home services case and the case plan once they are completed;
    3) Notifying, as applicable, PACE, Health Service Worker, and foster parent(s) that early intervention screening referral has already been made to DDS Children's Services per CAPTA requirements prior to PACE evaluation.
H. Invite DDS services coordinator and early intervention service providers to staffings if child is receiving early intervention services.
I. Keep the local DDS Service Coordinator informed of any changes to the case plan that may affect early intervention services and coordination.
J. Document contacts related to the DDS early intervention services referral in the contacts screen in CHRIS.
K. Update the child's case plan as appropriate.
L. Conference with supervisor as needed regarding the referral to DDS early intervention services.

Investigative and FSW Supervisors will:

A. Conference with the investigator and/or FSW caseworker as needed regarding the child's DDS early intervention referral and/or any subsequent services.

B. Notify, as necessary, his or her supervisor of any issues related to the child's DDS early intervention referral and/or services.

Upon referral, the DDS Service Coordinator should:

A. Acknowledge receipt of the DHS-3300 via email or fax.
B. Arrange the early intervention intake meeting.
C. Assess and determine the need and eligibility of the child for services and notify in writing the DCFS Family Service Worker (FSW) and FSW Supervisor indicating the eligibility status and needs of the child, if applicable.
D. If it is determined that the child needs and is eligible for early intervention services:
    1) Provide a more detailed explanation to the parent/guardian of early intervention services including types, benefits, requirements, etc.
    2) Provide copies of the child's IFSP and any early intervention evaluations to the FSW.
    3) Keep the child's FSW and person serving as the parent informed of the child's progress and any changes in services.

PROCEDURE II-J2: DDS Early Intervention Individualized Family Service Planning

01/2020

The FSW will:

A. Regardless of the type of case (i.e., protective or foster care), include early intervention services and Individualized Family Service Planning (IFSP) meetings in the case plan as appropriate and ensure the biological parent participates IFSP and related services as appropriate.
B. If the biological parent is unable or unwilling to participate in IFSP (e.g., court orders that the child's parent/guardian shall have no involvement in child's educational planning, parents cannot be located; goal is not reunification):
    1) Ensure that an appropriate adult serving in place of the parent attends the IFSP meetings to act as a decision-maker regarding the child's early intervention services. The person serving in place of the parent is generally the person who is currently caring for the child (e.g., temporary guardian, foster parent, etc.).
        a) Ensure that a no contact order from the court pertaining to the person serving in the place of the parent does not exist and that the surrogate parent is otherwise appropriate.
        b) If the person selected to serve in the place of the parent would like to attend a DDS Surrogate Parent Training, contact the DDS Service Coordinator to request the DDS Service Coordinator to arrange the training.
        c) If the individual caring for the child/serving in place of the parent cannot attend or otherwise participate in the IFSP meetings, DDS will appoint a DDS certified surrogate parent.
C. Continue to update child's case plan accordingly with information from IFSP.
D. Conference with supervisor as needed regarding the child's IFSP.

The FSW Supervisor will:

A. Conference with the FSW as needed regarding the child's IFSP.
B. Notify, as necessary, his or her supervisor of any issues related to the child's IFSP.

PROCEDURE II-J3: FASD Referrals and Services

01/2020

Note: This procedure is applicable to those children already involved in an open DCFS case and who DCFS staff or providers suspect may be affected by FASD. This procedure is not applicable to infants born with and affected by FASD or prenatal drug exposure and reported to the Child Abuse Hotline by a healthcare provider. Please see Policy II-F and related procedures for more information regarding infants born with and affected by FASD and prenatal drug exposure.

If child is symptomatic of FASD, the Family Service Worker (FSW) or Health Service Worker (HSW) will:

A. Gather information regarding the child's in utero and birth history to determine if the biological mother consumed alcohol (e.g., at what points during the pregnancy, amount consumed, frequency consumed, etc.) and/or any illegal substances while pregnant with child.
B. Complete and submit CFS-099: FASD Screening Referral to the appropriate Resource Supervisor or designee.
C. Collaborate with the Resource Unit to ensure the child and placement provider receives any necessary referrals and accesses any needed services.
D. Conference with supervisor as needed regarding FASD referrals and services.

The FSW Supervisor will:

A. Conference with the FSW as needed regarding FASD referrals and services.
B. Notify, as necessary, his or her supervisor of any issues related to the FASD referrals and services.

The Resource Supervisor or designee will:

A. Review the CFS-099: FASD Screening Referral.
B. Assign the referral to a local Resource Worker.
C. Provide the completed CFS-099: FASD Screening Referral to the assigned Resource Worker for review.

The assigned Resource Worker will:

A. Review the CFS-099: FASD Screening Referral.
B. Work with the child's FSW and Health Service Worker to coordinate appropriate referrals and screenings for the child and placement provider.

POLICY II-K: SEX OFFENDER WITH CUSTODY OR UNSUPERVISED VISITATION RIGHTS

01/2020

When DCFS receives a report that a child is living with or participating in unsupervised visits with a registered sex offender, DCFS will find the report "un-substantiated" when:

- **A. A court has ruled that the registered sex offender, as a custodian or participant in unsupervised visitation does not pose a risk to the child; and**
- **B. No other allegations have been made regarding the offender and the children and the report is simply based on the mere fact that the offender is a registered sex offender.**

PROCEDURE II-K1: Sex Offender with Custody or Unsupervised Visitation Rights

When investigating a report that a child is living with or participating in unsupervised visits with a registered sex offender, the Family Service Worker will:

- A. Determine if a court has granted custody or unsupervised visitation to the registered sex offender.
- B. When a court has granted custody rights or unsupervised visitation to a registered sex offender, the FSW must obtain a copy of the court order or divorce decree, and must designate the case as "UN-SUBSTANTIATED", if no other allegations have been made regarding the offender and the children and the report is simply based on the mere fact the offender is a registered sex offender.
- C. Document the investigative determination and the individual findings for each child on the "Investigation Findings" screen in CHRIS. Individual findings for each victim are also documented on the "Investigation Finding" screen. CHRIS will automatically populate the Overall Finding (true, unsubstantiated, exempted from finding due to religious exemption or exempted from finding under-aged juvenile offender) based on the individual findings.

III: SERVICES CASE OPENING
POLICY III-A: GENERAL SERVICES CASE OPENING & REEVALUATION

01/2011

The Division of Children and Family Services will open cases to ensure safety and promote the best interest of the child and to provide services to strengthen, reunify, and assist families. This will be accomplished through the delivery of Supportive, Protective, Adoptive (See Section VIII for Adoptive Services) or Out-of-Home Placement Services as deemed appropriate by assessment. The purpose of services shall be to provide the child with a continuous and stable living environment, promote family autonomy, strengthen family life where possible and promote the reunification of the child with the parent, guardian or custodian, when applicable.

The Division will ensure a determination of title IV-E/ Medicaid eligibility is obtained for each child placed in an out-of-home setting or subsidized adoption. When a child is removed from his home, 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. Eligibility for title IV-E foster care maintenance payments will be based on the following requirements:

A. The child was removed from the home of a specified relative pursuant to judicial determination to the effect that:
   1) Continuation in the residence in the home would be contrary to, or that the placement would be in the best interest, of the child. The contrary to the welfare determination will be made in the first court ruling that sanctions (even temporarily) the removal of a child from the home. If the determination regarding "contrary to the welfare" is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for title IV-E maintenance subsidy for the duration of that stay in foster care; and
   2) A finding of or a deeming of reasonable efforts is required. The judicial determination must state that reasonable efforts to prevent a child's removal from home or to reunify the child and family are not required.

B. The child's placement and care in a foster family home or with a public or private child placement or child care agency is the responsibility of either DHS or any other public agency with whom DHS has an agreement. Child care agency means a private child care agency, or a public child care agency which accommodates no more than 25 children, and is licensed by the State in which it is situated or has been approved by the agency of such State or tribal licensing authority (with respect to child care institutions on or near Indian reservations) responsible for licensing or approval of institutions of this type as meeting the standards established for such licensing, except, in the case of a child who has attained 18 years of age, the term includes a supervised transitional living setting in which the individual is living independently. This definition must not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent. The licensing file must contain documentation that verifies that safety considerations with respect to the staff of the institution have been addressed, and,

C. The child received aid (for the purposes of the FSPP Manual "aid" is defined as AFDC program requirements in effect 7-16-1996) in or for the month in which court proceedings leading to the removal of the child from the home were initiated, or would have received aid in or for the month if application for such aid had been made, or had been living with a specified relative within six (6) months prior to the month in which court proceedings were initiated, and would have received aid in or for such month if the he/she had been living with such relative and an application had been made for aid under title IV-A.

In any case where the child is an alien disqualified by the Immigration and Nationality Act from receiving aid in or for the month in which court proceedings leading to the removal of the child from the home were instituted, such child shall be considered to satisfy the requirements with respect to that month, if he or she would have satisfied such requirements but for such disqualification. The Office of Chief Counsel will be consulted if the child's immigration status must be addressed in any manner.

D. The child was living with a specified relative prior to removal from the home and was AFDC eligible (per AFDC requirements in effect 7-16-1996) for in that home in the month of the initiation of court proceedings. Or the child had been living with the parent or specified relative within six (6) months of the month of the initiation of court and the child would have been AFDC eligible in that month if he or she had still been living in that home (constructive removal.)

A child of a parent who is in DHS custody is also considered a dependent juvenile and is eligible to receive foster care maintenance payments and is deemed to be a recipient of aid to families with dependent children. Titles XIX and XX services will be available to the child in the state in which the child resides.
The state of Arkansas is not a voluntary placement state. The removal of a child from his home must occur pursuant to a judicial order placing custody of the child with the Department.

PROCEDURE III-A1: Protective/Supportive Services Case Opening

04/2018

The Family Service Worker will:

A. Gather data from the family about the needs of the family and place the information in the Family Advocacy and Support Tool (FAST). This information is located in the "Case Plan/Needs Assessment" section on the "Family Screen".
B. Enter all necessary data in CHRIS to create a client screen for each household member.
C. Review all information in the contact automatically populated from "case connect" screen into the contacts screen for the newly opened case.
D. Ensure that any current protection plan with a nearing 30-day re-assessment date is noted and that a re-assessment of the safety of the child occurs within 30 days of the implementation of the current plan.
E. File an affidavit for dependency-neglect for any plan which has been re-assessed and it is determined that a substantial risk of harm to the health and safety of the child remains.

PROCEDURE III-A2: Out-of-Home Placement Services Case Opening

04/2018

The Family Service Worker will:

A. Complete the "Case Connect" Screen in the Investigation to open a case.
B. Enter the appropriate information in the open case on the "Removal" screen in the "Removal" section of CHRIS.
C. Enter the appropriate information in the "Placement" section of CHRIS and within the "Place" section on "Recommend", "Pay Scale", and "Enter/Exit" screens. Entering information in CHRIS on the first placement of a removal episode will generate a message to "Review/Complete Initial Medicaid Application."
D. Enter the appropriate information on the "Gen. Info" and "Status" screens and on the "Employ" and "Education" screens under the "Emp/Educ" heading in the "Client" section.
E. Enter the appropriate information on the screens under the "Medical" heading in the "Client" section.
F. Photograph the child or children, and:

1) With the child in a comfortable, non-intimidating setting, explain the need to take his or her photograph. Facilitate this in as sensitive a manner as possible.
2) Using a digital camera provided by the Division, take a digital photograph (head shot from the shoulders up) of the child or children entering foster care. The photograph should be taken within three working days of the date the child entered foster care.
3) Upload the image as a JPEG to the CHRIS case record. The electronic file size should be no larger than 500 KB.
4) Print the photograph using the "Photo and Child Information" functionality in CHRIS and add a hard copy of the photograph to the case record.
5) Delete the photo from the camera stick after the photo has been uploaded into the CHRIS application.
6) Provide the child with a copy if they request one.
7) If the child remains in foster care, the FSW who is his or her primary or secondary caseworker will retake the photograph on an annual basis within ten working days prior to the date the child entered foster care. Each time a new photograph is taken, update the electronic version in the CHRIS system and the hard copy in the case record. The photograph may be:
   a) Shared with law enforcement and the National Center for Missing and Exploited Children to help facilitate the recovery of missing children, or for other official law enforcement purposes that are in the best interest of the child.
   b) Used for staffings, Team Decision Making meetings, or court procedures if children are not present;
   c) Included in placement applications; and,
   d) Used in the child's Life Book. The photograph used for the Life Book should be printed using the "Photo Only" functionality in CHRIS.
8) As with other electronic equipment that contains sensitive client information, precautions should always be taken to protect confidentiality and the images of all children being served by DCFS.
9) A DHS 5008 must be completed for the camera and the camera must be enabled for read-only connection to the computer.
10) For any child already placed in care, but lacking a photograph, the FSW who is his or her primary or secondary caseworker should take his or her photograph at the next visit between the FSW and the child and follow the procedures and specifications listed above.

G. Issue an initial clothing order, if needed, using the DCFS P Card Requisition.

H. Initiate a request for Medicaid within one working day of the date the child enters DHS custody by completing the following actions:
   1) Ensure all relationship screens are completed in CHRIS.
   2) Ensure all information in client demographic screens is current including the "financial" tab.
   3) Complete removal and placement screens for each child in foster care and ensure the placement is approved by a supervisor.

   If the FSW has been notified that the CHRIS system will be down, and he or she cannot transmit the Initial Medicaid Application within the one-day time frame, only then will he or she complete and fax a paper copy of the CFS-487: Application for title IV-E Payments/Medicaid to the Eligibility Unit.

I. Route the signed court order to Family Support Specialist (Eligibility Unit).

J. Apply for title IV-E Payments/Medicaid:
   1) Complete the "Application for Social Security Card" (SS-5) if the child does not already have a Social Security Number or the number is not known:
      a) Sign the SS-5 as the DCFS representative for the case.
      b) Route the SS-5 to the Social Security Administration and copy to the Family Support Specialist.

K. Enter income, debts and asset information in the Client/Finance Screens in CHRIS for each member of the removal household.

L. Enter necessary information on the Medicaid/IV-E Application screen (four tabs) in CHRIS in order to complete the application and click "Send" to transmit the application to the Eligibility Unit. Send the completed Medicaid/IV-E Application to the Eligibility Unit within seven working days from the date the child entered the out-of-home-placement. Other information needed to establish title IV-E Medicaid

eligibility, e.g., birth certificate, Social Security Number, removal order, petition that led to removal, etc., should also be sent to the Eligibility Unit if available at that time.

M. Obtain any additional requested information and forward it to the Family Support Specialist within 10 working days.
N. Within 10 working days of any delay, notify the Family Support Specialist of the information which cannot be obtained and the reason.
O. Review all information in the contact automatically populated from the investigation "case connect" screen into the contacts screen for the newly opened case.
P. Continue the Family Advocacy and Support Tool (FAST) or Child and Adolescent Needs and Strengths (CANS) assessment, as applicable, with family participation.

PROCEDURE III-A3: Case Reevaluation for Medicaid Redetermination Purposes

04/2018

The Family Service Worker will:

A. Receive the printout of cases due for reevaluation from the Foster Care/Medicaid Eligibility Unit.
B. Receive CHRIS tickler notification of Medicaid/IV-E case Re-determination.
   Complete the Re-determination screen in CHRIS (3) tabs and click "Send" to transmit the Re-determination to the Eligibility Unit for processing.
   1) The Eligibility Unit will be notified by an automated process for reporting "Changes" in CHRIS when changes are made to the case record for the following circumstances:
      a) Child age 18
      b) Child left care
      c) Trial visit
      d) Runaway
      e) Parental rights terminated
      f) Child age 16-19/not in school
      g) Child placed for adoption
      h) Insurance
      i) Placement/address change

      If a child is born to a child in DHS custody, then the FSW will check "Client Gave Birth" on the changes tab of the Re-determination/Changes screen in CHRIS.
C. Mail a DHS-160: Notice to Applicants for and Recipients of title XX Services at least 10 days prior to the change in service, if the family signed the application and service is to be reduced or terminated.

PROCEDURE III-A4: Out-Of-Home Placement Outside the Initiating County

04/2018

The Family Service Worker Supervisor from the primary (initiating county office) will:

A. Notify (telephone, fax, or email) the FSW Supervisor in the resident county office prior to moving the child(ren).
B. Within 24 hours following the above notification, assign the resident county as secondary on the Assign/Transfer screen in CHRIS. Include a brief summary of services needed for the client in the Assign/Transfer screen and ensure all contact information is correct in the client CHRIS demographics screens.

The Family Service Worker in the primary (initiating) county will:

A. Within 24 hours, email secondary FSW a list of important dates and summary of service needs for the client. This list should include scheduled court dates, scheduled staffings, and previously scheduled transportation needs (i.e., PACE evaluations, visitation with family, approved contact list, special medical needs, etc.).
B. Continue providing casework services to the custodial/non-custodial parents as determined by the case plan.
C. Maintain a case file including such non-CHRIS (hard copy) items as legal and medical documents.
D. Provide the resident county FSW a copy of the case file with non-CHRIS items.
E. Key data (e.g., case plan changes) into CHRIS as appropriate.
F. Collaborate with primary FSW to develop and process any needed purchase orders (P Card Request, DHS 1914) for the child.
G. Collaborate with secondary FSW to complete approved purchases by emailing purchase approvals to secondary FSW for completion of purchases, as appropriate.
H. Request Medicaid determinations/reevaluations by the DCFS Eligibility Unit and submit needed documentation.
I. Develop the initial case plan and subsequent changes as per Policy IV-A.
J. Arrange staffings as needed and maintain a current case plan.
K. Ensure that the secondary FSW is invited to staffings and that all applicable case information is gathered from secondary FSW for necessary adjustment of CANS ratings and case service planning.
L. Place information about visitation responsibilities (which county will transport, which county will supervise visits) in the "visitation" section of the family case plan.
M. Contact the secondary FSW a minimum of once monthly by phone or email and enter a contact in CHRIS demonstrating the collaboration of service provision, any information obtained regarding service provision, coordination of purchasing needs, coordination of child care needs, and documenting any placement issues identified.
N. Ensure provision of services to facilitate reunification or other permanency arrangements as appropriate.
O. Arrange, coordinate, and ensure transportation is provided for parent/child visits.
    1) Consideration should be given to use of relative or fictive kin volunteers when appropriate. Additional consideration should be given to transporting parents rather than children in an effort to decrease travel hardships for children.
P. Notify the secondary FSW immediately of any changes in plans for care of the child.

The Family Service Worker (secondary) in the county of residence will:

A. Participate in staffings and case plan development.
B. Assist the foster home or facility with implementing case plan goals by monitoring progress for each goal and making service referrals as necessary.
C. Notify primary FSW by email if financial needs are identified.
D. Take lead on completing necessary paperwork for purchases and coordinate with primary FSW to ensure completion of purchasing requests.
E. Complete purchases upon receipt of approved requisitions.
F. Keep the primary FSW informed of all progress, problems and child experiences through CHRIS documentation and during monthly/as needed contact with the primary FSW. Issues needing immediate attention should be documented in an email to the primary FSW and his/her Supervisor.
G. Obtain a progress report from facility staff every month following a child's placement in a facility and forward a copy to the primary FSW.
    1) 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 Department foster home. The order will set forth the schedule for the progress reports and will identify the service provider responsible for submitting the progress report. The service provider will 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 will subject the service provider to contempt sanctions of the court. The progress report will 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 will 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.

H. Notify the primary FSW immediately of any change in the plans for care of the child.
I. Notify the primary county by telephone within 24 hours, and make all other necessary notifications (e.g., foster parents) if an emergency change in placement is necessary.
J. Make regular foster home/facility visits to the child/children as per the case plan.
K. Assist the primary county in arranging for the parent/child/sibling visits as outlined by the primary FSW in the case plan or as otherwise coordinated by primary FSW.
L. Complete any necessary incident reports (e.g., disruption) and provide the primary county a copy.

POLICY III-B: NOTIFICATION OF RELATIVES AND FICTIVE KIN WHEN A CHILD IS TAKEN INTO CUSTODY BY THE DIVISION

08/2015

The Division shall exercise due diligence to identify and provide notice to all adult grandparents, all parents of a sibling of the juvenile where the parent has legal custody of the sibling, and other adults who are related to the child transferred to the custody of the Division within the third degree of kinship by virtue of blood, adoption, or marriage. Additionally, the Division will provide notice to any other adult relatives suggested by the parents of the child. Per A.C.A. § 9-28-107, the Division may provide notice of a child transferred to the custody of the Division to fictive kin which are persons who have a strong, positive emotional tie to the child and have a positive role in the child's life but are not related by blood, adoption, or marriage. The Division will, on a continuing basis, seek out for the purpose of identifying potential opportunities for permanency, persons with whom the child has meaningful relationships. The Division will document its attempts to provide notice in court reports.

PROCEDURE III-B1: Notice to Relatives and Fictive Kin

08/2015

Notices

The Family Service Worker will:

A. Provide notice using CFS-323-A: Notice to Adult Relatives by Blood, Adoption, or Marriage that a Child Has Been Taken into DCFS Custody to all adult relatives by blood, adoption, or marriage within the third degree of kinship, all parents of a sibling of the juvenile where the parent has legal custody of the sibling, as well as any other adult relatives suggested by the parents of the child.
   1) The Division *should* provide notice using CFS-323-B: Notice to Fictive Kin that a Child Has Been Taken into DCFS Custody to any adults identified as having a positive, meaningful relationship with the child and/or could offer needed services and supports to the child and/or his or her family.

B. Send notices within 30 days after the child is transferred to the custody of the Division.

C. Send notices to additional persons of interest who are identified at any point in time during the child's stay in foster care (within 30 days of identification) until permanency is achieved.
   1) Notices need not be sent to any adult relative or fictive kin who has:
      a) A pending charge or past conviction or plea of guilty or nolo contendere for family or domestic violence; or,
      b) A true finding of child maltreatment in the Child Maltreatment Central Registry.

      However, if it is determined that the relative may have a meaningful relationship with the child and the charge, conviction, or true finding is such that the relative is not considered to pose a threat to the child, the notice may be sent.

D. In the Document Tracking Screen in CHRIS, select the CFS -323-A: Notice to Adult Relatives by Blood, Adoption or Marriage that a Child Has Been Taken into DCFS Custody or CFS-323-B: Notice to Fictive Kin that a Child Has Been Taken into DCFS Custody, as appropriate, and enter the following information:
   1) Date Sent
   2) Description text field
   3) Comments text field
   4) Document Issue on Behalf of Client – select the client
   5) Document Issued to Recipients – select relative client

E. Contact by phone any individual to whom CFS-323-A: Notice to Adult Relatives by Blood, Adoption or Marriage that a Child Has Been Taken into DCFS Custody or CFS-323-B: Notice to Fictive Kin that a Child Has Been Taken into DCFS Custody was sent within five (5) working days of sending the notification to more fully explain the options that the specific individual may have in terms of providing a temporary home for or otherwise staying in contact with the child who was taken into DHS custody.

F. Document the date and time of all phone contact attempts (whether successful or unsuccessful in speaking with the individual) and the result of each attempt in the CHRIS contacts screen.
G. If, after three attempts of trying to reach an individual to whom CFS-323-A: Notice to Adult Relatives by Blood, Adoption or Marriage that a Child Has Been Taken into DCFS Custody or CFS-323-B: Notice to Fictive Kin that a Child Has Been Taken into DCFS Custody was sent, the Family Service Worker is unable to reach him or her, the FSW may cease trying to contact the individual.
H. Enter the following information as appropriate on the Relative/Fictive Kin Interest Information Tab within the Court Report Screen in CHRIS under the Relative/Fictive Kin Interest Detail if the individual indicates interest in providing support to the child:
    1) Child
    2) Relative/Fictive Kin
    3) No Relative/Fictive Kin Identified checkbox (if applicable)
    4) Notified Date
    5) Under the "Interested in Participating in the Care and Placement of Child" section, each grouping has a checkbox and when selected the text box will become mandatory to enter the information on the following:
        a) Provisional Home
        b) Foster Home
        c) Kinship Guardianship
        d) Desires Visitation

Court Reports

The Family Service Worker will:

A. Include the following information in the CFS-6011: Court Report:
    1) Outline of the efforts made by the Division to identify and notify all adult relatives including all parents of a sibling of the juvenile where the parent has legal custody of the sibling, that the child is in the Division's custody.
    2) A list of all adult relatives and the response of each relative to the notice, including:
        a) The adult relatives' interest in participating in the care and placement of the child;
        b) Whether the adult relative is interested in becoming a provisional foster parent or foster parent of the child;
        c) Whether the adult relative is interested in visitation.
    3) Outline of the efforts made by the Division to identify and notify any fictive kin that the child is in the Division's custody.
    4) A list of all fictive kin and the response of each fictive kin to the notice, including:
        a) Whether fictive kin is interested in becoming a provisional foster parent or foster parent of the child.

POLICY III-C: COORDINATION WITH THE OFFICE OF CHILD SUPPORT ENFORCEMENT

02/2010

The Division of Children and Family Services will coordinate with the Office of Child Support Enforcement (OCSE) to ensure that foster care cases are referred so that support can be paid to the Department of Human Services while the child remains in DHS custody. Foster care cases in which paternity is an issue will also be identified and referred. A referral for child support will be made for each parent involved in a foster care case meaning the parents from whom the child was removed, absent parents and putative fathers.

The Family Service Worker will refer foster care cases to OCSE by completing the Relationships screen in CHRIS with family identifying information. In addition, he Family Service Worker will provide information as needed and coordinate with OCSE after an OCSE (IV-D) case is opened. The CHRIS system generates the referral to OCSE after a child has been in foster care for 30 days. Once an OCSE case is opened, OCSE has responsibility to coordinate with the support payer and for arranging and paying for paternity testing.

Child support monies will be paid to and managed by the Department of Human Services. Child support monies collected will be used to reimburse the state for foster care board payments and other expenses as appropriate.

PROCEDURE III-C1: DCFS Coordination with OCSE

02/2010

The Family Service Worker will:

A. Complete the Relationships screen in CHRIS.
B. Initiate the referral to OCSE by selecting Yes from the Refer to Child Support Enforcement Unit radial button on the Relationships screen.
C. Be the contact person with authority to advise OCSE on the status of the family and case as casework progresses.
D. Receive and act on notices, e.g. requests for information sent by OCSE.

The CHRIS system will generate information to OCSE based on information entered into CHRIS by the Family Service Worker. CHRIS will:

A. Notify OCSE when parental rights have been terminated so the child support case can be closed.
B. Advise OCSE when custody changes and the child leaves foster care.
C. Notify OCSE when a child's demographic information changes such as name, SSN, etc.
D. Provide OCSE with the following information when custody changes:
    1) Where the child is placed.
    2) Where child support payments are to be sent: DHS P.O. Box 8181, Little Rock, AR 72203.

POLICY III-D: RESOLUTION OF DENIAL OF MEDICAID SERVICE

09/2008

When a particular service is denied for an otherwise Medicaid eligible child in foster care, the Division will attempt to resolve the issue by discussing the issue with the appropriate Division of Medical Services (DMS) representative. If the issue cannot be resolved internally, the Division will file an appeal according to established DMS guidelines.

PROCEDURE III-D1: Internal Resolution

09/2008

If a Medicaid eligible child in foster care is denied a Medicaid service and the Family Service Worker disagrees with the denial, the Family Service Worker will:

A. Notify the DCFS Client Advocate.
B. Complete a Departmental appeal form (DHS-1200) and provide to the Client Advocate.

The Client Advocate will:

A. Contact the DMS Director or his designee and attempt to resolve the issue by providing any additional information and documentation regarding the child and his/her need for the denied service. The issue must be resolved prior to the expiration of the 30 day Medicaid appeal timeframe, to allow for a formal appeal in the event that the issue cannot be resolved internally.
B. Notify the FSW when DMS makes a determination as to the outcome of the internal appeal. If the denial is upheld, the Client Advocate may initiate an external appeal.

PROCEDURE III-D2: External Resolution

09/2008

If a Medicaid eligible child in foster care is denied a Medicaid service and an attempt to resolve the issue through the internal resolution process has been unsuccessful, the Client Advocate will, with agreement of the DCFS director, notify the contract attorney for children in foster care.

The contract attorney will:

A. File an appeal on behalf of the child according to the guidelines established by DMS.
B. Complete a Departmental appeal form (DHS-1200)
C. File the form with the Office of Appeals and Hearings within 30 days of the date on the notification letter.

The Office of Appeals and Hearing will make a final decision regarding eligibility for a Medicaid service and send written notification of the final agency determination to the appropriate parties.

POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING

10/2014

OVERVIEW

Drug and alcohol use are often contributing factors to child maltreatment. As such, there are times when drug and/or alcohol screening for clients is necessary to ensure appropriate interventions are provided to the family. However, drug and alcohol screening alone are neither treatment interventions nor child safety interventions. The use of drug and alcohol screens and the corresponding results are only one component in the assessment of child safety and risk as well as the strengths and protective capacities of families. It is also important to recognize that drug screens administered by DCFS staff are only presumptive screening tools. As such, only the results of a lab confirmed drug test (not a drug screen) can definitively confirm the presence of a specific drug.

The Division of Children and Family Services will conduct drug and alcohol screening of clients (e.g., parents, caretakers, youth) when appropriate during a child maltreatment investigation or during the course of any type of open DCFS case. It is considered appropriate to conduct a client drug or alcohol screen if DCFS staff has reasonable cause to suspect that a youth involved in a DCFS investigation or case is using drugs and/or alcohol or has reasonable cause to suspect a child's parents or caretakers are under the influence of drugs and/or alcohol to the point that their parenting abilities are negatively impacted. Reasonable cause to suspect may include past history of drug and/or alcohol abuse and/or observable client behavior indicating he or she may be under the influence of drugs or alcohol.

FREQUENCY AND LOCATION OF DRUG AND ALCOHOL SCREENS

DCFS may request random drug or alcohol screenings of a youth, parent, or caretaker for reasonable cause. DCFS will also conduct drug screens for clients as outlined in court orders, when applicable.

If a client is participating in a substance abuse treatment program that requires frequent random drug screening or has a probation or parole officer who conducts frequent random drug screens, then drug screens conducted by DCFS are not necessary (unless a court order specifies DCFS must administer drug screens rather than accepting drug screens from another qualified provider). The results from the drug screens conducted by the substance abuse treatment program, probation officer, or parole officer will suffice (see preceding court order exception) as long as the substance abuse treatment program, probation officer, parole officer, etc. provides the written results of the drug screens to DCFS in a timely manner. If results are not received from the substance abuse treatment program, probation officer, parole officer, etc. within court timeframes or as otherwise needed by DCFS, then at that point it will become necessary for DCFS to conduct an additional drug screen. DCFS will remain responsible for providing written drug screen results to the court regardless of the entity that conducts the screen.

Appropriate locations for drug and/or alcohol screenings for clients 13 and older may include, but are not limited to, the county office, client home, and court house, as appropriate. While DCFS staff may conduct drug or alcohol screens on teenagers when necessary, all children younger than 13 for whom a drug screen or test is needed will be referred to a physician or medical facility to have an appropriate screen or test completed (e.g., hair shaft test) at no cost to the client. If parental consent for a necessary drug screen or test on a minor is not granted, DCFS will obtain an order of investigation to conduct a drug screen or test for children and youth. For drug screens or tests for children who are less than 13 years of age, DCFS staff will accompany them to a qualified agency for the screen or test.

TYPES OF DRUG SCREENS UTILIZED BY THE DIVISION

DCFS staff will conduct only oral fluids and urine specimen drug screenings. Only drug and alcohol screens from the Division approved vendor will be used by DCFS staff. DCFS staff will only administer drug and alcohol screens according to training and procedures provided by the vendor.

Division staff will keep record of their completion of training and complete training updates as needed. An employee who has not completed the Division approved vendor drug screening training will neither administer a

drug or alcohol screen to a client nor serve as a witness to drug or alcohol screen results (witnesses to drug screen results are only required when results of the drug screen are unclear and/or challenged by the client). While interns (stipend and non-stipend) may observe DCFS staff working with drug and alcohol screens, interns will never independently conduct drug or alcohol screens on clients nor will they serve as an official witness to drug or alcohol screen results.

Written screening instructions provided by the Division approved vendor will be kept in a binder clearly identified as such in all county offices. County office personnel are responsible for maintaining all updates to the screening instructions that the Central Office Prevention and Support Unit provides to the field.

Court ordered (or otherwise deemed necessary) hair shaft tests, blood tests, or other drug screens that are not the standard DCFS oral fluids or urine specimen screens administered by Division staff will be handled on an individual basis. All requests for payment of hair shaft tests, blood tests, or other non-standard drug screens will be made via the Area Financial Coordinator or designee to the Central Office Financial Unit. Such tests and screens will be paid with a state procurement card or purchase order with prior approval from the Central Office Financial Unit.

CLIENT REFUSAL OF SCREENS

If not previously court ordered, parents or caretakers may decline participating in their own drug and/or alcohol screens. Any refusal must be documented in CHRIS. The drug and/or alcohol screen may not be pursued further without a court order. If the adult client refuses to submit to any court ordered drug or alcohol screen, the screen will be documented in CHRIS as a refusal, and the refusal will be disclosed to the court.

ACTIONS FOLLOWING SCREEN RESULTS

Regardless of the results of the drug screen, DCFS staff will verbally share the results of the screen with the client. DCFS staff will also record the results of the screen with the client via the CFS-150: Drug and Alcohol Screen Results form.

If drug and/or alcohol screen results are positive, DCFS must assess how the drug and/or alcohol usage is impacting the parent/caretaker's ability to effectively parent and ensure child safety prior to making decisions about the placement of the child, parent-child visits, and/or other case plan requirements. A positive drug or alcohol screen in and of itself will not result in the postponement and/or withholding of visits between a parent and child in DHS custody unless:

A. The parent is under the influence of drugs and/or alcohol at the time of the scheduled visit and has observable behavior indicating impairment of parenting capacity; or,
B. A court order specifies that a parent's positive screen will result in the withholding of parent-child visits.

CLIENT CHALLENGES TO DRUG OR ALCOHOL SCREEN RESULTS

For each Division administered drug screen that is positive, DCFS will pay for one lab test of that positive drug screen if it is challenged by the client. If the lab test confirms the presence of the drug(s), then DCFS will not pay for further testing of that positive screen and/or lab confirmation. However, if a consistent pattern of positive screens followed by client requests for lab confirmations of each screen that also return positive emerges, the Division will have the discretion, in consultation with other parties to the case, to cease paying for continued lab confirmation tests requested by the client.

If a client challenges the results of a Division administered drug or alcohol screen, the client may elect at his or her own expense to have another entity (e.g., hospital for drug and alcohol screens, local police station for alcohol screens only) conduct another drug and/or alcohol screen or test rather than DCFS sending the screen to the lab for testing. The Division will accept the results of urine or blood sample screens or tests from other qualified agencies as long as a DCFS employee is able to immediately accompany the client to the qualified agency and provided the qualified agency conducting the screen gives results in writing to DCFS.

CONFIDENTIALITY OF DRUG AND ALCOHOL SCREEN RESULTS

All data, information, and results related to client drug and/or alcohol screens are confidential. Disclosure of information will only be to those individuals whose official business duties necessitate disclosure or as required by law. Breaches of confidentiality will constitute grounds for disciplinary action to include the possibility of job termination.

PROCEDURE III-E1: Administering Client Urine Specimen Drug Screens

10/2014

The DCFS employee will:

A. Ask client to put away his or her purse, bag, jacket, etc. and ask client to empty all of his or her pockets.
B. Observe, but not touch, each of the client's pockets to ensure they are empty. The only item the client may take into the restroom stall is the collection container.
C. Escort the client to the restroom.
D. Directly observe the clients wash their hands without soap.
E. Give the client only the collection container. The client must not have access to the screen.
F. Instruct the client to fill the cup to the marked line.
G. Observe the client enter the restroom, close the door to give privacy to the client, but remain immediately outside the restroom.
    1) Do not directly observe the client in the process of urination unless court ordered to observe.
        a) If court ordered to observe, the witness must be the same gender as the client.
H. If the client has difficulty giving a specimen, have the client drink eight (8) ounces of water and wait up to two (2) hours for the client to give a urine specimen. As such, do not attempt to conduct the drug screen if a minimum of three hours are not left in the workday.
I. After the cup has been returned to the FSW or designee, visually examine the specimen.
    1) Suspicion of adulteration and/or dilution will be indicated by the PH screen and temperature gauge.
J. Verbally share and explain the drug screen results to the client.
K. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
L. If the client does not challenge the screening results:
    1) Return the specimen cup to the client after the specimen has been screened and the results documented.
    2) Ask client to dispose of the contents in the toilet or urinal, flush, and discard the container in the designated trash container.
    3) Place the top copy of the CFS-150: Drug and Alcohol Screen Results Form in the client record.
    4) Retain the middle copy for submission to court.
    5) Give the client the bottom copy of the completed CFS-150: Drug and Alcohol Screen Results Form.
    6) Scan and email the completed CFS-150: Drug and Alcohol Screen Results Form to all parties to the case.
    7) Document drug and alcohol screen results and any other relevant information associated with drug and alcohol screen results in CHRIS as applicable.
M. If the client challenges the screening results, please refer to Procedure III-E2: Urine Specimen Drug Screen Challenges.

The DCFS Supervisor will:

A. Ensure all staff administering and/or serving as witnesses to drug screen results have successfully completed the Division approved drug and alcohol vendor training.
B. Conference with the FSW as needed regarding need for screening and any subsequent action steps.

PROCEDURE III-E2: Client Urine Specimen Drug Screen Challenges

10/2014

If urine specimen drug screen results are positive and the client challenges the result, the DCFS employee will:

A. Inform the client that the specimen will be sent to the lab for drug testing confirmation.
   1) However, if DCFS staff initially conducted the drug screen at the client's home, the DCFS employee may offer to re-screen the client at the county office that same day and have another DCFS staff person serve as a witness to the results of the second screening.
B. The chain of custody will be maintained throughout the entire challenge process.
C. Complete the county specific vendor challenge form.
D. Write the client specimen identification number found on the county's vendor challenge form/mailing strip on the CFS-150: Drug and Alcohol Screen Results Form (**the client specimen identification number is the identifier used in the subject line of the email that the lab sends when emailing the FSW with the challenge results; this number is the only way to match the challenge results to the correct client so it is extremely important to record the client specimen identification number prior to mailing the challenge screen to the lab**).
E. Prepare the urine specimen for laboratory screening (lab will not process urine specimens that are received without proper identification).
   1) Notify the DCFS Prevention & Support Manager or designee that the collection will be sent for lab confirmation by faxing a copy of the Chain of Custody, prior to the urine specimen being sent to the lab.
   2) Check for leakage of the collection device prior to mailing/sending the specimen for confirmation screening.
   3) Use the supplied FedEx mailer envelopes to send the challenged, positive, urine specimens to the lab.
      a) If samples taken on weekends or after FedEx facility closes during the week, refrigerate samples until they are delivered to FedEx facility for shipment.
   4) To access challenge results, contact the Area Financial Coordinator or designee for instructions on how to access the lab confirmation results via the internet.
   5) If challenge results are contested, documentation of the chain of custody of urine specimen shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.
      a) Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody of those urine specimens.
      b) For a court ordered screening, a written report of the results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.
      c) This report must be certified by an affidavit subscribed and sworn to before a notary public.
      d) This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.

If the alcohol screen results are positive and the client challenges the results, the DCFS staff will:

A. Inform the client he or she may immediately obtain a blood test from a qualified agency or immediately take a Breathalyzer test at the local police station.

PROCEDURE III-E3: Administering Other Client Drug and Alcohol Screens

10/2014

The DCFS employee will:

A. Refer to vendor information for screen (e.g., K2 strip, ALCO screen) collection procedures and interpreting results.

B. Under normal circumstances, limit the entire screening process to 15 minutes.
C. Verbally share and explain the drug screen results to the client.
D. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
E. If the specimen screening results are positive and the client challenges the result:
   1) Prepare the oral fluids specimen for laboratory confirmation, if applicable, for that specific screen. Do not dispose of an oral fluids specimen that needs to be sent to the screening laboratory for confirmation testing.
      a) Send the specimen to the lab per the vendor's instructions.
      b) Access lab confirmation results (see Area Financial Coordinator for more information).
      c) If challenge results are contested, documentation of the chain of custody of specimen shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.
         i. Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody.
         ii. For a court ordered screening, a written report of the results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.
         iii. This report must be certified by an affidavit subscribed and sworn to before a notary public.
         iv. This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.
   2) If the oral fluid specimen is not able to have a laboratory confirmation and the client still wishes to challenge the result, immediately accompany the client to a qualified agency for confirmation testing provided the qualified agency will give results in writing to DCFS.
F. If the client does not challenge the results of the screening:
   1) Return oral fluids screening kit to the client after the specimen has been tested and results documented.
   2) Ask client to discard the kit in the designated trash container.
   3) Observe client throwing away kit in designated trash container.

PROCEDURE III-E4: Maintenance and Re-ordering of Drug and Alcohol Screens

10/2014

The County Office will:

A. Store the drug screen kits at room temperature (do *not* leave drug screen kits in vehicles for storage purposes as this will impair the effectiveness of the drug kits).
B. Maintain an adequate supply of drug screening materials, to include copies of drug screening information, at all times.
C. Monitor closely the specimen collection supplies (county office supply stock will not fall below 15 kits).
D. Drug screen kits past their expiration dates will *not* be used and will be disposed of immediately (expiration date will be clearly marked on each drug screen kit).
E. Use new supplies only after current supplies are depleted.
F. If the county has several kits nearing expiration, order new drug and/or alcohol screen kits as well as challenge kits directly from the DCFS approved vendor and copy the Prevention and Support Unit on the order request.
G. Address questions pertaining to Chain of Custody Challenged screening to the Central Office Prevention and Support Unit.

The Central Office Prevention and Support Unit will:

A. Ensure funds are available for all drug and alcohol screen kit orders and challenge kit orders.
B. Email DCFS approved vendor to inform them whether to move forward with county order request (based on availability of funds) and copy county point of contact on the email.
C. Respond to the county office regarding questions related to DCFS approved drug screen and challenge kits.
D. Serve as a liaison between the county office and DCFS approved drug screen vendor as necessary.

POLICY III-F: SERVICES CASE OPENING FOR INFANTS BORN TO JUVENILES IN THE PHYSICAL CUSTODY OF THE DIVISION OF YOUTH SERVICES

09/2008

DCFS is responsible for coordinating services with the Division of Youth Services (DYS) to ensure that infants born to youth in the physical custody of DYS will be placed in a healthy, safe and caring environment upon the infants discharge from the hospital. The responsibilities and duties of each agency is delineated in the Arkansas Department of Human Services Division of Children and Family Services – Division of Youth Services Cooperation Agreement, which is posted on CHRIS Net and is subject to renewal annually. To determine the individual responsibilities and operational protocol of the two agencies, see the specifics of the agreement.

PROCEDURE III-F1: Coordination of Services, Care and Case Opening for Infants Born to Juveniles in the Physical Custody of the Division of Youth Services

08/2013

DCFS Responsibilities and Duties:
To ensure the well-being of an infant, born to a juvenile in the physical custody of DYS, the DCFS Assistant Director of Community Services or designee shall work collaboratively with DYS and function as the liaison between DYS and DCFS.

Upon receipt of information from DYS that a juvenile in their custody is pregnant, the DCFS Assistant Director of Community Services or designee will be responsible for contacting and coordinating services with the appropriate DCFS county staff and DYS staff.

In order to ensure the health and safety of any infant born to a juvenile in the physical custody of DYS, the DCFS Assistant Director of Community Services or designee shall perform the following duties:

A. Contact the appropriate DCFS county office to notify them of the referral from DYS.
B. Forward all information to the appropriate DCFS county office concerning the juvenile and designated caregivers.
C. Coordinate all information sharing between the county office and DYS. If the county office needs any additional information from DYS, the county must contact the DCFS Assistant Director of Community Services.
D. Track all referrals to the county office until the infant is placed with a designated caregiver or with DHS. The DCFS Assistant Director of Community Services or designee will develop a log to track all referrals and maintain a status of the referrals.

In order to ensure the health and safety of any infant born to a juvenile in the physical custody of DYS, the DCFS county office shall perform the following duties:

A. Contact the identified caregiver(s) to determine their willingness to take custody of the child at birth and to care for the child until the parent is released from DYS.
B. Explain to the prospective caregiver that:
    1) If his or her home study, including a Central Registry Check, a State Police Criminal Background Check, and Vehicle Safety (DMV) Check, is approved, DCFS will petition the court for them to take custody of the child at birth, and DCFS would have no further involvement in the case.
    2) A prospective caregiver has the option of becoming a foster family only if they need assistance in the care of the child.
C. Coordinate the services between other counties if the juvenile identifies more than one potential caregiver and any of the prospective caregivers live in different counties.
D. Subsequent to declining a prospective caregiver due to an unfavorable home study, contact other county offices as necessary to have those counties conduct home studies on other identified potential caregivers.

E. Conduct a home study, including a Central Registry Check, a State Police Criminal Background Check, and Vehicle Safety (DMV) Check, on the family that is the most willing to take the infant and willing to work for the best interest of the juvenile. County office staff can use contracts for conducting the home studies if contracts are available.
F. Once a favorable home study is completed on a prospective caregiver, explain to the prospective caregiver that DCFS will petition the court for them to obtain emergency custody of the child. The home study needs to be completed and approved, if possible, prior to the infant's birth.
G. If the home study is completed and approved within the first or second trimester of the pregnancy, then after the child is born but before placement, complete a walk-through of the prospective caregiver's home to ensure the home remains appropriate (a new home study is not required, only a walk-through).
H. Contact OCC on each case so that there is appropriate court involvement.
I. Identify cases as FINS Non-DCFS Involvement as appropriate.

If an appropriate caregiver is willing to take custody of the child, DCFS will not take custody but will file a petition for dependency due to the parent being incarcerated. The petition will ask for emergency custody to be given to the caregiver once the baby is born. Placement with the approved caregiver will be the requested placement and not placement with DHS.

If there is no appropriate caregiver or if the identified caregiver is not willing to take custody of the child but expresses that they would like to become a foster parent for the child, DCFS will petition the court for custody of the infant and open the caregivers home as a provisional foster home if the approved caregiver is a relative or fictive kin. If the approved caregiver is not a relative or fictive kin and wants to become a foster parent for the infant, the infant will have to be placed in an approved foster home until the caregiver becomes an approved licensed foster home.

Release of Infant

A. The DCFS Assistant Director of Community Services or designee will immediately notify the appropriate county office of the juvenile's entry into the hospital for delivery or immediately after the juvenile delivers the infant.
B. Upon notification, the county office will immediately notify the approved caregiver of the juvenile's entry into the hospital for delivery of the child.
C. DCFS shall be responsible for initiating any legal proceedings necessary to facilitate the placement or release of the infant(s).

POLICY III-G: SERVICES CASE OPENING FOR INFANTS IF ABORTION RESULTS IN LIVE BIRTH

04/2018

The Division of Children and Family Services (DCFS) is responsible for the immediate and on-going care of infants born alive as the result of an attempted abortion if before the abortion, the pregnant woman, or if married, the pregnant woman and her spouse, have stated in writing that they do not wish to keep the infant if the abortion results in a live birth and the writing is not retracted before the abortion.

PROCEDURE III-G1: Coordination of Services, Care, and Case Opening for Infants if Abortion Results in Live Birth

04/2018

To ensure the well-being of an infant, when abortion results in live birth, the Family Service Worker (FSW) will:

A. Place an immediate hold on the infant, regardless of the medical status of the infant.
B. Notify OCC immediately that a hold has been exercised to initiate a dependency petition.
C. Communicate with the current medical provider to determine the medical condition of the infant and to coordinate necessary medical services.
D. Refer the child's case to the Adoption Supervisor.

The FSW Supervisor will:

A. Ensure the child's case is referred to the Adoption Supervisor timely.
B. Coordinate with Adoption Supervisor to ensure services for the child while transitioning to an appropriate pre-adoptive placement.

The Adoption Specialist will:

A. Carry out the same actions as those listed for the Adoption Specialist in Procedure VIII-F1.

The Adoption Supervisor will:

A. Assign an adoption specialist within 24 hours.

POLICY III-H: SERVICES CASE OPENING FOR CASES INVOLVING INCARCERATED PARENTS

04/2018

The Division of Children and Family Services (DCFS) is responsible for coordinating services with the Arkansas Department of Corrections (ADC) and Arkansas Sheriff's Association to ensure the immediate and on-going assessment and provision of services to incarcerated parents of juveniles. DCFS will make diligent efforts to locate incarcerated parents and to determine what services are available to those parents during their incarceration. When working with parents incarcerated through ADC, the responsibilities and duties of ADC and DCFS are delineated in the Arkansas Department of Human Services-Arkansas Department of Corrections Memorandum of Understanding (MOU), which is posted on CHRIS Net and are subject to renewal every three (3) years. To determine the individual responsibilities and operational protocol of the agencies, see the specifics of the MOU.

PROCEDURE III-H1: Coordination of Services, Hearings, and Visitation for Incarcerated Parents

04/2018

In order to ensure adequate communication with and provision of services to incarcerated parents, the Family Service Worker (FSW) will:

A. Attempt to locate incarcerated parents at all stages of service provision, including during investigations. Efforts to locate will include, at a minimum:
   1) Conducting a Lexis Nexis search.
   2) Searching local jail, Arkansas Department of Corrections, etc. for inmate information at: www.vinelink.com.
   3) Checking AOC Public Court Connect at: https://caseinfo.aoc.arkansas.gov/cconnect/PROD/public/ck_public_qry_main.cp_main_idx.
   4) Contacting the reporter and any listed collaterals from the current and former investigations and cases to ask for information about the location of the parent.

B. Document reasonable efforts to identify and locate incarcerated parents at all stages of service provision, including during investigations, in CHRIS contact screens, court reports, and affidavits.

C. Contact the identified ADC facility or local detention facility (city or county jail) and determine:
   1) The appropriateness of visitation and venue for parent-child visitation for children in foster care by assessing the following:
      a) Whether the parent is under any restriction by the facility that would affect visitation;
      b) Whether the facility has any limitations to visitation such as lack of space or lack of staff to meet facility protocols;
      c) Whether the facility is an appropriate venue for visitation based on the child's age, trauma history, and current developmental status;
      d) Whether the distance to the facility is prohibitive for routine visitation based on the child's educational and developmental status;
      e) Whether the facility is open to allowing volunteer relatives/fictive kin to transport to visitation;
      f) Whether the visitation can be accommodated in another manner such as Skype, Video Visitation, letter writing, email or Facetime.
   2) How to adequately assess and coordinate services for the incarcerated parent by:
      a) Determining if the detention facility staff will assist in the completion of the parent's portion of the CANS and in identifying necessary services for the parent.
         i. The FSW will complete the CANS by phone with the parent if detention staff is unable to assist.
      b) Coordinating with ADC or the local detention facility to ensure that services identified are provided to the inmate (whether provided directly by the detention facility staff/contract

providers or by DCFS staff providing the services to the inmate in the facility and/or by sending educational materials to the facility for the inmate).

c) Sending staffing notices via CFS-590: Invitation to Family-Centered Meeting to the identified detentions contacts.
    i. The FSW will notify the contact that the incarcerated parent is invited to participate in the staffing by telephone if the parent requests to do so at least 24 hours prior to the scheduled time for the staffing to begin. It will be the incarcerated parent's responsibility to schedule with ADC or the local detention facility to have phone privileges as necessary.

d) Adding the incarcerated parent to the CANS assessment and case plan while including all services provided by the detention facility.

e) Requesting written progress reports and certificates of completion for services from the detention facility.
    i. Attach all documents obtained to the written court report for upcoming hearings and place a copy of all correspondence with the detention facility in the physical case record.

f) Coordinating discharge planning, including determining who will be the assigned parole/probation officer, when appropriate.

g) Providing a copy of local assistance organizations and services available for the tentative county of residence to the incarcerated parent 30 days prior to the parent's discharge from the detention facility.

D. Coordinate joint decision making as to the appropriateness of visitation with assigned Attorneys Ad Litem, CASAs, and Parent Counsel.

E. Provide the incarcerated parent with a copy of all case plans, court reports, and court orders via standard mail to the ADC or local detention facility contact person.

F. Coordinate services with resident county:
    a) Refer the case for resident county services in the CHRIS assignment screen.
    b) Email resident county FSW and copy resident county Supervisor with a summary of service needs and requests.
    c) Invite resident county FSW to staffings via CFS-590.
    d) Maintain minimum monthly contact with resident county FSW in an effort to coordinate on-going services, monthly face-to-face contact with the incarcerated parent and parent-child visitation.

FSW Supervisor will:

A. Monitor to ensure diligent efforts to locate incarcerated parents.

B. Attend staffings to assist in determining the appropriateness of services and visitation.

C. Ensure case assignment to and coordination of services with resident county.

POLICY III-I: SERVICES CASE OPENING FOR CASES INVOLVING ACTIVE DUTY SERVICE MEMBERS

04/2018

The Division of Children and Family Services (DCFS) is responsible for coordinating services with Little Rock Air Force Base to ensure the immediate and on-going assessment and provision of services to active duty service members who are involved in open DCFS cases. This includes reports involving as an alleged victim a child of an active duty service member, as an alleged offender a person who is an active duty service member, and any report alleging child maltreatment that occurred during an activity conducted or sanctioned by the United States Department of Defense or its subdivisions, or occurring at a facility operated by the United States Department of Defense or its subdivisions.

DCFS will make diligent efforts to locate active duty service members and to determine what services are available to those clients through the Family Advocacy Program (FAP) on the military installation and via DCFS. The FAP at Little Rock Air Force Base will act as the central point of contact for all military branches and installations within the State of Arkansas. The LRAFB FAP will coordinate, on behalf of LRAFB and other Arkansas military branches and installations, with DCFS/CACD to develop a plan of investigation, share information, and coordinate the provision of necessary services for active duty service members. The FAP will determine eligibility for and coordinate available service provision through the base to active duty service members. Only the service member who was active duty at the time of the incident will be eligible for services through the military installation. Not all military installations have services available locally.

The specific responsibilities and duties of each agency is delineated in the Arkansas Department of Human Services-Little Rock Air Force Base Memorandum of Understanding (MOU), which is posted on CHRIS Net and is subject to renewal every three (3) years. To determine the individual responsibilities and operational protocol of the two agencies, see the specifics of the agreement.

PROCEDURE III-I1: Coordination of Services for Active Duty Service Members

04/2018

To ensure coordination of services for active duty service members, both on and off base, the Family Service Worker (FSW) will:

A. Review the initial case connect contact to determine if LRAFB was notified of the active duty service member's involvement in the DCFS case.
    1) If the FSW determines that notifications to LRAFB were not made, the FSW will contact the FAP during duty hours at 501-987-7377 and provide notification.
B. Ensure the client screen for the active duty service member contains an accurate social security number and that the "active duty service member" check box is checked.
C. Enter the FAP as a collateral in the open case and document all contacts with the FAP in the case contact screen.
D. Contact FAP at 501-987-7377 and coordinate the following:
    1) Contact with active duty service member/family if residence is on base.
    2) Determination of what, if any, services are available for the service member through the FAP.
    3) Termination of services and case closure.
E. Assist in providing case management updates for ongoing services directly provided by DCFS.
    1) Upon request, furnish FAP with written progress reports and/or assessments to include any agreements, stipulations, or court orders for ongoing services.
F. When removal of a child becomes necessary:
    1) Consider that when the suspected offender is the active duty service member, the member's military commander has the authority to order the alleged offender out of the home.

2) Contact the Security Forces Law Enforcement desk at 501-987-3221 if there is a concern for the safety of staff members or victim(s).

G. In situations where a military order is deemed appropriate for an active duty service member to have no contact with the alleged victim, provide FAP with suggested instruction(s) regarding authorized contact between the alleged victim(s) and the suspected active duty service member. Such instructions may include guidance about phone, letter, electronic, or unsupervised/supervised face-to-face contact.

The FSW Supervisor will:

A. Ensure referrals for active duty service members are provided to the FAP timely.
B. Ensure open and accurate communication continues between DCFS and the FAP for the duration of DCFS involvement with the family.

IV. ASSESSMENT OF FAMILY STRENGTHS AND NEEDS TO DEVELOP INDIVIDUALIZED CASE PLANS
POLICY IV-A: FAMILY ASSESSMENTS

02/2015

OVERVIEW
The assessment of a family's strengths and needs is the basis for developing individualized goals and identifying services and supports to meet the family's needs. The family shall be a primary source of information for the assessment with emphasis on the partnership with the family and a holistic view of their circumstances. Other agencies or individuals with knowledge of the family's circumstances will also be consulted as appropriate.

Family assessment is an approach to engaging families while also collecting and organizing information at critical decision points in every case. A thorough assessment of family functioning includes evaluating risk and/or safety factors that are barriers to family functioning as well as protective factors that may mitigate risks and/or safety factors.

ASSESSMENT TOOLS USED FOR IN-HOME AND OUT-OF-HOME SERVICES CASES
The Family Advocacy and Support Tool (FAST) is the family assessment instrument used for all in-home services cases (to include supportive services cases, see Policy II-A: Supportive Services for more information, but excluding Differential Response cases). The Child and Adolescent Strengths and Needs (CANS) tool is the family assessment instrument used for all out-of-home placement cases. The 0-4 CANS will be used for all children from birth through age four involved in an out-of-home placement while the 5+ CANS will be used for all children ages five and older involved in an out-of-home services case The only reason for which both a FAST and CANS will be completed with the same family is if there is still a child left in the home while another child is removed from the home.

The FAST and CANS are multiple purpose information integration tools that are designed to be the output of the assessment process. This allows the Division to more consistently communicate the needs and strengths of children and their caregivers involved with in-home and out-of-home services cases, respectively. The use of the FAST or CANS does not replace professional judgment. As such, while the FAST and CANS will help inform the in-home services and out-of-home placement case plans, respectively, the completion of a FAST or CANS does not write the case plan.

During the completion of both the FAST and the CANS, the FSW will ensure family involvement and receive input from parents, caregivers, children, service providers, and extended family members. Just as each child is rated individually using the FAST or CANS, as appropriate, each of the child's primary caregivers will be rated as individuals (i.e., If a child has two or more primary caregivers in the home such as a mother, stepfather, and maternal grandmother, all three of these primary caregivers in the home will be rated individually. Likewise, if a child has two (2) primary caregivers who live in different homes such as a mother and father who are divorced, then both of these primary caregivers will be rated as individuals). Caregivers and other parties to the case will receive a copy of the FAST and/or CANS output document. Anyone else involved in the development of the FAST and/or the CANS may receive the FAST and/or CANS output document, as applicable, upon request within the parameters of A.C.A. 9-28-407 (see Policy I-F: Confidentiality for more information).

For in-home services cases the FAST will be completed within 30 days of case opening and every three months thereafter to correspond with required case staffings and prior to case closure. The FAST may be updated more frequently as needed. With each FAST update, the case plan will also be updated accordingly.

The CANS will be completed within 30 days of the child entering out-of-home placement or 30 days of case opening, whichever occurs first. Subsequent CANS will be every three months thereafter and prior to case closure. The CANS may be updated more frequently as needed. With each CANS update, the case plan will also be updated

accordingly. If a four-year-old child will turn five years of age by the time the next CANS is due, either the 0-4 CANS or the 5+ CANS may be used for the child at that point in time.

An individual performing the family assessment will be trained and certified in the use of FAST and CANS. FAST and CANS re-certification must be completed on an annual basis.

Procedure IV-A1: Family Assessments Using the FAST and CANS

07/2017

The Family Service Worker will:

A. Explain the general purpose of the FAST or CANS to the family, as applicable.
B. Meet several times with the parents, caregivers, children, service providers, and extended family members to conduct a thorough and complete FAST or CANS, as applicable;
    1) Complete the FAST at a minimum within 30 days, every three months thereafter, and prior to case closure;
    2) Complete, at minimum, the CANS within 30 days of the child entering out-of-home placement or within 30 days of case opening, whichever comes first, every three (3) months thereafter; and prior to case closure;
C. Explain the overall outputs of the FAST or the CANS to the family, as applicable.
D. If at any time during the completion of an initial or subsequent FAST or CANS, or at any other point during a protective services or foster care case, there is reason to believe a child involved in a protective services or foster care case is a victim of sex trafficking or at risk of being a sex trafficking victim:
    1) Document accordingly in CHRIS and conference with the FSW supervisor to determine appropriate next steps for additional screening related to sex trafficking victims and/or referral to appropriate services, with incorporation of any referrals and/or services into the case plan.
    2) Report information on children or youth who have been identified as a sex trafficking victim to local law enforcement immediately, and in no case later than 24 hours after receiving the information.
    3) Document in CHRIS contacts when local law enforcement is notified of a child being identified as a sex trafficking victim.
E. Obtain the necessary signatures on the approved FAST or CANS, as applicable;
F. Attach the approved and signed FAST or CANS, as applicable, to the case plan.
G. Provide the caregivers and other parties to the case with a copy of the FAST and/or CANS output document, as applicable.
H. Provide a copy of the FAST and/or CANS output document to anyone else involved in the development of the FAST and/or CANS upon request, within the parameters of A.C.A. 9-28-407 (see Policy I-F: Confidentiality for more information).

The FSW Supervisor will:

A. Conference with the FSW as necessary during the completion of the FAST or CANS.
    1) Approve the FAST at a minimum within 30 days, every three (3) months thereafter, and then prior to case closure but only once the appropriate family assessment instrument has been sufficiently completed;
    2) Approve the CANS at a minimum within 30 days of the child entering out-of-home placement or within 30 days of case opening, whichever comes first, every three months thereafter; and prior to case closure, but only once the appropriate family assessment instrument has been sufficiently completed.

POLICY IV-B: SERVICES CASE PLAN

02/2015

The case plan is a written document that is a discrete part of the case record between the family and the Division of Children and Family Services that outlines a plan of services and supports and articulates needed changes in order to assure the child's safety. The case plan addresses the family's needs, builds on the family's strengths, outlines the roles and responsibilities of all involved parties, and provides appropriate timeframes in which each action listed on the case plan will be completed. The ultimate goal of the case plan is to assist the family in rectifying the issues that resulted in DCFS involvement.

Case plans will be developed after a thorough assessment of a family's strengths and needs. The strengths and needs identified via the Family Advocacy and Support Tool (FAST) will inform the development of the case plan for supportive and in-home services case plans. The strengths and needs identified via the Child and Adolescent Needs and Strengths (CANS) functional assessment will inform the development of the case plan for out-of-home cases. Using the information from the FAST or CANS, as applicable, to help identify priority needs and strengths, the case plan will then be developed with the involvement of family, the age-appropriate children, the foster parents (if applicable) and the attorney ad litem (if there is court involvement), the Family Service Worker, and any other involved parties. The case plan will be updated as necessary following updates to the FAST and/or CANS.

Consideration of the health and safety of a child must be included in case planning for children involved in all case types.

No child in an out-of-home placement will have a case plan goal of reunification for longer than 12 months, unless otherwise ordered by the court.

PROCEDURE IV-B1: Case Plan

02/2015

The Family Service Worker will:

A. Review the:
    1) Most current FAST or CANS, as appropriate, for the child and family;
    2) Investigation allegation;
    3) Findings from the allegation; and,
    4) Reason for removal, if applicable.
B. Assign actionable items on the FAST or CANS into subgroupings as appropriate.
C. Complete an initial Case Plan in CHRIS within 30 days of opening a services case or a child entering an out-of-home placement, whichever comes first. A case plan must be completed on all cases—including supportive services and in-home services cases—and will include the following:
    1) A description of the out-of-home placement, if applicable, with regard to the health and safety of the child;
    2) A plan for assuring a child receives safe and proper care;
    3) A discussion of the appropriateness of the services that have been provided to the child;
    4) A plan for assuring services are provided to the child and caregiver to improve conditions in the caregiver's home and facilitate return of the child, if applicable, or the permanent placement of the child;
    5) A plan for assuring services are provided to the child and foster parents to address the needs of the child while in out-of-home placement, if applicable;
    6) The visitation rights and obligations of the parents, guardian or custodian and the Division during the period the child is in an out-of-home placement, if applicable;
    7) A description of the location of siblings. If siblings are separated, the reasons why joint placement would be contrary to the safety or well-being of any of the siblings as well as documentation of efforts

for frequent visitation or other ongoing interaction, unless the Division documents that frequent visitation or other ongoing interaction would be contrary to the safety or well-being of any of the siblings;

8) A Transitional Plan for a child 14 or over that will help prepare the child for successful transition to adulthood (see Policy VIII-A);
9) A discussion of how the case plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available and in close proximity to the home of the caregiver(s) when the case plan goal is reunification, and a discussion of how the placement is consistent with the best interests and special needs of the child.
10) The reasons why it is in the best interest of the child if he or she has been placed in an out-of-home placement, if applicable, that is a substantial distance from the home of the caregiver, or has been placed out-of-state.
11) A discussion of the safety and appropriateness of the placement and how the Division plans to carry out the judicial determination made with respect to the child that:
    a) Continuance in the home is contrary to the welfare of the child, or that placement would be in the best interest of the child, and
    b) Reasonable efforts to prevent a child's removal from home or to reunify the child and family are not required.
12) If the child has been placed in foster care in a state outside the state in which the child's caregiver(s) are located, assure that the caseworker of either state visits the foster home or institution no less frequently than every six (6) months and submits a report on the visit to the state agency of the state where the home of the child's parent(s) is located.
13) Assurance that each child who has attained the minimum age for school is a full-time elementary or secondary school student or has completed secondary school. This includes public schools, private schools, and home school programs. This should also include the most recent information available regarding:
    a) Names and addresses of the child's health and educational providers
    b) Child's grade level performance
    c) Child's school record
    d) Assurances the child's placement in foster care, if applicable, takes into account the proximity to the school in which the child is enrolled at the time of placement
    e) Any other relevant education information concerning the child determined to be appropriate
14) The health records of the child including the most recent information available regarding:
    a) Record of the child's immunizations
    b) Child's known medical problems
    c) Regularly updated information regarding any medical conditions that cause the child to be incapable of attending school (see Policy VI-D3)
    d) Child's medications
    e) Any other relevant health information concerning the child determined to be appropriate
15) Documentation of the steps taken to:
    a) Find an adoptive family or other permanent living arrangement for the child;
    b) Place the child with an adoptive family, a fit and willing relative, a legal guardian, or in another planned permanent living arrangement; and,
    c) Finalize the adoption or legal guardianship.

    At a minimum, documentation shall include child specific recruitment efforts such as the use of state, regional, and national adoption exchanges including electronic exchange systems. This applies in the case of a child for whom the permanency plan is adoption or placement in another permanent home.

D. Print the case plan.
E. Explain and discuss the case plan with the family to help ensure the family's understanding of case plan goals, actions, roles, responsibilities, and timeframes.
F. Have all applicable family members sign the completed case plan.
G. Provide the family and all parties to the case with copies of the signed case plan.
H. Place the signed case plan in the client record.

I. File the case plan with the court no later than 30 days after the date the petition was filed, if applicable, or the child was first placed out-of-home, whichever is sooner.
J. Using information from the updated FAST or CANS, as applicable, review and update the case plan as necessary during case plan staffings held at a minimum of every three months for both in-home services cases and out-of-home placement cases.

Case Plan Packet for Court Involved Cases Includes:

A. Case Plan CHRIS Case Report
B. Completed FAST for in home cases or completed CANS for out-of-home cases
C. If child(ren) are in DHS Custody:
    1) CFS-6008: Placement Plan CHRIS Case Report (if appropriate)
    2) CFS-6018: Placement History CHRIS Case Report (if appropriate)
    3) CFS-7010: Visits Report CHRIS Case Report (if appropriate)
    4) CFS-6012: Client Medical and Psychological Information CHRIS Case Report (if appropriate)
    5) CFS-6010 Addendum A: Visitation Plan / Visitation Schedule CHRIS Net Template (form for worker to type in info) (if appropriate)
    6) Completed Comprehensive Health Assessment

Case Plan Packet for Non-Court Involved Case Plans:

A. Case Plan CHRIS Case Report
B. Completed Family Advocacy and Support Tool (FAST)
C. Any case specific attachments (i.e. grades, provider information, etc.) as appropriate.

The FSW Supervisor will:

A. Conference with the FSW as necessary throughout the development of and adjustments to the case plan.
B. Approve the case plan once it is sufficiently completed by the FSW within:
    1) 30 days of opening the case (whether in-home services of out-of-home placement) or a child's entering an out-of-home placement;
    2) Every three (3) months thereafter for in-home services and out-of-home placement cases.

POLICY IV-C: CASE STAFFINGS

02/2015

A case staffing is a meeting of all involved parties for the purpose of assessing the current status of the child and family strengths and needs and developing or updating the case plan accordingly. Case staffings will address all appropriate issues relevant to the needs and strengths of the family. A case staffing may be held for various reasons based on the needs of the child and family. Situations which require a staffing include but are not limited to:

- **A. Developing the initial case plan;**
- **B. Reviewing progress or making changes in the case plan to include reviewing progress or making changes to the Transitional Plan for a child 14 or older in an out-of-home placement;**
- **C. Reviewing situations where a child has been in three or more out-of-home placements within a 12-month period;**
- **D. Addressing challenges that bring a child or family into a state of crisis;**
- **E. Determining the need for ongoing services and/or supports; and,**
- **F. Reviewing the need for case closure before a case is closed.**

PROCEDURE IV-C1: Case Staffings

02/2015

The Family Service Worker will:

- A. Invite supervisors, parents, or guardian, and if there is court involvement, Court-Appointed Special Advocate (CASA, if applicable), all parties' attorneys, foster parents, caretaker, age-appropriate child, and any other involved party in the case plan.
- B. Inform families of their right to have their attorney present.
- C. Furnish written notice to the child, if of appropriate age (ten (10) years or older).
- D. Furnish written notice of the staffing CFS-590: Invitation to Family-Centered Meeting (complete with date, time and location to all participants at least two weeks prior to the staffing.
- E. File copies of the CFS-590: Invitation to Family-Centered Meeting in the case record. Include documentation of the reason, if the child was not able to attend.
- F. Document on the case plan any parent's unwillingness to participate and provide this written documentation to the parent if available.
- G. Conduct the:
    - 1) Initial staffing within 30 days of opening the case (whether in-home services of out-of-home placement) or a child's entering an out-of-home placement, whichever comes first regarding out-of-home placement cases;
    - 2) Subsequent staffings at least every three months for in-home services and out-of-home placement cases.
- H. Complete the original case plan by the initial staffing and update the case plan as needed after subsequent staffings.
- I. Review the case plan for compliance by the participants and update as necessary to reflect progress made, new factual circumstances, and new goals.
- J. Conduct a permanency planning staffing at the 11th month of case opening. Invite the adoption specialist and all other parties involved in the case.
- K. Conduct a staffing before closing a case to review progress and determine that closure is appropriate.

The FSW Supervisor will:

- A. Conference with the FSW as necessary regarding case plan staffings.
- B. Attend all case plan staffings if possible.

The Area Director will:

A. Hold a special case staffing within two weeks of the third move, whenever a child has been in three (3) or more out-of-home placements within a 12-month period.
B. Address the reasons for the frequent moves.
C. Determine what steps shall be taken to prevent future placement disruptions.
D. Include the Family Service Worker, supervisor, foster parents, age-appropriate child, and any appropriate service providers and/or life connections for the child.
E. Conduct a staffing to review the status of a child placed in long-term, out-of-home care.

Some persons will attend the entire staffing, while others will attend only the portion of the staffing relating to the area in which they are involved. Confidentiality prevents sharing information with unauthorized individuals.

V. SERVICES TO PRESERVE FAMILIES IN THEIR HOMES
POLICY V-A: SERVICES TO PRESERVE FAMILIES IN THEIR HOMES

01/2005

Services to preserve families and protect children encompass a comprehensive continuum of services designed to address the life needs of the child and the family. These services include concrete services such as: housing, transportation, cash assistance, rental deposit, food, and direct therapeutic intervention both for the family, as a whole, and for individual family members. The array of services to preserve families and protect children is either direct or purchased services.

Services available to children and families are provided through title IV-B, sub-part II funding under the Promoting Safe and Stable Families Programs. The child's health and safety will be a priority in the provision of services. The four categories of services under the Promoting Safe and Stable Families Programs are Family Preservation Services, Family Support Services, Time Limited Family Reunification Services and Adoption Promotion and Support Services.

Family Preservation Services means services to children and families designed to help families, including adoptive and extended families, at risk or in crisis. Family Preservation Services include:

- **A. Service programs designed to help children, where appropriate, return to families from which they have been removed; be placed for adoption; be placed with a legal guardian; and if adoption or legal guardianship is determined not to be safe and appropriate for a child, in some other planned, permanent living arrangement.**
- **B. Pre-placement preventive services programs, such as intensive family preservation programs, designed to help children at risk of foster care placement remain safely with their families.**
- **C. Service programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement.**
- **D. Respite care of children to provide temporary relief for parents and other caregivers, including foster parents.**
- **E. Services designed to improve parenting skills by reinforcing parents' confidence in their strengths, and helping them to identify where improvement is needed and to obtain assistance in improving those skills with respect to matters such as child development, family budgeting, coping with stress and health and nutrition.**

Family Support Services are community-based services that promote the well-being of children and families and are designed to:

- **A. Increase the strength and stability of families (including adoptive, foster and extended families).**
- **B. Increase parents' confidence and competence in their parenting abilities.**
- **C. Afford children a stable and supportive family environment, and otherwise to enhance child development.**

Services include: respite care, early developmental screening of children, mentoring, tutoring, health education for youth, parenting skills, counseling, home visiting activities, and a range of center-based activities.

Time-limited Reunification Services are services and activities that are provided to a child that is removed from the child's home and placed in a foster family home or a child care institution, and to the parents or primary caregiver of such a child, in order to facilitate the reunification of the child safely and appropriately within a timely fashion, but only during the 15-month period that begins on the date the child enters foster care. Services include: counseling, substance abuse treatment services, mental health services, assistance to address domestic abuse, temporary child care, and transportation to services/activities.

Adoption Promotion and Support Services are services and activities designed to encourage more adoptions out of the foster care system, when adoptions promote the best interest of children, including such activities as pre-

and post- adoptive services and activities designed to expedite the adoption process and support adoptive families.

PROCEDURE V-A1: Services to Preserve Families in Their Homes

The Family Service Worker will:

A. Go to "Workload", "Case" in CHRIS and complete the automated "Family Strengths and Needs Assessment" found within the "Case Plan", "Assessment", section of CHRIS on the "Family" and "Child" screens within 30 days from the "Open Date" established by the Case Connection. This report will be printed from CHRIS and may be the result of several family sessions.
B. Consider resources for the family within DCFS, other DHS Divisions, state agencies, and in the community.
C. Make a referral to another Division or community resource, if appropriate.
D. Open a case in accordance to Procedure III-A1: Supportive/Protective Services Case Opening and III-A2: Out-of-Home Placement Services Case Opening.
E. Hold staffings, as needed, in accordance with Procedure IV-C1: Case Staffings.
F. Arrange for other services as needed.
G. Deliver services as identified in the CFS-6010: Case Plan.
H. Address the educational needs, including any special needs identified during the Strengths and Needs Assessment, of the children in the home, and attach copies of report cards, etc., as required in the CFS-6010: Case Plan.
I. Conduct staffing to discuss closure.
J. Close non-court involved case when both the Family Service Worker and the family agree that services are no longer needed or that the needs of the family will best be met by one or more referrals to other service providers.

POLICY V-B: FAMILY SERVICE WORKER CONTACTS

01/2005

The Division shall maintain a level of contact with the family adequate to protect the health and safety of the child, to protect the child from further child maltreatment and to provide family support. When a report of child maltreatment is true and it is determined that the child shall remain in the home, the appropriate frequency for visits to the child and family shall be no less than weekly in the home during the first month that the case is opened. If the case is open longer than one (1) month, the Worker and his Supervisor may staff the case to determine if visits may safely be held less frequently than weekly. Visits to the family in the home, with a face-to-face visit with the child, will be held at least once a month. Less frequent contact shall be dictated by the needs of the child and family and must have prior approval by the supervisor. The supervisor must review the Health and Safety Assessment and Risk Assessment before granting a waiver (see Procedure II-D8 and II-D9).

PROCEDURE V-B1: Family Service Worker Contacts

The Family Service Worker will:

A. Visit the child and family in the home to address their assessed needs. If there is a reason why the visit did not occur in the home, document the reason in the case record. The FSW is responsible for making weekly face-to-face contacts with the family during the first month that the case is opened. Visits by other DCFS staff (e.g., SSA, Supervisor) will count as a weekly visit after the case has been opened 30 days.

   A face-to-face contact is defined as an in-person contact with the perpetrator, victim or caretaker (parent, guardian or other person responsible) for the purpose of observation, conversation or interviews about substantive case issues. Risk/needs assessment, treatment planning, case planning and/or progress, are examples of substantive case issues. A weekly or family visit is completed once contact is made with the victim child and primary caretakers to assess the child's health and safety and case plan progress.

B. If the case is opened longer than one (1) month, and the Supervisor has approved less frequent visits than weekly, visit the family in the home, with a face-to-face visit with the child as frequently as approved, but at least once a month. High-risk cases must continue to have at least weekly face-to-face contact. Moderate or low risk cases must have at least monthly face-to-face contact. Visits can occur in other locations, however, there must be a once a month visit to the home. Visits by other DCFS staff will not count as monthly visits.

C. Engage family members in meaningful activities as dictated by the case plan.

D. Document weekly visit contacts in the CHRIS client information screen by clicking on services/contacts and selecting new for each new client contact. Include the proposed visitation schedule in the case record documentation.

E. Weekly contacts must be maintained for cases with "High" and "Intensive" risk levels and for families where the child's or family's situation raises protective concerns and where weekly contact is necessary to monitor the family situation and assure child safety. In addition, the worker should maintain weekly visits if the child is experiencing a period of crisis in the home, school, or community and contact with the worker can be of assistance to the child in coping with the crisis.

The Family Service Worker Supervisor will:

A. Click on the Reviewed check box after reviewing the worker's contact.

B. Click on the Weekly Contacts Waiver check box and key in the mandatory explanation field to include documentation that the Health and Safety Assessment and Risk Assessment has been reviewed in order for less than Weekly Contacts to be approved (see Procedure II-D8 and II-D9). Under no circumstances can a waiver be granted for less than weekly contacts based on staff shortages without other appropriate justification.

POLICY V-C: FAMILY SUPPORT FUND

01/2012

The Division shall ensure that staff has prompt access to the Family Support Fund to support birth, adoptive, and foster families. The purpose of the fund shall be:

A. To prevent children from entering or remaining in Out-of-Home Placement due to the parents' financial inability to meet the children's basic needs.

B. To pay for Out-of-Home Placement incidental items that are outside of the contracting process and are not covered by board payments. Examples include school field trips, camping dues, dance supplies, musical instruments, registration fees, specialized school supplies (e.g., graphing calculators required by the school; however, standard school supplies shall be covered by personal needs monies within the board payment), sport fees or equipment, social club fees, summer programs, specialized art supplies, and school pictures.

PROCEDURE V-C1: Cash Assistance

01/2010

The Family Service Worker will:

A. Complete the CFS-496: Assessment for Income Assistance to make a determination of the basic unmet needs and appropriateness of using the fund to address the need(s).
B. Route the CFS-496: Assessment for Income Assistance to the DCFS County Supervisor for review and approval.

The DCFS County Supervisor will:

A. Monitor the county's allocation to ensure the county's funds are sufficient to meet client needs.
B. Review and approve/deny requests.
C. Maintain a log of approved requests, CFS-332: Income Assistance Request Log.
D. Determine the payment mechanism through the DHS-1914: DHS Requisition. Payment will only be made to service providers.
E. Ensure completion of process to develop the purchase order.
F. Monitor activities to ensure payment to service providers and management of county funds.

PROCEDURE V-C2: Foster Care Incidentals

01/2010

The Family Service Worker will:

A. Assess and determine the needs of the child receiving Out-of-Home Placement Services and the appropriateness of using the fund to meet the assessed need.
B. Request the use of the fund from the DCFS County Supervisor/Designee.
C. Complete any additional paper work required by the method of payment chosen by the DCFS County Supervisor.
D. Provide a receipt to the DCFS County Supervisor/Designee within two (2) business days following the dating of the check. Attach the receipt to the CFS-333: Client Information Sheet. If the amount of the check exceeds the amount of the receipt, the balance must be returned to the DCFS County Supervisor/Designee immediately.

The DCFS County Supervisor/Designee will:

A. Monitor the county's allocation to ensure the county's funds are sufficient to meet client needs.
B. Approve or deny the request.
C. For approved requests, the Supervisor will access the Family Support Fund in one of the following ways:

1) Trust Accounts - if available and ample for purchase. Fill out the CFS-334: Foster Care Authorization for Billing for amount of purchase and submit to finance.
2) Process Purchase Order using the DHS-1914: DHS Requisition. Follow guidelines in the Purchase Order manual.

POLICY V-D: INTENSIVE FAMILY SERVICES

10/2010

Intensive Family Services (IFS) are time-limited intensive counseling, skill building, support services, and referrals to resources that target the needs of the family. The service is primarily intended for families whose children are at imminent risk of an out-of-home placement, but may include under certain circumstances, families who have already experienced an out-of-home placement and reunification is planned. Services are aimed at ensuring the safety of all family members while helping the family learn how to stay together successfully. The goal is to safely keep children with their families, when possible, by providing services aimed at restoring families in crisis to an acceptable level of functioning. IFS may be provided by Division staff or by contractors. Efforts are made to consistently maintain an IFS provider for each county in the state.

PROCEDURE V-D1: IFS Screening

10/2010

Prior to referral, the Family Service Worker will, for new cases:

A. Complete the FAST in CHRIS. Indicate whether IFS is considered to be an appropriate service.
B. Complete a case staffing and the CFS-6010: Case Plan in CHRIS. Indicate whether IFS is considered to be an appropriate service.
C. Refer the family to the County Supervisor for a final determination of referral need.

Prior to referral, the Family Service Worker will for existing cases:

A. Update the FAST and the CFS-6010: Case Plan. Indicate whether IFS is considered to be an appropriate service.
B. Refer the family to the County Supervisor for a final determination of referral need.

The County Supervisor will:

A. Determine if the family's children are at imminent risk of out-of-home placement or the family's children have recently experienced an out-of-home placement and reunification is planned.
B. Decide if the family is appropriate for a referral for IFS.

PROCEDURE V-D2: IFS Referral

10/2010

The Family Service Worker will:

A. Refer families to the IFS Practitioner on the CFS-345: Intensive Family Services Referral Form.
B. Accompany the IFS Practitioner to a joint introductory session with the family.
C. Provide the IFS Practitioner with a copy of the completed FAST and other pertinent information about the family as appropriate.

The IFS Practitioner will:

A. Within 24 hours of receipt of the referral, hold a joint introductory session with the family and the Family Service Worker.
B. Within 72 hours of receipt of the referral, complete an assessment of the family to determine if IFS is appropriate and the short-term crisis intervention services can be of benefit to the family. Outcomes will be measured through the North Carolina Family Assessment Scale, which is a validated, evidence-based assessment tool with performance indicators. This baseline assessment will guide the family's treatment plan.
C. Within 72 hours of receipt of the referral, recommend to the County Supervisor if the family is appropriate for IFS on the CFS-345: Intensive Family Services Referral Form.
D. Assessment for IFS will focus on:

1) The potential that the health and safety of the child and other family members can be assured by frequent home visits, counseling, and other support services.
2) The potential that meeting the critical needs of the child will increase to an acceptable level.
3) The potential that the parents or caregivers can recognize the needs of the child and their ability to nurture and protect the child.
4) The parents or caregivers are present and are willing to accept help.

PROCEDURE V-D3: IFS Service Provision

10/2010

If IFS is appropriate, the County Supervisor will:

A. Add IFS to the Service Log.
B. Delete IFS from the Service Log after termination of IFS.

The IFS Practitioner will:

A. Provide services based on the results of the assessment tool.
B. Provide services on a frequent, often daily, basis within the family's home.
C. Be available to the family 24 hours a day, seven days a week by telephone.
D. Provide services at times convenient to the family.
E. Provide services to no more than four families at a time.
F. Provide a mixture of counseling and support services, as appropriate to the family's needs.
G. Devote 75% of work time to direct contact with the family.
H. Document the services provided to the family. Documentation includes:
   1) A completed CFS-345: Intensive Family Services Referral Form and assessment of the family within 72 hours of receipt of the referral from the County Supervisor
   2) A completed individualized Family Action Plan within two (2) weeks of initiation of IFS
   3) Dated narratives on the types of services provided and the family's progress
   4) Completed CFS-347: IFS Family Counselor's Time Record
   5) A Transition Plan describing the family's continued needs after IFS and the linkages established to meet those needs two (2) weeks prior to the termination of IFS
   6) A final report on the family's progress and continued needs within one week of termination of IFS
   7) Any additional reports requested by the Division
I. Provide follow-up services once a month for three months after termination of IFS, and again at six (6) months after termination of IFS.
J. Provide brief reports to the County Supervisor on the status of the family.
   Maintain confidentiality. See POLICY I-F: CONFIDENTIALITY.

POLICY V-E: CHILD INVOLVED IN PROTECTIVE SERVICES CASE WHO IS MISSING

07/2017

Occasionally there are instances when a child or youth involved in an open protective services case may runaway or otherwise go missing. In all instances of missing children who are part of an open protective services case, the Division of Children and Family Services (DCFS) will collaborate with the child's family, law enforcement, and the National Center for Missing and Exploited Children (NCMEC) in an effort to locate the child.

Child Who May Have Been Taken Without Authorization or the Family Has Absconded with the Child(ren)
If the family and/or Division has reason to believe the child was taken from his/her parents/caretakers without authorization by another individual, then upon notification, the family's FSW caseworker and FSW caseworker's supervisor will ensure the following individuals are notified of the child's disappearance:

A. Area Director
B. Assistant Director of Community Services or designee

The Assistant Director of Community Services or designee will then notify the DCFS Director.

The FSW caseworker will also issue a Protective Services Alert if:

A. The family has left the county of origin and moved with their child(ren) to another county or state; and,
B. The new address is unknown; and,
C. The child's health or physical well-being is deemed to be in immediate danger because the family is involved in an open protective services case involving an identified Arkansas Health and Safety Factor.

Child Who May Have Run Away
If the family and/or Division has reason to believe the child independently left his/her home of his/her own accord (i.e., run away), then upon notification, the family's FSW caseworker and FSW caseworker's supervisor will ensure the Area Director is also notified of the child's disappearance. The FSW caseworker will then follow the steps outlined below.

PROCEDURE V-E1: When a Child is Reported Missing from a Family with an Open Protective Services Case

07/2017

The following applies to situations in which the child has been taken from his/her parents/caretakers without authorization and to situations in which the child has run away independently from the home.

After receiving notification of the child's disappearance from the child's family or by other means, the FSW caseworker will:

A. Notify the child's attorney ad litem (if applicable) within two (2) hours.
    1) This notification may occur via email, phone, or text.
B. Determine within two (2) hours whether the child's parents/caretakers have filed a missing person report with the local police department or sheriff's office.
    1) If the parents/caretakers have filed a missing person report, obtain the missing report number from the parents/caretakers.
    2) If the parents/caretakers have not yet filed a missing person report, encourage the parents to file the report with the local police department or sheriff's department as soon as possible and obtain the missing person report number from the parents/caretakers as soon as possible.

3) If the parents/caretakers refuse to file a missing person report within one (1) business day, contact the local police department or sheriff's department immediately to file a missing person report and provide the following information:
   a) Child's name;
   b) A physical description of the child;
   c) A picture of the child may be released to assist with identification provided that the child is not identified as being involved in an open protective services case.
   d) Child's date of birth;
   e) Circumstances of the missing child's disappearance, including the date the child went missing or was last seen and if the child indicated a destination (and, if so, what the destination is);
   f) Any other factual, biographical, or historical information that may assist with locating the missing child;
   g) A request for law enforcement to enter the information into the National Crime Information Center (NCIC) database of the Federal Bureau of Investigation.
      i. If the local police department or sheriff's department will not allow DCFS to file a missing person report on behalf of the family, document the attempt to file the missing person report in CHRIS contacts.

C. Once a police report has been filed, contact the National Center for Missing and Exploited Children (NCMEC) at 1-800-THE-LOST (1-800-843-5678) no later than 24 hours after receiving information on missing or abducted children or youth to provide the following information to NCMEC per the Memorandum of Understanding (MOU) between DCFS and NCMEC:
   1) Child's name;
   2) Photo of the child, if available;
   3) Child's date of birth;
   4) Name and contact information of the FSW caseworker and FSW supervisor;
   5) Investigating Law Enforcement Agency Name, Contact Information, and Case Number (i.e., Missing Person Report number);
   6) Circumstances of the missing child's disappearance, including the date the child went missing or was last seen;
   7) Any other factual, biographical, or historical information that may assist with locating the missing Child.

D. Upon NCMEC's request, release to NCMEC any additional requested information and/or records in its possession that are relevant to locating the missing child.

E. Keep NCMEC informed with up-to-date information regarding the missing child.

F. Update CHRIS contacts regarding the missing child and efforts to locate the missing child.

G. If the child:
   1) Is not found and there are other children in the home:
      a) Continue to provide services to the family and other children as appropriate; and,
      b) Continue to call previously contacted parties and inquire for information and furnish further information that becomes available through case closure.
      c) If appropriate, extend the search to other counties and states.
   2) Is not found within 60 calendar days and is the only child in the home:
      a) Update the FAST to determine if additional services (e.g., counseling may be appropriate for the parents/caretakers);
      b) Close the case if the family does not need further services.

After notification of the child's disappearance by the family or by other means, the FSW supervisor will:

A. Notify the Area Director and Assistant Director of Community Services or designee of the child's disappearance.

B. Conference with the FSW as needed.

PROCEDURE V-E2: When a Child Involved in a Protective Services Case Who has been Missing is Located

07/2017

When a child involved in an open protective service case who has been missing is located, the FSW caseworker will:

A. Encourage the parents to have the child examined by his/her primary care physician, if possible, within 72 hours of locating the child or immediately in the case of a medical emergency.
B. Notify immediately (but no later than 24 hours after the child has been located) all parties and individuals previously notified of the child's disappearance that the child has been located to include, but not limited to:
    1) FSW Supervisor
    2) Area Director
    3) Local OCC attorney
    4) Child's attorney ad litem, if applicable
    5) Law enforcement
    6) NCMEC
        a) This notification may occur via email, phone, or text as appropriate.
C. If the case:
    1) Was not closed during the child's absence from the home:
        a) Conduct a visit with the child and the child's family within three business days after the child has been located to determine what immediate needs the child and/or family may have and what immediate steps may need to be taken to better support the child and his/her family.
        b) Update CHRIS contacts to note the child has been located and when the FSW caseworker met with the child and his/her family.
        c) Determine the primary factors that contributed to the child's running away or otherwise being absent from his/her home to include:
            i. Updating the family's FAST assessment within 30 days of locating the child; and,
            ii. Determining if the child is a sex trafficking victim or at risk of being a sex trafficking victim based on responses to the updated FAST and any other information gathered.
                (1) If there is reason to believe the child is a victim of sex trafficking:
                (a) Document accordingly in CHRIS and conference with the FSW supervisor to determine appropriate next steps for additional screening related to sex trafficking victims and/or referral to appropriate services.
                (b) Report information on children or youth who have been identified as a sex trafficking victim to local law enforcement immediately, and in no case later than 24 hours after receiving the information.
                (c) Document in CHRIS contacts when local law enforcement is notified of a child being identified as a sex trafficking victim.
    2) Was closed because the child was the only child involved in the case and absent from the home for more than 60 days and the family did not require further services:
        a) Reopen the case if the child is still under 18 years of age.
        b) Determine the primary factors that contributed to the child's running away or otherwise being absent from his/her home to include:
            i. Updating the family's FAST assessment within 30 days of reopening the case; and,
            ii. Determining if the child is a sex trafficking victim or at risk of being a sex trafficking victim based on responses to the updated FAST and any other information gathered.
                (1) If there is reason to believe the child is a victim of sex trafficking:

(a) Document accordingly in CHRIS and conference with the FSW supervisor to determine appropriate next steps for additional screening related to sex trafficking victims and/or referral to appropriate services.

(b) Report information on children or youth who have been identified as a sex trafficking victim to local law enforcement immediately, and in no case later than 24 hours after receiving the information.

(c) Document in CHRIS contacts when local law enforcement is notified of a child being identified as sex trafficking victim.

The FSW supervisor(s) will:

A. Conference with the FSW(s) as needed.
B. Notify the Assistant Director of Community Services or designee.

VI. SERVICES TO REUNIFY FAMILIES
POLICY VI-A: OUT-OF-HOME PLACEMENT CRITERIA

01/2020

The state of Arkansas is not a voluntary placement state. The removal of a child from his or her home must occur pursuant to a judicial order placing custody of the child with the Department. After the Department removes the child or the court grants custody of the child to the Department, the child shall be placed in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined at A.C.A. § 9-28-402.

When a child is in the custody of the Department of Human Services, DCFS shall ensure that the out-of-home placement is in the best interest of the child, is the least restrictive possible, is matched to the child's physical and therapeutic needs (e.g., caretakers have the skills and training sufficient to meet the child's individual needs), and is close in proximity to the child's parents and the child's school. All efforts to place a child within Arkansas shall be thoroughly explored and documented before consideration is given to out-of-state placement.

If the biological parent expresses a preference for placing a child in a home of the same or similar religious background to the biological parents, the Division will place the child with a family that meets the genetic parent's religious background. If a family with the same or similar religious background is not available, the Division will place the child with a family of a different religious background but that is knowledgeable and appreciative of the child's religious background.

When it is in the best interest of each of the children, the Department shall attempt to place siblings together while in out-of-home placements. Siblings include those individuals who would be considered a sibling under state/tribal law if it were not for the disruption in parental rights, such as a termination of parental rights or death of a parent. When it is in the best interest of each of the children, the Department shall attempt to place together infants with minor mothers who are in foster care.

The state shall check all appropriate child abuse and neglect registries for information on any prospective foster or adoptive parent and any household member age 14 and up living in the home before the prospective parent may be finally approved for placement of that child. This will be done regardless of whether foster care maintenance payments or adoption assistance payments are to be made on behalf of the child. The state shall also request any other state in which a prospective parent or any household member age 14 and up has resided in the preceding five years to check any child abuse and neglect registry it maintains for such information. The state will comply with any request received from another state to check its own child abuse and neglect registry.

In addition, a child in the custody of the Department shall not be placed in an approved home of any foster or adoptive parent unless all household members 18 and one-half years of age and older, excluding children in foster care, have had an Arkansas State Police Criminal Record Check.

A child in the custody of the Department shall also not be placed in an approved home of any foster or adoptive parent unless all household members 18 and one-half years of age and older, excluding children in foster care, have a fingerprint-based FBI Criminal Background Check.

No child shall be placed in the home of a foster parent where a records check reveals a felony conviction for child abuse or neglect, for spousal abuse or domestic battery, for a crime against children (including child pornography), or a crime involving violence, including rape, sexual assault or homicide. No child shall be placed in the home of a foster parent if the record check reveals a criminal conviction for physical assault, battery, or a drug related offense, if the offense was committed within the past five (5) years. The placement decision shall be based on an individual assessment of the child's needs.

In all custodial placements by DCFS, preferential consideration will be given to an adult relative over a nonrelated caregiver if the relative caregiver meets all relevant child protection standards and it is in the best interest of the

child to be placed with the relative caregiver. All potential out-of-state relative placements will be given the same opportunity as in-state relative placements to choose to become foster homes.

In order to assist in placing the child with an appropriate relative, the court will order the parent(s) to provide the necessary information to the Department to locate appropriate relatives:

- **A. The names, addresses, and phone numbers of any relatives who may be placement resources for the child;**
- **B. The names, addresses, and phone numbers and other identifying information on any putative father(s) of the child;**
- **C. Any information regarding possible membership or descent from an Indian tribe;**
- **D. Information necessary to determine financial eligibility for services or foster care.**

If the relative meets all relevant child protection standards and it is in the child's best interest to be placed with the relative caregiver, the FSW shall discuss with the relative the following two options for placement of the child in the relative's home:

- **A. The relative becoming a DCFS provisional foster home prior to becoming a regular DCFS foster home (if the relative opts to have his or her home opened as a provisional foster home, the relative shall not be paid a board payment until the relative is opened as a regular foster home); or,**
- **B. The relative obtaining legal custody of the child.**

For more information on these placement options, refer to Policy VI-B: Consideration of Relatives and Fictive Kin for Children in Foster Care.

Fictive kin to the child may be an appropriate placement option for a child provided the individual meets all relevant child protection standards and it is in the child's best interest to be placed with fictive kin. Fictive kin are defined as persons not related by blood or marriage but who have a strong, positive emotional tie to the child, and have a positive role in the child's life such as, godparents, neighbors, or family friends. If appropriate fictive kin are identified as a placement option for a child, the FSW shall discuss with the fictive kin the following two (2) options for placement of the child in the fictive kin's home:

- **A. The fictive kin becoming a DCFS provisional foster home prior to becoming a regular DCFS foster home (if the fictive kin opts to have his or her home opened as a provisional foster home, the fictive kin shall not be paid a board payment until the fictive kin is opened as a regular foster home); or,**
- **B. The fictive kin obtaining legal custody of the child.**

The child shall remain in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined at A.C.A. § 9-28-402(12), until:

- **A. The relative or fictive kin's home is opened as a provisional foster home or regular foster home; or,**
- **B. The court grants custody of the child to the relative or fictive kin after a written approved home study is presented to the court.**

Placement or custody of a child in the home of a relative or other person shall not relieve the Department of its responsibility to actively implement the goal of the case.

The court may order a child to remain in a placement if the court finds the placement is in the best interest of the child (with the exception that the court shall not order a child to remain in a placement in a foster home that has been closed or suspended by a child placement agency) after hearing evidence from all parties. The court shall not specify a particular provider for placement or family services, when DHS is the payer or provider; however, the court may order a child to be placed into a licensed approved placement (i.e., no child shall be placed in a foster home that has been closed or suspended by a child placement agency) after a hearing where the court makes a finding that it is in the best interest of the child based on bona fide consideration of evidence and recommendations from all the parties.

If the court orders a child to be placed into a licensed approved placement as outlined above, a IV-E eligible child may still remain IV-E claimable. However, if the court orders a child into a specific placement and it is determined

that the court did not make a finding based on bona fide consideration of evidence and recommendations from all parties a IV-E eligible child's IV-E claimability may be affected.

If the health or welfare of a child is in immediate danger while in a court-ordered placement the Division may immediately remove the child from the court-ordered placement. If the Division must move a child from a court-ordered placement due to the health or welfare of a child being in immediate danger, the Division shall notify all parties within 24 hours of the change in placement. Regarding this type of placement change, a hearing may be requested by a party to the case, and the hearing shall be held within five business days of receiving the request.

In all cases in which family services are ordered, the court shall determine the parent's, guardian's, or custodian's ability to pay, in whole or in part, for these services. This determination and the evidence supporting it shall be made in writing in the court order ordering family services. If the court determines that the parent, guardian, or custodian is able to pay, in whole or part, for the services, the court shall enter a written order setting forth the amounts the parent, guardian, or custodian can pay for the family services ordered and ordering the parent, guardian, or custodian to pay the amount periodically to the provider from whom family services are received. If a child is committed to a youth services center or detained in a juvenile detention facility and is covered by private health insurance, the court may order the parent or guardian to provide information on the health insurance coverage (including a copy of the health insurance policy and pharmacy card when available) to the detention or youth services center.

A child of a parent who is in DHS custody, is also considered a dependent juvenile and is eligible to receive foster care maintenance payments and is deemed to be a recipient of aid to families with dependent children. Titles XIX and XX services will be available to the child in the state in which the child resides.

Children who are in the custody of the Department shall be allowed trial home placements with parents, for a period not to exceed sixty (60) days, except as approved by the Department, and in any event not to exceed six (6) months. This includes trail home placements with the juvenile's parent(s) from whom custody was removed (or other person from whom custody was removed). The Department values child safety and will not place any child in trial home placement unless safety factors have been mitigated and sixty (60) days is the intended maximum trial home placement. Use of trial home placement for a period exceeding sixty (60) days will be reserved for extenuating circumstances. At the end of the sixty (60) days, unless an extension is requested by the Department for good cause, the court shall either place custody of the child with the parent, or the Department shall return the child to a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined in A.C.A. § 9-28-402.

When a child leaves the custody of the Department and the court grants custody to the parent or another person, the Department is no longer the legal custodian of the child, even if the Juvenile Division of Circuit Court retains jurisdiction.

PROCEDURE VI-A1: Initial Out-of-Home Placement Determination

01/2014

The Family Service Worker (FSW) will:

A. Contact the OCC Attorney immediately if there is any indication that the child is a member of an Indian tribe.
B. Consider placement with appropriate relatives and/or fictive kin. The child is in the custody of the Division, therefore, the child shall remain in an approved foster home or licensed shelter or facility until a relative or fictive kin's home is opened as a provisional home.
    1) If the worker makes the removal and potential relative and/or fictive kin placements for foster care are identified, notify the area Resource Worker Supervisor by email within twenty-four hours of removal that children have been removed and a potential provisional placement has been identified.
        a) In the notification email provide the area Resource Worker Supervisor with:

i. Names and ages of the children who have been removed;
ii. Name(s)of potential provisional placement;
iii. Relationship of potential provisional placement to children;
iv. Contact information for potential provisional placement;
v. Any other information collected regarding potential provisional placement (see CFS-450: Prospective Provisional Foster Parent Information and Questionnaire for more information).

2) Assist with completion of Prospective Provisional Foster Parent Information and Questionnaire as appropriate to the specific case and/or local county procedures.
3) Refer to Policy VI-B: Consideration of Relatives and Fictive Kin for Children in Foster Care and related procedures for more information.

C. Consider appropriate relatives and/or fictive kin who are interested in obtaining legal custody of the juvenile if identified relatives and/or fictive kin are not interested in becoming a provisional foster home.
   1) If potential relatives and/or fictive kin are identified as potential temporary custody relative placements, refer to Policy VI-B: Consideration of Relatives and Fictive Kin for Children in Foster Care and related procedures for more information.
D. If identified relatives and/or fictive kin are not interested in becoming provisional foster parents or obtaining legal custody of the child, talk with them about otherwise maintaining contact with the child (e.g., visits, transporting).
E. If there are no viable placements with appropriate relatives or fictive kin at the time placement is needed, select an available foster home or other out-of-home placement that will serve the child's best interest (see Policy III: Services Case Opening and related procedures for information regarding opening an out-of-home services placement case).
F. Continue to discuss with and/or support appropriate relatives' and/or appropriate fictive kin's interest in maintaining connections with the child and/or becoming a DCFS foster home throughout the life of the case if such actions are in the child's best interests.

PROCEDURE VI-A2: Out-of-Home Placement of Underaged Juvenile Offender, Juvenile Offender, or Sexual Offender

09/2011

A. If the child being placed has been identified as an Exempted from Finding Underaged Juvenile Offender, or a Juvenile Offender, or a Sexual Offender, the child must not be placed in a home with other children, unless the child's therapist and the Division determine that the child is no longer a danger to other children. Proper documentation of this will be contained in the child's hard copy file and documented in the Recommended Placement screen.
B. Any child being placed who is an adolescent or child sexual offender and has been assessed and designated as a risk Level 3 or Level 4, and is required to register as a sex offender under the Offender Registration Act *must not:*
   1) Be placed in any out-of-home placement that is within 2000 feet of the victim's residence.
   2) Be allowed to have any direct or indirect contact with the intention to harass the victim.
   3) Be placed in any out-of-home placement that is within 2000 feet of any public or private elementary or secondary school, public park, youth center, or child care facility.
C. Document in CHRIS that a child who is a Level III or IV Registered Sex Offender and must not be placed in any out-of-home placement that is within 2000 feet of the victim's home or any public or private elementary or secondary school, public park, youth center or child care facility.
D. Provide local law enforcement or other appropriate law enforcement agency, with all applicable and appropriate information that is required by law within five business days after the person establishes residency.
E. Document that law enforcement has been notified of this placement and all subsequent placements.
F. If recommended placement is a facility, facility must be notified about any under-aged juvenile offender, juvenile offender, or sexual offender status and documented in Placement Recommendation screen.

PROCEDURE VI-A3: Placement of Infants Born to Incarcerated Mothers

08/2013

The Division of Children and Family Services will accept referrals from the Arkansas Department of Correction (ADC) social worker seeking to find appropriate placements for infants born to incarcerated mothers. If the infant has a legal father, DCFS will not take any action unless the legal father refuses to assume responsibility for the child. The ADC social worker will refer the case to DCFS if the female inmate is unable to identify anyone who meets specific ADC guidelines for the assumption of care for the infant.

After referral by the ADC social worker, the DCFS Family Service Worker (FSW) will:

A. Visit with the mother and discuss possible placements for the child. Options include placement with a family member, a non-family member, or custody placed with DHS.
   1) If the mother wants to place the infant with a relative or fictive kin, the FSW will discuss whether the mother wants:
      a) Custody placed with DHS, with the relative or fictive kin opened as a provisional foster home; or,
      b) Full custody given to the relative or fictive kin.
   2) If the mother wants to place the infant with a non-family member, the FSW will discuss whether she wants:
      a) Custody placed with DHS, with the family opened as a regular foster home; or,
      b) Full custody given to the non-family member.
B. Inform the mother of applicable Minimum Licensing Requirements and DCFS Policy if a provisional or regular foster placement with a family or a regular foster placement with a non-family member with custody placed with DHS is being considered. Any foster or adoptive placement with a family or non-family member, wherein DHS is the custodian, must meet the same child welfare licensing requirements as a regular foster home prior to the child being placed in the home as defined at A.C.A. § 9-28-402.
C. Inform the mother that a home study must be completed on any family or non-family member who is being considered to take full custody of the infant.
D. When applicable, begin the process for opening any identified family member as a provisional foster home or any identified non-family member as a regular DCFS foster home (see Policy VI-B: Consideration of Relatives and Fictive Kin for Children in Foster Care and Policy VII: Development of Foster Homes for more information).
E. When applicable, conduct a home study on the requested placements where consideration for custody is with a family or non-family member, but not with DHS.
   1) If the home study is unfavorable, work with the mother to identify other possible placements, or petition for custody of the child upon birth.
   2) If the home study is favorable, when the child is born, petition the court for custody to be given to the relative or other person identified by the mother.
F. Petition the court for custody to be given to DHS for placement when the child is born. The court will assess each case individually and will have a range of options for disposition:
   1) Place the child in the identified provisional foster home or regular foster home.
   2) Place permanent custody with a relative or other person and close the case with no DHS involvement.
   3) Grant guardianship to a relative or other person and close the case with no DHS involvement.
   4) Grant custody to DHS and recommend immediate termination of parental rights. If termination of parental rights is granted, the Family Service Worker will follow Policy VIII-D: Termination of Parental Rights.
G. If applicable, follow DCFS policy for case opening, placement, and provision of services to the child.
H. Contact the ADC social worker to arrange visitation between the child placed in an out-of-home setting and the incarcerated mother as stated in Policy VI-C: Maintaining Family Ties in Out-of-Home Placement, unless such visitation is prohibited by the court, physician, Division, etc.

PROCEDURE VI-A4: Out-of-Home Placement by Sheriff or Police Chief in Emergency Situations

09/2011

In an emergency situation, a sheriff or police chief may place children in DCFS foster homes only when the following criteria have been met:

A. The sheriff or chief of police contacts the area or county designated on-call worker and does not get a return phone call within 30 minutes.
B. Subsequent to not receiving a phone call in the above situation, the sheriff or chief of police contacts the DCFS Emergency Contact Line and does not get a return phone call within 15 minutes.
C. The foster parent is personally well-known to the sheriff or the chief of police and the sheriff or chief of police has:
   1) Determined that the foster parent's home is safe and provides adequate accommodations for the child; and,
   2) Performed a criminal record and child maltreatment check on the foster parent.
D. The sheriff or chief of police will on the next business day, notify DCFS of the time and date that the child was placed in the foster parent's home.

PROCEDURE VI-A5: Out-of-Home Placement Support

09/2011

The Family Service Worker will:

A. When a child is first placed in foster care, an initial clothing order may be issued if needed. The FSW will assess with the foster parent which clothing items are needed and issue the authorized amount of clothing allowance using the P-card process. The FSW will accompany the foster parent to the store to approve the purchase.
B. Complete all actions identified in Policy III-A: Services Case Opening and Re-Evaluation. Complete the IV-E and Medicaid application as prescribed in Procedure III-A2.
C. Complete all of the medical exam requirements for the child including the Comprehensive Health Assessment (see Procedure VI-D1: Comprehensive Health Assessment and Health Plan for Children Receiving Out-Of-Home Placement Services).
D. Complete all case opening functions as outlined in Policy IV-A: Services Case Plan and IV-B: Case Staffings.
E. Visit the child as required in Policy VII-I: Supervision of Children in Out-Of-Home Placement.

PROCEDURE VI-A6: Concurrent Planning

The Division will ensure timely permanency for children entering out-of-home Placement. Concurrent planning includes working towards the goal of returning the child to the parents while concurrently working on alternative permanent placements. Concurrent planning will be done for all out-of-home placement cases except for those cases where the court determines no reasonable efforts to provide reunification services. The level and degree of concurrent planning will be on a case by case basis. The DCFS worker will immediately develop and implement a realistic concurrent plan.

The Family Service Worker will:

A. Inform the family of the concurrent planning process.
B. Emphasize the importance of family involvement and partnerships in establishing permanency for children in out-of-home placements.
C. Request parental input in identifying relatives and significant others who may be appropriate caregivers and initiate contact and home studies. The family will be required by court order to provide information identifying other relatives.

D. Use the identified contact information to locate and contact named relatives to assist in the child's placement as prescribed in this policy (VI-A). Information on the putative father or any absent parent should be obtained and submitted on the CFS-408: Federal Parent Locator System Information to the local OCC Attorney. Lexis Nexis may be used if appropriate. In considering placements, foster parents should be viewed as a resource.
E. Initiate the completion of the Life Story Book for all children in out-of-home care.
F. Complete the initial CFS-6010: Case Plan within 30 days and document all concurrent planning activities in the appropriate section of the case plan (see Procedure IV-C1). The CFS-6010: Case Plan should document tasks that support reunification as well as permanency activities.
G. Complete the CFS-456: Birth Family Background Information within 60 days of case opening.
H. At the second staffing (90 days), invite the Adoption Specialist if the court determines reunification services are not required, or the Division is recommending termination of parental rights. The CFS-6010: Case Plan developed from this staffing should assign tasks and responsibilities to the FSW and Adoption Specialist.
I. Invite the Adoption Specialist to participate in the sixth month, ninth month, and eleventh month staffing if it appears likely that the child will not return home or if the goal for the child is adoption. The CFS-6010: Case Plan will assign tasks and responsibilities to the Family Service Worker and Adoption Specialist.

The Adoption Specialist will:

A. Participate in the sixth month, ninth month, and eleventh month staffing if it appears likely that the child will not return home or if the goal for the child is adoption. The CFS-6010: Case Plan will assign tasks and responsibilities to the Family Service Worker and Adoption Specialist.

POLICY VI-B: CONSIDERATION OF RELATIVES AND FICTIVE KIN FOR CHILDREN IN FOSTER CARE

01/2020

The Division of Children and Family Services (DCFS) believes that safe and appropriate relatives and fictive kin are the best placements for children who must be removed from their homes to ensure safety. Research confirms that children in foster care fare much better when placed with relatives and fictive kin than in traditional foster homes or other placement settings. Placement with relatives and fictive kin helps to minimize trauma, improve well-being, and increase permanency for children in foster care. DCFS will strive to ensure that a child's first placement is with a relative or fictive kin if at all possible.

"Relative" means a person within the fifth degree of kinship to the child or at least one of the children in a sibling group, including step-siblings and half-siblings, by virtue of blood or adoption. In all custodial placements by the Department of Human Services in foster care or adoption, preferential consideration shall be given to an adult relative over a nonrelated caregiver if the relative caregiver meets all relevant child protection standards and it is in the best interest of the child to be placed with the relative caregiver.

When considering placement options for a child in foster care, relative includes non-custodial parents as parents are presumed to be the most appropriate caregiver for a child unless evidence to the contrary is presented. When a child enters foster care, the Department will immediately evaluate the appropriateness of non-custodial parents for trial home placement of their child.

When a non-custodial parent is not an immediate placement option, the Department will seek other relatives as potential caregivers in an effort to preserve the bond between the child and family. The Department will discuss with a relative (who is not the non-custodial parent) the following two (2) options for placement of the juvenile in the relative's home:

A. The relative becoming a DHS provisional foster home prior to becoming a regular foster home; or,
B. The relative obtaining legal custody of the juvenile.

Per A.C.A. § 9-27-354, placement or custody of a juvenile in the home of a relative shall not relieve the Department of its responsibility to actively implement the goal of the case.

"Fictive kin" means a person not related to a child by blood or marriage, but who has a strong, positive, emotional tie to a child and has a positive role in a child's life. If there are no available and/or appropriate relatives within the fifth degree of kinship to the child, then DCFS will attempt to identify appropriate fictive kin, to include people beyond the fifth degree of kinship by virtue of blood or adoption, as a placement option for the child. If the fictive kin meet all relevant child protection standards and it is in the best interest of the child to be placed with the fictive kin, the Department shall discuss with the fictive kin the following two (2) options for placement of the juvenile in the relative's home:

A. The fictive kin becoming a DHS provisional foster home prior to becoming a regular foster home; or,
B. The fictive kin obtaining legal custody of the juvenile.

The juvenile shall remain in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency until a trial home visit placement occurs with a non-custodial parent, a relative or fictive kin's home is opened as a provisional or regular foster home, or the court grants custody of the juvenile to the relative or fictive kin after a written approved home study is presented to the court.

If the relative or fictive kin chooses to obtain legal custody of the juvenile, a protective services case must be opened on the child and a case plan developed to establish permanency for the child. The Division must provide services similar to the services that would have been provided if the child was placed in foster care, and the case plan must address these services. For example, the child's health, education, and/or counseling needs should be

addressed in the case plan. Relatives and fictive kin have the option of obtaining permanent custody or guardianship if all efforts toward reunification are exhausted and/or to achieve case plan goals for permanency. If the court grants permanent custody, or guardianship is granted, the protective services case will be closed.

If Termination of Parental Rights (TPR) is an option for the case, the relative or fictive kin is eligible to adopt the child and can receive services identified in Policy VIII-I: Adoption Subsidy and related procedures, if the child is eligible.

PROCEDURE VI-B1: Trial Home Visit with Non-Custodial Parents

01/2020

The Family Service Worker will:

A. Immediately ask the child, child's parent(s) or legal guardian(s) from whom custody was removed, and any available relatives or fictive kin to provide information on non-custodial parent(s) to include, as available:
   1) The names, addresses, last known address, last known place of employment, and phone numbers of the non-custodial parent(s);
   2) The names, addresses, phone numbers, and other identifying information of any relative or collateral who could assist in location of the non-custodial parent(s);
   3) Information pertaining to stability of the non-custodial parent(s) such as:
      a. History of and any current substance misuse issues
      b. History of and any current domestic violence issues;
      c. History of and any current mental or behavioral health issues;
      d. Current and/or previous restraining orders and/or protection orders with child or immediate family members.

B. Collaborate with the Resource Worker to assess appropriateness of the non-custodial parent.
   1) For initial, immediate placement the following must be conducted and considered:
      a. Verification that the individual is the non-custodial parent;
      b. An expedited Child Maltreatment Central Registry Check (via CFS-316: Request for Arkansas Child Maltreatment Central Registry Check);
      c. An expedited State Police Criminal Record check (via CFS-342: State Police Criminal Record Check);
      d. A Vehicle Safety Program Check (i.e., driving points);
      e. A Lexis Nexis search;
      f. A Court Connect search for applicable counties;
      g. A visual inspection of the home guided by the Non-Custodial Parent Information and Questionnaire and also to include:
         i. Follow up on immediate concerns identified by child or collaterals during the removal;
         ii. Review of information gathered during the visual inspection of the home;
         iii. Assessment of how other children and/or adults in the home may affect the child being considered for placement;
         iv. Assessment of how the child being considered for placement may impact the household members.
   2) The following must also be submitted within two weeks of placement (results do not have to be received in order to place with the non-custodial parent if there are no other health or safety concerns):
      a. FBI (non-state) Criminal Record Check if the non-custodial parent has lived or worked (if different) in another state in the last five years;
      b. Request for Child Maltreatment Central Registry check from any state in which non-custodial parent has lived or worked (if different) for the past five years.

C. If placement with the non-custodial parent appears viable, interview the child, if age appropriate, to assess how the child may feel about placement with the non-custodial parent and make individualized placements on a case-by-case basis in the best interest of the child.

D. If placement is viable:
   1) Contact the OCC Attorney immediately if child is being moved from one Out-of-Home Placement to

another and provide notice of the placement change to all other parties to the case as required by law and outlined in Policy VII-L: Changes in Out-of-Home Placement and related procedures if that placement was not considered to be a temporary placement (see Appendix I: Glossary).

2) Provide the child's parent(s) with PUB-11: What Happens When Your Child and Family Are Involved with DCFS?
3) Provide the non-custodial parent with PUB-15: A Relative's Guide to the Arkansas Child Welfare System.
4) Place the child in the non-custodial parent's home and:
    a) Ensure the non-custodial parent acknowledges they will not allow the alleged perpetrator access to the child that is not supervised by the Division until the investigation is complete and will not allow any contact with the alleged offender that is not approved or authorized by the Division or the court after the investigation is completed (if found true).
    b) Document placement selection on the Case Plan by keying the "Plan Goals" and the "Needs/Svc" screens in the "Treatment" portion of the "Case Plan" section of CHRIS.
    c) Assist the non-custodial parent in applying for benefits if appropriate, such as benefits under the Temporary Employment Assistance (TEA) Program or the Supplemental Nutrition Assistance Program (SNAP).

E. Keep the Resource Worker informed of any changes to the child's need for a placement with the non-custodial parent and any other relevant information.
F. Hold staffings, as needed, in accordance with Procedure IV-C1: Case Staffings and update the Child and Adolescent Needs and Strengths (CANS) Assessment and case plan.

The Resource Worker will:

A. Process all necessary background checks by (see Procedure VII-C1: Background Check Processing for more information):
    1) Conducting an expedited Child Maltreatment Central Registry Check (via CFS-316: Request for Arkansas Child Maltreatment Central Registry Check);
    2) Conducting an expedited State Police Criminal Record check (via CFS-342: State Police Criminal Record Check);
    3) Submitting a Vehicle Safety Program (DMV) Check (driving record points will be computed in DCFS Central Office, and the results, including qualification or disqualification, will be forwarded to the Resource Worker for inclusion in the non-custodial parent's file);
    4) Submitting a Non-state Criminal Record Check if the non-custodial parent has lived or worked (if different) in another state in the last five years; and,
    5) Submitting requests for Child Maltreatment Central Registry check from any state in which non-custodial parent has lived or worked (if different) for the past five years;
B. Conduct a visual inspection of the non-custodial parent's home as guided by the Non-Custodial Parent Information and Questionnaire.
C. Keep the child's FSW informed of progress and/or any challenges associated with processing of the background checks.

The FSW and Resource Supervisors will:

A. Conference with and support the FSW and Resource Worker as necessary.
B. Review and approve placement with non-custodial parent.

PROCEDURE VI-B2: Provisional Foster Home Placement for Children in Foster Care

01/2020

The Family Service Worker will:

A. Ask the child's parent(s) or legal guardian(s) from whom custody was removed to provide information on appropriate relatives and fictive kin to include, as available (if not already provided at time of removal):

1) The names, addresses, and phone numbers of any relatives or fictive kin who may serve as appropriate placement resources for the child;
2) The names, addresses, phone numbers, and other identifying information of any putative father(s)of the child.

B. Assist with completion of CFS-450: Prospective Provisional Foster Parent Information and Questionnaire as appropriate to the specific case and/or local county procedures.

C. Keep the Resource Worker informed of any changes to the child's need for a provisional placement and any other relevant information.

D. Ensure that the Resource Worker conducts a review of the prospective provisional home to include:
1) An expedited Child Maltreatment Central Registry Check (via CFS-316: Request for Arkansas Child Maltreatment Central Registry Check);
2) An expedited State Police Criminal Record check (via CFS-342: State Police Criminal Record Check);
3) A vehicle safety check; and,
4) Submission of the FBI (non-state) Criminal Record Check (results do not have to be received in order to open the provisional foster home, but results must be received and clear within six months in order to make a determination as to whether to approve as a regular DCFS foster home).
5) A visual inspection of the home (via CFS-446: In Home Consultation Visit Report).

E. If the provisional foster home placement appears viable, interview the child, if age appropriate, to assess how the child may feel about placement with the relative and make individualized placements on a case-by-case basis in the best interest of the child.

F. Collaborate with the Resource Worker to evaluate:
1) How the other children and adults in the home will affect the successful development of a child in foster care; and,
2) How the child in foster care will impact the other members of the home.

G. If, after the Resource Worker has completed all necessary steps to open the family as a provisional home (see below for more information), it is determined that placement with the family is in the best interest of the child:
1) Arrange at least one (1) pre-placement visit for the child if it is not the child's initial placement;
2) Contact the OCC Attorney immediately if child is being moved from one Out-of-Home Placement to another and provide notice of the placement change to all other parties to the case as required by law and as outlined in Policy VII-L: Changes in Out-of-Home Placement and related procedures if that placement was not considered to be a temporary placement (see Appendix I: Glossary);
3) Provide the child's parent(s) with PUB-11: What Happens When Your Child and Family Are Involved with DCFS?;
4) Provide the prospective provisional foster family with PUB-15: A Relative's Guide to the Arkansas Child Welfare System;
5) Place the child in the provisional home and:
   a) When a child is placed in a provisional foster home for a 72 hours hold, ensure that the provisional foster parents acknowledge they will not allow the alleged perpetrator access to the child that is not supervised by the Division until the investigation is complete and will not allow any contact with the alleged offender that is not approved or authorized by the Division or the court after the investigation is completed (if found true);
   b) Ensure that the provisional foster parents understand that they must work with their Resource Worker to complete any corrective actions necessary to bring the home into compliance with Minimum Licensing Standards and DCFS Policy within six (6) months;
   c) Document placement selection on the Case Plan by keying the "Plan Goals" and the "Needs/Svc" screens in the "Treatment" portion of the "Case Plan" section of CHRIS;
   d) Assist the provisional foster parents in applying for benefits if appropriate. Until the provisional foster home is opened as a regular foster home, the relative/fictive kin may apply for and receive benefits for which the provisional foster parents may be entitled due to the placement of the child in the home, such as benefits under the Temporary Employment Assistance (TEA) Program or the Supplemental Nutrition Assistance Program (SNAP);

e) Assess the situation with the Resource Worker and Supervisor(s) if the family does not come into compliance within six months of the placement of the child in the home and recommend to OCC on how the case should proceed (i.e., remain in foster care or have a completed approved home study and recommend custody to the relative);
f) Collaborate with the Resource Worker to ensure that the relative(s) is completing the process for foster home approval. If the relative's home is not fully licensed as a foster home within six (6) months of the placement of the child in the home:
   i. The Department shall remove the child from the relative's home and close the relative's provisional foster home and place child in an approved or licensed placement; or,
   ii. The court shall remove custody from the Department and grant custody of the child to the relative.

I. Complete the Permanency Planning Hearing Court Report and submit to the FSW Supervisor for review and approval.
J. If approved by the FSW Supervisor, submit the Permanency Planning Hearing Court Report to the OCC attorney, CASA, and all other required parties within 14 days prior to any Permanency Planning Hearing scheduled for the case.
K. Hold staffings, as needed, in accordance with Procedure IV-C1: Case Staffings and update the Child and Adolescent Needs and Strengths (CANS) Assessment and case plan.
L. Invite the Adoption Specialist to the staffing when appropriate.
M. Conduct a staffing to discuss closure when appropriate.

The Resource Worker will:

A. Assist with completion of CFS-450: Prospective Provisional Foster Parent Information and Questionnaire as appropriate to specific case and/or local county procedures.
B. Process all necessary background checks by (see Procedure VII-C1: Background Check Processing for more information):
   1) Conducting an expedited Child Maltreatment Central Registry Check (via CFS-316: Request for Arkansas Child Maltreatment Central Registry Check);
   2) Conducting an expedited State Police Criminal Record check (via CFS-342: State Police Criminal Record Check);
   3) Conducting a Vehicle Safety Program (DMV) Check (driving record points will be computed in DCFS Central Office, and the results, including qualification or disqualification, will be forwarded to the Resource Worker for inclusion in the applicant file; see Procedure VII-C1 for forms which must be completed); and
   4) Submitting the FBI Criminal Record Check (FBI results do not have to be received in order to open the provisional foster home, but results must be received and clear within six months in order to approve as a regular DCFS foster home).
C. Complete a visual inspection of the home (via CFS-446: In Home Consultation Visit Report). See Procedure VII-C2: In Home Consultation Visit for more information.
D. Based on the results of the background checks listed above and the visual inspection of the home, begin the process for requesting any necessary Alternative Compliances or DCFS Policy Waivers, if applicable.
E. Explain to the relative/fictive kin that, if opened as a provisional foster home, they will not receive a board payment until they are opened as a fully approved DCFS Foster Home which must occur within six (6) months of being opened as a provisional foster home.
F. Explain to the relative/fictive kin other processes related to becoming a provisional and, ultimately, a regular DCFS foster home (see Policy VII: Development of Foster Homes and related procedures).
G. Keep the child's FSW informed of progress and/or any challenges to opening the relative as a provisional foster home.
H. Collaborate with the child's FSW to evaluate:
   1) How the other children and adults in the home will affect the successful development of a child in foster care; and,
   2) How the child in foster will impact the other members of the home.

I. If the relative/fictive kin and relative/fictive kin's home are appropriate to open as a provisional foster home, complete CFS-452: Provisional Foster Home Verification and CFS-474: Provisional Foster Home Checklist with the family and file in the provider record.
J. Enter a relative into CHRIS as a Provider opening two placement services: Provisional (Relative) Placement (No Board) Service, and Foster Family Home Service. The Provisional (Relative) Placement (No Board) Service must be quickly approved (once the necessary requirements are received), while the Foster Family Home Service has Applicant Status awaiting compliance (all required checks, certifications and training) for approval. In CHRIS, the relative will have only one Provider Number showing two services provided by the family.
K. Enter fictive kin into CHRIS as a Provider opening two placement services: Provisional (Fictive Kin) Placement (No Board) Service, and Foster Family Home Service. The Provisional (Fictive Kin) Placement (No Board) Service must be quickly approved (once the necessary requirements are received), while the Foster Family Home Service has Applicant Status awaiting compliance (all required checks, certifications and training) for approval. In CHRIS, the fictive kin will have only one Provider Number showing two (2) services provided by the family. Provisional (Fictive Kin) will mirror the same Board Rate as Provisional (Relative) which carries the payment scale status of "None."
L. Request any necessary policy waivers and/or alternative compliances to waive non-safety standards for the relative/fictive kin prior to referring to training.
M. Refer to Policy VII: Development of Foster Homes, to continue with the process of opening the provisional foster home as a regular DCFS foster home.
N. Support the relative/fictive kin throughout the process of becoming a provisional and regular DCFS foster home.
O. Assess the situation with the FSW and Supervisor(s) if the relative does not come into compliance within six (6) months of the placement of the child in the home.

The FSW Supervisor will:
A. Conference with and support the FSW on the case as necessary.
B. Review and approve the Permanency Planning Hearing Court Report.

The Resource Worker Supervisor will:
A. Upon receipt of a notification email from a worker who has removed children and identified a prospective provisional placement (see Procedure VI-B1: Provisional Foster Home Placement for Children in Foster Care for more information), be responsible for ensuring completion of CFS-450: Prospective Provisional Foster Parent Information and Questionnaire within 48 hours of receipt of notification.
B. Conference with and support the Resource Worker as necessary regarding opening the provisional foster home.

PROCEDURE VI-B3: Relative and Fictive Kin Custody for Children in Foster Care

01/2020

The Family Service Worker will:
A. Ask the parent(s) or legal guardian(s) from whom custody was removed to provide information on appropriate relatives to include, as available (if not already provided):
   1) The names, addresses, and phone numbers of any relatives who may be placement resources for the child;
   2) The names, addresses, phone numbers and other identifying information on any putative father(s) of the child.
B. If appropriate relatives cannot be identified or are otherwise not able to serve as a placement resource, ask the parent(s) or legal guardian(s) from whom custody was removed to provide information on appropriate fictive kin to include, as available (if not already provided):
   1) The names, addresses, and phone numbers of any fictive kin who may be placement resources for the child.

C. Interview the child, if age appropriate, to assess how the child may feel about placement with a specific relative or fictive kin.
D. Complete the home study, to include Central Registry Checks, State Police Criminal Background Checks, and Vehicle Safety (DMV) Program Checks on all applicable household members, on the relative or fictive kin and submit to the FSW Supervisor for review and approval.
E. Based on the results of the background checks listed above, request any necessary DCFS Policy Waivers.
F. If FSW Supervisor approval is attained, submit the home study to the court with the recommendation to place the child with the relative or fictive kin so that the relative or fictive kin may obtain legal temporary custody.
G. Open a protective services case on the child if the court grants temporary custody to the relative or fictive kin.
H. Schedule a staffing within 30 days of opening the protective services case.
I. Invite the child's parents, relatives, the child (if age appropriate) and community providers as appropriate. During the staffing these individuals will determine the permanency goal for the child: reunification, adoption, guardianship, permanent custody with the relative, or APPLA.
J. Complete or update the FAST within 30 days of opening the protective services case and submit to the FSW Supervisor for review and approval.
K. Develop or update the Case Plan within 30 days of opening the protective services case and submit to the FSW Supervisor for review and approval.
L. Complete the Permanency Planning Hearing Court Report and submit to the FSW Supervisor for review and approval.
M. After receiving approval from the FSW Supervisor for the Permanency Planning Hearing Court Report, submit to the OCC attorney within 14 days prior to any Permanency Planning Hearing scheduled for the case.
N. Submit the Permanency Planning Hearing Court Report to OCC, CASA and all parties no later than 14 days before the scheduled Permanency Planning Hearing.
O. Hold staffings, as needed, in accordance with Procedure IV-C1: Case Staffings and update the FAST.
P. Invite the Adoption Specialist to the staffing when appropriate.
Q. Conduct a staffing to discuss closure when appropriate.

The FSW Supervisor will:

A. Review and approve the home study.
B. Review and approve the FAST within 30 days of the FSW opening the protective services case.
C. Review and approve the case plan within the 30 days of the FSW opening the protective services case.
D. Review and approve the Permanency Planning Hearing Court Report prior to the FSW's submission of this report to the OCC attorney.
E. Conference with and support the FSW on the case as necessary.

The Adoption Specialist will:

A. Attend staffings when invited.
B. Keep his or her Adoption Supervisor informed of the child's permanency goal and progress toward that goal.

POLICY VI-C: MAINTAINING FAMILY TIES IN OUT-OF-HOME PLACEMENTS

01/2020

Removal from the home and subsequent out-of-home placement are traumatic events for children. One way this trauma may be minimized is by maintaining family ties in out-of-home placements. Moreover, the Division believes that strengths of families and supporting these strengths contribute to life-long permanent relationships for children. This belief is supported by research demonstrating that children who maintain positive family ties while in out-of-home placement achieve better short- and long-term outcomes. If court orders differ from the requirements outlined in this policy and related procedures regarding visits and contact with family members, the Division will comply with court orders accordingly.

CONTACT WITH PARENTS

In order to maintain and strengthen the parent-child relationship, visits and other forms of contact with parents and their children in out-of-home placements are essential. Visits between parents, including noncustodial and putative parents as applicable, and their children will occur at least weekly based upon the child's best interest. More frequent visits are encouraged, as appropriate. A positive drug or alcohol screen in and of itself will not result in the postponement and/or withholding of visits between a parent and child in DHS custody unless:

- **A. The parent is under the influence of drugs and/or alcohol at the time of the scheduled visit and has observable behavior indicating impairment of parenting capacity; or,**
- **B. A court order specifies that a parent's positive screen will result in the withholding of parent-child visits.**

There is a legal presumption that visits may be unsupervised unless evidence has been provided to and the court has made a ruling that unsupervised visitation is not in the best interest of the children involved. The burden is upon Division staff to provide evidence regarding why visits must be supervised or may be unsupervised.

If the court orders supervised visitation, the parent from whom custody of the child has been removed will receive a minimum of four (4) hours of supervised visitation per week. The court may order less than four (4) hours of supervised visitation if the court determines that the supervised visitation is not in the best interest of the child or will impose an extreme hardship on one (1) of the parties.

Visits that have been ordered to be supervised may be graduated to unsupervised depending on the dynamics of the case. Any Division staff member as well as approved student interns and volunteers may supervise visits. However, the appropriate supervisor will individualize each assignment to supervise visits. When making the assignment the supervisor will consider the family's history, current level of functioning, and any other applicable factors as well as the skill set of the individual selected to supervise the visit.

The preferred location for visits is the parent's home or, if that is not possible, in the most home-like setting possible. Office visits are a last resort. Visits are encouraged to include any variety of quality family time activities such as visiting a library/story time at a library, playing at a park, making and enjoying a meal together, etc., as appropriate for an individual family.

While children are in out-of-home placements, the Division, in conjunction with foster parents and placement providers, will update parents regarding their children's lives including providing information regarding, without limitation, status of physical, behavioral, and emotional health, progress in school, involvement in extracurricular activities, and achievements. Parents will be invited to participate in their children's school, faith-based, and extracurricular activities as appropriate.

The specific plan for visits between a child in out-of-home placement and his or her parents, as appropriate, will be included in the case plan. As the family prepares for reunification, the frequency and/or length of visits will increase while the level of supervision will decrease accordingly. The case plan will be updated as needed to reflect changes regarding visits and other contact.

Foster parents and approved relative and fictive kin volunteers may communicate directly with biological parents when appropriate and in the child's best interest to give updates on the child's progress, inform them of the child's school and extracurricular activities, and share photos. Foster parents and approved relative and fictive kin volunteers are also encouraged to consider supporting the parent-child relationship in other ways such as helping the child write letters to his or her parents, creating Life Books with the children to then share with the biological parents, and presenting a positive view of the child's parents to the child to the extent possible.

In addition, since foster parents can model positive parenting skills that may help the biological parents to achieve reunification, foster parents may consider hosting parent-child visits, if appropriate and acceptable to all individuals involved.

When assessing the appropriateness of foster parents and approved relative and fictive kin volunteers communicating directly with biological parents, holding parent-child visits in the foster parent home, or transporting the child to parent-child visits, the Division will ensure the foster parents and approved relative and fictive kin volunteers thoroughly understand all court orders related to parent-child contact and consider:

A. Various family dynamics;
B. Progress of the case at that point in time; and,
C. Experience and other skills sets of the foster family or approved relative and fictive kin volunteers.

DCFS staff members will discuss with foster parents, approved relative and fictive kin volunteers and biological parents the level of comfort that both sets of parents have with foster parents or approved relative and fictive kin volunteers providing transportation to parent-child visits or, as applicable to foster parents hosting/supervising parent-child visits. Staff will not expect foster parents to host/supervise parent-child visits and/or transport to parent-child visits:

A. During the first placement they have as foster parents;
B. During the first month of any open foster care case regardless of the number of times they have served as foster parents.

Exceptions to the above guidelines may be made if the foster parents express an interest in assisting with parent-child visits under these conditions. Even when foster parents state they are willing to assist with parent-child visits during the first placement they have as foster parents or during the first month of any open foster care case, the FSW will make a decision regarding the foster parents' involvement with parent-child visits after carefully assessing each individual case and the dynamics involved. Even after the first month of an open foster care case, if foster parents desire to assist with parent-child visits, the FSW will continue to assess on a case by case basis the appropriateness of foster parent involvement for each foster care placement.

The Division will assist the foster parents and approved relative and fictive kin volunteers and biological parents in establishing appropriate expectations and boundaries regarding communication and interaction (e.g., frequency and specific times the biological parent may call and/or visit the foster home). Any direct interaction between the biological parents and foster parents or approved relative and fictive kin volunteers in no way relieves the Division of its duty to ensure the biological parents remain current on all aspects of their case and their children.

CONTACT WITH SIBLINGS

Sibling relationships are emotionally powerful and critically important not only in childhood, but over the course of a lifetime with sibling relationships likely to be the longest relationships most people experience. Siblings include those individuals who would be considered a sibling under state/tribal law if it were not for the disruption in parental rights, such as a termination of parental rights or death of a parent.

For children in out-of-home placements, sibling relationships can provide a significant source of continuity, stability, and comfort while in foster care. As such, when it is in the best interest of each of the children and barring extenuating circumstances, siblings are entitled to be placed together in out-of-home placements.

Siblings may be placed separately only if:

A. Allegations of abuse between siblings are under investigation and/or have been founded;

1) **An assessment must be conducted by a mental health professional within five days of placing siblings in different placements due to the abuse allegations between the siblings that are under investigation and/or have been founded.**
    a) **The siblings may continue in the separated placements if the assessment by the mental health professional supports continuing the separated placements because placing the siblings together would be detrimental to the health, safety, or well-being of one or more of the children as related to the abuse allegations and/or investigation findings;**

B. **An assessment by a mental health professional determines that placing the siblings together would be detrimental to the health, safety, or well-being of one or more of the children; or,**
C. **The Division presents evidence to the court that there are no available placements that can take the entire sibling group.**

If children must be separated, the Division will attempt to place them in close proximity in order to facilitate regular and meaningful contact. The Division will ensure the reasons for the separation of siblings into different foster homes or other approved placements are regularly reassessed and targeted recruitment efforts continue to reunite the siblings. The case plan must include when siblings will be reassessed to determine if they can be reunited at a later point in time. If the reassessment determines reunification is appropriate, the plan for placing siblings together will be documented in the case plan as well.

In an effort to maintain sibling connections for those siblings who are placed separately, the siblings' case will be reviewed by the court at least once every 90 days to determine whether there have been reasonable efforts to reunite the siblings and to allow regular and meaningful contact with the siblings. If the court approves a paper review, the 90-day court reviews of separated siblings may be satisfied by such a review and a hearing is not required.

In addition, siblings who must be placed separately will have consistent and meaningful contact at least weekly when possible. While face-to-face visits in home-like settings or other family-friendly locations are preferred and encouraged, other forms of communication such as phone calls, emails, and Skype or FaceTime (or similar program) conversations are permissible, as age and developmentally appropriate, to meet the weekly contact requirement. However, siblings who are placed separately will have at least bi-weekly face-to-face visits unless a FSW Supervisor grants a visit waiver. The plan for sibling visits and other contact will be outlined in the case plan. Visits or other forms of contact with siblings will not be withheld by DCFS or any placement provider as a behavioral consequence unless there are documented safety concerns for one or more of the siblings.

Siblings also have the right to remain actively involved in each other's lives. Aside from regularly scheduled visits, the Division, foster parents, approved relative and fictive kin volunteers, and other placement providers will work together to allow siblings to share celebrations including birthdays, holidays, graduations, and other meaningful milestones when possible. The Division, foster parents, approved relative and fictive kin volunteers, and other placement providers will also collaborate to ensure siblings attend each other's extracurricular events such as athletic events, musical performances, and faith-based events when reasonable and practical.

The Division will ensure siblings are included in one another's case plan staffing decisions and permanency planning decisions as age and developmentally appropriate. Siblings will also be notified when another sibling has a change in placement or exits foster care as age and developmentally appropriate. When a sibling leaves foster care, that sibling will be allowed, as appropriate, to maintain contact with a sibling who remains in an out-of-home placement. The Division will also strive to help children in foster care maintain relationships with their siblings who are not in out-of-home placements or who have been adopted or placed in permanent custody or guardianship.

CONTACT WITH RELATIVES AND OTHER FICTIVE KIN

In an effort to ensure foster care supports the permanency and well-being of the children in DHS custody, children may have an opportunity to visit or have other forms of contact with non-custodial parents, grandparents, great-grandparents, other relatives, and fictive kin provided the visits are in the best interest of the children. It is the responsibility of the Division to explore the willingness and appropriateness of identified relatives and fictive kin interested in being involved in the lives of children in out-of-home placements.

CONTACT AFTER TERMINATION OF PARENTAL RIGHTS
If it is in the child's best interest, visits with relatives may continue after Termination of Parental Rights (TPR). Visits after TPR will continue until an adoptive placement is made or the out-of-home placement case is closed. The Division will encourage adoptive parents to consider allowing contact between biological relatives and fictive kin with their adopted children, as appropriate. Continuation of visits with relatives does not include the parents for whom the agency has obtained TPR.

PROCEDURE VI-C1: Parent-Child Contact for Children in Out-of-Home Placements

04/2018

The Family Service Worker will:

A. Within five working days of placement, assess and determine what, if any, evidence must be provided to the court to establish that supervised visitation is necessary.
B. Regardless of the type of visitation (i.e., supervised or unsupervised) needed for a particular family, establish the frequency and length of parent-child visits, to include non-custodial and putative parents as appropriate, in order to develop a visit plan to recommend to the court.
C. Obtain approval from FSW Supervisor for any deviations from required frequency of visits.
    1) If approved, request appropriate visit waiver in CHRIS.
D. Arrange for visits with parents as outlined in the case plan to include assisting with transportation, supervision of visits, and/or other logistics, as needed.
    1) This coordination may include asking Program Assistants (PAs), foster parents, interns, approved relative and fictive kin volunteers, and/or non-relative volunteers to assist with transportation to visits and asking Program Assistants (PAs), foster parents, interns, and/or non-relative volunteers to assist with the supervision of visits, as appropriate.
    2) The FSW will ensure any PAs, foster parents, interns, and/or non-relative volunteers supervising parent-child visits:
        a) Know the history and other applicable dynamics of the case; and,
        b) Understand what they are to observe and/or assist with while providing said supervision.
E. Prepare children for visits with their parents.
F. Ask Program Assistants, interns, approved relative and fictive kin volunteers, and/or non-relative volunteers, as applicable, for information he/she obtained while assisting with parent-child visits and/or review PA CHRIS contact entries, as applicable.
G. Update the CANS and/or case plan as necessary based on the interaction and/or outcomes of parent-child visits.
H. Conference with FSW Supervisor as necessary regarding parent-child visits.

The Family Service Worker Supervisor will:

A. Review and approve the plan for visits and other contact with parents.
B. Assist with parent-child visit logistics if needed.
C. Conference regularly with the FSW and other staff who may supervise visits to assess the quality of the visits and to determine if any changes to the plan for visits and/or other contact are needed.

The Program Assistant will:

A. Assist with transports to and/or supervision of parent-child visits as assigned.
B. Share information gathered from transports to and supervision of parent-child visits with FSW and document information in CHRIS contact screens.

PROCEDURE VI-C2: Sibling Contact for Children in Out-of-Home Placements

04/2018

The Family Service Worker will:

A. Include in the case plan the reasons for the separation, if applicable, as well as the steps that will be taken to reunify the siblings in a single placement, if appropriate.
    1) Arrange for an assessment by a mental health professional within five days to determine if placing the siblings together would be detrimental to the health, safety, or well-being of one or more of the siblings as needed.
B. Within five working days of placement, assess and determine the frequency and length of sibling visits in order to develop a visit plan to recommend to the court.
C. Obtain approval from the FSW Supervisor for any deviations from required frequency of visits.
    1) If approved, request appropriate visit waiver in CHRIS.
D. Arrange for visits with siblings as outlined in the case plan as well as participation in sibling celebrations and attendance of sibling extracurricular events, to include assisting with transportation and/or other logistics, as needed.
    1) This coordination may include asking Program Assistants (PAs), interns, foster parents, approved relative and fictive kin volunteers, and/or non-relative volunteers to assist with transportation to visits and asking PAs, interns, foster parents, and non-relative volunteers to assist with supervision of visits, as appropriate.
    2) Encourage foster parents to assist with siblings participating in one another's various celebrations and extracurricular activities.
E. Prepare children for visits with their siblings.
F. Ensure supervision of visits if needed.
G. Document sibling visits and participation in sibling celebrations and extracurricular activities in CHRIS contact screens.
H. Ask Program Assistant for information he/she obtained while assisting with sibling visits and other contact and/or review PA CHRIS contact entries, as applicable.
I. Update the CANS and/or case plan as necessary based on the interaction and/or outcomes of sibling visits and other contacts.
I. Conference with FSW Supervisor as necessary regarding sibling visits and other contacts.
J. Document efforts to reunify siblings placed separately in CHRIS contacts screen.
K. Document sibling visits that occur after TPR in CHRIS contacts screen.
L. Prepare the packet for the 90 Day Court Review to include:
    1) 90 Day Case Review Cover Sheet
    2) The case plan participants and visitation plan sections of the case plan
    3) The Family Visit Log for the preceding 90 days listing only the sibling visits and/or parent visits that include all siblings as well (i.e., exclude visits involving only parents and one child)
    4) Printed CHRIS contact screens for the past 90 days regarding sibling visits, other sibling contact, and efforts to reunify siblings
M. Submit the 90 Day Case Review Packet to the FSW Supervisor for review.
N. Submit the 90 Day Case Review Packet to the local OCC attorney.

The Family Service Worker Supervisor will:

A. Review and approve the plan for visits and other contact with siblings.
B. Assist with sibling visit logistics if needed.
C. Conference regularly with the FSW and other staff, interns, and/or volunteers, as applicable, involved with siblings visits to assess the quality of the visits and to determine if any changes to the plan for visits and/or other contact are needed.
D. Review the 90 Day Court Review Packet and request any necessary changes.

The Program Assistant will:

A. Assist with transports to and/or supervision of sibling visits as assigned.
B. Share information gathered from transports to and supervision of sibling visits with FSW and document information in CHRIS contact screens.

PROCEDURE VI-C3: Other Relative and Fictive Kin-Child Contact in Out-of-Home Placement

04/2018

The Family Service Worker will:

A. Assess and determine the frequency and length of contact with other relatives and fictive kin to recommend to the court.
B. Arrange for contact with other relatives or fictive kin as outlined in the case plan to include assisting with transportation and/or other logistics, as needed.
    1) This coordination may include asking Program Assistants (PAs), interns, foster parents, approved relative and fictive kin volunteers, and/or other volunteers to assist with transportation to visits to and asking PAs, interns, foster parents, and/or other volunteers to assist with supervision of visits, as appropriate.
C. Prepare children for visits with other relatives and fictive kin.
D. Ensure supervision of visits as needed.
E. Update the CANS and/or case plan as necessary based on the interaction and/or outcomes of contact with other relatives and fictive kin.
F. Conference with FSW Supervisor as necessary regarding contact with other relatives and fictive kin.

The Family Service Worker Supervisor will:

A. Review and approve the plan for contact with other relatives and fictive kin.
B. Assist with logistics of contact with other relatives and fictive kin if needed.
C. Conference regularly with the FSW and other staff who may supervise visits with other relatives and fictive kin to assess the quality of the visits and to determine if any changes to the plan for visits and/or other contact are needed.

The Program Assistant will:

A. Assist with logistics of contact with relatives and fictive kin as assigned.
B. Share information gathered from interaction with children, other relatives, and fictive kin with FSW and document information in CHRIS contact screens.

POLICY VI-D: INITIAL AND GENERAL HEALTH SERVICES FOR CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

08/2013

The Division of Children and Family Services shall ensure that all necessary medical services are provided to children receiving out-of-home placement services in order to promote their optimal physical, mental, and emotional health and well-being. Foster parents will play an integral role in meeting the child's daily health and well-being needs.

As the legal custodian for children in out-of-home placements, the Division has the right to obtain the medical records of any child upon presentation of an order of custody. In addition, the Division has the right to obtain medical care for any child in DHS custody, including giving consent to specific medical, dental, or mental health treatments and procedures as required in the opinion of an authorized or licensed physician, dentist, surgeon, or psychologist, whether or not such care is provided on an emergency, inpatient, or outpatient basis. However, the Division shall not make any of the following decisions without receiving express court approval:

- **A. Consent to the removal of bodily organs, unless the procedure is necessary to save the life of the child;**
- **B. Consent to withhold life-saving treatments;**
- **C. Consent to withhold life-sustaining treatments; or,**
- **D. Amputation of any body part.**

An initial health screening will be held. If the initial screening indicates that treatment or further evaluation is needed, DCFS shall ensure that such treatment or evaluation is promptly provided.

A Medical Passport will be completed for each child in an out-of-home placement. The Medical Passport is a brief, readable, and current summary of the child's health history and current health status for use by present and future caretakers of the child.

PROCEDURE VI-D1: Initial Health Screening for Children Receiving Out-of-Home Placement Services

The Family Service Worker or Health Services Specialist will:

- A. Ensure that each child who enters the custody of DHS shall receive an initial health screening, not more than 24 hours after removal from home, if the reason for removal is an allegation of severe child maltreatment under A.C.A. § 12-18-602, or there is evidence of acute illness or injury.
- B. Ensure that all other children who enter the custody of DHS receive an initial health screening no more than 72 hours after removal from home.
- C. Complete the CFS-362: Medi-Alert to Foster Care Provider from information obtained from the child's parents.
- D. Use information obtained from the CFS-362: Medi-Alert to Foster Care Provider to complete the CFS-6007: Placement Plan-Placement Provider Information Report, by keying the "Gen. Info" screen in the "Client section" of CHRIS and all "Shots" screens in the "Medical" section of CHRIS.
- E. Complete the CFS-6012: Client Medical and Psychological Information Report by keying all screens found in the "Medical" section of CHRIS from information obtained from the child's parents and the CFS-362: Medi-Alert to Foster Care Provider.
- F. Schedule appointments as indicated by the initial screening.
- G. Ask the Medical Provider to complete the CFS-366: Health Screening.

PROCEDURE VI-D2: Foster Parent Involvement in Health Care for Children Receiving Out-of-Home Placement Services

07/2009

The Foster Parents will:

A. Accompany the child to all medical appointments.
B. Inform the Division of any scheduled medical visits or medical problems for the child.

Foster parents are authorized to provide consent to medical treatment (excluding mental health services - See Procedure VI-L1) for children in their care in the following cases:

A. Emergency situation—An "emergency situation" is one in which the proposed surgical or medical treatment or procedures are immediately or imminently necessary and any delay occasioned by an attempt to obtain consent would reasonably be expected to jeopardize the life, health, or safety of the person affected or would reasonably be expected to result in disfigurement or impaired faculties.
B. Routine medical treatment
C. Ongoing medical treatment
D. Nonsurgical procedures by a primary or specialty care provider

The Family Service Worker or Health Services Specialist will:

A. Provide necessary support services to enable foster parents to accompany the child to any medical appointment.
B. Provide consent to medical treatment (excluding mental health services - See Procedure VI-L1) for children in foster care in the following cases:
    1) Nonemergency surgical procedures
    2) Nonemergency invasive procedures
    3) "End of life" non-emergency procedures which include:
        a) Do-not-resuscitate orders, with DCFS Director approval and a court order
        b) Withdrawal of life support, with DCFS Director approval and a court order
        c) Organ donation, with DCFS Director approval
    4) Nonemergency medical procedures relating to a criminal investigation or judicial proceeding that involves gathering forensic evidence

PROCEDURE VI-D3: Gathering & Maintaining Health Records for Children Receiving Out-of-Home Placement Services

The Family Service Worker or Health Services Specialist will:

A. Gather each child's health care history from health care providers who have evaluated or treated the child, the child's family, previous caretakers, and from school reports.
B. Provide the child's health care history to the physician conducting the Comprehensive Health Assessment.
C. Request medical records on the child and document requests on the CFS-353: Requested Medical Records Log.
D. Record the date of each medical visit, the condition or problem addressed, the diagnosis and treatment (or periodic screening and the results of the screening), and the health care provider's name and telephone number in the "Medical Visits" screen in CHRIS.
E. Place all information gathered as to the child's health history, and all records of health screening, assessment and treatment during placement, in the child's case record. This includes the CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic, CFS-353: Requested Medical Records Log, CFS-362: Medi-Alert to Foster Care Provider, CFS-366: Health Screening, CFS-368: Child's Health Services Plan, CFS-6007: Placement Plan-Placement Provider Information and the CFS-6012: Client Medical and Psychological Information.

PROCEDURE VI-D4: Medical Passport for Children Receiving Out-of-Home Placement Services

The Family Service Worker or Health Services Specialist will:

A. Develop and maintain the Medical Passport. The Medical Passport will consist of the CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic, CFS-353: Requested Medical Records Log, CFS-362: Medi-Alert to Foster Care Provider, CFS-366: Health Screening, CFS-368: Child's Health Services Plan, CFS-6007: Placement Plan-Placement Provider Information and CFS-6012: Client Medical and Psychological Information.

B. Provide the CFS-365: Receipt for Medical Passport to the out-of-home placement provider for completion to verify receipt of the medical passport.

C. Provide a copy of the Medical Passport to:
   1) The out-of-home placement provider and to the child's new caretaker if the child is moved.
   2) The child (if the child is in the Transitional Youth Services Program).
   3) The child when he or she reaches the age of majority.
   4) The parents, if the child returns home.

POLICY VI-E: COMPREHENSIVE HEALTH ASSESSMENT AND HEALTH PLAN FOR CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

09/2008

A comprehensive health assessment of each child shall be completed. The assessment shall be conducted under the supervision of a physician and a qualified mental health practitioner. Whenever possible, the Family Service Worker, Health Services Specialist, family, and foster parents shall be involved in the assessment to ensure as much information about the child as possible is available to the examining professionals.

A written plan specifying any conditions requiring treatment, the recommended treatment, the schedule for treatment, the names of health care providers responsible for treatment, and the results of treatment as it occurs shall be completed and updated periodically. This plan shall be provided to the child's birth parents and foster parents. The birth parents shall be informed about any medical treatment scheduled for their child and shall be involved in and informed about their child's health care.

PROCEDURE VI-E1: Comprehensive Health Assessment and Arkansas Children's Hospital Outpatient Services

09/2008

Comprehensive Health Assessment
The Family Service Worker or Health Services Specialist will:

A. Arrange to have the Comprehensive Health Assessment completed within 60 calendar days of removal from home.
B. Complete the CFS-6012: Client, Medical and Psychological Information Report within seven calendar days after completion of the Comprehensive Health Assessment.
C. Schedule needed medical appointments for the child as indicated in the CFS-6012: Client, Medical and Psychological Information Report after this form is received from University of Arkansas Medical Sciences.

Arkansas Children's Hospital (ACH) Outpatient Services
The Family Service Worker will:

A. Sign the initial ACH consent for outpatient services, the ACH consent for in-patient services, and any other informed consents as required by the ACH Informed Consent policy, e.g., surgical procedures, anesthesia, etc.

The ACH Routine Outpatient Consent form may serve as a valid consent for all routine outpatient care. Foster parents are authorized to sign additional routine consent forms for outpatient care.

When the FSW is unable to accompany the foster parent for the initial outpatient visit or for outpatient surgery or when informed consent is required before a medical or surgical treatment may be performed, verbal or phone consent may be provided. No consent is necessary for treatment of a child when a medical emergency concerning the child exists.

PROCEDURE VI-E2: Health Plan for Children Receiving Out-of-Home Placement Services, Consent for Treatment and Life Sustaining Treatment

07/2009

The FSW or Health Services Specialist will:

A. Sign any necessary consent for medical or dental treatment (excluding mental health services - see Procedure VI-L1) prior to the child receiving treatment in the following cases; consent may be given in person, over the phone, or via fax:
   1) Nonemergency surgical procedures

2) Nonemergency invasive procedures
3) "End of life" non-emergency procedures which include:
   a) Do-not-resuscitate orders, with DCFS Director approval and a court order
   b) Withdrawal of life support, with DCFS Director approval and a court order
   c) Organ donation, with DCFS Director approval
4) Nonemergency medical procedures relating to a criminal investigation or judicial proceeding that involves gathering forensic evidence

B. Complete the CFS-368: Child's Health Services Plan within 14 calendar days after completion of the Comprehensive Health Assessment.
C. Inform parents of any medical treatment and involve them as appropriate.
D. Update the CFS-368: Child's Health Services Plan at least every six months.
E. Provide copies of updates of the CFS-368: Child's Health Services Plan to the child's parents and the out-of-home placement provider.
F. Ask the Medical Provider to complete the CFS-366: Health Screening.

Life Sustaining Treatment

The FSW must obtain the permission of the Director of the Division and a court order for the withholding or withdrawing of life sustaining treatment of any child in the custody of DCFS. The FSW must obtain the permission of the Director for any organ donation.

POLICY VI-F: PERIODIC HEALTH REASSESSMENT OF CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

02/2010

Following the initial screening and comprehensive health assessment, the Division shall ensure that periodic medical, dental, mental health, vision, and hearing evaluations are conducted by qualified providers, according to the periodicity schedules approved by the Division of Medical Services.

PROCEDURE VI-F1: Periodic Health Reassessment of Children Receiving Out-of-Home Placement Services

02/2010

The Family Service Worker or Health Services Specialist will:

A. Refer all children receiving Out-of-Home Placement Services for the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT) via the EMS-694 "EPSDT" form to the child's primary care physician (PCP), or other EPSDT providers after the initial screening and the Comprehensive Health Assessment. *If it is the first time the child has seen a health care provider while in the out-of-home placement, a primary care provider must be selected.*

B. Make an appointment with the PCP, or other EPSDT providers for the EPSDT screening.

C. File a copy of the examination report upon receipt from provider.

D. Schedule all subsequent screenings according to established periodicity schedules (The most recent periodicity schedules can be found in the Arkansas Medicaid Provider Manuals.)

E. Ensure all essential treatment is provided and documented in CHRIS in a timely manner.

F. Ask the Medical Provider to complete the CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic at each subsequent examination.

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

01/2020

ADJUDICATION & DISPOSITION HEARINGS

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.

SIX MONTH REVIEW HEARINGS

The court will review out-of-home placement cases no less than every six (6) months, including children in out-of-home cases who are placed out-of-state. The first six-month review shall be held no later than six (6) months from the date of the original out-of-home placement of the child. However, the court may require a review prior to the sixth-month review hearing. In addition, at any time during the life of an out-of-home placement case, any party may request the court to review the case, and the party requesting the hearing shall provide reasonable notice to all parties.

At each sixth-month hearing the court will review the case sufficiently to determine the future status of the child based on the child's best interest. The court shall determine and include in its orders the following:

- **A. Whether the case plan, services, and placement meet the needs and best interest of the child, with the child's health, safety, and educational needs specifically addressed;**
- **B. Whether the Division has made reasonable efforts to provide family services;**
- **C. Whether the case plan is moving towards an appropriate permanency plan for the child, per A.C.A. § 9-27-338;**
- **D. Whether the visitation plan is appropriate for the child, the parent(s), or any siblings, if separated.**

The court may order any studies, evaluations, or post-disposition reports, if needed. All such documents will be provided in writing to all parties and counsel at least two days prior to the review hearing. All parties will be given a fair opportunity to dispute any part of a study, evaluation, or post-disposition report.

In making its findings, the court shall consider the following:

- **A. The extent of compliance with the case plan, including but not limited to, a review of the Division's care for the health, safety, and education of the child while the child has been in an out-of-home placement;**
- **B. The extent of progress made toward alleviating or mitigating the causes necessitating the out-of-home placement;**
- **C. Whether the child should be returned to his or her parent(s) and whether the child's health and safety can be protected by his or her parent(s) if returned home;**
- **D. An appropriate permanency plan pursuant to A.C.A. § 9-27-338 for the child, including concurrent planning (e.g., adoption, legal guardianship, APPLA, as appropriate).**

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.

PERMANENCY PLANNING HEARING

Each child in an out-of-home placement, including children placed out-of-state, shall have a permanency planning hearing (PPH) 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 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 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 with a fit and willing relative or fictive kin for adoption or with a legal guardian, including identifying appropriate in-state and out-of-state placements, will be made concurrently with reasonable efforts to reunify the child and family.

The permanency planning hearing (PPH) shall determine the permanency goal for the child that includes, listed in order of preference, in accordance with the best interest, health, and safety of the child:

A. **Placing custody of the child with a fit parent at the permanency planning hearing.**
B. **Returning the child to the guardian or custodian from whom the child was initially removed at the permanency planning hearing.**
C. **Authorizing a plan to place custody of the child with a parent, guardian, or custodian only if the court finds that:**
    1) **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 the case plan and diligently working toward reunification or placement in the home of the parent, guardian, or custodian.**

a) **Regardless of when the effort was made, the court shall consider all evidence of an effort made by the parent, guardian, or custodian to remedy the conditions that led to the removal of the child(ren) from the custody of the parent, guardian, or custodian and give the evidence the appropriate weight and consideration in relation to the safety, health, and well-being of the child(ren).**
b) **The burden is on the parent, guardian, or custodian to demonstrate genuine, sustainable investment in completing the requirements of the case plan and following court orders in order to authorize a plan to return or be placed in the home as the permanency goal.**

2) **The parent, guardian, or custodian is making significant and measurable progress toward remedying the conditions that:**
   a) **Caused the child's removal from the home or the child's continued removal from the home; or,**
   b) **Prohibits placement of the child in the home of a parent.**
3) **Placement of the child in the home of the parent, guardian, or custodian shall occur within a time frame that is consistent with the child's developmental needs but no later than three (3) months from the date of the PPH.**

D. **Authorizing a plan to obtain a guardianship or adoption with a fit and willing relative.**
E. **Authorizing a plan for adoption with the Division filing a petition for termination of parental rights, unless:**
   1) **The child is being cared for by a relative and the court finds that:**
      a. **Either:**
         i. **The relative has made a long-term commitment to the child and is willing to pursue guardianship or permanent custody of the child; or**
         ii. **The child is being cared for by his or her minor parent who is in foster care and TPR is not in the best interest of the child; and,**
      b. **That termination of parental rights is not in the best interest of the child;**
   2) **The Division has documented in the case plan a compelling reason why filing a petition to terminate parental rights is not in the child's best interest and the court approves the compelling reason as documented in the case plan; or**
   3) **The Division has not provided the family of the child with services, consistent with the time period in the case plan, the services the Division deemed necessary for the safe return of the child to the child's home if reunification services were required to be made to the family.**

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 (6) 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 (1) 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.

F. 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.

G. Permanent custody with a fit and willing relative - If the court grants permanent custody no further services or periodic reviews are required.

H. 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.

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 transitional 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 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 committed:

1) Murder of any child;

2) Manslaughter of any child;

3) Aiding or abetting, attempting, conspiring, or soliciting to commit such a murder or such a manslaughter; or

4) A felony battery that results in serious bodily injury to any child; or,

5) Abandoned an infant as defined by A.C.A. § 9-27-303; or,
6) Registered with a sex offender registry under the Adam Walsh Protection and Safety Act of 2006.

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 (5) 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-G1: Case Review Judicial Hearings for Children in Out-of-Home Placement

08/2013

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 Policy III-B: Notification of Relatives and Fictive Kin When a Child is Taken into Custody by the Division and related procedures.
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.

POLICY VI-H: INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN

08/2013

The Interstate Compact on the Placement of Children (ICPC) is used to move children in need of a foster or pre-adoptive placement, adoption across state lines, or reunification with parents in an orderly and timely manner. A child in foster care is defined as a child who has been removed from the home of his parent, guardian, or custodian by a court of competent jurisdiction and whose custody has been placed with a private or public agency. Foster care shall not include placement in a residential facility by a parent if a child welfare agency or court is not involved with the parent or child through an open case or investigation.

When a child requires placement for foster care or a possible adoption outside the resident state, DCFS shall use the ICPC process. DCFS will ensure all potential out-of-state relative placements are given the same opportunity as in-state relative placements to become foster homes. Homes of relatives approved under the Articles of ICPC will be considered approved foster homes. Unless authorized by the ICPC, all communications with other states regarding approval of placement, progress reports, disruption of placement, or termination of the ICPC case should process through the Arkansas ICPC Central Office, to the ICPC liaisons.

For the most up-to-date information regarding ICPC articles and regulations, go to http://icpc.aphsa.org/Home/resources.asp.

The ICPC process ensures:

- **A. Proper extensions of authority into the receiving state.**
- **B. The sending agency can obtain home studies for proposed placements, is identified as legally and financially responsible, and does not lose jurisdiction once the child leaves the sending state.**
- **C. The receiving agency can determine the placement is not "contrary to the child's interests" and that all applicable laws and policies have been followed.**
- **D. Supervision is maintained out-of-state and the sending agency receives progress reports.**
- **E. Maximum opportunity for each child to be suitably placed.**
- **F. Proper information to authorities in the receiving state.**
- **G. Effective utilization of cross-jurisdictional resources to facilitate timely foster, adoptive, or permanent placements.**

Children placed out-of-state are to go through ICPC when one of the following placements occurs:

- **A. Foster care placements**
- **B. Pre-adoptive placements**
- **C. Adoptive placements**
- **D. Parent, other relative, or non-agency guardian placements**

If guardianship is established as a prelude to a non-relative adoption, the guardian shall comply with this compact. If in doubt, request clarification from the Arkansas Interstate Compact Unit in Central Office.

Types of placements that are not covered by ICPC include:

- **A. Divorce or custody investigations involving home studies**
- **B. Placement of a probationer, parolee, or aftercare juvenile**
- **C. Interstate placement of children with mental disabilities**
- **D. Placement into a primarily educational institution**
- **E. Runaways from Arkansas to another state or to Arkansas from another state (See Procedure VI-H14 about other compacts).**
- **F. Kidnapped children transported out-of-state**
- **G. Visits that do not extend beyond 30 days and are not pre-placement visits**
- **H. Placement outside the resident state when custody will be transferred to that person**

DCFS caseworkers should not directly contact the ICPC offices in other states, but should direct their communication to the ICPC liaisons in their Area. Liaisons will then communicate with Central Office. Interstate

communication between field staff from the involved states is discouraged, except for the routine sharing of information, which is NOT related to case approval, progress reports, disruption, or termination of placement. The Juvenile Division of Circuit Court shall retain jurisdiction to issue orders of adoption, interlocutory or final, when a child is placed outside the state of Arkansas.

PROCEDURE VI-H1: Responsibilities of the Sending State

09/2011

The sending party will:

A. Provide proper notice of the intent to place using the ICPC-100A: ICPC Request and receive authorization from the receiving state prior to the placement. The 100A must clearly indicate DCFS is the sending party.
B. Document in the case file and ICPC packet that potential out-of-state relative placements were offered the option of becoming a paid foster home.
C. Work with the receiving parties to arrange the placement details (e.g., childcare payment, type of monitoring, frequency of supervisory reports, and transportation) after approval is given.

   The sending state shall not recommend that custody be given to the placement resource without completion of at least six (6) months of supervision and concurrence of the receiving state. Failure to comply with these requirements violates the terms under which the receiving state originally gave placement approval. This could result in the child and placement resource being without essential medical coverage and a request for the child to be returned to the sending state.
D. Provide additional information when requested by the receiving state to ensure the placement is not "contrary to the interests of the child."

   Any such report from another state, Indian tribe, or private agency under contract with the receiving state, shall meet all requirements imposed by the sending state for the completion of the home study before placing the child in the home. This will be done unless, within 14 days after receipt of the report, the sending state determines based on specific grounds in the report that making a decision based on the report would be contrary to the welfare of the child.
E. Notify the receiving state of the placement date and any change in the child's status by using the ICPC-100B: Report on Child's Placement Status.
F. Retain jurisdiction over the child sufficient to determine all matters of custody, supervision, care, and disposition of the child until the child is adopted, reaches majority, becomes self-supporting, or is discharged with concurrence of the appropriate authority in the receiving state.
G. Retain planning and financial responsibility for the duration of the placement and indicate this responsibility on the ICPC-100A.

   The one (1) exception comes under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) requiring that children under title IV-E adoption assistance agreements and those receiving title IV-E foster care payments will be granted Medicaid coverage in their current resident state. (See Medical Services Manual, Section 6600 to 6673.)
H. Return the child to the sending state at the request of the receiving state.

PROCEDURE VI-H2: Responsibilities of the Receiving State

08/2010

Within 60 days after receiving a request for a home study from another state, the receiving state will directly or by contract:

A. Assess and monitor the placement to ensure compliance with applicable laws and policies of the receiving state, and that the placement is "not contrary to the interests of the child."
B. Notify the sending state in writing whether or not the placement is appropriate and in the best interest of the child.

   The receiving state is not required to complete those parts of the home study within the designated time period that involve the education and training of the prospective foster or adoptive parents.

C. Supervise the placement and provide or arrange for necessary services after the child is placed and the ICPC-100B is received.
D. Submit quarterly progress reports to the sending party. More frequent reports may be submitted on request.
E. Honor and enforce lawful orders of the court of jurisdiction of the sending state unless it conflicts with Arkansas policies and/or laws.

PROCEDURE VI-H3: Placing Arkansas Children in Another State and Requesting Out-of-State Home Studies

08/2010

The following are procedures to use when requesting an out-of-state home study for an Arkansas child, including placement into residential treatment facilities. Always use the child's name on the correspondence.

The sending party (county office, etc.) will follow CFS-6092: ICPC Home Study Request Check List and compile an Interstate Compact Placement Packet consisting of **THREE (3)** copies of each of the following (include **FIVE (5)** copies of ICPC-100A):

A. Cover Letter (CFS-6092: COVER LETTER) to explain the placement plans
B. ICPC-100A: ICPC Request; (Retain one (1) copy and include five (5) completed, signed, and dated copies with the packet)
C. Court order (most recent) showing that DHS has custody or the court has jurisdiction of the child (e.g. adjudication order, recent review order).
D. Termination of Parental Rights (TPR) for an adoptive home study.
E. ICPC-101: Priority Home Study Request.
F. Current Case Plan (CFS-6010: Case Plan).
G. Social Summary (CFS-6092: SOCIAL SUMMARY) OR an Adoption Summary if requesting a pre-adoptive placement.
H. Medical Records / Reports (PACE evaluation, if available), including Immunization Records.
I. School Reports / Records from the past three years, if applicable.
J. Psychological Evaluations/ Reports and Counseling Reports, if applicable.
K. Financial/Medical Plan (CFS-592: Financial/Medical Plan Interstate Compact on the Placement of Children). The form must indicate that DCFS is the sending party and will retain financial and planning responsibility for the child.
L. IV-E Eligibility form (print screen of CHRIS Foster Care Determination Window). Financial arrangements should always be discussed with the prospective placement resource before the home study is requested. If a board payment is needed, a foster home study must be requested.
M. Proof of Citizenship—U.S. Birth Certificate or other birth records. If birth records are not available, you can ask if the client has any other citizenship-related documents such as those listed in Sections 6700, 6703, & 6705 of the following link: http://www.arkansas.gov/dhs/webpolicy/Medical%20Services/MS%206700.htm.
N. Proof of Identity—A Social Security Card, completed application for a duplicate card, or school ID with photo (Per DCFS Eligibility Unit, federal authority will determine other acceptable documents of a child's identity "at a later date.")
O. Photo of Child or Children—This is not required, but is strongly encouraged.

Send packet to ICPC Central Office, Donaghey Plaza South, 700 Main Street, P.O. Box 1437, Slot S567, Little Rock, Arkansas 72201-1437.

Financial arrangements should be discussed with the prospective placement resource and put in writing before the study is requested. If a board payment is needed, a foster home study must be requested.

The Arkansas ICPC Central Office will:

A. Review the packet to determine whether or not it is complete and ready to forward to the receiving state's ICPC office.

B. Coordinate with the sending party if changes in the packet are needed.
C. Send packet to receiving state's compact office.
D. Notify sending party of disposition.

The Family Service Worker and/or Area ICPC Liaison will:

A. Complete and route the ICPC-100B to the ICPC office if the out-of-state placement is approved and made. Show the date of the placement or of the withdrawal of the request.
B. Close the Arkansas Medicaid so that Medicaid services can be pursued in the receiving state.
C. Code the CFS-6013: Application for Emergency Services to show ICPC service using the child's name.
D. Key the case type in CHRIS as "ICPC" for the child placed by the Division in another state.
E. Notify the Adoption Services Unit of a proposed adoptive placement, if appropriate.
F. Coordinate the travel plans with the Family Service Worker if placement is approved (placement must be made within six months of placement approval)

Communication between states regarding approval of placements, progress reports, case closures, and disruptions must go through the Arkansas ICPC Central Office.

PROCEDURE VI-H4: Children Entering Arkansas for Placement

Services to children should not begin without a completed home study packet, placement approval (ICPC-100A) from the receiving state's ICPC office AND receipt of placement notification (ICPC-100B) from the sending state's ICPC office. Requests from sending state should include the same information as described in the Interstate Placement Packet and outlined in Procedure VI-H5. Contact the Arkansas ICPC Central Office if additional information is needed from the sending state to initiate services. Supervision of a placement will not begin until the receiving state obtains ICPC-100B.

PROCEDURE VI-H5: Completion of Home Study Packet

The Area ICPC Liaison will

A. Ensure the completion of a home study packet which includes:
   1) CFS-316: Request for Child Maltreatment Central Registry Check
   2) CFS-342: Arkansas State Police Criminal Record Check
   3) FBI Criminal Background Check (An FBI check is only required for foster or adoption home studies. Parents and relatives do not need to complete an FBI check)
   4) SAFE Home Study (SAFE Home Studies will be used for all ICPC placements with the exception of parental home studies)
   5) Three (3) positive, confidential references
B. Obtain the FSW Supervisor or Area Director recommendation for or against placement.
C. Obtain the Adoption Manager signature for recommendation in an adoption home study.
D. Send signed recommendation regarding placement within 60 calendar days of a request.
E. If the criminal record checks have not been received, a copy of the application/request must be included in the packet and the results sent when received.
F. Notify the ICPC Central Office in writing if there is to be a delay.
G. Send the home study packet to the ICPC Central Office, not directly to the other state.

No child shall be placed in the home of a foster parent where a records check reveals a felony conviction for child abuse or neglect, for spousal abuse or domestic battery, for a crime against children (including child pornography), or a crime involving violence, including rape, sexual assault or homicide. No child shall be placed in the home of a foster parent if the record check reveals a criminal conviction for physical assault, battery, or a drug related offense, if the offense was committed within the past five years.

Any state agency that administers or supervises the administration of a state program operated under such an approved state plan will not be restricted from contracting with a private agency to conduct home studies.

The designated DCFS Staff will:

A. Make a recommendation for or against placement based on the information contained in the home study packet.

The Adoption Manager will:

A. Sign and date the recommendation in an adoption home study.

PROCEDURE VI-H6: Routing of Home Study Packet

ICPC approved home study packets are valid for six months from the date the ICPC Central Office signed the ICPC-100A. The child must be placed within that 6-month period.

The Arkansas ICPC Central Office (Receiving State) will:

A. Review the home study packet to determine whether or not it is complete.
B. If the home study packet is complete, forward to the sending state's ICPC office.

If Arkansas receives an approved home study from another state, the ICPC Central Office will forward the approved home study and the ICPC-100B to the appropriate ICPC liaison.

The ICPC liaison will forward the approved home study and the ICPC-100A to the assigned caseworker.

The assigned caseworker and/or supervisor will, with the court's concurrence, make a determination as to whether or not placement will be made. When the determination has been made, an ICPC-100B will be prepared and forwarded to the ICPC liaison. The liaison will, within 72 hours of placement, send it to the ICPC Central Office who will forward to the appropriate state.

If the home study is denied, the ICPC Central Office will process the denied home study request by forwarding a copy of the following to the appropriate ICPC liaison:

A. The denied home study.
B. The ICPC-100A which indicates, in Section IV, "placement shall not be made."

The ICPC liaison will forward the documents to the appropriate FSW or supervisor.

The FSW or supervisor will:

A. File the denied home study and ICPC-100A in the appropriate case file and close the case, **OR**
B. Appeal the receiving state's denial of the home study by:
    1) Preparing a formal request with available supporting documentation to justify why the home study denial should be appealed.
    2) Forwarding to the immediate supervisor for approval.
    3) If approved, forwarding to the Area Director for approval.
    4) If approved, forwarding to the ICPC Central Office.

The Arkansas ICPC Central Office will:

A. Forward a copy of the appeal to the appropriate state's ICPC office for reconsideration of the denied home study.
B. If the appeal is denied, the FSW must wait a minimum of six months before re-initiation of the home study.

PROCEDURE VI-H7: Follow-up, Routing, and Monitoring

The Family Service Worker in Arkansas will:

A. Provide monthly supervision of the child. Supervision must include face-to-face visits with the child at least once each month and beginning no later than 30 days from the date on which the child is place, or 30 days from the date on which the receiving state is notified of the child's placement, if notification occurs after placement. A majority of visits must occur in the child's home.
B. Complete a written supervision report, using ICPC-90, at least once every 90 days following the date of the receipt of the ICPC-100B.

C. Send the reports to the ICPC Liaison every 90 days, or as often as requested on the ICPC-100A. The ICPC Liaison will then forward the reports to the ICPC Central Office.
D. Notify the ICPC Central Office, immediately, if problems or changes with placement occur. If significant issues of concern are identified during a face-to-face visit or at any time during a child's placement, the receiving state shall promptly notify in writing the ICPC Central Office in the sending state.
E. Key the case type in CHRIS as "ICPC" for the child placed in Arkansas from another state.

PROCEDURE VI-H8: Travel Procedures for Children Receiving Out-of-Home Placement Services

When an Arkansas child in foster care has been approved to move into or out of Arkansas for a foster care or adoptive placement, or for reunification with parents, the Family Service Worker/Area ICPC Liaison will:

A. Submit request for travel to ICPC Central Office with "Application for Out-of-State Travel" (DHS-1010) no less than two weeks in advance. The ICPC Central Office will be responsible for obtaining approvals for the travel.
B. Make necessary travel arrangements through a travel agency approved by DHS.
C. Submit ICPC-100B to the ICPC Central Office for forwarding to the receiving state after the child is placed in the receiving state.

When an escort (state employee or non-state employee) is needed to assist with transporting an Arkansas child in foster care to or from an out-of-state placement, the Family Service Worker or Area ICPC Liaison will submit the same information as stated above for children in foster care travel. No travel shall commence until the DHS-1010s are signed.

PROCEDURE VI-H9: Other Travel Non-ICPC and Non-DCFS Children

For Non-ICPC travel, the Family Service Worker will:

A. Request prior approval, using the DHS-1010 for a child and for an escort, as appropriate. (e.g., to attend a funeral, go on vacation with a foster parent or go on a visit of less than 30 days.)
B. Direct requests and questions to the Foster Care Unit.

   Exception: For children placed out-of-state by an Arkansas court, the sending party is responsible for arranging transportation (DHS does not have legal custody).

C. Forward the DHS-1010 to the Assistant Director of Community Services and then the DCFS Director for signatures.
D. Attach the child's court order giving authority to travel and written documentation from the attorney ad litem.

An out-of-state visit is 30 days or less and is not subject to ICPC. However, if it is greater than 30 days, it is a placement, which is subject to ICPC.

PROCEDURE VI-H10: Progress Reports

The receiving state must:

A. Send quarterly progress reports every three months unless otherwise stated on the ICPC-100A.
B. Mail progress reports to ICPC Central Office for forwarding to the sending state.
C. Enter the progress reports in the child's case record in CHRIS.

PROCEDURE VI-H11: Termination of ICPC Cases

An Interstate Compact Placement can only be terminated with the concurrence of the receiving state ICPC Office. Reasons for terminating an ICPC placement include the following reasons:

A. Adoption finalized
B. Child reaches age of majority
C. Child legally emancipated

D. Legal custody returned to parent(s) or given to relative with a court order
E. Treatment completed
F. Sending state's jurisdiction terminated with the concurrence of the receiving state
G. Unilateral termination
H. Child returned to sending state
I. Child has moved to another state Proposed placement request withdrawn
J. Approved resource will not be used for placement

The Family Service Worker will complete ICPC-100B indicating termination reason and route it to the ICPC Central Office for forwarding to the receiving state.

The Arkansas ICPC Central Office will send the ICPC-100B to the sending or receiving state's ICPC office to notify them of the closure of the ICPC case.

The sending state is responsible for the original submission of both the ICPC-100A and 100B.

PROCEDURE VI-H12: Exceptions to Policy

Items and services not specified in this policy must have prior approval of the Interstate Compact Administrator or Deputy Administrator.

The Family Service Worker/Area ICPC Liaison, with the approval of the Area Director, will:
A. Write a memo to the Interstate Compact Administrator to fully explain the situation.
B. Request that exceptions to policy be made.

The Arkansas ICPC Administrator will:
A. Review the request.
B. Inform the Family Service Worker/Area ICPC Liaison of the decision.

PROCEDURE VI-H13: Request for an Interstate Compact on the Placement of Children Priority Placement Regulation No. 7

08/2013

A priority placement is when a court, upon request or on its own motion, or where court approval is required, determines that a proposed priority placement of a child from one state into another state is necessary because placement is with a relative and:
A. The child is under four (4) years of age, including other siblings sought to be placed with the same proposed placement.
B. The child is in an emergency placement.
C. The court finds that the child has a substantial relationship with the proposed placement resource.
D. An unexpected dependency due to a sudden or recent incarceration, incapacitation, or death of a parent or guardian has occurred.

The receiving state agency has 30 days to complete a request for a priority placement. Requests for placement shall not be expedited or given priority except as outlined below.
A request for a priority placement will be implemented as follows:
A. The court shall send its order to DCFS within two business days.
B. The order shall include:
   1) The child's name, address and phone number;
   2) The fax number of the judge and the court, if available.

3) The sending party will send the following to the state's ICPC Central Office via overnight mail, or fax, within three business days.
4) The signed court order (the court order must specify how the case qualifies as Regulation No. 7).
5) A completed ICPC-100A: ICPC Request.
6) Supporting documentation according to policy.

C. Within two business days after the receipt of the ICPC priority placement request, the sending state's ICPC office will overnight mail the priority request and its supporting documentation to the receiving state's ICPC office with a notice that the request for placement is entitled to priority processing.

D. The receiving state ICPC office shall send all the documents to the receiving state's local office within two days. The receiving state's local office has 20 working days to send a determination back to the receiving state's ICPC Office.

E. The receiving ICPC office has two days to overnight mail the determination to the sending state's ICPC office. The sending state ICPC office has two days, through overnight mail, to send the determination to the local office.

F. The foregoing shall not apply if:
1) Within two business days of receipt of the ICPC priority placement request, the sending state Compact Administrator determines that the ICPC request documentation is substantially insufficient, specifies that additional information is needed, and request the additional documentation from the FSW by FAX or telephone if FAX is not available; or,
2) Within two business days of receipt of the ICPC priority placement request, the receiving state Compact Administrator notifies the sending state Compact Administrator that further information is necessary. Such notice shall specifically detail the information needed.

For such a case in which either of the two preceding points apply, the 20 business day period for the receiving state Compact Administrator to complete action shall be calculated from the date of the receipt by the receiving state Compact Administrator of the additional information requested.

PROCEDURE VI-H14: Juvenile, Mental Health, and Adoption and Medical Assistance Compacts

In addition to the ICPC, three other Interstate Compacts were enacted to coordinate the interstate placements of children and juveniles as follows:

A. Interstate Compact for Juveniles: This compact is designed to serve those children/youth needing an out-of-state placement who have been adjudicated delinquent and who have been placed on probation or parole. This compact also provides for the return of non-delinquent runaways, escapees, and absconders. This includes foster children/youth who run away and are located out of state. The Interstate Compact for Juveniles is administered by the Division of Youth Services.

B. Interstate Compact on Mental Health: This compact is designed to facilitate the transfer of resident patients (both children and adults) from a state-operated mental health facility in one state to a similar state-operated facility in another state. The Mental Health Compact is administered by the Division of Behavioral Health Services.

C. Interstate Compact on Adoption and Medical Assistance: This compact is for adoption assistance for IV-E eligible children who are under an adoption subsidy agreement. The adoption worker should notify the Adoption Subsidy Coordinator as soon as it is known that an adoptive family/child is moving out of state or has moved. The Adoption Subsidy Coordinator will send information to the new state of residence and also to the adoptive parents advising them to contact the local Medicaid office in their new state of residence. This contact will be for the purpose of getting medical benefits for their child in the new state of residence.

POLICY VI-I: INTERFERENCE WITH CUSTODY

Interference with custody is committed when a person:

- **A. Knowingly and without lawful authority takes, entices, or keeps a minor away from any person entitled by court order or decree to the right of custody of the minor;**
- **B. Accepts physical custody (for any length of time) of a minor who was removed from their custody or has care, supervision, or custody of a minor removed from their custody pursuant to or arising from a dependency-neglect action;**
- **C. Who has been awarded custody or granted adoption/guardianship of a minor places the minor in the care of any person from whom the minor was removed or any person whom the court has ordered NOT to have care, supervision, or custody of the minor;**
- **D. Knowingly (and without lawful authority) takes, entices, or keeps, or aids, abets, hires, or otherwise procures another person to take or entice any minor from the custody of any:**
  - **1) Parent or guardian of the minor, including an unmarried woman with legal custody of an illegitimate child;**
  - **2) Public agency with lawful charge of the minor;**
  - **3) Parent, guardian, or lawful custodian while the custodian and minor are housed at a shelter.**
  - **4) Any other lawful custodian.**

Prior to serving a warrant for arrest on a person charged with interference with custody, law enforcement will inform the Division of the circumstances of any minor involved. The Division will provide a representative, upon request, to accompany the arresting officer to take the minor into temporary custody pending further court proceedings.

A court of competent jurisdiction will determine the immediate custodial placement of the minor pursuant to the Division's petition. The court will give immediate custodial placement to the lawful custodian if that person is present before the court. The court will determine if there is probable cause that the minor may be:

- **A. Removed from the jurisdiction of the court;**
- **B. Abandoned; or**
- **C. Outside the immediate supervision or care of the lawful custodian.**

The Division will provide the lawful custodian of a minor, notice of any hearing to be held regarding the minor.

The Division is immune from liability with respect to any actions undertaken involving interference with custody, unless it is determined that the Division acted with malice.

PROCEDURE VI-I1: Interference with Custody

The Family Service Worker will:

- A. Accompany the officer arresting an individual for interference with custody. Take the minor into temporary DHS custody pending further proceedings from a court of competent jurisdiction.
- B. Contact OCC Attorney immediately.

POLICY VI-J: TRUST ACCOUNTS FOR CHILDREN IN FOSTER CARE

08/2008

The Department of Human Services (DHS) maintains Trust Accounts for children in foster care who receive Supplemental Security Insurance (SSI), Social Security (SSA), Child Support, Veterans Benefits (VA), Railroad Benefits (RR) or any type of income. These benefits will automatically be used to pay for the child's foster care expenses, which include the monthly board payment. DHS will apply to become the payee for all benefits collected.

DCFS must ensure that changes in payee are made when a child receiving benefits initially enters foster care. The IV-E/Medicaid Eligibility Unit will screen all DCFS clients for potential SSI and SSA eligibility based on information reported on the SSI Screening Questionnaire completed by DCFS field staff and make applications for those who may meet SSA criteria.

The child's trust fund account must not exceed resource limits to maintain eligibility for Medicaid and title IV-E. DCFS will coordinate the monitoring of Trust Fund accounts with the Office of Finance and Administration - General Operations Section, IV-E/Medicaid Eligibility Unit and other pertinent agencies to ensure the timely and efficient management of these accounts.

Authorized uses of different funds vary according to their sources. However, any expenditure from a child in foster care's trust account must be for the direct care and/or needs of the child in receipt of the income. Funds cannot be used for siblings, parents, or other individuals in the initial removal home. Authorized uses are as follows:

- **A. Income in a Regular Account has no restrictions; spending must be appropriately prioritized according to the child's needs and disability.**
- **B. SSI Income in a Dedicated Account may be used for the following with approval from the Social Security Administration:**
  - **1) medical treatment, education or job skills training or**
  - **2) if they pertain to an impairment –**
    - **a) personal needs assistance**
    - **b) housing modifications**
    - **c) special equipment**
    - **d) therapy or rehabilitation or**
    - **e) other items / services if approved by the SSA.**

PROCEDURE VI-J1: Opening a Trust Account

When the child enters foster care and is already receiving income, the Family Service Worker will:

- A. List the income source, amount and frequency on the CHRIS Income screen.
- B. Have the birth/legal parent(s) or guardian execute a CFS-491: Consent for Use of Funds and Resources and explain that without consent authorization, the child may accumulate excess funds which would make him ineligible for Medicaid. If permission is not given, obtain permission from the court to use conserved funds.
- C. Forward a CFS-376: Authorization for Billing and Trust Account Action and a memo containing the following information to the IV-E Eligibility Unit if monies are being sent by the Family Service Worker to be deposited into a Trust Account:
  - 1) Child's name, Social Security number, date of birth, race, and gender
  - 2) Type of benefit
  - 3) County
  - 4) Date of request and begin date of income
  - 5) Award amount
  - 6) Back pay (optional)
  - 7) CHRIS Case & Identification Number
  - 8) Signature and telephone number of person submitting request

The IV-E Eligibility Unit will:

A. Submit a change of payee request to the appropriate agency(s) once a child receiving cash benefits is court ordered into foster care.
B. Prepare appropriate forms and deliver monies received directly by the IV-E Eligibility Unit to the DHS Accounts Receivable section for establishment of or deposit into a foster care trust account.

PROCEDURE VI-J2: Closing a Trust Account

To close a Trust Account when a child returns home, is emancipated, or adopted, the Family Service Worker will:

A. Exit the child from foster care in CHRIS and complete the Trust Form A including the following information:
B. Child's Name, SSN, CHRIS case and identification number.
C. Name, telephone and signature of person submitting the request.
D. Name and address of the child's custodian/legal guardian, the relationship to the child.
E. Notation to return funds to the following once all outstanding bills are paid:
   1) Child- if emancipated.
   2) Parent/Legal Guardian if a child is not emancipated or is under 18.
F. Immediately request all outstanding bills from providers and forward to the IV-E Eligibility Unit with appropriate documentation as soon as possible.

The IV-E Eligibility Unit will:

A. Complete forms to close out the account and send the closeout packet to the Office of Finance and Administration.
B. Notify the Social Security Administration that the child has exited foster care so that SSA may determine the appropriate payee for the child's benefits.

PROCEDURE VI-J3: Change of Payee Requests

When a Family Service Worker becomes aware that a child entering care is already receiving benefits from SSA, SSI, VA, RR Benefits, Child Support or other income, the Worker will notify the DCFS Eligibility Unit. The DCFS Eligibility Unit will:

A. Notify the appropriate office that DHS/DCFS is the new payee: ** (see below)
B. For Social Security benefits – Submit a request to be payee form to the Little Rock Social Security Office.
C. For VA benefits – Telephone or Fax the VA office with the primary recipient's benefit number and advise them that DHS/DCFS is the new payee.
D. For RR benefits – Contact the Benefits Department of the specific, individual railroad company to advise them DHS/DCFS is the new payee.
E. For Child Support – The Office of Chief Counsel will submit a copy of the court order placing the child in foster care to the Office of Child Support Enforcement (OCSE). The Family Service Worker will refer the child's parent(s) to the Office of Child Support Enforcement using the Relationship screen in CHRIS.
F. Submit a change of payee request to the appropriate agency(s), designating DHS/DCFS as the new payee.
G. Designate the payee as follows:
   DHS Fiscal Administration for Foster Care
   PO Box 8181, Slot W405
   Little Rock, AR 72203-8181
H. File a copy of the completed "Change of Payee" request to the IV-E/Medicaid Eligibility Unit in the child's eligibility record.
I. If a contract facility (rather than DHS) is designated the payee for a child's income, that facility must submit a monthly report CFS-377: Facility Trust Account Reporting to the DCFS Foster Care Unit to include the following information:
J. Child's name and Social Security number
K. Beginning of the month balance
L. Deposits and expenses

M. End of the month balance

Under current procedure, the only facilities authorized to become representative payee for Arkansas children in foster care are Arkansas Human Development Centers, Easter Seals, Arkansas Pediatric Facility, and Millcreek. Ultimately, the Social Security Administration is the decision making entity regarding payees for SSA and SSI benefits.

PROCEDURE VI-J4: Requests for Trust Account Funds

To request trust account funds the Family Service Worker will:

A. Complete the appropriate sections of CFS-334: Foster Care Services – Authorization for Billing indicating the amount and purpose for the funds being requested.
B. Attach the original invoice or billing statement from the provider along with an original provider signature.
C. Have the CFS-334: Foster Care Services – Authorization for Billing reviewed, approved and signed by the County Supervisor and/or Area Director.
D. Forward the original CFS-334: Foster Care Services – Authorization for Billing and originals of any required attachments to the DCFS Eligibility Unit at Slot S571 within 7 days of the service or purchase date.
E. In the event that the original invoice/receipt is lost, or a provider issues carbon copies of invoices as the client's original receipt, an agency generated CFS-380: Trust Account Invoice must be utilized on a case by case basis.
F. There is currently no mechanism in place to reimburse contract payments from trust accounts in the same manner currently utilized to reimburse board payments. Contract reimbursements will continue to be submitted on the CFS-334: Foster Care Services – Authorization for Billing.

To request that trust account funds be held or conserved, the Family Service Worker will:

A. Submit requests to hold/conserve trust account funds to the DCFS eligibility Unit via email prior to making the purchase. Purchases are not to be made without prior approval from the DCFS Eligibility Unit.
B. A completed CSF-334: Foster Care Services – Authorization for Billing along with appropriate attachments must be forwarded to the DCFS Eligibility Unit within 15 business days of the approval to hold/conserve funds.
C. Funds will not be held more than 60 days of the initial request to hold/conserve funds. After 60 days, the held funds will be released for other account uses unless an extension is requested and approved.

PROCEDURE VI-J5: Reporting Information Changes to the DCFS Eligibility Unit

Status changes that affect a child in foster care's trust account will be coordinated between the DCFS Eligibility Unit and the Office of Finance and Administration- General Operations Section.

Status changes that affect a child in foster care's trust account must be submitted electronically or in writing and signed by the appropriate DCFS staff on CFS-376: Authorization for Billing and Trust Account Action.

The Family Service Worker will report appropriate information to the DCFS Eligibility Unit within 5 days of any of the following occurrences, which may affect the child's monthly benefit amount and/or SSI income payments:

A. Placement changes to or from a detention or long-term care facility, Human Development Center, Mill Creek or run-away status.
B. When the child is placed in a contract or long-term care facility the FSW must ensure that the child receives his/her personal need funds.
C. To reinstate benefits, the FSW must make notification of return to DHS custody from the above placements.
D. The child in foster care is adopted, reaches the age of maturity or is deceased.
E. Errors are found on the Trust Report or on the Assets screen in CHRIS.

PROCEDURE VI-J6: Monitoring Trust Accounts for Accuracy and Compliance with State and Federal Regulations

County Supervisors will:

A. Supervise the trust account related work carried out by the Family Service Workers.
B. Review and sign each approved CFS-334: Foster Care Services – Authorization for Billing .
C. Monitor trust account balances to ensure they do not exceed resource limits. Resource limits are:
   1) $1,000 for Non-IV-E Foster Care Medicaid (category 91)
   2) $2,000 for Foster Care EC Medicaid (category 96), DDS Waiver Medicaid, Foster Care Spend Down Medicaid (category 97), and Supplemental Security Income (SSI category 45)
   3) $10,000 for title IV-E
D. Carry out any trust account related responsibilities delegated by their Area Directors.

Area Directors will:

A. Monitor Trust Reports for their DCFS service area, ensuring:
   1) Compliance with state and federal resource limits
   2) Accuracy of basic information (county placement, duplicate accounts, etc.)
   3) Necessary actions by Family Service Workers
   4) Reimbursement of board payments
B. Monitor CFS-334: Foster Care Services – Authorization for Billings for duplicate, repeat or unusual purchases prior to submission to the Office of Finance and Administration– General Operations Section.
C. Monitor reports of trust funds being held or conserved for action by county staff.
D. Ensure Trust Reports available electronically on CHRISnet are used to the full extent necessary.

PROCEDURE VI-J7: DHS Office of Finance and Administration – General Operations Section Trust Account Responsibilities

01/2010

The DHS Office of Finance and Administration – Managerial Accounting, Accounts Receivable will:

A. Complete trust account deposits within three working days of the deposit posting to the Bank Account.
B. Interest will be allocated no later than the fifth working day of each month for the previous month's interest receipts.

The DHS Office of Finance and Administration - General Operations Section will:

A. Complete trust account withdrawals, holds, and closures within 10 business days of request by DCFS staff.
B. Forward each CFS-334: Foster Care Services – Authorization for Billing needing correction or additional information to the DCFS Eligibility Unit for corrective action. Any CFS-334: Foster Care Services – Authorization for Billing that is rejected due to incomplete documentation, lack of funds, or any other reason will be handled in the following manner:
   1) If the form is returned due to insufficient funds in the trust account, the DCFS Eligibility Unit will notify the appropriate Area Financial Coordinator and/or DCFS staff and forward the returned invoice to individual for further processing/instruction.
   2) If the form is returned due to missing signatures, original/agency-generated CFS-380: Trust Account Invoice, insufficient documentation or the invoice was previously paid, the DCFS Eligibility Unit will forward the form(s) to the appropriate Area Financial Coordinator and/or DCFS staff for correction.
C. Forward requests to close trust accounts, appropriate documentation and a net refund check (minus outstanding obligations) to the Social Security Administration, Office of Child Support Enforcement, or appropriate party within 10 business days of receipt of request.
D. Submit Trust Account Closeout Requests to Office of Finance and Administration on the CFS-379: Closeout/Overpayment Notification. The DCFS Fiscal Officer or designees within that Division will initial each form.

PROCEDURE VI-J8: CHRIS Team Trust Account Responsibilities

The CHRIS Team will:

A. Update CHRIS Asset screen information with monthly Trust Report data.
B. Provide OFM with an electronic mechanism to review and approve prior to reimbursement for board payment from the trust account.
C. Make corrections to CHRIS asset screens upon notification.
D. Reimburse contract payments from trust accounts in the same manner currently used to reimburse board payments.

PROCEDURE VI-J9: DCFS Eligibility Unit Responsibilities

The DCFS Eligibility Unit will:

A. Assist DCFS staff with trust account related problems as needed.
B. Assist DCFS with training its staff on new/revised trust account policies and procedures.
C. Monitor Trust Report balances for compliance with state and federal resource limits.
D. Monitor Trust Reports for accuracy (is the child still in care, duplicate accounts, incorrect Social Security Numbers, etc.).
E. Monitor trust account for funds being held or conserved pending action by the Family Service Worker.
F. Forward requests for corrections on CHRIS Asset screens to CHRIS personnel for correction.
G. Notify the Social Security Administration of changes in their recipient's status (excluding a request to close accounts).*In accordance with Section 2126.1 of the Social Security Handbook, status changes must be reported within 10 days after the month in which they occur.*
   Changes may be reported by –
   1) Calling the Social Security Administration, toll free, at 1-800-772-1213.
   2) Calling, writing or visiting the Little Rock Social Security Office.
H. Review and forward each completed CFS-334: Foster Care Services – Authorization for Billing to the Office of Finance and Administration- General Operations Section within 5 business days of receipt.
I. Review each CFS-334: Foster Care Services – Authorization for Billing returned by OFM for needed additional information/errors/etc., and coordinate with DCFS staff for corrected re-submission of the form(s) to OFM for processing.
J. Review and forward requests to open, close, hold/release or update trust accounts/funds to the Office of Finance and Administration-General Operations Section electronically within 5 business days of receipt. Requests may also be submitted in writing with appropriate DCFS staff signature(s).
K. Process Overpayment Requests received from Social Security. Overpayment requests and requests to close trust accounts will be submitted to OFM on the CFS-379: Closeout/Overpayment Notification with appropriate documentation.

POLICY VI-K: EDUCATIONAL SERVICES FOR CHILDREN IN OUT-OF-HOME PLACEMENT

04/2012

Educational Continuity and Responsibilities
All decisions regarding the education of children in foster care will be based on the best interest of the individual child. To assure the continuity of education for children in foster care, DCFS shall work collaboratively with educators, school foster care liaisons, other Divisions of the Department of Human Services, the Department of Education, the circuit courts, providers of services to children in foster care, CASA, parents, guardians, and any person appointed by the court.

The Division shall consider the continuity of educational services and school stability when making placement decisions. As such, the DCFS will make every attempt to maintain the child's enrollment in the school he or she attended prior to placement into foster care and in any subsequent placement moves while in foster care. To this end, the Division shall coordinate transportation issues with the local school district and provide other assistance that is reasonable and practical.

When it is in their best interest, children in foster care shall be moved in a timely manner to a new school. Except in the case of an emergency, prior to making a recommendation to move a child in foster care from their current school, the Division shall provide a written explanation to the following:

- **A. The child in foster care;**
- **B. The child's attorney ad litem;**
- **C. The CASA, if appointed; and,**
- **D. Parents, guardians, and any persons appointed by the court.**

To ensure that children in the custody of the Department receive a quality education, it is the Division's policy to enroll children in foster care only in schools accredited by the Arkansas Department of Education. This requirement also applies to children placed in residential facilities.

It is the responsibility of DCFS to assure that children in foster care are afforded educational opportunities, including academic resources, services, and extracurricular enrichment activities in order to help each child in foster care achieve his or her full potential. Children in foster care shall be held to the same academic achievement standards to which all children are held and be placed in the least restrictive educational placement. The local county office should be aware of educational resources in the community and across the state so that staff may access these resources for children in foster care.

School districts are required to:

- **A. Allow the child to remain in his/her current school unless the court finds that doing so is a conflict with other laws (not residency);**
- **B. Work out a transportation plan that will allow the child to remain in his/her current school, to the extent reasonable and practical;**
- **C. Designate a foster care liaison;**
- **D. Accept credit coursework when the child satisfactorily completes the appropriate education placement assessment;**
- **E. Refrain from lowering the grades of a child in foster care because of:**
  - **1) A change in school;**
  - **2) Absence due to attendance at court-ordered treatment or counseling;**
  - **3) Absence due to attendance at dependency-neglect proceedings.**
- **F. Immediately enroll any child that has been moved to their district, even if the child does not have his/her school uniform, school records, immunization records, etc.**

Schooling Options:
Children in foster care shall attend public schools. However, the DCFS Director may grant an educational waiver allowing a child to be placed in a non-public school, including a private, parochial, or home school if it is in the best interest of the child. No state or federal funding may be used for such placement. For a child in foster care to be enrolled in a non-public school or be home schooled, a certified mental health professional must present documentation stating that the non-public schooling is in the child's best interests. A child in foster care may receive Home Bound Instruction as part of their Individualized Education Program (IEP). Home Schooling and Home Bound Instruction are two different programs. Home Bound Instruction is a planned, time limited program that is established and provided by the child's school.

If a child is incapable of attending school on a full-time basis due to the medical condition of the child, the reason for which the child is deemed incapable of attending school must be certified by a medical professional and be supported by regularly updated information in the case plan of the child.

If a child in foster care is currently enrolled in a "School Improvement" school as determined by the Arkansas Department of Education (ADE) the child's case can be staffed to assess the child's progress at that school. If the child is progressing at the current school he or she can remain at that school, or the child can transfer to another school if it is in the child's best interest to do so. The Foster Care Manager will review the ADE website quarterly to determine the "School Improvement" schools and notify the appropriate County Supervisor of the information.

Each public education agency would be expected to ensure that the rights of a child are protected if:

- **A. No parent can be identified; or,**
- **B. The public agency, after reasonable efforts, cannot discover the whereabouts of a parent; or,**
- **C. The child is a ward of the state of Arkansas under the laws of this state.**

If the court transfers custody of a child to the Department, the court shall issue an order containing determinations on whether the child's parent or guardian may:

- **A. Have access to the child's school records;**
- **B. Obtain information on the child's current placement, including the name and address of the foster parents or provider; and**
- **C. Participate in school conferences or similar activities at the child's school.**

Surrogate Parents Provisions for IDEA
If custody of a child is transferred to the Department, the court may also appoint an individual to consent to an initial evaluation of the child and serve as the child's surrogate parent under Individuals with Disabilities Education Act (IDEA), as in effect on February 1, 2007. If the court orders that the child's parent(s) shall have no involvement in the child's educational planning, the Department shall ask the child's foster parent or appropriate biological relative to act as the surrogate parent. If the child's parent is a partner in planning and overseeing the child's education as a member of the IEP team, a surrogate parent is not necessary. The child's parent, if permitted by the court to participate, may request that a family member or the foster parent act as the surrogate parent. The appointed family member or foster parent will not be required to undergo surrogate parent training and will be discharged once the child's parent is ready to resume involvement. If the family member or foster parent has not received surrogate parent training and would like to, the Local Education Agency (LEA) Special Education Supervisor or designee can assist in coordinating the surrogate parent training for the foster parent.

If DCFS is unable to locate the child's parent, the parent(s) are not involved in the case, or the parent's rights have been terminated, the Division shall request that the child's foster parent be assigned as the surrogate parent, if appropriate. If the foster parent has not received surrogate parent training, and would like to, the LEA Special Education Supervisor or designee can assist in coordinating the surrogate parent training for the foster parent.

Transition planning is a required component of the IEP for children age 16 and above.

Children in Foster Care Special Education Needs:
Due to the special education needs of many children who enter foster care, it is necessary to assess and identify educational needs early in the casework process. A comprehensive health assessment must be completed on each child in foster care within 60 calendar days of removal from home (see Policy VI-E Comprehensive Health Assessment and Health Plan for Children Receiving Out-of-Home Placement Services). The comprehensive health assessment includes assessments of cognition/achievement, speech/language development, hearing, vision, medical, emotional and behavioral development which can be used by the child's school in the process of determining the child's need for services. The University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation (UAMS PACE) Program is responsible for conducting the comprehensive health assessments and will make recommendations concerning the child's educational needs and referrals for Special Education Services.

The Individuals with Disabilities Education Act (IDEA) states that ADE ensures that all children with disabilities ages 3 to 21 residing in the state have the right to and availability of a free appropriate public education including children with disabilities who have been suspended or expelled from school. Free Appropriate Public Education (FAPE) also requires that the services provided to a child with disabilities under this part must address all of the child's identified special education and related service needs. The services and the change of placement needed by each child with a disability to receive FAPE must be based on the child's unique needs and not on the child's disability. Each public education agency shall implement child-find requirements to identify, locate, and evaluate all children with disabilities.

PROCEDURE VI-K1: Educational Services

09/2008

If the child is maintained in the same school after entry into foster care, then the Family Service Worker will:

A. Complete the CFS-362: Medi-Alert immediately when a child is removed and placed out of the home of the parent or legal guardian into foster care or adoptive home or moved to another foster care provider. Section IX of the Medi-Alert addresses the child's Academic Status and must be completed upon the child entering care or changing a placement. Complete Section IX in consultation with the child's parent upon initial placement. Update Section IX of the CFS-362: Medi-Alert as information becomes available if the parent does not provide needed information at the time of placement.
B. Use CFS-384 LEA: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events to notify the school counselor when a child enters foster care, DCFS exercises a 72-hour hold on a child, a court places a child in DCFS custody, when a child has experienced a traumatic event, or DCFS believes a child has experienced a traumatic event, or when DCFS gains knowledge through an investigation or ongoing protective services case that a child has experienced a traumatic event. Submit the CFS-384: LEA Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events to the school counselor by the next business day.
C. Provide the counselor authorization of who can pick the child up from school. Present the school counselor with the child's court order if the FSW has it. If the FSW does not have it when accompanying the child to school, present it to the school once it is received.
D. Provide guidance to the school counselor on the role of the child's biological parent in the case (i.e. supervised visitation, unable to locate parent, working towards reunification or TPR, parent cannot have access to any foster parent information) and the role of the parent in the education process (i.e. parents will be attending school conferences as part of reunification services, TPR and parents will not be attending conferences).
E. Share all known information with the school that may impact the health and safety of the child in foster care and all other children in the school. The school counselor may share any reported information with the child's principal and teachers if appropriate.
F. Obtain the child's school records from the school counselor for documentation in the child's case record. The child's school records will also be used to help address the child's educational needs in the case plan.

Provide the University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation (UAMS PACE) Program copies of any school records available to assist in the Comprehensive Health Assessment.

G. Ensure that the school counselor or designee completes the CFS-397: Educational Assessment within 20 days of child entering care. The completed form will be added to the Comprehensive Health Assessment for review. If the child enters care when school is not in session, the CFS-397: Educational Assessment should be sent to the child's school within ten (10) days of the opening of the next school session.
H. Ensure that the foster parents are given the names of the child's teacher and counselor. Ensure that the foster parents are involved in the child's education process. The foster parents must attend all scheduled parent/teacher conferences and school open houses. The foster parent will encourage children in foster care in their home to participate in school extracurricular activity and provide transportation to those activities.
I. Complete and update, as needed, the Medical Passport information related to the child's educational needs.

If the child is enrolled in a new school after entry into foster care, then the Family Service Worker will:

A. Complete each step outlined in the above section.
B. In one business day, notify the child's old school of the child's transfer to a new school and request copies of the child's school records. Involve the child's current school in the transfer process if this is a planned move for the child.
C. Notify the school counselor or designee of the new school via the CFS-384: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events and enroll the child in the new school within two business days after the move. Provide the school with copies of any documents that would assist in the child's educational program and have an impact on the child's health and safety. Provide UAMS PACE Program with any school records that are available.
D. When conducting a request of change of placement staffing discuss the impact of the child transferring to a new school if there is a change in placement.
E. Notify the parents that a change in schools was necessary if their parental rights have not been terminated.

The FSW will provide the school with the name, address, work phone number, and cell phone number of the County Supervisor. If the child is suspended from school, the school will contact the resident County Supervisor who will notify the foster parents.

PROCEDURE VI-K2: Special Education Needs Service Delivery Process

Service Delivery Process:

A. The FSW will enroll the child in school and provide the school with copies of any documents that would assist in the child's educational program. Provide UAMS PACE Program with any school records that are available.
B. The DCFS Health Services Specialist will refer the child in foster care to UAMS PACE Program for a Comprehensive Health Assessment (CHA) within three (3) working days of the child entering care.
C. The FSW will notify the Health Specialist of all placement changes. The Health Services Specialist will forward all notifications to UAMS PACE Program.
D. UAMS PACE Program will obtain a copy of the child's school records via a DHS-81: Consent for Release of Information and DHS-4000: Authorization to Disclose Health Information, if the records have not been received from the Family Service Worker. The child's parent and FSW must sign the DHS-81 and DHS-4000. The FSW will also send the court order to UAMS PACE Program indicating that the child is in DHS custody.
E. UAMS PACE Program will forward the results of the Comprehensive Health Assessment (CHA) to identified DCFS staff. UAMS PACE Program will key recommendations from the CHA into CHRIS for DCFS staff access.
F. The FSW/Health Specialist will present recommendations for referrals for special education consideration to the school building principal and or Local Education Agency (LEA) Special Education Supervisor or Designee.

G. The FSW will provide the school with the name and address of the child's biological parent(s), if available, so that the school can send notice of the conference to the parent. If not appropriate, DCFS will request the school to appoint a surrogate parent for the child.
H. If DCFS is unable to locate the child's parent, the parents are not involved in the case, or the parent's rights have been terminated, the FSW will request that the child's foster parent be appointed as the child's surrogate parent. The LEA Special Education Supervisor can assist in coordinating the surrogate parent training for the foster parent.
I. A conference will be scheduled with the appropriate school personnel, the biological parent, and foster parents/ surrogate parent, to discuss the child's needs.
J. The FSW will attend the referral conference.
K. The foster parent will be actively involved in the child's educational process and must attend all scheduled conferences and meetings, upon notification by the school and or DCFS, for children placed in their home.

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 three (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 five (5) days of their entry into foster care.
B. Refer children younger than three (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 five (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 two (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.
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 five (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 Family Service Worker 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 seven (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 Family Service Worker 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 seven (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:

A. 24-hour respite
B. No-harm contract with the child
C. Increased frequency of mental health services
D. Medication changes
E. Local phone numbers for emergency response to escalating behavior
F. Behavioral interventions appropriate for the child's diagnosis and symptoms
G. 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 two (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 (5) 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.

POLICY VI-M: INTERDIVISIONAL STAFFINGS AND THE CHILD CASE REVIEW COMMITTEE

01/2014

INTERDIVISIONAL STAFFINGS

When a youth is receiving DHS services and has serious and complex needs that make placements difficult, a caseworker can refer the youth for an interdivisional staffing. The purpose of an interdivisional staffing is threefold:

- **A. To improve treatment/case planning to more appropriately address the youth's needs;**
- **B. To provide assistance and support to DCFS field staff, direct services staff, and other stakeholders involved with the youth and family; and,**
- **C. To attempt to resolve the youth's issues before referring him or her to the Child Case Review Committee (CCRC). An interdivisional staffing must take place before a CCRC is held.**

Youth referred for interdivisional staffings include, but are not limited to, youth who:

- **A. Are in DHS custody and have significant trouble being placed due to multiple, more serious and/or complex needs or who are at risk of coming into DHS custody due to multiple, more serious, and/or complex needs;**
- **B. Have cases needing clarification as to which DHS Division has primary responsibility for the case; and/or,**
- **C. Have cases needing intensive coordination between DHS Divisions, service providers, and/or other community partners in order to connect the youth with appropriate services and supports in an effort to help youth reach permanency.**

An interdivisional staffing is comprised of the following individuals:

- **A. A representative from the following DHS Divisions– Children and Family Services, Youth Services, Medical Services, Developmental Disabilities Services, Behavioral Health Services, and Office of Chief Counsel**
- **B. A representative of the Department of Education, Special Education (as needed)**
- **C. Specialized Placement Unit (SPU) Manager, whose responsibilities include:**
  - **1) Coordinating the interdivisional staffings;**
  - **2) Managing contract; and,**
  - **3) Providing technical assistance**

Additional Interdivisional Staffing participants may include:

- **A. Division representatives who act as referral coordinators within their agencies;**
- **B. The designated caseworker for the youth and family;**
- **C. Appropriate service providers; and/or,**
- **D. Other stakeholders needed to develop a suitable plan of service to meet the youth's needs (e.g., parents/relatives, attorney ad litem, CASA, etc.)**

CHILD CASE REVIEW COMMITTEE

If an interdivisional staffing does not result in finding appropriate services and supports for the youth within Arkansas, then a Child Case Review Committee (CCRC) shall be called. The CCRC serves as the gatekeeper for out-of-state placements for youth receiving DHS services. The CCRC is ONLY for out-of-state placements. Before a case can be reviewed by the CCRC, the case MUST first be reviewed in an interdivisional staffing. The SPU Manager serves as the CCRC Coordinator.

Youth referred to CCRC include, but are not limited to, youth who:

- **A. Are in DHS custody and have significant trouble being placed due to multiple, more serious and/or complex needs**
- **B. Have cases that, despite coordination between DHS Divisions, cannot be assigned as the primary responsibility of one particular division**
- **C. Have accessed appropriate in-state resources, but have not had measurable success with those resources**
- **D. Have identified needs that cannot be met by the available resources in Arkansas**
- **E. Are recommended to receive treatment out-of-state**

The CCRC is comprised of the following members:

- **A. Director of the Department of Human Services (Chairman) or designee**
- **B. The Directors or designees of the following DHS Divisions – Children and Family Services, Youth Services, Medical Services, Developmental Disabilities Services, Behavioral Health Services, and Office of Chief Counsel**
- **C. A representative of the Department of Education, Special Education (as needed)**
- **D. CCRC Coordinator (Specialized Placement Unit Manager), whose responsibilities include:**
  - **1) Coordinating the CCRC meetings**
  - **2) Managing contracts**
  - **3) Providing technical assistance**

Additional committee members may include:

- **A. Division representatives who act as referral coordinators within their agencies**
- **B. The designated caseworker for the youth and family**
- **C. Appropriate service providers**
- **D. Others needed to develop a suitable plan of service to meet the youth's needs**

The SPU Manager will notify Divisions when they have a case on the agenda. Each committee member is expected to attend the meeting or send a designee with the authority to make decisions for their Division. Decisions will be made by majority vote with the Chairman breaking any tie votes. Dates will be established for the CCRC to be updated on the status of the plan implementation.

PROCEDURE VI-M1: Interdivisional Staffing Referral

01/2014

When any local Divisional staff member becomes aware of a youth who meets the criteria for referral to an interdivisional staffing he or she will:

- A. Contact the County Supervisor, the Area Director, and, where available, the designated Placement Specialist for the area to discuss the youth's needs and verify whether an interdivisional staffing referral is appropriate.
- B. If the referral is deemed appropriate at the local level, the Divisional staff member will contact the Specialized Placement Unit Manager in Central Office for approval.
- C. If the referral is approved by the SPU Manager, completed CFS-302: Interdivisional Staffing Summary Form which will be presented during the Interdivisional Staffing.

Additionally, if the referral is determined to be appropriate for an interdivisional staffing, the Specialized Placement Unit Manager will:

A. Place the case on the agenda for the next interdivisional staffing which shall occur at least monthly.
B. Advise the Division's contact person which people need to attend or be available by conference call for the staffing.

If the referral is determined to be inappropriate, the Specialized Placement Unit Manager will:

A. Provide guidance to the county office regarding other potential next steps.

PROCEDURE VI-M2: Child Case Review Committee (CCRC) Referral

01/2014

If the case has already been reviewed by an interdivisional staffing that did not resolve the youth's presenting issues within the state and the referral is determined to be appropriate for the CCRC, the Specialized Placement Unit Manager will:

A. Request the referring county to prepare the CCRC referral packet (see below for more information).
B. Place the case on the agenda for the next CCRC meeting (CCRC meetings are scheduled on an as needed basis but shall be scheduled within two weeks of receipt of referral).
C. Advise the Division's contact person which people need to attend or be available by conference call for the CCRC meeting.

The Family Service Worker will:

A. Prepare and submit the referral packet which will include:
    1) Cover memo stating:
        a) Family Service Worker's name and title, phone and fax numbers, and supervisor's name
        b) Youth's name, age, legal status, and current location
        c) Concise paragraph detailing the reasons for referring the youth for out-of-state placement and when the placement is needed
        d) Youth's last/current placement and an explanation for the removal
    2) Completed CFS-302: Interdivisional Staffing/Child Case Review Committee (CCRC) Form (a new one does not need to be completed; the CFS-302: Interdivisional Staffing/Child Case Review Committee (CCRC) submitted for prior interdivisional staffing may be resubmitted unless there is new information to be included)
    3) Completed CFS-303: Out of State Placement Request
B. Attend (or ensure other key staff who are knowledgeable about all aspects of the case attends) the CCRC meeting to present details of the case and answer questions.
C. Remain responsible for regular follow-up regarding the out-of-state placement if the CCRC approves the out-of-state placement in order to best meet a youth's needs.
D. Submit monthly updates regarding the youth's out-of-state placement and progress to the SPU Manager.

PROCEDURE VI-M3: Medicaid and Financial Issues

01/2014

Before a youth is placed in an out-of-state treatment facility due to an emotional disturbance, the Office of Chief Counsel will make and document the following determinations as required by ACA §20-46-106 via CFS-303: Out of State Placement Request, which will then be reviewed with the SPU Manager.

If a youth in DHS custody is placed in an out-of-state placement without proper documentation, or CCRC authorization as outlined above, Medicaid will not approve a Certificate of Need (CON) and authorization to pay the provider/facility for services will be refused.

The information collected by the above determinations shall be included in the youth's case file. The information shall be reviewed and considered by the juvenile judge.

POLICY VI-N: LEGAL COUNSEL FOR CHILDREN IN FOSTER CARE

09/2008

The Division may secure legal counsel for children in foster care in connection with legal actions and proceedings of which they are a part during their foster care experience. This includes but is not limited to fair hearings involving Medicaid or Social Security; administrative hearings to represent the child as an alleged offender of child maltreatment; Special Immigrant Juvenile Status (SIJS) applications: wrongful death; medical malpractice; probate and estate matters; contract issues; and school matters for Division cases.

The Division will not secure legal counsel for a child who is not in DHS custody at the time of the hearing, regardless of whether the child was in DHS custody at the time the offense was committed.

PROCEDURE VI-N1: Making Referrals to Secure Legal Counsel

09/2008

The following steps are to be followed during the referral process:

A. The person making the referral (e.g. field staff, supervisor, Area Director) will send the request via email to the Special Assistant to the Director. The request must include the child's name, county responsible, and reason for the referral.
B. The Special Assistant to the Director will review the referral and, if accepted, forward to the attorney via email.
C. The Special Assistant to the Director will notify the person making the referral and the Area Director of the decision via email within ten (10) working days of receiving the request.

If the child is involved in an administrative proceeding, Fair Hearings will send a notice to provide an attorney directly to the Special Assistant to the Director, who will send a copy of the notice via email to the Area Director.

POLICY VI-O: THERAPEUTIC FOSTER CARE

06/2011

Therapeutic foster care (TFC) is a specialized form of foster care that provides a wraparound plan for children who need more intensive case management to meet their individual needs. TFC is a family-based service delivery approach supported by licensed mental health professionals (as recognized by Arkansas Medicaid) that provides individual treatment for children, youth, and their families. Therapeutic foster parents are specially trained and more intensively supervised and supported to help them care for children with more complex needs. Children may need TFC as a result of disruptive behaviors, mental health issues, true findings of sexual abuse, or numerous unsuccessful placements. In addition to a DCFS Family Service Worker, each child in a therapeutic foster home is assigned a case manager who is active in the child's daily life through more frequent visits, medication management, therapy, etc. The goal of therapeutic foster care is to stabilize children in their communities so they can achieve permanency through reunification with parents or relatives or through adoption.

DCFS contracts for therapeutic foster care with licensed providers across the state. All referrals for TFC will go through the Specialized Placement Unit (SPU) to ensure that placement is in a child's best interest and, if possible, that a child remains close to his or her home county. A referral does not guarantee placement as TFC may not be appropriate for every child. Additionally, a child may be placed on a waiting list until the provider can secure an appropriate placement.

A foster home may not be both a TFC foster home and a DCFS foster home. However, a foster child not requiring TFC may be placed into a TFC foster home only in the following circumstances:

A. He or she is a sibling of a child in the TFC foster home
B. He or she is a child of a youth in the TFC foster home
C. He or she had previously been receiving TFC services in that TFC home

Before placing a foster child not requiring TFC services into a TFC home with a child receiving TFC services, the potential risk to all children shall be considered. Justification of the appropriateness of the placement shall be documented.

If a TFC foster home wishes to become a DCFS foster home, all applicable Minimum Licensing Standards and DCFS Policy requirements must be met by the foster home.

PROCEDURE VI-O1: Referrals for Therapeutic Foster Care

If the Family Service Worker believes TFC to be the most appropriate placement for a child, he or she will:

A. Complete CFS-367: Specialized Placement Referral Form.
B. Email the completed CFS-367: Specialized Placement Referral Form to TFCReferral@arkansas.gov.
C. Retain a paper copy of the CFS-367: Specialized Placement Referral Form in the child's case file.

If the child is accepted into a TFC placement, the Family Service Worker will:

A. Forward additional required documents to the provider, as requested.
B. Continue to maintain the child's case file while he or she is in TFC.
C. Coordinate a monthly visit with the TFC case manager to assess the health and safety of the child placed in the TFC home.

The Specialized Placements Unit Manager will:

A. Review the completed CFS-367: Specialized Placement Referral Form for appropriateness.
B. Forward appropriate referrals to the TFC providers.
C. Notify the FSW if the child is accepted into the TFC program.

PROCEDURE VI-O2: Therapeutic Foster Home Transitioning to DCFS Foster Home

In the event that a current TFC foster home wishes to become a DCFS foster home, the Resource Worker will:

A. Request a referral on the family from the TFC provider.
B. If the referral is positive, ensure that all required DCFS background checks (i.e., Child Maltreatment Central Registry Check, Adult Maltreatment Central Registry Check, State Police Criminal Record Check, FBI Criminal Background Check, and Vehicle Safety Check) are in place and current. Complete appropriate CHRIS screens (see Procedure VII-C1).
C. Once background checks have been verified, conduct an In-Home Consultation Visit (see Procedure VII-C2) with the family.
D. Verify that the family has completed:
   1) Pre-service training with the TFC provider
      a) If the family did not complete pre-service training with the TFC provider, refer the family to MidSOUTH for pre-service training upon successful completion of all background checks and the In-Home Consultation Visit (see Procedures VII-C3: Initiation of Pre-Service Training and VII-C4: Pre-Service Training).
   2) CPR and Standard First Aid Certification. First Aid and CPR training and certification will only be accepted from a certified trainer associated with the American Heart Association, the National Safety Council, or the American Red Cross. First Aid training provided through the National Safety Council must be the Standard First Aid, not Basic First Aid.
      a) If the family does not have current CPR and Standard First Aid Certification, assist the family in accessing appropriate training.
   3) Fifteen hours of continuing education related to fostering within the past calendar year.
      a) If the family has not earned 15 hours of continuing education within the past calendar year, they are responsible for obtaining the remaining hours. However, the time spent during the In-Home Consultation Visit and Orientation may count toward the 15-hour continuing education requirement.
E. If the family will not be attending pre-service training, ensure that the individual conducting the home study receives the completed SAFE Questionnaire I.
F. Arrange for a SAFE Home Study to be completed on the family (see Procedure VII C-5: Home Study).
G. If the family's SAFE Home Study is approved, ensure the CFS-475: Initial Checklist for Foster/Adoptive Home Assessment is completed, that any safeguard measures deemed necessary have been implemented, and that any requested alternative compliances or policy waivers have been approved.
H. Invite the County Supervisor to accompany them on the final face-to-face visit and final visual inspection of the home.
I. Conduct a final face-to-face visit with the prospective foster parents and a final visual inspection of the home (preferably with the County Supervisor).
J. Provide the family with an Approval Packet.
K. Review the DCFS Approval Packet which includes:
   1) Stamped envelopes addressed to the appropriate county office
   2) Examples of the completion of travel documentation that must be submitted monthly
   3) Copy of the Code of Ethics
   4) Copy of the Arkansas Practice Model
   5) CFS-381: Training Record Log
   6) Medication Log
   7) Child Inventory Log
   8) Fire Drill Log
   9) CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic Visits
   10) After hours contact sheet
   11) Foster Care Board Sheet
   12) Appropriate Foster Parent Association contact information
L. Complete the CFS-462: Initial Foster Family Agreement with the family.

M. File the CFS-462: Initial Foster Family Agreement in the foster home record.
N. Enter a disposition as to the approval/denial of the foster home within three (3) working days of receipt of the Area Director's approval or denial.
   1) If the recommendation is approval, then:
      a) If the orientation has not already taken place, schedule a date for a County or Area Orientation Session for newly approved foster parents.
      b) Complete Provider Alternate Care Screen in CHRIS if family has determined they are willing to serve as an Informal Respite Home and, using CFS-419: Foster Family Support System (FFSS) Information, enter all appropriate identified Foster Family Support System Individual Members including information on their cleared background checks (see POLICY VII-G: Alternate Care For Children In Out-Of- Home Placement).
      c) Enter Begin Date on Availability Status on Provider Service Status Screen and Request Approval on Provider Service Detail Screen in CHRIS.
      d) If the family has indicated interest and been approved to foster children/youth with specific characteristics, identify the appropriate Disability Willing to Accept selection under the Preferences Tab in the Provider Services/Admission Criteria Button.
      e) File the approval letter in the foster home record.
   2) If the recommendation is denial, then:
      a) Send a "Letter of Denial" to the applicants who were not approved. See POLICY VII-D: Denial of a Foster Home and document in Provider Contact Information Screen in CHRIS.
      b) End Date the Foster Family Service on the Provider Services Tab selecting the appropriate Reason for End Date.
      c) Specify why the home was denied in the comment box on the Provider Services Tab.

The County Supervisor or designee is encouraged to:
A. Participate in the final face-to-face visit and final visual inspection of the home with the Resource Worker.

The Area Director or designee will:
A. If appropriate, approve the Resource Worker's Request for Approval in Provider Service Detail Screen in CHRIS to finalize the approval of the Foster Family. Upon approval, CHRIS automatically provides the Foster Family Approval Letter to be printed, mailed, and filed in the foster home record.

PROCEDURE VI-O3: Former Therapeutic Foster Home Reopening as DCFS Foster Home

For former TFC foster homes that express interest in opening as a DCFS foster home, the Resource Worker will:
A. Request a referral on the family from their former TFC provider.
B. If the referral is positive, complete new background checks on all appropriate members of the household regardless of whether previous background checks are still current.
C. Once background checks have been verified, conduct an In-Home Consultation Visit (see Procedure VII-C2) with the family.
D. Verify that the foster parent applicants have completed pre-service training within the past two years.
   1) If the applicants have not completed pre-service training within the past (2) years, refer the family to MidSOUTH for pre-service training upon successful completion of all background checks and the In-Home Consultation Visit (see Procedures VII-C3: Initiation of Pre-Service Training and VII-C4: Pre-Service Training).
E. Verify that the foster parent applicants have current CPR and Standard First Aid certification.
      a) CPR and First Aid training and certification will only be accepted from a certified trainer associated with the American Heart Association, the National Safety Council, or the American Red Cross. First Aid training provided through the National Safety Council must be the Standard First Aid, not Basic First Aid.

b) If the family does not have current CPR and Standard First Aid Certification, assist the family in accessing appropriate training.

F. If the foster home has been closed less than one year, verify that the foster parent applicants have completed 15 hours of continuing education related to fostering within the past calendar year.
   a) If the family has not earned 15 hours of continuing education within the past calendar year, they are responsible for obtaining the remaining hours. However, the time spent during the In-Home Consultation Visit and Orientation may count toward the 15-hour continuing education requirement.

G. If the family will not be attending pre-service training, ensure that the individual conducting the home study receives the completed SAFE Questionnaire I.

H. Arrange for a SAFE Home Study to be completed on the family (see Procedure VII C-5: Home Study).

I. If the family's SAFE Home Study is approved, ensure the CFS-475: Initial Checklist for Foster/Adoptive Home Assessment is completed, that any safeguard measures deemed necessary have been implemented, and that any requested alternative compliances or policy waivers have been approved.

J. Invite the County Supervisor to accompany them on the final face-to-face visit and final visual inspection of the home.

K. Conduct a final face-to-face visit with the prospective foster parents and a final visual inspection of the home (preferably with the County Supervisor).

L. Review the Approval Packet with the family.

M. Complete the CFS-462: Initial Foster Home Agreement with the family and file it in the foster home record.

N. Enter a disposition as to the approval/denial of the foster home within three (3) working days of receipt of the Area Director's approval or denial.
   1) If the recommendation is approval, then:
      a) If the orientation has not already taken place, schedule a date for a County or Area Orientation Session for newly approved foster parents.
      b) Complete Provider Alternate Care Screen in CHRIS if family has determined they are willing to serve as an Informal Respite Home and, using CFS-419: Foster Family Support System (FFSS) Information, enter all appropriate identified Foster Family Support System Individual Members including information on their cleared background checks (see POLICY VII-G: Alternate Care For Children In Out-Of- Home Placement).
      c) Enter Begin Date on Availability Status on Provider Service Status Screen and Request Approval on Provider Service Detail Screen in CHRIS.
      d) If the family has indicated interest and been approved to foster children/youth with specific characteristics, identify the appropriate Disability Willing to Accept selection under the Preferences Tab in the Provider Services/Admission Criteria Button.
      e) File the approval letter in the foster home record.
   2) If the recommendation is denial, then:
      a) Send a "Letter of Denial" to the applicants who were not approved. See POLICY VII-D: Denial of a Foster Home and document in Provider Contact Information Screen in CHRIS.
      b) End Date the Foster Family Service on the Provider Services Tab selecting the appropriate Reason for End Date.
      c) Specify why the home was denied in the comment box on the Provider Services Tab.

The County Supervisor or designee is encouraged to:

A. Participate in the final face-to-face visit and final visual inspection of the home with the Resource Worker.

The Area Director or designee will:

A. If appropriate, approve the Resource Worker's Request for Approval in Provider Service Detail Screen in CHRIS to finalize the approval of the Foster Family. Upon approval, CHRIS automatically provides the Foster Family Approval Letter to be printed, mailed, and filed in the foster home record.

VII. DEVELOPMENT OF FOSTER HOMES
POLICY VII-A: FOSTER HOME PURPOSE AND ROLES

08/2013

The development of quality foster homes is a process essential for ensuring the safety and well-being of children in care while concurrently supporting children's permanency goals. The foster family is part of a team also comprised of DCFS, the child in foster care, the custodial/non-custodial parents and other appropriate community members. When these team members cooperate and understand their own and each other's roles, the quality of the experience for everyone is increased and the well-being of the child and his or her family is positively affected.

For the purpose of title IV-E eligibility, a foster home means the home of an individual or family licensed or approved as meeting the standards established by the Child Welfare Agency Review Board that provides 24-hour out-of-home care for children (with respect to foster homes on or near Indian reservations, approval would rest with the tribal licensing or approval authority). Anything less than full licensure or approval is insufficient for meeting title IV-E eligibility requirements.

In addition, the Child Welfare Agency Licensing Act defines a foster home as a private residence of one or more family members that receives from a child placement agency any minor child who is unattended by a parent or guardian in order to provide care, training, education, custody or supervision on a 24-hour basis, not to include adoptive homes. The home must meet foster home standards and the individual child's needs for the duration of the placement.

There are two types of DCFS foster homes: Provisional Foster Homes and Regular Foster Homes.

Provisional foster homes are identified and recruited by the Family Service Worker, who, in an effort to preserve family connections and expedite placement, may seek to place a child in foster care with a relative or fictive kin. "Relative" means a person within the fifth degree of kinship to the child or to at least one of the children in a sibling group, including step-siblings and half-siblings, by virtue of blood or adoption (see POLICY VI-A) if one has been identified and is appropriate. "Fictive kin" means a person not related by blood or marriage, but who has a strong, positive, emotional tie to a child and has a positive role in the child's life if one has been identified and is appropriate.

The purpose of opening a provisional foster home is to enable DCFS to make an expedited placement for a child with a relative or fictive kin with whom a bond already exists. Therefore, a provisional home may be opened before the results of the FBI Background Check are received, before the provisional foster parents have completed the pre-service training, and before a full home study is finished (however a visual inspection of the home is required before placement in a provisional home). These are the only differences in initial approval requirements, including Minimum Licensing Standards, between provisional foster homes and regular foster homes in Arkansas.

Once opened as a provisional home, DCFS staff works with the foster parents in that home to bring them into full compliance within a six-month period. Provisional foster homes that are not in full compliance at the end of six months must be closed and the child(ren) removed, unless the relative has acquired custody.

During the period of time that the home is on provisional status, a foster care board payment is not provided. However, provisional foster parents may apply for and receive benefits for which the relative and/or fictive kin is entitled due to the placement of the child in the home (e.g., SNAP). Provisional foster homes may also receive child support or any federal benefits (e.g., SSA) paid on behalf of the child, as applicable.

If the home is opened as a regular foster home, a foster care board payment will then be provided to help support the needs of the child placed in the home. However, if the home received any child support and/or any federal benefits paid on behalf of the child while the home was on provisional status, those child support payments

and/or federal benefits must then be transferred to the Division to reimburse the state for foster care board payments and other expenses as appropriate.

Once opened as a fully approved foster home, the foster parents may then request to care for children who are not related or not fictive kin children in foster care with the understanding that additional evaluation of their home would be required to ensure that it would be an appropriate placement for children who are not related or not fictive kin to the foster parent(s).

DCFS is licensed to approve foster homes. Regular Foster Homes are approved foster homes that may provide care for both related and non-related children. In addition, a Regular Foster Home may also serve, if desired, as an informal respite home. An informal respite home is an approved DCFS foster home that can provide temporary care (no more than seven continuous days at one time) for children in out-of-home placements when the children's full-time foster family is unable to do so and a member of the foster family's support system cannot assist (see POLICY VII-G: ALTERNATE CARE).

DCFS staff are only permitted to be agency-approved foster homes for informal respite care purposes but may not serve as an informal respite home for children/youth on their own caseload. The DCFS Director or designee must give prior approval to any employee seeking to become an agency-approved informal respite home provider. Each DCFS employee's request to serve as an informal respite care home will be assessed on a case-by-case basis. Staff from a different county or a contract provider must assess and approve the home. Employees shall not use their employment status as a means to obtain information about the child's case, gain services, or receive preferential treatment.

However, in situations where Division staff are relatives of children placed in DHS custody, and it is in the best interest of the child to be placed with the relative, the DCFS Director may grant approval for the relative/employee to serve as a full-time foster home on a case-by-case basis.

For additional information, see PUB-11: What Happens When Your Child and Family Are Involved with DCFS?, PUB-22: Standards of Approval for Foster and Adoptive Homes and PUB-30: Foster Parent Handbook.

POLICY VII-B: FOSTER HOME RECRUITMENT & RETENTION

01/2011

The Division shall recruit a sufficient number of foster families to ensure that all children are placed in the least-restrictive, most family-like setting that meets each child's individual needs. Recruitment should result in an increased number of qualified, trained foster families in Arkansas. The Division shall diligently recruit potential foster families that reflect the ethnic and racial diversity of children in care. Targeted recruitment shall also take place for foster parents who are willing and able to meet special needs of children needing placement.

Recruitment of new foster families is an ongoing activity for which all staff are responsible. However, Resource Workers in each Area will take the lead role in the recruitment process. Recruitment efforts include, but are not limited to, participation from current foster parents, development of local and statewide media campaigns, and collaboration with community organizations.

Each Area Director will develop an annual recruitment plan for his or her area, to be initiated at the beginning of each fiscal year. The CFS-445: Foster Home Needs Assessment will be utilized in the development of the recruitment plan. The plan will outline ongoing recruitment efforts for the Area. The Foster Home Needs Assessment will also be utilized in the development of the Area Foster Home Recruitment Plan and the Statewide Foster Home Recruitment Plan.

As part of foster home recruitment, each county will host information meetings to explain the steps to becoming a foster or adoptive parent (if appropriate) as well as the responsibilities that foster parents have to children and their families who are involved with DCFS. The information meeting will also help attendees better determine if they want to apply to become foster parents. Prospective foster parents are strongly encouraged to attend an information meeting prior to beginning the application process (i.e. the In-Home Consultation Visit). Neighboring counties may hold joint information meetings to better accommodate schedules and maximize staff time.

Recruitment does not end when a foster home is opened. It must be sustained with retention efforts. DCFS will retain quality foster homes by ensuring good communication with and support to foster families.

PROCEDURE VII-B1: Foster Parent Recruitment

All staff should participate in recruitment efforts. While the following is not a comprehensive list, staff should:

A. Actively coordinate with professional organizations and minority groups to create public interest.
B. Contact community organizations and media to inform them about DCFS needs and successes.
C. Encourage foster parents to:
    1) Make one-to-one contacts with other individuals who may be interested or have expressed interest in fostering.
    2) Schedule speaking engagements with community groups in order to share information about fostering.
D. Conduct Information Meetings.

The Area Director or designee will:

A. Conduct an annual assessment of current foster homes and identify the need for additional foster homes by utilizing the CFS-445: Foster Home Needs Assessment.
B. Discuss the CFS-445: Foster Home Needs Assessment, referrals, and inquiries with Resource Workers.
C. Submit the CFS-445: Foster Home Needs Assessment to the Foster Care Unit by June 30 of each year.

The Foster Care Unit will:

A. Use the CFS-445: Foster Home Needs Assessment to inform the statewide foster home recruitment plan.
B. Share the statewide foster home recruitment plan with the field.

PROCEDURE VII-B2: Retention of Foster Homes

All DCFS staff will:

A. Ensure good communication among all team members, as well as mutual respect, understanding, and honesty.
B. Keep foster parents informed of DCFS programs, services, and policies that relate to foster care.
C. Support foster homes as needed in order to best serve children and families.

Resource Workers will:

A. Discuss and assist foster parents in understanding their rights and responsibilities as foster parents as well as the rights and responsibilities of the Division.
B. Provide foster parents with the county on-call contact information sheet.
C. Visit homes quarterly for monitoring to ensure compliance with licensing standards and foster home requirements, address any issues, and offer support to the foster family.
D. Engage external stakeholders and share relevant information, thus supporting the practice model.
E. Inform foster parents of their right to a grievance procedure when differences arise with DCFS which have not been resolved to the foster parents' satisfaction, as outlined in PUB-30: Foster Parent Handbook.
F. Collaborate with adoption staff as appropriate when a child's permanency goal is changed to adoption and when a child is transitioning from a foster home to an adoptive home.

PROCEDURE VII-B3: Inquiries

The County Supervisor or designee will:

A. Assign foster care-only inquiries to the designated Resource Worker within 3 working days. (Notification of internet inquiries made by prospective foster parents will go directly to the designated supervisor, who will assign the inquiry to the designated Resource Worker).
B. Assign inquiries regarding both Adoption and Foster Care to the designated Area Resource Worker within three working days and ensure that the appropriate Adoption Supervisor will assign an Adoption Specialist as secondary.
C. Relay adoption-only inquiries to the Adoption Supervisor within three working days.

The designated Resource Worker will:

A. Enter information documenting all activities with the family beginning with Applicant Status (Inquiry) to the approval process in CHRIS. This includes all appropriate Provider Screens – General Information Tabs, Household Members/Requirements Tabs, Contacts Screen, Preferences Tab and Services Details Screen.
B. Respond to all phone and internet inquiries within three working days of receiving the assignment from the County Supervisor (Inquiries made via the website will automatically populate the appropriate CHRIS county inbox the next working day).
    1) When an inquiry is made, give a brief explanation of the county foster care needs, correct any misinformation the caller may have, and explain the foster parent assessment process.
C. Provide the family with an information packet within three working days after initial contact is made. The information packet will consist of:
    1) A letter that:
        a) Thanks the family for their interest
        b) Identifies a contact person
        c) Indicates the date, time and location of the next information meeting in their county or, if applicable, a neighboring county that is hosting prospective foster parents from surrounding counties.
    2) PUB-406: Care, Commit, Connect
    3) PUB-409: What is DCFS?
    4) PUB-20: Open Your Heart, Open Your Home to Foster Care (if applicable)

Background check forms should **not** be mailed at this point in time. Copies of the brochures listed above can be obtained from the Foster Care and Adoption Units, ordered from the DHS print shop through the local financial coordinator, or printed directly from CHRIS Public.

D. Within 5 working days after sending the information packet, contact the family via phone (if the family has not already contacted the Resource Worker) to:
   1) Ensure that they received the information packet.
   2) Answer any additional questions they may have.
   3) Determine if they will be able to attend the next scheduled information meeting.
      a) If the family will be able to attend the next scheduled information meeting, no further action needs to be taken until that time.
      b) If the family will not be able to attend the next scheduled information meeting, mail PUB-22: Standards of Approval for Foster and Adoptive Homes and PUB-30: Foster Parent Handbook and the background check packet to them with instructions on how to complete and submit these completed forms. The background check packet includes:
         i. FBI fingerprint card
         ii. CFS-316: Request for Child Maltreatment Central Registry Check
         iii. APS-0001: Authorization for Adult Maltreatment Central Registry
         iv. CFS-341: Certification of Absence of Criminal Record
         v. CFS-342: State Police Criminal Record Check
         vi. CFS-419: Foster Family Support System Information
         vii. CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
         viii. VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
         ix. VSP-2: Authorization to Obtain Traffic Violation Record
         x. Arkansas State Vehicle Safety Program Manual
      c) See Procedure VII-C1 for background check processing information.

E. If the Resource Worker is unable to contact the family after three phone attempts, send another letter to the family informing them that the Resource Worker has attempted to contact them and will not be contacting them further, but also welcoming the family to call or email the Resource Worker if they are still interested in fostering.

PROCEDURE VII-B4: Information Meetings

The Resource Worker or designee will:

A. Address the following topics at the Information Meeting:
   1) Overview of foster care
   2) Demographics and characteristics of children in care
   3) Types of foster homes needed in the county
   4) Approval standards
   5) Application and assessment process (i.e., the application process formally begins with the In-Home Consultation Visit).

B. Ensure a current or former foster or adoptive parent is present and available to answer questions.

C. Provide all participants with a copy of PUB-22: Standards of Approval for Foster and Adoptive Homes and PUB-30: Foster Parent Handbook.

D. Provide all participants with a Background Check Packet (MidSOUTH shall not provide the packet to prospective foster families), which includes:
   1) FBI fingerprint card
   2) CFS-316: Request for Child Maltreatment Central Registry Check
   3) APS-0001: Authorization for Adult Maltreatment Central Registry
   4) CFS-341: Certification of Absence of Criminal Record
   5) CFS-342: State Police Criminal Record Check
   6) CFS-419: Foster Family Support System Information
   7) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
   8) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business

9) VSP-2: Authorization to Obtain Traffic Violation Record
10) Arkansas State Vehicle Safety Program Manual

E. Have a notary present to notarize the forms in the Background Check Packet if the family chooses to complete during the Information Meeting.

F. Provide participants with additional Background Check Packets for their FFSS and any other household members. *Any household member who resides in the home for more than 3 cumulative months in a calendar year (e.g. an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for 6 weeks twice a year) must clear all background checks.*

POLICY VII-C: FOSTER HOME ASSESSMENT PROCESS

08/2013

In order to ensure quality foster homes, DCFS will complete a thorough home assessment for each prospective foster family. The purpose of the assessment process is to educate prospective foster parents on the characteristics of children in out-of-home placement and evaluate their ability to meet those needs, as well as evaluate the applicants' compliance with the Minimum Licensing Standards and DCFS policy requirements for foster homes. The home assessment is a mutual selection process. It involves several components including, but not limited to, background checks, an in-home consultation visit, pre-service training, a home study, and ongoing consultation with the prospective foster parents to ensure that all appropriate criteria related to both compliance and quality are met. Prospective foster parents, with the exception of provisional foster parents, are highly encouraged to attend an Information Meeting before the In-Home Consultation Visit.

BASIC CRITERIA
Basic criteria for consideration in determining the appropriateness of foster homes include, but are not limited to the following.

***Age* - Applicant is at least 21 years of age and not older than 65 years of age.**

***Relationship Stability* -**

A. **In a two-parent home, both parents shall be joint applicants and both parents shall actively participate in the approval process. The couple shall demonstrate a stable relationship. In assessing relationship stability, considerations may include major life changes such as:**
   - **Death or serious illness among family members**
   - **Marriage, separation, divorce, or other significant changes in the couple's relationship**
   - **Addition of household members (e.g., birth, adoption, aging relative moving in)**
   - **Loss of or change in employment**
B. **Marriages and divorces will be verified. Applicants must provide a copy of their marriage license to verify marriage and a copy of their most recent divorce decree to verify divorce.**
C. **In a single parent home, the major life changes listed above shall also be considered when assessing the person's ability to be an effective foster parent.**

A foster home may not house or admit any roomer or boarder. A roomer or boarder is:

A. **a person to whom a household furnishes lodging, meals, or both, for a reasonable monthly payment; and,**
B. **not a household member.**

A household member is a resident of the home who:

A. **owns or is legally responsible for paying rent on the home (household head); or,**
B. **is in a close personal relationship with a household head; or,**
C. **is related to a household head or a to person in a close personal relationship with a household head.**

Any household member who resides in the home for more than 3 cumulative months in a calendar year must clear the following background checks: Arkansas Child Maltreatment Central Registry, Arkansas Adult Maltreatment Registry, Arkansas State Police Criminal Record Check, and FBI Criminal Background Check.

***General Physical and Mental Health* - Members of the household must not have a health condition or disability that would interfere with the family's ability to parent the child. Each member of the household shall have a physical examination by a physician within six months prior to the approval of the home study on the prospective foster family, and annually thereafter.**

Housing-

A. **Space must be adequate to promote health and safety. Each bedroom should have at least 50 square feet of space per occupant.**
B. **All firearms must be maintained in a secure, locked location and stored separately from ammunition.**
C. **All water hazards and dangerous pets will be assessed. Safeguard measures will be implemented, as appropriate.**
D. **Children of opposite sexes will have their own separate bedrooms if either child is four years old or older, except for a mother in foster care with her child(ren).**
E. **Water must be provided by public water system or approved annually by the Department of Health.**
F. **Prospective foster parents who rent must obtain acknowledgement from their landlord that they plan to foster on landlord's property if they are approved by DCFS to foster.**

***Smoking Restrictions* - DCFS shall not place or permit a child in foster care in any foster home if the foster parent smokes or allows anyone else to smoke in the presence of any child in foster care unless it is in the child's best interest to be placed in or remain in the foster home. If the foster parent indicates smoking will not occur in the presence of a child in foster care, then DCFS will designate the home a "non-smoking" foster home. If a foster parent indicates that smoking will occur in the presence of a child in foster care, the foster home will be designated a "smoking" foster home, and no child may be placed or remain in the foster home unless it is in the child's best interest to be placed in or remain in the foster home. Second hand smoke is detrimental to a child's health and, as such, it is generally not in a child's best interest to be placed in a foster home that permits smoking in the presence of a child in foster care. In addition, state law prohibits smoking in a vehicle if a child in the car is under the age of 14.**

***Resources* - The applicant must have sufficient resources to meet the financial, medical, physical, educational, emotional, and shelter needs of the child without relying solely on state or federal financial assistance (e.g., SNAP, SSI, SSA, etc.) to meet those needs (although these forms of assistance may be used to supplement a family's income). A recent check stub and the previous year's income tax return is required to verify income and employment. While the foster care board payment may be a resource for a child, foster parents should have sufficient resources to care for a child even without a board payment. The foster care board payment shall not be considered a part of the foster family's income.**

BACKGROUND CHECKS

In addition to ensuring that homes meet the basic criteria, the Division shall only place children in approved foster homes where the foster parents and appropriate members of the household have been cleared through a series of background checks: the Arkansas Child Maltreatment Central Registry, the Arkansas Adult Maltreatment Central Registry, the Arkansas State Police Criminal Record Check and an FBI Criminal Background Check (with the exception that placements may be made in Provisional Foster Homes before FBI results are received). Any household member who resides in the home for more than 3 cumulative months in a calendar year (e.g. an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for 6 weeks twice a year) must clear all background checks.

***Child Maltreatment Central Registry* - Foster parents and all other members of the household age 14 years and older, excluding children in foster care, must be cleared through the Arkansas Child Maltreatment Central Registry. The Arkansas Child Maltreatment Central Registry Check will be repeated every two years on all appropriate household members. If applicable, a Child Maltreatment Central Registry Check shall also be conducted on each household member age 14 years or older in any state of residence in which they have lived for the past five years, and in their state of employment, if different, for reports of child maltreatment.**

***Adult Maltreatment Central Registry* – Foster parents and all other members of the household age 18 and one-half years and older, excluding children in foster care, must be cleared through the Arkansas Adult Maltreatment Central Registry. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the Arkansas Adult Maltreatment Central Registry Check must be**

initiated to ensure results are received by the time that household member reaches 18 and one- half years of age. The Arkansas Adult Maltreatment Registry check will be repeated every two years on all appropriate household members.

***State Police Criminal Record Check* - Foster parents and all other members of the household age 18-and-one-half years and older, excluding children in foster care, must be cleared through a State Police Criminal Record Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the State Police Criminal Record Check must be initiated to ensure results are received by the time that household member reaches 18-and-one-half years of age. The State Police Criminal Record Check shall be repeated every two years on all appropriate household members.**

***FBI Criminal Background Check* - Foster parents and all members of the foster home who are 18 and one-half years of age and older, excluding children in foster care, must also clear an FBI fingerprint-based Criminal Background Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the FBI Criminal Record Check must be initiated to ensure results are received by the time that household member reaches 18-and-one-half years of age. The FBI Check does not need to be repeated.**

***Vehicle Safety Check* - DCFS will check the driving record (violation points) for each prospective foster parent and other applicable members of the household. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points a foster parent may be allowed.**

PRE-SERVICE TRAINING

Foster parents must also complete the Division's pre-service training curriculum which includes 27 hours of Pre-service training and three hours of DCFS orientation prior to placement of a child in their home. Central Registry and State Police Criminal Background checks must be cleared and the FBI Criminal Background Check must have been submitted before a prospective foster parent can begin pre-service training. Foster parents must also complete CPR and Standard First Aid Training and receive certification in both areas prior to placement of a child in their home.

HOME STUDY

The home study (a component of the overall home assessment) assists in determining if a family is ready, willing, and able to become a suitable and safe placement resource for a child. At least two home study visits must be conducted in person with the foster parent applicants, including at least one visit to the home. The evaluator shall interview each age-appropriate member of the household.

The home study must evaluate a family's dynamics including but not limited to, motivation for wanting to foster, household composition, housing, safety hazards, income and expenses, health, education, childcare arrangements or plans, child rearing practices, daily schedules, social history, family activities, and support systems, (for more information see PUB-04: Minimum Licensing Standards for Child Welfare Agencies). By learning more about these areas, the home study assists in ascertaining how members of a family function individually and as a unit, and, subsequently, helps inform the conclusions and recommendation as to whether a family should serve as a foster home.

To complete a successful home study, the Division uses the Structured Analysis Family Evaluation (SAFE). SAFE includes a series of interviews guided by questionnaires and then an evaluation using the SAFE Psychosocial Inventory and Desk Guide, which is summarized in the final home study report. The use of these tools ensures a common evaluation process and promotes uniformity in the home studies across the state.

If at any point throughout the home assessment process a prospective foster home is found to be out of compliance with a licensing standard or a DCFS policy, the non-compliance issue must be addressed. However, if the Resource Worker determines that the non-compliance issue would not endanger the safety or well-being of children placed in a home, an Alternative Compliance or DCFS Policy Waiver may be requested as appropriate,

particularly for relatives. An alternative compliance is a request for approval from the Child Welfare Agency Review Board to deviate from a minimum licensing standard. A policy waiver is a request to deviate from a DCFS policy or procedure. If the individual conducting the home study finds an area of non-compliance, he or she must notify the Resource Worker who should then take the appropriate steps as outlined in Appendix 8, to address the non-compliance issue.

The successful completion of all home assessment components as outlined above will allow the Division to assess the quality and capability of foster homes. The home assessment process will also assist prospective foster parents in determining if fostering is appropriate for them and, if so, prepare them for their new role.

PROCEDURE VII-C1: Background Check Processing

08/2013

If the prospective foster family did not attend an Information Meeting, the Resource Worker must provide the family with a Background Check Packet which includes:

A. FBI fingerprint card (if not using harvester)
B. CFS-316: Request for Child Maltreatment Central Registry Check
C. APS-0001: Authorization for Adult Maltreatment Central Registry
D. CFS-341: Certification of Absence of Criminal Record
E. CFS-342: State Police Criminal Record Check
F. CFS-419: Foster Family Support System Information
G. CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
H. VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
I. VSP-2: Authorization to Obtain Traffic Violation Record
J. Arkansas State Vehicle Safety Program Manual

The Resource Worker will:

A. Submit the signed CFS-593: DCFS Arkansas State Vehicle Safety Program, VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business, and VSP-2: Authorization to Obtain Traffic Violation Record to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each prospective foster parent, FFSS member, and applicable teenage driver.
    1) Copy the front and back of the driver's license.
    2) Document on the Provider Household Member Required Checks Information Screen.
    3) The county office must receive the results of the Arkansas State Vehicle Safety Program check before the family can be approved for training.
B. Submit the completed CFS-316: Request for Child Maltreatment Central Registry Check for each household member and FFSS member age 14 years and older, excluding children in foster care. The CFS-316: Request for Child Maltreatment Central Registry Check must be notarized. The Child Maltreatment Central Registry Check shall be repeated every two years.
    1) If applicable, a Child Maltreatment Central Registry Check should also be conducted on each household member and FFSS member age 14 years or older, in any state of residence in which they have lived for the past five years, and in their state of employment, if different, for reports of child maltreatment.
    2) Route each completed CFS-316: Request for Child Maltreatment Central Registry Check to the Central Registry Unit.
    3) Document on the Provider Household Member Required Checks Information Screen.
    4) File a copy of the results in the foster home record. The county office must receive the results of the Child Maltreatment Central Registry Check before the family can be approved for training.
C. Submit the completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services for each household member age 18 and one-half years and older, excluding children in foster care. The APS-0001: Authorization for Adult Maltreatment Central Registry must be notarized. The person must have no history of true abuse and/or neglect.

1) Route each completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services.
2) File a copy of the results in the foster home record. The county office must receive the results of the Adult Maltreatment Central Registry Check before the family can be approved for training.

D. Use CFS-341: Certification of Absence of Criminal Record to obtain written certification from the foster parents that any household member ages 10-17 does not have a criminal record. File a copy in the foster home record.

E. Submit the completed CFS-342: State Police Criminal Record Check for each household member and FFSS member age 18-and-one-half years and older, excluding children in foster care. The CFS-342: State Police Criminal Record Check must be notarized. The State Police Criminal Record Check must be completed prior to requesting the FBI Criminal Background Check. The State Police Criminal Record Check shall be repeated every two years.
   1) Route each completed CFS-342: State Police Criminal Record Check to the Criminal Records Unit.
   2) Document on the Provider Household Member Required Checks Information Screen.
   3) File a copy of the results in the foster home record. The county office must receive the results of the Criminal Record Check before the family can be approved for training.

F. Process an FBI fingerprint-based Criminal Background Check for all foster parent applicants and all members of the prospective foster home who are 18 and one-half years of age and older, excluding children in foster care. The fingerprint-based FBI Criminal Background Check must be submitted prior to the family attending training; however, the results are not required before the family can attend training.
   There are two options for completing the FBI check:

G. Electronic Fingerprint Scanning
   a. Foster parent applicants do NOT need to fill out an FBI fingerprint card, as a request for electronic scanning will be done via CFS-342: State Police Criminal Record Check.
   b. The Resource Worker will forward the completed CFS-342: State Police Criminal Record Check to the Criminal Records Unit.
   c. The Criminal Records Unit will use the CFS-342: State Police Criminal Record Check to get a transaction number from the State Police.
   d. The Criminal Records Unit will forward the transaction number to the Resource Worker.
   e. The Resource Worker will forward the transaction number to the applicants.
   f. Applicants must go to an approved Electronic Harvester to have fingerprints scanned. Check with the Resource Worker for the closest location.
   g. Applicants must pay the electronic harvester fee. If applicants are approved and opened as a foster home, they may request reimbursement. A receipt for the harvester fees and a DHS-1914 must be submitted to the Resource Worker's local financial coordinator for reimbursement processing.
   h. The Resource Worker will document the results on the Provider Household Member Required Checks Information Screen and file a copy of the results in the foster home record.

H. Ink Fingerprint
   a) Foster parent applicants will complete CFS-342: State Police Criminal Record Check and the FBI fingerprint card with good, unsmudged prints. Take care not to staple through the fingerprints on the FBI fingerprint card.
      i. If the prints are not readable, the family will have to re-submit. Foster parent applicants may not use an Electronic Harvester if they have already submitted ink fingerprints and the attempt was unsuccessful.
      ii. If a legible set of fingerprints cannot be obtained after a minimum of two attempts, a name-based FBI check will be conducted instead.
   b) The Resource Worker will forward the documents to the Criminal Records Unit.
   c) The Resource Worker will document the results on the Provider Household Member Required Checks Information Screen and file a copy of the results in the foster home record.

PROCEDURE VII-C2: In-Home Consultation Visit

08/2011

The Resource Worker will:

A. Within 5 working days after clearances on all required background checks have been received, (FBI checks must have been submitted but not completed) contact the prospective foster family to schedule an in-home consultation visit with them. The in-home consultation visit should take place within two weeks of the scheduling call.

B. During the in-home consultation visit:
   1) Provide all Information Meeting documents (aside from the Background Check Packet which should have already been completed) to the family if they have not yet attended an Information Meeting (see Procedure VII-B4). Families are encouraged to attend an Information Meeting but are not required to do so.
   2) Review and complete the CFS-446: In-Home Consultation Visit Report. The completed CFS-446: In-Home Consultation Visit Report will serve as the first formal step in the application process.
   3) Discuss the standards of approval for foster homes as outlined in PUB-22 and answer any questions the family may have.
   4) Inform the prospective foster family that they will not be approved until they meet minimum licensing standards, DCFS policy requirements, and any other qualifications deemed appropriate.
   5) Discuss training required prior to approval, including completion of CPR and Standard First Aid training and certification (for specific CPR and First Aid requirements, see PUB-30).
   6) Review the Arkansas State Vehicle Safety Program (ASVSP) with the family and have them complete the following forms, if they have not already done so:
      a) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers. Teenage drivers in the home will be subjected to the ASVSP and must be licensed if they will be allowed to transport children in foster care who are placed in the home. The result of the teenager's ASVSP report should not impact the decision to approve the home as long as the parents' ASVSP check is favorable. If teenager does not pass the ASVSP report, he or she will not be able to transport children in foster care.
      b) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
      c) VSP-2: Authorization to Obtain Traffic Violation Record
   7) If the Background Check Packet for the members of the Foster Family Support System has not been completed and processed, collect and begin processing the CFS-419: Foster Family Support System Information (one per FFSS member family) and each of the following documents for each appropriate member of each FFSS family (following Procedure VII-C1: Background Check Processing):
      a) CFS-316: Request for Child Maltreatment Central Registry Check
      b) CFS-342: State Police Criminal Record Check
      c) CFS-593: Arkansas State Vehicle Safety Program (ASVSP)
      d) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
      e) VSP-2: Authorization to Obtain Traffic Violation Record
   8) Provide the family with the following documents and review/explain as necessary:
      a) CFS-363: Foster Parent, Adoptive Parent or Applicant Smoking Certification.
      b) CFS-404: General Medical Report (one for each person residing in the household)
      c) CFS-409: Foster/Adoptive Family Preference Checklist
      d) CFS-455: Request/Consent for Health Department Services, if applicable. This form should only be utilized if the family uses a well to access drinking water or if the Resource Worker has other concerns related to the drinking water, sanitation, or general health/safety conditions of the home and/or its surroundings that require an inspection by the Health Department.
      e) CFS-480: Alternate Compliance of Water Supply Agreement, if applicable. If the family will use bottled water (and purified water for bathing if infants or children under the age of 5 will be placed in the home), this must be noted on the CFS-480: Alternate Compliance, signed by the foster parents, and updated annually. Neither a policy waiver nor an alternative compliance is required

to accompany CFS-480: Alternate Compliance if the agreement to use bottled water is noted on this form and signed by the foster parents.

f) CFS-484: Landlord Notification of Potential Tenant Foster Care Services
g) PUB-30: Foster Parent Handbook
h) SAFE Questionnaire I

9) Inform the family that three positive confidential references are required.
   a) Request that the family provide the names and addresses of three references.
   b) Mail the SAFE Reference Letter Templates and the SASE envelope (to either their area MidSOUTH Training Academy c/o Foster Parent Program or contract provider, as appropriate) to each of the references that the family provides. Include a brief cover letter that:
      i. Introduces the Resource Worker
      ii. Explains the reason for the SAFE Reference Templates
      iii. Instructs the reference to mail the completed SAFE Reference Templates using the envelope provided.
      iv. Informs the reference that they are not to share the completed SAFE Reference Letter with the prospective foster family.
   c) Inform the prospective foster family that the individual writing the reference letter must mail it directly to the agency listed on the stamped addressed envelope provided. The prospective foster family shall not view the reference letters.
10) Begin completing CFS-475-A: Initial Checklist for Foster/Adoptive Home Assessment.
11) Determine whether the family would be willing to serve as an informal respite home in addition to a regular foster home (see Policy VII-G: Alternate Care).
12) If the family is being opened as a provisional foster home, also:
   a) Complete the CFS-452: Provisional Foster Home Verification with the family.
   b) Provide a copy of the CFS-452: Provisional Foster Home Verification to the family and file the original in the foster home record.
   c) Complete the CFS-474: Provisional Foster Home Orientation Checklist with the family.
   d) Once all signatures are obtained, provide the family with a copy of CFS-474: Provisional Foster Home Orientation Checklist.
   e) File the original CFS-474: Provisional Foster Home Orientation Checklist in the foster home record.

Provisional foster parents are not required to complete CFS-409: Foster/Adoptive Family Preference Checklist. However, they must complete CFS-363, CFS-404, CFS-455 (if applicable), and CFS-480 (if applicable) prior to the end of the 6-month provisional period but not necessarily before the relative child is placed in their home.

The Area Director or designee will:

A. Sign the CFS-474: Provisional Foster Home Orientation Checklist.
B. Return the signed CFS-474 to the Resource Worker.

PROCEDURE VII-C3: Initiation of Pre-Service Training

In order to approve applicants for Pre-Service Training, within 10 working days of successfully completing the In-Home Consultation Visit (which must include the results of the cleared Child Maltreatment Central Registry Checks, Adult Maltreatment Central Registry Checks, and State Police Criminal Record Checks), the Resource Worker will:

A. Submit the signed and completed CFS-446: In Home Consultation Visit Report to the Area Director or designee with one of the following recommendations:
   1) Invite the applicant to attend Pre-Service Training, OR
   2) Do not invite the applicant to Pre-Service Training and provide an explanation.
B. If the Area Director approves the recommendation to send the applicant to Pre-Service Training:
   1) Complete the contact purpose of “In-Home Consultation/Approval for Training” in the Provider Contact Information Screen.
   2) Log receipt of the CFS-446 on the DCFS Foster/Adopt Home in CHRIS.
   3) Submit a copy of the following to the prospective foster parents and to MidSOUTH (unless one-on-one pre-service training has been arranged):

a) The CFS-446 approving the family to attend Pre-Service Training.
b) Cover letter to the prospective foster family that will:
   i. Inform the prospective foster parents of approval to attend Pre-Service Training.
   ii. Inform the prospective foster parents that the MidSOUTH trainer will contact them to schedule Pre-Service Training.

4) Select the "In-Home Consultation/Approval for Training Purpose" which you entered in the Provider Contact Information Screen. *It is important to select this checkbox prior to the family attending training in order to assist MidSOUTH with pre-service training. Once it is selected, the system will automatically notify MidSOUTH of approval status.*

C. When an applicant is NOT approved:
   1) Send letter to applicants who were not approved to attend Pre-Service Training.
   2) Forward a copy of the letter to the Area Director.
   3) Log notice of non-selection on the Provider Household Member Required Checks Information Screen.

D. Arrange and/or provide one-on-one pre-service training to the family if group training sessions are unavailable locally.

The Area Director or designee will:

A. Either approve or disapprove as appropriate the recommendation within five working days of receipt of the CFS-446 from the Resource Worker.
B. Return the signed CFS-446 to the Resource Worker.

PROCEDURE VII-C4: Pre-Service Training

09/2011

The prospective foster family will:

A. Complete a minimum of 27 hours of pre-service training and three hours of DCFS orientation (individually or in a group) prior to placement of a child. All make-up sessions shall also be completed in order for a family to fully complete pre-service training.
B. Complete CPR and Standard First Aid Training and receive certification in both areas.
C. Submit the completed SAFE Questionnaire I to their Pre-Service Trainer on the first day of training.
D. Submit the following completed forms to the Resource Worker before completing Pre-Service Training (do not submit to the Pre-Service Trainer):
   1) CFS-363: Foster Parent, Adoptive Parent or Applicant Smoking Certification. Note that if the foster home is designated as a smoking foster home, the Area Director will sign and submit the CFS-363 along with any supporting documentation (explaining why it would be in the child's best interest to be placed in a smoking foster home) to the Assistant Director of Community Services. No child in foster care will be placed in a smoking foster home without a policy waiver.
   2) CFS-404: General Medical Report (one for each member residing in the household)
   3) CFS-409: Foster/Adoptive Family Preference Checklist
   4) CFS-455: Request/Consent for Health Department Services, if applicable. This form should only be utilized if the family uses a well to access drinking water or if the Resource Worker has other concerns related to the drinking water, sanitation, or general health/safety conditions of the home and/or its surroundings that require an inspection by the Health Department.
   5) CFS-480: Alternate Compliance of Water Supply Agreement, if applicable.
   6) CFS-484: Landlord Notification of Potential Tenant Foster Care Services
E. Ensure that the individuals providing references have mailed their letters to the agency responsible for the home study before completing Pre-Service Training. Each person providing a reference should mail the reference letter directly to the appropriate MidSOUTH Training Academy (c/o Foster Parent Program) or the contract provider agency as appropriate using the pre-stamped, pre-addressed envelope provided (i.e., all reference letters shall remain confidential; prospective foster family shall not handle a completed reference letter).

The Resource Worker will:

A. Document the CPR Training and First Aid Training Effective and Expiration Dates in the Provider_Household Members/Requirements Tab in CHRIS.
B. File all completed forms in the foster family record (CFS-404; CFS-455, if applicable; CFS-480, if applicable; CFS-484, if applicable).
C. Enter prospective foster family preferences (based on their selections on CFS-409) in the Preferences Tab in the Provider Services/Admission Criteria Button.
D. Attend the last training module and as many other training modules as possible.
E. Hold the Area or County Orientation Session using the CFS-465: Foster Parent Orientation Checklist to guide the orientation session.

The Area Director or designee will:

A. Attend the Area or County Orientation Session whenever possible.

PROCEDURE VII-C5: Home Study

07/2011

The home study may be conducted by designated Division staff, by staff contracted through the MidSOUTH Training Academy or other contract providers, or by volunteers trained by designated DCFS staff. The evaluator will complete the home study in accordance with established SAFE protocols.

The individual conducting the home study will:

A. Conduct an initial face-to-face interview with the prospective foster parent(s) using the applicants' responses to SAFE Questionnaire I (to have been completed and submitted by the prospective foster parents by the first day of pre-service training) to guide the conversation.
B. Evaluate the first interview and note responses that will require further clarification and/or development.
C. Conduct a second face-to-face interview with the applicant(s).
D. During the second interview, provide SAFE Questionnaire II to the prospective foster parents who will complete this questionnaire in the presence of the home study evaluator. In the case of joint applicants, each applicant should complete and discuss their responses to the SAFE Questionnaire II with the home study evaluator separately, before holding another couple interview to discuss shared issues.
E. Evaluate the second interview and note responses that will require further clarification and/or development.
F. Conduct additional face-to-face interviews with the prospective foster parent(s) and/or other household members to further explore topics noted during the evaluation process.
G. Interview each household member separately who is 10 years of age or older. Observe younger children and interview if appropriate.
H. Review the 3 reference letters and ensure that all 3 letters are positive references.
I. Using information collected during the interviews and SAFE Reference Templates, along with the Desk Guide, complete the SAFE Psychosocial Inventory.
J. Within 45 working days of the family completing pre-service training, complete and submit the final SAFE Home Study Report to the Resource Worker for review and assessment.

The Resource Worker will:

A. Review the final SAFE Home Study Report and other assessment documents.
B. Based on the review, submit the recommendation to approve or deny the home to the Area Director or designee within 7 working days of receiving the final SAFE Home Study Report.
C. Document the Initial Home Study Completed Date on the Provider Service Details Screen in CHRIS.

D. Notify the applicant in writing if a determination to approve or deny the home based on the final SAFE Home Study Report and other assessment documents cannot be completed within 60 working days of the family completing pre-service training and explain the reason.
E. Provide a copy of the final SAFE Home Study Report to the family regardless of approval or denial.

The Area Director or designee will:

A. Review and assess the completed final SAFE Home Study Report and other assessment documents as well as the Resource Worker's recommendation to approve or deny.
B. Approve or deny the home within 7 working days of receipt of all final documents from the Resource Worker.

PROCEDURE VII-C6: Final Approval of Foster Homes

08/2011

The Resource Worker will:

A. Ensure the CFS-475-A: Initial Checklist for Foster/Adoptive Home Assessment is completed, that any safeguard measures deemed necessary have been implemented, and that any requested alternative compliances or policy waivers have been approved.
B. Invite the County Supervisor to accompany them on the final face-to-face visit with the prospective foster parents and final visual inspection of the home.
C. Conduct a final face-to-face visit with the prospective foster parents and a final visual inspection of the home (preferably with the County Supervisor).
D. Provide the family with an Approval Packet.
E. Review the Approval Packet content with the foster parents. The Approval Packet will include:
    1) Stamped envelopes addressed to the appropriate county office
    2) Examples of the completion of travel documentation that must be submitted monthly
    3) Copy of the Code of Ethics
    4) Copy of the Arkansas Practice Model
    5) CFS-381: Training Record Log
    6) Medication Log
    7) Child Inventory Log
    8) Fire Drill Log
    9) CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic Visits
    10) After hours contact sheet
    11) Foster Care Board Sheet
    12) Appropriate Foster Parent Association contact information
F. Complete the CFS-462: Initial Foster Family Agreement with the family.
G. File the CFS-462: Initial Foster Family Agreement in the foster home record.
H. Enter a disposition as to the approval/denial of the foster home within three working days of receipt of the Area Director's approval or denial.
    1) If the recommendation is approval, then:
        a) If the orientation has not already taken place, schedule a date for a County or Area Orientation Session for newly approved foster parents.
        b) Complete Provider Alternate Care Screen in CHRIS if family has determined they are willing to serve as an Informal Respite Home and, using CFS-419, enter all appropriate identified Foster Family Support System Individual Members including information on their cleared background checks (see POLICY VII-G: Alternate Care).
        c) Enter Begin Date on Availability Status on Provider Service Status Screen and Request Approval on Provider Service Detail Screen in CHRIS.
        d) If the family has indicated interest and been approved to foster children/youth with specific characteristics, identify the appropriate Disability Willing to Accept selection under the Preferences Tab in the Provider Services/Admission Criteria Button.

e) File the approval letter in the foster home record.

2) If the recommendation is denial, then:
   a) Send a "Letter of Denial" to the applicants who were not approved. See POLICY VII-D: Denial of a Foster Home and document in Provider Contact Information Screen in CHRIS.
   b) End Date the Foster Family Service on the Provider Services Tab selecting the appropriate Reason for End Date.
   c) Specify why the home was denied in the comment box on the Provider Services Tab.

The County Supervisor or designee is encouraged to:

A. Participate in the final face-to-face visit with the prospective foster parents and final visual inspection of the home with the Resource Worker.

The Area Director or designee will:

A. If appropriate, approve the Resource Worker's Request for Approval in Provider Service Detail Screen in CHRIS to finalize the approval of the Foster Family. Upon approval, CHRIS automatically provides the Foster Family Approval Letter to be printed, mailed, and filed in the foster home record.

The Resource Worker will:

A. Develop and maintain a record for each foster home that contains all information and documentation as required by Minimum Licensing Standards and DCFS policy. The foster home record order will include the items listed in Appendix 4: Foster Home Record Order.

POLICY VII-D: DENIAL OF A FOSTER HOME

01/2011

If at any point during the home assessment the Division determines that an applicant does not meet the standards or any other criteria of a quality foster home, DCFS will deny approval of the home.

PROCEDURE VII-D1: Denial as a Result of the In-Home Consultation Visit

01/2011

The Resource Worker will:

A. Inform the family of their non-compliance with any identified standard or policy and determine if the family is willing and/or able to implement a safeguard measure in a timely manner in order to achieve compliance. The family cannot be approved to open as a foster home until the safeguard measure is implemented.
B. If the family chooses not to address compliance issues or, despite trying, fails to achieve compliance, share the non-compliance with the family and document it on the CFS-446: In-Home Consultation Visit Report with all signatures. The family will sign the In-Home Consultation acknowledging non-compliance.
C. Recommend non-approval for training if the family cannot comply with all approval standards, including if they receive a negative result from the Vehicle Safety Program.
D. End Date the Foster Family Service on the Provider Services Tab selecting the appropriate Reason for End Date in CHRIS.
E. Specify why the home was closed in the comment box on the Provider Services Tab.

The Area Director or designee will:

A. If a family fails to address non-compliance issues, disapprove the family and provide them with a copy of the CFS-446: In-Home Consultation Visit Report with all signatures.

PROCEDURE VII-D2: Denial as a Result of Negative Results of a Background Check

01/2011

The Area Director or designee will:

A. Share the results with the family and inform them of their ineligibility to attend training.
B. Send a “Letter of Denial” to the family and document in Provider Contact Information Screen in CHRIS.
C. Document the results of the background check in the Provider Household Member/Requirements Tab and End Date the Foster Family Service on the Provider Service Tab selecting the appropriate Reason for End Date in CHRIS.
D. Specify why the home was closed in the comment box on the Provider Services Tab

PROCEDURE VII-D3: Denial as a Result of the Home Assessment

01/2011

The Area Director or designee will:

A. Send a “Letter of Denial” to all applicants who are not approved and document in Provider Contact Information Screen in CHRIS.
B. End Date the Foster Family Service on the Provider Service Tab selecting the appropriate Reason for End Date in CHRIS.
C. Specify why the home was closed in the comment box on the Provider Services Tab.

POLICY VII-E: REEVALUATION OF THE FOSTER HOME

08/2011

In order to ensure continued quality of all DCFS foster homes, the Division shall reevaluate each foster home's ability to care for children at least annually and whenever there is a major life change. Major life changes include:

- **Death or serious illness among the members of the foster family.**
- **Marriage, separation, or divorce. (See more detailed information concerning foster parents who plan to marry or divorce in procedures below.)**
- **Loss of or change in employment.**
- **Change in residence.**
- **Suspected child maltreatment of any child in the foster home.**
- **The addition of family members (e.g. birth, adoption, aging relative moving in).**

The completion and approval of all foster home reevaluations must be documented in CHRIS. If a foster home reevaluation is not completed and documented annually in CHRIS, any IV-E eligible child placed in the home will lose IV-E eligible claimability until the reevaluation of the family is completed and documented.

In addition to continuing to meet all Minimum Licensing Standards and DCFS Policy requirements as they relate to foster homes, foster parents must also complete a minimum of 15 hours of Division-sponsored or Division-approved in-service training annually after the first year of service. No more than 5 hours of videos, TV programs, books, or online courses for each foster parent will be accepted per year and must have prior approval by the Area Director or designee. Foster parents must also maintain current CPR certification and Standard First Aid training. Maintenance of CPR certification and First Aid training is in addition to the fifteen hours of continuing education and, therefore, cannot be counted as part of the annual 15 hour continuing education requirement.

Foster parents must complete their annual in-service training requirements before any additional children in care are placed in their home, unless an exception is granted. Foster parents who do not meet the in-service training requirements will be notified that they must complete the in-service training requirements within 60 days. No additional children will be placed in the home during this 60-day period.

If the foster parents' annual in-service training requirements are more than 60 calendar days overdue, then a reevaluation will also be required unless an extension to meet in-service training requirements has been granted by the Area Director. Extensions should be the exception and not the rule.

PROCEDURE VII-E1: Quarterly Monitoring of Foster Home

08/2011

The Resource Worker will:

A. Monitor approved foster homes through quarterly visits to ensure compliance with Minimum Licensing and Division standards.
B. Complete 475-B: Quarterly Monitoring Checklist for Foster Home to document completion of each quarterly monitoring visit.
C. File each completed 475-B in the foster home record and document in CHRIS.

PROCEDURE VII-E2: Foster Home Reevaluations

08/2011

The Resource Worker will:

A. Conduct a reevaluation of the foster home annually and in the case of any major life change.
B. Complete SAFE Update/Reevaluation Tools, CFS-451: Foster Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Foster/Pre-Adoptive Home. The completion and approval of all foster home reevaluations must be documented in CHRIS.
C. Complete/update the Individual Training Needs Assessment (ITNA) with the foster parent.
D. Submit the completed ITNA to MidSOUTH within 45 working days of completing the reevaluation.
E. Document in the foster home record that the foster parent(s) have maintained current certification in both CPR and Standard First Aid and document in the Provider Household Members/Requirement Tab in CHRIS.
F. Update any expired State Police Criminal Record Checks and Central Registry Checks for each member of the household or members of the FFSS and document in the Provider Household Members/Requirement Tab in CHRIS.
G. Enter the foster parents' hours of in-service training on the Training Screen in CHRIS.
H. Request an exception for any foster parent whose annual in-service training hours are 60 calendar days overdue, if applicable.
I. Submit documentation with recommendation to approve or disapprove the home to the Area Director or Designee.
J. Complete the Provider Reevaluation Screen in CHRIS and Request Approval for Area Director's review and approval.

The Area Director will:

A. Review the SAFE Update/Reevaluation Tools, CFS-451: Foster Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Foster/Pre-Adoptive Home and Resource Worker recommendation to approve or deny the home.
B. Approve the Resource Worker's Request for Approval on the Provider Reevaluation Screen in CHRIS.

When an exception to the in-service training requirements is requested, the Area Director will:

A. Receive the request for extension to in-service training requirements.
B. Review the quality of care provided by the foster family and the reasons for overdue training.
C. Determine whether to grant an exception to the in-service training requirement for up to 60 calendar days.

PROCEDURE VII-E3: Single Foster Parents Who Plan to Marry

08/2011

When a single foster parent plans to marry (or otherwise move in with/live together with a partner) and wishes to continue providing care to children in foster care, the Resource Worker will:

A. Conduct a reevaluation using the SAFE Update/Reevaluation Tools, CFS-451: Foster Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Foster/Pre-Adoptive Home. This is to ensure the foster home will maintain compliance and quality with the inclusion of the new spouse/partner in the home.

The future spouse/partner will be considered an applicant seeking approval. He or she must complete and submit the following to the Resource Worker:

A. Vehicle Safety Program documents
    1) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
    2) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
    3) VSP-2: Authorization to Obtain Traffic Violation Record
B. Background check documents
    1) CFS-316: Request for Child Maltreatment Central Registry Check

2) APS-0001: Authorization for Adult Maltreatment Central Registry
3) CFS-342: State Police Criminal Record Check
4) FBI fingerprint card (This is not needed if applicant is completing FBI fingerprint check via Electronic Harvester.).
5) Complete the Required Checks Tab on the Provider Household Member Screen in CHRIS.

The future spouse/partner must also complete pre-service training and foster parent orientation. The foster parent and fiancé(e)/partner should be informed that the reevaluation will have to be completed before the fiancé(e)/partner can take on the role of foster parent and reside with the children in the home. If the future spouse/partner does not clear any of the background checks or does not complete pre-service training before moving into the home, the home must be closed.

PROCEDURE VII-E4: Two Parent Homes that Plan to Divorce/Separate

08/2011

When approved foster parents, who currently have children placed in their home, plan to divorce or separate, the Resource Worker will:

A. Conduct a reevaluation on the foster parent who has elected to continue the role of care provider using the SAFE Update/Reevaluation Tools, CFS-451: Foster Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Foster/Pre-Adoptive Home.
B. Determine if the foster parent still meets all other licensing standards.
   1) If the home continues to comply with all standards, an alternative compliance is not needed.
   2) If the home is out of compliance or does not meet other DCFS policies designed to ensure the quality of the home, determine if a corrective action plan could bring the home into full compliance and/or maintain the quality of the home.
      a) If the foster parent agrees to participate in the corrective action plan, the home may remain open and he or she may continue caring for the child(ren) currently placed in the home.
      b) The corrective action plan must be completed successfully within 60 days.
      c) If a corrective action plan is not feasible, the case may be referred for alternative compliance or a policy waiver request.
C. End Date the Household Member who is no longer in the home in the Household Information Tab of the Provider Household Members Screen in CHRIS.
D. If both individuals wish to continue as foster parents, a new Provider Screen must be initiated for the parent who will be residing at a new address.

POLICY VII-F: FOSTER HOME REOPENING

01/2011

In order to secure the best placement for each child in foster care, the Division seeks to maintain a large pool of quality foster homes. For this reason, the Division will consider reopening foster homes when situations arise where foster parents who previously self-elected to close their home and/or whose home was closed by the Division would like to reopen. Requirements vary depending on how long a foster home has been closed.

PROCEDURE VII-F1: Reopening a Foster Home That Has Been Closed Less Than One Year

01/2011

For former foster homes that have been closed less than a year and express interest in reopening, the Resource Worker shall:

A. Complete new background checks (i.e., Arkansas Child Maltreatment Central Registry Check, Arkansas Adult Maltreatment Central Registry Check, Arkansas State Police Record Check, FBI Background Check, Vehicle Safety Checks) on all appropriate members of the household regardless of whether previous background checks are still current.
B. Conduct a reevaluation of the prospective home as an annual reevaluation of any standing foster home would be completed to determine if the prospective foster home would be still be an appropriate placement for a child in care.

PROCEDURE VII-F2: Reopening a Foster Home That Has Been Closed More Than One Year but Less Than Two Years

08/2011

For former foster homes that have been closed for more than one year but less than two years and express interest in reopening, the Resource Worker shall:

A. Follow the process outlined in POLICY VII-C: FOSTER HOME ASSESSMENT PROCESS and Procedures VII-C1: Background Check Processing, VII-C2: In-Home Consultation Visit, VII-C5: Home Study, and VII-6: Final Approval of Foster Homes.
B. Ensure that the foster parents have earned 15 hours of continuing education for the year that their home was closed. Time spent during the In-Home Consultation Visit and updating foster parents on new DCFS policy may be counted toward the 15 continuing education hours. Document number of hours spent on the In-Home Consultation Visit and policy updates on the CFS-446: In Home Consultation Visit Report.
C. If, based on the Resource Worker's home assessment, the family does not need to complete pre-service training, inform the family that while they are not required to attend pre-service training, they have the option to do so.
D. If the family elects to attend pre-service training, follow the process outlined in Procedures VII-C3: Initiation of Pre-Service Training and VII-C4: Pre-Service Training.

PROCEDURE VII-F3: Reopening a Foster Home That Has Been Closed for More Than Two Years

08/2011

For former foster homes that have been closed for more than two years and express interest in reopening, the Resource Worker shall:

A. Follow all policies and procedures outlined in POLICY VII: DEVELOPMENT OF FOSTER HOMES. Pre-service training is required for all former foster homes that have been closed for more than two years.

POLICY VII-G: ALTERNATE CARE FOR CHILDREN IN OUT-OF- HOME PLACEMENT

10/2015

Alternate care for children in out-of-home placement may be used to provide assistance to foster parents when circumstances requiring supervision by an appropriate adult other than the foster parents exist. The Division also promotes the use of certain types of alternate care (e.g., normal age appropriate activities, interaction with a Foster Family Support System) among children and youth as a way to foster normalcy in the lives of children and youth in out-of-home placements.

There are five categories of alternate care:

A. Normal Age Appropriate Activities – Children in all out-of-home placement types will be encouraged to participate in extracurricular, enrichment, cultural, and/or social activities that are age and developmentally appropriate for a particular child. Age and developmentally appropriate activities are those that are generally accepted as suitable for children of the same chronological age and that are determined to be developmentally appropriate for a child, based his or her cognitive, emotional, physical, and behavioral capacities. Examples of normal age and developmentally appropriate activities include, but are not limited to, overnight visits with friends, school field trips, school sports or other sport leagues, faith-based activities, and short-term summer camps.

Foster parents, contract placement providers, and any private provider with whom the Division maintains a Memorandum of Understanding (MOU) will uphold the reasonable and prudent parent standard in regards to children participating in age and developmentally appropriate activities. The reasonable and prudent parent standard requires foster parents and other out-of-home placement providers to exercise careful and sensible consideration when determining whether an activity for a particular child will not only encourage the emotional and developmental growth of the child, but also maintain the health, safety, and best interests of the child.

All contract placement providers as well as any private provider with whom the Division maintains an MOU will establish an on-site official who is authorized to apply the reasonable and prudent parent standard to ensure appropriate caregiver liability when approving an activity for a child in an out-of-home placement.

A caregiver is not liable for harm caused to a child who participates in an activity approved by the caregiver, provided the caregiver has acted in accordance with the reasonable and prudent parent standard. This paragraph may not be interpreted as removing or limiting any existing liability protection afforded by law.

The Division will provide information and skill-based training to foster parents, contract placement providers, and private providers with whom the Division maintains an MOU regarding how to apply the reasonable and prudent parent standard for the participation of a child in age and developmentally appropriate activities. This training will include sharing knowledge and skill-based applications relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child.

Foster parents, contract placement providers, and private providers will notify the child's FSW if the child will spend more than 24 continuous hours outside the approved placement when participating in said activities.

B. Child Care – Child care may be routinely provided as a part of an out-of-home placement case. Child care providers must be on the voucher system and licensed by The Division of Child Care and Early

Childhood Education or on the Voluntary Child Care Registry. Every attempt should be made to place children in care in a quality child care setting.

Child care for children may also be provided as a part of an out-of-home placement case to provide assistance to foster parents for non-routine circumstances that relate to the retention and/or support of the foster home such as foster parent training. Child care provided for such purposes may be reimbursed by the Division.

C. Babysitting – Babysitters may be used to provide occasional care for children in the foster home for no more than eight continuous hours at one time. Foster parents shall exercise careful consideration when evaluating the character and competence of any individual asked to babysit. Foster parents may reimburse the babysitter if they choose to do so. The Division will not reimburse for baby-sitting services. Babysitters shall not transport children. Background checks are not required.

D. Foster Family Support System – The Foster Family Support System (FFSS) may be comprised of up to three other households identified by the foster family. FFSS members may provide care for children when the foster parent is unable to do so on the occasion of anticipated or unanticipated events.

Foster parents shall exercise careful consideration when evaluating the character and competence of any household asked to serve as an FFSS member. FFSS members must be at least 21 years of age. There is not a standard maximum age limit for FFSS members, but FFSS members must be physically, mentally, and emotionally capable of caring for children for up to 72 hours. Foster parents may reimburse an FFSS member if they choose to do so. The Division will not reimburse FFSS members.

Members of a Foster Family Support System may transport children and care for children in the foster home or in the home of the FFSS member. However, an FFSS member shall not provide care for more than 72 continuous hours at one time regardless of the location in which care is provided and/or regardless of which FFSS member is providing care. No extensions may be granted for FFSS care of a child. The FSW shall be notified when an FFSS member will provide care for more than 24 continuous hours. FFSS members taking children out-of-state for overnight trips are prohibited.
The Foster Family Support System shall not be used in place of respite care or as an out-of-home placement. The number of children placed in an FFSS member household must meet all Minimum Licensing and DCFS Policy requirements.

All prospective FFSS members must be cleared through the Child Maltreatment Central Registry and a State Police Criminal Record Check. The Division will request any other state where the prospective FFSS member has resided in the preceding five years to check its child abuse and neglect registry. The Division will provide documentation in the case record that the Child Maltreatment Central Registry and State Criminal Record Checks were received on the prospective FFSS member.
Documentation of at least one visual inspection of the home for evaluation purposes is required of all prospective FFSS members.

The Division will check the driving record (violation points) for each potential FFSS member. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points an FFSS member foster parent may be allowed.

Documentation of at least one visual inspection of the home for evaluation purposes is required of all prospective FFSS members.

E. Respite Care – When a Foster Family Support System member is not available to provide needed care on a short-term basis, respite care may be utilized in order to temporarily relieve the foster family of the ongoing responsibilities and stresses of care. There are two types of respite care:

1) Informal Respite – An approved DCFS foster home that can provide temporary care when the Foster Family Support System is unable to assist or for situations in which children will be outside of the foster home for more than 72 continuous hours. An informal respite home may provide care for no more than seven continuous days at one time. Periods of respite care in an informal respite home lasting longer than seven consecutive days require approval from the Area Director or designee.
If an Area Director approved extension exceeds fourteen continuous days, the regular foster parents' board payment will be affected. If the child has stayed in any combination of FFSS or informal respite homes (i.e., outside of the regular foster home placement, the total amount of days within those alternate care types cannot exceed 14 consecutive days as board payment may be affected.

A stay in an informal respite home must be documented in CHRIS, but not as a separate/new placement. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

Foster parents may reimburse an informal respite provider if they choose to do so. The Division will not reimburse an informal respite provider. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

2) Formal Respite – A DCFS contract provider who supplies short-term respite care particularly when a child's current placement is at risk of disruption and/or respite is needed to prevent a residential, acute psychiatric or similar placement. Formal respite care should be provided in accordance with a family-driven, youth-guided respite plan and in coordination with a child's behavioral health treatment plan (if applicable).

Formal respite care shall be provided for no more than 7 days per 3-month period. A stay with a Formal Respite Care provider must be documented in CHRIS, but not as a separate/new placement (provided it does not exceed the more than 7 days per 3-month period).
Longer periods of formal respite care require approval from the Prevention & Support Manager. If an approved extension exceeds 14 consecutive days, the regular foster parents' board payment will be affected. If the child has stayed in any combination of FFSS or informal respite homes before a formal respite stay, the total amount of days within those alternate care types (i.e., outside the regular foster home placement) cannot exceed 14 consecutive days as board payment may be affected.

PROCEDURE VII-G1: Normal Age Appropriate Activities

10/2015

The foster family or authorized official of a contract placement provider will:

A. Use the reasonable and prudent parent standard in determining whether to give permission for a child living in an out-of-home placement to participate in extracurricular, enrichment, cultural, or social normal age appropriate activities by considering:

1) The child's chronological age, maturity level, physical and behavioral capacities, and cognitive and emotional developmental levels;
2) The potential risk factors and the appropriateness of the activity;
3) The best interest of the child, based on information known by the caregiver;
4) The importance of encouraging the child's emotional and developmental growth;
5) The importance of providing the child with the most family-like living experience possible;
6) The behavioral history of the child and the child's ability to safely participate in the proposed activity.

B. Notify the Family Service Worker if the child will participate in an age appropriate activity that will cause the child to be outside of the approved placement for more than twenty-four continuous hours. The foster family will provide as much advance notice as possible particularly for normal age appropriate activities that require the child to be outside the approved placement for several days such as summer camps.

C. Provide the Family Service Worker with:
1) Activity location address
2) Contact name at identified location
3) Contact phone number
4) Anticipated dates for which the child will stay at this location
5) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).

The Family Service Worker will:

A. Assess the appropriateness of the proposed activity when notified by the foster family or the authorized official of a contract placement provider that the child in care will be outside the approved placement for more than 24 continuous hours in order to participate in said activity.
1) If the proposed activity is determined to be appropriate:
a) Select the Alternate Care button on the Foster Children Screen in CHRIS.
b) Complete the Alternate Care Screen.
i. If the child is already participating in the activity, this screen should be completed immediately.
ii. If the child has not yet begun participating in the activity, this screen should be completed prior to the start of the activity.
c) Enter the actual end date of the activity on the Alternate Care Screen when the foster family or other placement provider confirms with the Family Service Worker that the child has returned to the foster home.
2) If there are concerns regarding the appropriateness of the proposed activity:
a) Notify the FSW Supervisor.
b) If the FSW Supervisor and Family Service Worker determine that the proposed activity is inappropriate, notify the foster family or authorized official of a contract placement provider that the child shall not participate in the said activity.
c) Document notification in the Contact Screen.

The FSW Supervisor will:

A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker to determine if proposed activity is appropriate.

B. Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the FSW Supervisor.

PROCEDURE VII-G2: Babysitting

The Family Service Worker will:

A. Notify the County Supervisor if he or she has cause to believe that babysitting services are being used inappropriately, excessively and/or if the Family Service Worker has concerns about the character or competence of the individual(s) providing baby-sitting services.
B. Call a meeting with the foster family, if deemed appropriate by the Supervisor, to clarify the appropriate use of babysitting services.
C. Document the meeting with the foster family in the Contacts screen.

The County Supervisor will:

A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker to determine if a meeting with the foster family or another action is needed to ensure the appropriate use of babysitting services.
B. Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the Supervisor.

PROCEDURE VII-G3 Child Care for Children in Temporary Out-of-Home Placement

For routine child care services, the Family Service Worker will:

A. Complete the Child Care Referral Request Screen.
B. Authorize services for a maximum of three months.
C. Make verbal requests to the County Supervisor for approval in an emergency, followed by a completed automated request within five working days.
D. Initiate renewals no later than the first day of the last month of the eligibility period.
E. Notify the child care center in writing 10 business days prior to last day child will attend if the child will no longer be attending.
F. Complete a new Child Care Referral Request if the child leaves Foster Care and enters Protective Services and child care is to continue.
G. Complete a new Child Care Referral Request if the child has been part of a Protective Services case and enters Foster Care and Child Care is to continue.

If the child leaves the foster care or protective services program, CHRIS will automatically notify the child care system.

The County Supervisor will:

A. Approve the Child Care Referral Request, which will then be sent automatically to Central Office for review and approval.

For non-routine child care services (e.g. when the foster parents are obtaining foster parent training), the Family Service Worker will:

A. Assist foster parents to obtain childcare. This transportation is payable via DHS-1914. All other requests must receive prior approval from the Area Director.

PROCEDURE VII-G4: Foster Family Support System for Children in Out-of-Home Placement

The Family Resource Worker will:

A. Per Procedure VII-C1, collect and process the CFS-419: Foster Family Support System Information (one per FFSS member household) and for each appropriate member of each FFSS family:
   1) CFS-316: Request for Child Maltreatment Central Registry Check
   2) CFS-342: State Police Criminal Record Check
   3) CFS-593: Arkansas State Vehicle Safety Program (ASVSP)
   4) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
   5) VSP-2: Authorization to Obtain Traffic Violation Record
B. Complete and document visual inspection of the FFSS home.
C. Select the Support System Button on the Provider Screen
D. Complete the Foster Family Support System Individual Member Tab and Required Checks Tab for all appropriate members of the Foster Family Support System.
E. Update this information as necessary following each annual reevaluation.

The Foster Family will:

A. Notify the Family Service Worker each time the child in care will stay with a member of the Foster Family Support System for more than 24 continuous hours and indicate:
   1) With which member of the Foster Family Support System the child will be staying; and,
   2) The dates that the child will be with the identified member of the Foster Family Support System.
   3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).

The Family Service Worker will:

A. Select the Alternate Care Button on the child's current placement screen each time a child stays with a member of the Foster Family Support System for more the 24 continuous hours.
B. Complete the Alternate Care Screen.
C. Enter actual end date of stay with FFSS on the Alternate Care screen when the child returns to the regular foster family.

PROCEDURE VII-G5: Respite for Children in Out-of-Home Placement

The foster family will:

A. Notify the Family Service Worker in advance of each time the child in care will stay with an informal respite home and indicate:
   1) With which informal respite home the child will stay; and,
   2) The dates that the child will be with the identified informal respite home.
   3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).
B. Request approval from the Family Service Worker for informal respite home stays longer than seven consecutive days.
C. Notify the Family Service Worker immediately if the child is in need of formal respite care in order to prevent a child's current placement from disrupting and/or to prevent a residential, Division of Youth Services (DYS), juvenile detention center, acute psychiatric, or similar placement.

The Family Service Worker will:

A. For informal respite care:

1) Select the Alternate Care Button on the Foster Children Screen each time a child stays with an informal respite home for more than 24 continuous hours.
2) Complete the Alternate Care Screen.
3) Update the Alternate Care Screen with the actual end date when the child returns to the regular foster family.
4) Request extension approval for stays in an informal respite home longer than seven consecutive days from the Area Director through CHRIS.
5) Notify the foster family as to whether a request for the child's placement in an informal respite home for longer than seven consecutive days is approved or denied.
6) Complete Alternate Care Screen accordingly.

B. For formal respite care:
1) Contact the financial coordinator to request formal respite placement for up to seven (7) days.
2) If a formal respite placement is authorized and available, make necessary arrangements with the formal respite care provider (however, please note the referral form for the formal respite provider must be signed by a DCFS County Supervisor, Financial Coordinator, Area Director, or Central Office Staff) and the regular foster family.
3) Select the Alternate Care Button on the Foster Children Screen each time a child stays with a formal respite placement.
4) Complete the Alternate Care Screen.
5) Update the Alternate Care Screen with the actual end date when the child returns to the regular foster family.
6) If an extension is needed beyond seven (7) days, consult with Area Director as to whether it is in the child's best interest to request an extended stay in formal respite care from the Prevention & Support Manager in Central Office.
7) If the request for an extended stay in formal respite care is deemed in the child's best interest, request extension approval from Prevention & Support Manager in Central Office.
8) Notify the foster family and financial coordinator as to whether a request for the child's placement in a formal respite placement for longer than seven (7) days is approved or denied.

The Financial Coordinator will:
A. Contact the appropriate provider to assess formal respite availability for up to seven (7) days.
B. If formal respite is available, notify the Family Service Worker and encumber in PIE/CFM.
C. If formal respite is needed for more than seven (7) days, encumber in PIE/CFM once approval from the Prevention & Support Manager in Central Office is granted.

The Area Director will:
A. Consult with the Family Service Worker as to whether an extended stay request in an informal respite home (more than 7 consecutive days at one time) or formal respite placement (more than 7 consecutive days per three-month period) is in the child's best interest.

The Prevention and Support Manager will:
A. Consult with the Family Service Worker and Area Director as to whether formal respite care is appropriate for more than seven (7) days.
B. Approve or deny accordingly.
C. Notify the Family Service Worker or the Financial Coordinator of the decision to approve or deny.

POLICY VII-H: PROVIDING INFORMATION TO FOSTER PARENTS

04/2018

Foster parents will be considered as team members working with other child welfare professionals for the family. Complete information, such as a child's health and education records, reasons for entering care, siblings, and probable length of placement, will be provided to foster parents at the time of placement. Additional information, including, but not limited to, a complete copy of the Child and Adolescent Needs and Strengths (CANS) assessment and complete copy of the case plan for each child placed in the home, will be shared promptly with the foster parents. Foster parents are also allowed to receive a copy of substantiated child maltreatment report for the child in their care.

The child's Social Security number may be given to the foster parents, only if the foster parent must have the number to obtain services, care, or treatment for the child (e.g., to enroll the child in school or to obtain medical treatment when treatment is needed for a child who is not Medicaid eligible). The foster parent must keep the child's Social Security number confidential and use the Social Security number only for allowable purposes.

Foster parents, pre-adoptive parents, and relative caregivers have the right to be heard in any proceeding held with respect to a child in their care. Foster parents will not be made a party to any such proceeding while reunification remains the court ordered goal or solely on the basis that such persons are entitled to notice and the opportunity to be heard.

PROCEDURE VII-H1: Providing Information to Foster Parents

04/2018

The Family Service Worker will:

A. Provide foster parents with copies of the CFS-6010: Case Plan, CFS-368: Health Services Plan and CFS-6007: Placement Plan-Placement Plan Provider Information Report within five calendar days of completion or revision.
B. Provide the foster parent with the child's Social Security number, when it is required, to obtain services, care, or treatment for the child.
C. Review and update the child's health and education records and provide copies to the out-of-home care provider at the time of placement.
D. Provide any additional information, as it becomes available, such as a complete copy of the most recent CANS assessment and the child's case plan.
E. Submit the CFS-343: Notification of Court Appearance to foster parents within 10 calendar days of any review hearing to be held with respect to a child in their care. Send the CFS-343 through certified mail for all Permanency Planning Hearings.
F. Provide the foster parent with a copy of a substantiated child maltreatment report on the child in their care, if requested.

The foster parents will:

A. Maintain the information shared as confidential.
B. Use information contained in the case plan and other provided information to assist the child placed in the foster home in understanding the progress of the child's foster care case.

POLICY VII-I: DIVISION CONTACT WITH CHILDREN IN OUT-OF-HOME PLACEMENTS

01/2016

Regular, quality contact between the Division of Children and Family Services (DCFS) and a child in an out-of-home placement can be one source of vital constancy for the child. Consistent contact not only provides some stability in the child's life, but also allows the Division to ensure the child's safety and well-being. As such, DCFS will have regular visits and other forms of contact with children in out-of-home placements.

The child's Family Service Worker (FSW) will visit the child in his/her approved out-of-home placement at least weekly during the first month of placement and at least weekly in any new placement thereafter. Visits after the first month in care or in a new placement will occur at least monthly in the approved out-of-home placement. During visits in the out-of-home placement, the FSW will engage the age-appropriate child in a private conversation to better assess the quality of care being provided.

In the event the FSW is unable to conduct these regular visits in the out-of-home placement, another FSW or the FSW Supervisor may make the visits in the place of the FSW to ensure the safety and well-being of the child and meet the regular visit requirement. However, these exceptions will be limited. While DCFS support staff (e.g., Program Assistants) may also visit the child in the out-of-home placement to ensure various needs are met, the regular out-of-home placement visit requirement will not be considered met until an FSW or FSW Supervisor has conducted the regular out-of-home placement visit.

In addition to the visits in the child's out-of-home placement, the FSW will maintain weekly contact with the child through forums such as school, parent-child visits, during transportation to various appointments, family-centered staffings, court hearings, and/or via telephone or programs such as FaceTime and Skype. Additional contact each week with other Division staff such as Program Assistants or Division interns or volunteers via telephone, transports, etc. is appropriate, but will not replace the requirement for the child's FSW to maintain weekly contact with the child.

The purpose of these visits and other contact will be to:

- **A. Provide the child with accurate information about his/her case at an age and developmentally appropriate level**
- **B. Answer questions the child may have**
- **C. Engage the child and foster parents, as appropriate, in activities geared to accomplish case plan goals and to assure the child's needs are being met**
- **D. Assess the quality of the care being provided**
- **E. Determine and monitor, through conversation and/or observation, the child's safety and the extent to which the child's developmental, medical, intellectual, and emotional needs are being met**
- **F. Assess the child's adjustment to the out-of-home placement, foster parents, other persons in the home, and school**

PROCEDURE VII-I1: Supervision of Children in Out-of-Home Placement

01/2016

The Family Service Worker will:

- A. Regularly inform the child and placement provider when visits will take place (though unannounced visits are allowable when necessary).
  - 1) Keep all scheduled visit appointments or, if unable to do so, inform the child and/or provider about the cancellation and reschedule as soon as possible.

B. Document visits with the child in his/her out-of-home placement on the contact screen with the "Face to Face Placement Provider" selected as the type and "Foster Child Weekly/Monthly" selected as the purpose.
C. Document all other forms of contact with the child in CHRIS contact screens.
D. Speak with any PA, secondary FSW, intern, and/or volunteer who has interacted with the child to gather information regarding those interactions and/or review CHRIS contacts entered by other Division staff.
E. Conference with the FSW Supervisor about information collected during regular visits and other contact with the child.
F. Update the CANS and/or case plan as appropriate based on visits and other contact with the child.

The Family Service Worker Supervisor will:

A. Conference with the FSW regarding regular visits and other contact with the child.
B. Conduct visits with the child in the out-of-home placement if needed.

The Program Assistant will:

A. Share information gathered during their contact with children in out-of-home placements with the child's FSW and the PA's supervisor.
B. Document contacts with children in out-of-home placements in CHRIS.

POLICY VII-J: DIVISION CONTACT WITH BIOLOGICAL PARENTS, LEGAL CUSTODIANS, AND LEGAL GUARDIANS INVOLVED IN OUT-OF-HOME PLACEMENT CASES

01/2016

Regular communication and quality interaction between the Division of Children and Family Services (DCFS) and the biological parents, the legal custodian, or legal guardian from whom the child was removed (hereinafter to be referred to only as biological parents) throughout the life of an out-of-home services case are critical to sustaining parental engagement and providing appropriate support to help the family work toward achieving reunification.

Early engagement with biological parents whose children have been removed from the home is a first step to the overall success of the case. The family may often view the Division's involvement as an unwelcome intrusion. This perception may result in a wide of range of reactions from the family including, but not limited to, defensiveness, hostility, resistance, and ambivalence. Nonetheless, the Division must examine the underlying cause of the parents' behavior and try to empathize with the parents by striving to engage them in the assessment and case planning process from the beginning of the out-of-home placement case.

When a Family Service Worker (FSW) is assigned to an out-of-home placement case, he or she will conference with the investigator or on-call worker who removed the child from the home within 72 hours of case assignment. The goal of this conference is to gather all pertinent information the investigator may have regarding the family and reasons for removal. The FSW assigned to the out-of-home placement case will use this information, along with other relevant sources to include any past agency involvement with the family as documented in CHRIS, to begin completing the initial Child Adolescent Needs and Strengths (CANS) for the family and case plan (see Policy IV-A: Family Assessments and Policy IV-B: Services Case Plan and related procedures for more information).

Within five (5) days of the child's entry into the out-of-home placement, the FSW who is primary (i.e., the FSW investigator if not yet assigned to an FSW caseworker or the FSW foster care caseworker if the assignment has been made) will attempt to reach the biological parents by phone to schedule the first visit with the biological parents in their residence to update the biological parents on the status of the case at that point and begin the assessment and case planning process. FSWs are encouraged to make this visit as early during the five (5) days following removal as possible. Scheduled visits are preferred, but unannounced visits are acceptable as necessary. If the parents are not at their residence when the FSW attempts the initial visit, the primary FSW will continue to attempt a face-to-face meeting with the biological parents as soon as possible by trying to reach the parents by phone to schedule a visit and/or making unannounced visits to the home.

Following the initial face-to-face visit with the biological parents, the FSW will meet with the biological parent(s) at least weekly in the residence of the biological parent(s) during the first month the case is opened. Both announced and unannounced visits are appropriate depending on the dynamics of a particular case.

After the first month of the open case, the FSW and FSW Supervisor will determine whether the frequency of in-home visits with the biological parents will continue to be weekly or be adjusted to bi-weekly, or, in limited circumstances for cases progressing extremely well, monthly. During these visits, the FSW caseworker will:

- **A. Assess parents' progress on case plan services and goals.**
- **B. Assess parents' new or developing needs, strengths, and/or risks.**
- **C. Include parents in the ongoing assessment and case planning process.**
- **D. Respond to parents' questions and concerns.**

E. Provide support and guidance to parents as needed.

If in-home visits with the biological parents will be held on a bi-weekly or monthly basis, the Division will also use other forms of communication with the family to maintain weekly contact and update them on various aspects of their case and their children's progress as appropriate. Other forms of communication may include telephone calls, text, and email as well as contact with the family through transports and family-centered staffings.

Procedure VII-J1: Caseworker Contacts with Biological Parents

01/2016

The Family Service Worker will:

A. Conduct the first face-to-face visit with the biological within five (5) days of the child entering an out-of-home placement in order to:
   1) Introduce him or herself, if not already completed
   2) Ensure the parents understand the reason for removal
   3) Collect any information critical to their child's health and well-being not already given to the FSW investigator or on-call worker at the time of removal including but not limited to:
      a) Child's allergies
      b) Child's medications
      c) Child's school and/or other educational information
      d) Behavioral information regarding the child
      e) Child's likes and dislikes
      f) Support items for the child such as stuffed animals
      g) Names and contact information for potential relative and fictive kin placements
   4) Begin gathering information about the strengths and needs of the family to assist with the completion of the CANS and case plan.

B. As part of meeting due diligence in establishing in-person contact with the parent(s), complete as many of the following activities necessary in order to complete the first in home visit or any visits thereafter:
   1) Conduct the appropriate Division of County Operations (DCO) record checks to attempt to obtain a valid address for the parent(s).
   2) Ask the local, county, and state law enforcement agencies to check their records for information that may the parent(s).
   3) Ask relatives and friends of the parent(s) to provide information to help locate the parent(s).
   4) Contact the local post office, utility companies, and schools to request a check of their records.
   5) Conduct the Lexis Nexis search to attempt to locate the parent(s).
   6) Utilize CFS-155: Unable to Locate Checklist for additional efforts to locate the parent.

C. Document contacts with biological parent(s) in the case contact screen (workload/case/services/contacts) with the purpose of "Family Contact."

D. Update the CANS and/or case plan as appropriate based on parent visits and other contact.

POLICY VII-K: Child Maltreatment Allegations Concerning Out-of-Home Placements

01/2019

OVERVIEW

All child maltreatment allegations concerning any person in a foster home will be investigated in accordance with the Child Maltreatment Act § 12-18-602. As with all children whose interest becomes the concern of DCFS, the safety and welfare of all children in foster care will be paramount.

If there is an allegation of sexual abuse perpetrated by a child in foster care, a public defender will be assigned to the child.

If any child in foster care is the subject (alleged offender or alleged victim) of an allegation of child maltreatment, the Child Abuse Hotline will notify the appropriate DCFS and CACD Executive Staff as well as the Area Director for the DCFS service area in which the foster home named in the report is located. The DCFS Area Director will then ensure that the appropriate Division staff notify the child(ren)'s family, the primary and secondary Family Service Worker (FSW) for the child, as applicable, the Office of Chief Council (OCC) attorney, the child(ren)'s CASA, if applicable, and the child(ren)'s attorney ad litem. The attorneys ad litem for any other children placed in the home will be notified as well.

The Arkansas State Police Crimes Against Children Division (CACD) will conduct all child maltreatment investigations (Priority I and II) involving a foster parent or household member of a foster home excluding reports that meet Differential Response criteria involving a child in foster care that allegedly occurred prior to the child entering foster care.

However, when any household member of a foster home (to include foster parents, biological and adopted children of the foster parents, and children in foster care placed in the home) is the subject of a child maltreatment allegation, DCFS staff will also conduct an individualized evaluation to assess the safety of the child(ren) within 24 hours of the receipt of the report to determine if the child(ren) can safely remain in the home during the course of the investigation. DCFS staff will try to coordinate this visit to the home to assess safety with CACD staff.

If any of the 14 Arkansas Health and Safety Factors are identified in the foster home in consultation with a DCFS supervisor, the children will be moved into another approved placement. However, if no Health and Safety Factors are identified, and if it can be shown that it is in the best interest of any or all of the children currently placed in that foster home, a corrective action plan may be considered to allow any or all of the children in foster care to remain safely in a home involved in a child maltreatment report. A corrective action plan is designed to ensure the safety and well-being of the children in the home as long as the concern was not directly related to an act or omission rising to the level of maltreatment on the part of the foster parent(s) (e.g., a biological child of the foster parent posed a risk, but not the foster parents themselves). All relevant information will be reviewed to make a decision regarding the implementation of a corrective action plan for the foster home. This would include, but is not limited to:

A. The characteristics and history of the child in foster care;
B. The characteristics and history of the foster parents and their own children (if any);
C. The nature of the allegation;
D. Information collected during the investigation;
E. The services, supports, and/or monitoring that will be put in place during the investigation.

The Assistant Director of Community Services or designee must approve all corrective action plans for foster homes prior to the DCFS staff leaving the home in which the corrective action plan will be implemented. If the

safety and welfare standards of the Division cannot be met and the children cannot safely remain in the home, the children in care will be moved to another approved placement.

If after the initial safety evaluation conducted by DCFS staff it is determined that there are no risk or safety factors present and, as such, a corrective action plan is not required while the investigation is being completed, the Area Director may approve leaving the children in the home if it is in the best interest of the children. The Area Director will notify the Assistant Director of Community Services or designee when children are left in a foster home with a pending investigation but for which a corrective action plan was not necessary.

While any foster home is being investigated because of a child maltreatment allegation, no additional children in foster care may be placed there (regardless of whether a corrective action plan was required or not). As such, the foster home will be placed on unavailable status in CHRIS.

ACTIONS FOR UNSUBSTANTIATED MALTREATMENT REPORTS INVOLVING A CHILD IN FOSTER CARE
If the child maltreatment report is unsubstantiated, consideration will be given to:

A. Ending the corrective action plan for the foster home, if applicable;
B. Returning any children who may have been removed from the foster home as a result of the allegation; and,
C. Removing the foster home from unavailable status back to available status in CHRIS.

All unsubstantiated reports involving foster homes must be reviewed by the Resource Family Review Committee to discuss lifting the corrective action plan, the placement of the child(ren) involved, and the availability of the foster home. Even if a child maltreatment report involving a foster home is unsubstantiated, the Division retains the right to continue to leave the home on unavailable status or to close the foster home, as appropriate. Decisions will be made on a case by case basis and will be based on the best interest of the child(ren).

The Resource Family Review Committee meets bi-weekly but additional meetings may be called on an as needed basis.

ACTIONS FOR TRUE MALTREATMENT REPORTS INVOLVING A CHILD IN FOSTER CARE PENDING DUE PROCESS
If the child maltreatment report is determined to be true, the corrective action plan for the foster home, if applicable, as well as the overall health and safety of the children will be reevaluated immediately but no later than 24 hours from the time the investigative determination is made if the child(ren) had remained in the home during the course of the investigation and will continue to remain in the home until due process has been met.

If the child(ren) were allowed to remain in the home during the course of the investigation (with or without a corrective action plan) and must then be removed from the foster home based upon the true determination while due process is pending, all appropriate parties and stakeholders will be notified of the placement change as outlined in Policy VII-L: Changes in Out-of-Home Placement and related procedures.

Regardless of whether the child(ren) remain in the home with or without a corrective action plan in place or are removed from the home, the foster home will remain on unavailable status until due process has been satisfied and the home's availability status is reassessed at that point in time by local staff. Local staff will submit a recommendation regarding the foster home's availability status to the Resource Family Review Committee.

A staffing, to include the appropriate DCFS Area Director(s) or designee(s), will be held within three business days of the true determination so that all parties to the case and any other appropriate stakeholders may have input regarding the corrective action plan, if applicable, and/or the placement of the child(ren). The Area Director(s) or designee(s) may participate by phone.

If the child(ren) will be left in a home with a true determination while due process is pending the DCFS Assistant Director of Community Services or designee will be notified. The DCFS Assistant Director of Community Services or designee will notify the DCFS Director of the decision. The DCFS Assistant Director of Community Services or

designee will inform local staff if any changes to the corrective action plan, if applicable, and/or placement of the child(ren) are needed.

ACTIONS FOR TRUE MALTREATMENT REPORTS INVOLVING A CHILD IN FOSTER CARE UPON SATISFACTION OF DUE PROCESS

If the foster home is still open and the child(ren) still remains in the home, then upon satisfaction of due process, regardless of the result of the administrative hearing (if applicable), the safety and well-being of each child who is in the home will be reassessed at a staffing. This staffing will include the appropriate DCFS Area Director(s) or designee(s), held within three business days of the administrative hearing. The Area Director(s) may participate by phone.

This staffing will allow all parties to the case and any other appropriate stakeholders to have input regarding the reassessment and the placement of the child(ren), as applicable. Decisions will be made on a case by case basis and will ensure the best interest of the child(ren). The recommendation(s) from this staffing will be submitted to the Assistant Director of Community Services for final approval. The DCFS Assistant Director of Community Services will then notify the DCFS Director.

If it can be shown that it is in the best interest of any child to remain in the home, an alternative compliance or policy waiver may be requested if needed (due to a true finding that is upheld) to allow the foster home to remain open to care for the child(ren). The DCFS Director or designee must approve any alternative compliance or policy waiver needed to allow a foster home to remain open when a true finding is upheld.

For any foster home that has a true finding upheld at the administrative hearing, that home will remain on unavailable status if the child(ren) involved in the report is/are allowed to remain in the home because it is in the child(ren)'s best interest to do so. The foster home will then be closed once the child(ren) who was/were allowed to stay in the home due to it being in the child(ren)'s best interest, exits foster care or otherwise achieves permanency.

For foster homes that remain open following a true determination that the foster family either chose not to appeal or had a true determination overturned, that foster home will be reevaluated by the FSW Resource Worker with input from the FSW Caseworker, FSW Casework Supervisor, Resource Worker Supervisor, and County Supervisor. The reevaluation will also determine what may be necessary (e.g., additional training, revisions to the characteristics of children allowed to be placed in the home, etc.) to ensure the health and safety of any and all children placed in the home.

Based on the results of the reevaluation, if the recommendation is to place the foster home back on available status, that request will be submitted to the Resource Family Review Committee. The recommendation will also include what may be necessary (e.g., additional training, revisions to the characteristics of children allowed to be placed in the home, etc.) to ensure the health and safety of any and all children placed in the home.

The Division retains the right to continue to leave the foster home on unavailable status or to close the foster home, as appropriate.

If the foster home had been closed at some point during the process and requests to re-open due to a determination being overturned on appeal, the FSW Resource Worker will collaborate with other applicable local staff to determine if local staff members think it is an appropriate request for the home to be re-opened. If local staff decide to pursue re-opening a foster home, a request will be submitted to the Resource Family Review Committee.

After the completion of an investigation (once due process is satisfied) involving a foster home in which a child in foster care is the alleged victim or the alleged offender, the child's Child and Adolescent Needs and Strengths (CANS) assessment will be updated.

PROCEDURE VII-K1: Initial Report Response

01/2019

When any initial report of child maltreatment is made and concerns any person in a foster home, the CACD investigator will begin an investigation within 24 hours for Priority I allegations or within 72 hours for Priority II allegations.

The assigned DCFS staff will then:

A. Within 24 hours, assess the safety and risk of the child victim and any other children in the foster home and determine if the child(ren) in care can remain in the home with the implementation of a corrective action plan for the foster home on an individual, case-by-case basis. This includes determining the placement structure that best meets all the needs of the children and all members of the foster home. For example:
   1) The alleged victim child in care may be removed from the home; or,
   2) The alleged offender child may be removed from the home; or,
   3) Any of the children in care who are neither an alleged offender nor an alleged victim may be removed or remain in the home based on an individual, case-by-case determination of what is in their best interest and welfare;

B. If a corrective action plan for the foster home is implemented:
   1) Develop the corrective action plan for the foster home with the foster parents and child(ren) in the home, as age and developmentally appropriate, review it, and answer any questions the participants may have;
   2) Utilizing the appropriate chain of command, notify the Assistant Director of Community Services or designee of the corrective action plan via phone prior to leaving the home;
   3) If the corrective action plan is approved by the Assistant Director of Community Services or designee:
      a) Leave a copy of the corrective action plan with the foster parents.
      b) File the corrective action plan for the foster home in the provider record.
      c) Document the corrective action plan for the foster home and reasons behind the implementation of the plan in CHRIS contacts.
      d) Inform other parties to the case of the corrective action plan for the foster home immediately but no later than the next business day via email or text.
      e) Visit the home at least weekly to meet with the children and foster parents while the corrective action plan for the foster home is in place.
         1) During the home visit meet individually with foster parents and children in care, if age appropriate, to assess the corrective action plan for the foster home, the continued well-being of the children, and to determine any adjustments that may need to be made;

C. If the child(ren) must be removed (which includes removal because the Assistant Director of Community Services or designee does not approve the corrective action plan by phone), refer to Policy VII-L: Changes to Out-of-Home Placement and related procedures regarding notifications of the placement move;

D. Provide a briefing of the safety/risk assessment within 24 hours of conducting the safety/risk assessment by emailing the completed CFS-329: Foster Child Maltreatment Disclosure Case Briefing Summary to the DCFS Assistant Director of Community Services or designee, the Assistant Director of Prevention and Reunification, and the Child Protective Services (CPS) Manager;

E. Notify immediately, but no later than five business days the child(ren)'s custodial/non-custodial parent(s), attorney ad litem, and OCC attorney whenever the child is the victim or offender named in an allegation of child maltreatment. Notify via email, text, and/or with the following forms:
   1) CFS-204-A: Notice of Child Maltreatment Allegation to Legal Parent(s), Legal Guardian(s) and Current Foster Parent(s) of Alleged Offender in Foster Care
   2) CFS 205-A: Notice of Child Maltreatment Allegation to Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Alleged Victim(s) in Foster Care
   3) CFS 208-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem and CASA of Alleged Offender
   4) CFS 206-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim(s); and,

F. Notify attorneys ad litem for all children placed in the same out-of-home placement but not named as victims in the report, via email, text, and/ or the CFS-209-A: Notice of Child Maltreatment Allegation to AAL or CASA of Child in Foster Home Where Maltreatment Is Reported or Where an Alleged Juvenile Offender or Underaged Juvenile Offender is Placed, immediately, but no later than 5 business days.

The Area Director or designee will:

A. Ensure the appropriate DCFS field staff are notified (e.g., County Supervisor(s), FSW Unit Supervisor(s), primary and secondary FSWs for the child(ren), etc.) of the allegation so that these staff can then notify the child(ren)'s family, the OCC attorney, the child(ren)'s CASA, if applicable, and the child(ren)'s attorney(s) ad litem of the allegation;
B. Notify the Resource Worker and Resource Worker Supervisor of the maltreatment allegation so that the Resource Worker may place the home on unavailable status in CHRIS; and,
C. Conference with FSW Supervisor as needed.

The FSW Supervisor will:

A. Conference with the FSW as needed; and,
B. Notify the Area Director of the initial response outcomes.

The Resource Worker will:

A. At the direction of the Area Director or designee, classify the home under investigation as "unavailable" in CHRIS immediately but no later than the next business day, so that no additional children may be placed in that home until the resolution of the investigation; and,
B. Assist with the monitoring of the corrective action plan for the foster home as appropriate.

The Assistant Director of Community Services or designee will:

A. Notify the DCFS Director when a child is left in a foster home in which a member of the foster household has been named as an alleged offender and a corrective action plan has been implemented to allow the child to stay in the home in order to ensure the child's best interest;
B. Review the CFS-329: Foster Child Maltreatment Disclosure Case Briefing Summary;
C. Conference with field staff as necessary; and,
D. Share the CFS-329: Foster Child Maltreatment Disclosure Case Briefing Summary with the Assistant Director of Placement Supports and Community Outreach and the Foster Care Manager as appropriate.

PROCEDURE VII-K2: Response to Unsubstantiated Finding

01/2019

If the child maltreatment allegation is unsubstantiated, the FSW Resource Worker will:

A. Collaborate with the FSW Investigator and the child(ren)'s FSW Caseworker to write a request to the Resource Family Review Committee regarding how to proceed with the foster home;
B. Submit a request to the Resource Family Review Committee within one week of the determination.
   1) The request will include the FSW Resource Worker's recommendation regarding:
      a) Ending the corrective action plan for the foster home, if applicable;
      b) The placement arrangements for the child(ren) (e.g., returning any children who may have been removed from the foster home as a result of the allegation); and,
      c) Whether the foster home will be left on unavailable status or be returned to available status;
      d) Whether any other actions are required;
C. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable;
D. Update the status of the foster home in CHRIS as needed as well as CHRIS contacts as necessary.

The Resource Worker Supervisor will:

A. Conference with the FSW Resource Worker as needed;

B. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable; and,
C. Update the Area Director as needed.

The FSW Investigator will:
A. Collaborate with the FSW Resource Worker and the child(ren)'s FSW Caseworker to write a request to the Resource Family Review Committee regarding how to proceed with the foster home; and,
B. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable.

The FSW Caseworker for the child(ren) will:
A. Collaborate with the FSW Resource Worker and the FSW Investigator to write a request to the Resource Family Review Committee regarding how to proceed with the foster home;
B. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable; and,
C. Update the child(ren)'s CANS following the implementation of the Resource Family Review Committee's decision.

The FSW Supervisor(s) will:
A. Conference with the FSW Investigator and FSW Caseworker as needed;
B. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable.

The Area Director or designee will:
A. Participate in the Resource Family Review Committee meeting upon request.
   1) Phone participation in the Resource Family Review Committee meeting is acceptable.

The Resource Family Review Committee will:
A. Review the request from the FSW Resource Worker and determine the appropriate action(s) that may include, but are not limited to:
   1) Ending the corrective action plan for the foster home, if applicable;
   2) Revising the placement arrangements for the child(ren) (e.g., returning any children who may have been removed from the foster home as a result of the allegation);
   3) Determining whether the foster home will be left on unavailable status or be returned to available status; and,
   4) Determining whether any other actions are required;
B. Notify the FSW Resource Worker who submitted the request of the committee's decision in writing within one business day; and,
C. Document the recommendation in the Provider Screen in CHRIS.

PROCEDURE VII-K3 Response to True Finding Pending Due Process

01/2019

If the child maltreatment allegation is determined to be true, the FSW Caseworker will:

A. Reassess the corrective action plan for the foster home, if applicable, in collaboration with the FSW Resource Worker and FSW Investigator;
B. Remove any or all of the children from the home, determined on a case-by-case basis in consultation with the FSW Supervisor, if necessary to ensure their safety and well-being.
    1) If the child(ren) must be removed, refer to Policy VII-L: Changes to Out-of-Home Placement and related procedures regarding notifications of the placement move;
C. Hold a staffing within three business days of the finding to determine if the corrective action plan for the foster home, if applicable, needs to be revised and/or if changes to the child(ren)'s placement are needed until due process for the foster parents has been met;
D. Update CHRIS contacts as necessary; and,
E. Update the FSW Resource Worker and Resource Worker Supervisor as necessary.

The FSW Supervisor will:

A. Conference with the FSW regarding the determination; and,
B. Participate in the staffing to determine if the corrective action plan for the foster home, if applicable, needs to be revised and/or if changes to the child(ren)'s placement are needed until due process for the foster parents has been met.

The FSW Resource Worker will:

A. Participate in the staffing upon request; and,
B. Update the availability of the foster home and CHRIS contacts as applicable.

The FSW Investigator will:

Participate in the staffing upon request.

The Area Director or designee will:

A. Participate in the staffing in person or via phone to determine if the corrective action plan for the foster home, if applicable, needs to be revised and/or if changes to the child(ren)'s placement are needed until due process for the foster parents has been met; and,
B. Notify the Assistant Director of Community Services or designee if the child(ren) will remain in a foster home with a true finding while due process is pending.

The Assistant Director of Community Services or designee will:

Notify the DCFS Director if the child(ren) will remain in a foster home with a true finding while due process is pending.

PROCEDURE VII-K4: Response to True Finding Overturned on Administrative Appeal When the Foster Home is Still Open

01/2019

The FSW Caseworker will:

A. Arrange and hold a staffing within three business days of the administrative hearing to determine on a case by case basis if it is in the best interest of the children to remain in or return to that foster home, as applicable.
    1) If the results of the staffing determine that it is appropriate to allow the children involved in the allegation to remain in/return to the home, reassess the corrective action plan, if applicable, for the foster home and adjust accordingly if necessary.

2) If the staffing determines that any children still in the foster home must be removed, remove the children from the home.
    a) If the child(ren) must be removed, refer to Policy VII-L: Changes to Out-of-Home Placement and related procedures regarding notifications of the placement move.

B. Conference with the FSW Supervisor, Resource Worker, and Resource Worker Supervisor regarding the recommendation as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required; and,
C. Update CHRIS contacts as necessary.

The FSW Supervisor will:

A. Participate in the staffing regarding the children's placement to determine, as applicable, if it is in the child(ren)'s best interest to remain in/return to the foster home;
B. Conference with the FSW Caseworker, Resource Worker, and Resource Worker Supervisor regarding the recommendation as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required; and,
C. Update the Area Director as necessary.

The Area Director or designee will:

A. Participate in the staffing (in person or via phone) regarding the placement of the children;
B. Submit the recommendation developed during the staffing regarding the placement of the children to the Assistant Director of Community Services or designee for final approval; and,
C. Conference with the FSW Supervisor and Resource Worker Supervisor regarding the recommendation as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required

The Resource Worker will:

A. Participate in the staffing regarding the children's placement to determine, as applicable, if it is in the child(ren)'s best interest to remain in/return to the foster home;
B. Take lead on the reevaluation of the foster home if it is still open;
C. Conference with the FSW, FSW Supervisor, and Resource Worker Supervisor regarding the recommendation as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required;
D. Submit the recommendation, if applicable, to place the foster home back on available status to the Resource Family Review Committee;
E. Based on the response from the Resource Family Review Committee, update the status of the foster home in CHRIS, if applicable, or close the foster home in CHRIS, if applicable;
F. Complete CFS-475-F: True Reports of Child Maltreatment Against Foster Family Members and file it in the provider record;
G. Complete CFS-475-G: Checklist for Foster Home Closure and other required steps to close a foster home, if applicable; and,
H. Update CHRIS contacts as necessary.

The Resource Worker Supervisor will:

Conference with the FSW, FSW Supervisor, and Resource Worker regarding the recommendation as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required.

The Assistant Director of Community Services will:

Notify the DCFS Director or designee of the decision regarding placement of the children and availability status of the foster home.

The Resource Family Review Committee will:

A. Review the recommendation from the FSW Resource Worker as to whether the foster home will be left on unavailable status or returned to available status and if any other actions are required; and,
B. Notify the FSW Resource Worker who submitted the request of the committee's decision in writing within one business day.

PROCEDURE VII-K5: Response to True Finding Overturned on Administrative Appeal When the Foster Home has Previously Been Closed

01/2019

If the foster home has been closed and requests DCFS to re-open the home, the FSW Resource Worker will:

A. Arrange and hold a staffing within three business days of the administrative hearing to determine on a case by case basis if the local staff believe it is appropriate to pursue re-opening the foster home.
   1) If local staff believe it is appropriate to pursue re-opening the foster home, collaborate with other local staff, as appropriate, to write a request to the Resource Family Review Committee to consider re-opening the foster home and submit the request to the Resource Family Review Committee.
   2) If local staff believe it is not appropriate to pursue re-opening the foster home, inform the family of the decision.

The Resource Worker Supervisor will:

A. Participate in the staffing to determine on a case by case basis if the local staff believe it is appropriate to pursue re-opening the foster home; and,
B. Update the Area Director as necessary.

The FSW Investigator will:

Participate in the staffing in person or via phone to determine on a case by case basis if the local staff believe it is appropriate to pursue re-opening the foster home.

The FSW Caseworker will:

Participate in the staffing in person or via phone to determine on a case by case basis if the local staff believe it is appropriate to pursue re-opening the foster home.

The Area Director or designee will:

Participate in the staffing in person or via phone to determine on a case by case basis if the local staff believe it is appropriate to pursue re-opening the foster home.

The Resource Family Review Committee will:

A. Review the request from the FSW Resource Worker and determine if it is appropriate to re-open the home and, if so, under what conditions (e.g., once additional training has been completed, with certain restrictions on characteristics of children that can be placed in the home, etc.); and,
B. Notify the FSW Resource Worker who submitted the request of the committee's decision in writing within one business day.

PROCEDURE VII-K6: Response to True Finding Upheld on Administrative Appeal

01/2019

If the true finding is upheld by the administrative hearing, the foster home may remain open for any of the children currently placed in the home if it can be shown that it is in the best interest of the child(ren) to remain in the home. This will be done on an individual basis for each child.

The FSW will:

A. Arrange and hold a staffing within three business days of the administrative hearing to determine on a case by case basis if it is in the best interest of the child(ren) to remain in that foster home, if applicable.
   1) If the results of the staffing determine that it is appropriate to allow the child(ren) involved in the allegation to remain in the home, reassess the corrective action plan for the foster home and adjust accordingly if necessary.
   2) If the staffing determines that any child(ren) still in the foster home must be removed, remove the child(ren) from the home.
      a) If the child(ren) must be removed, refer to Policy VII-L: Changes to Out-of-Home Placement and related procedures regarding notifications of the placement move.
      b) Staff are highly encouraged to update the child's CANS assessment during this staffing or once the child(ren) moves into a new placement, if applicable;
B. Conference with the FSW Supervisor, Resource Worker, and Resource Worker Supervisor regarding at what point the foster home will be closed;
C. Provide the Resource Worker with any needed and/or requested information for an alternative compliance and/or policy waiver request, if applicable;
D. Update CHRIS contacts as needed; and,
E. If at any point the policy waiver and/or alternative compliance request is denied, conference with the FSW Supervisor and:
   1) Remove all child(ren) in care from the foster home.
   2) Refer to Policy VII-L: Changes to Out-of-Home Placement and related procedures regarding notifications of the placement move.

The FSW Supervisor will:

A. Participate in the staffing to determine on a case by case basis if it is in the best interest of the children to remain in that foster home, if applicable;
B. Conference with the FSW, the Resource Worker, and the Resource Worker Supervisor regarding at what point the foster home will be closed; and,
C. Update the Area Director as needed.

The Area Director or designee will:

A. Participate in the staffing in person or via phone to determine on a case by case basis if it is in the best interest of the children to remain in that foster home, if applicable;
B. Submit the recommendation from the staffing to the Assistant Director of Community Services or designee for final approval;
C. Review any received policy waiver and/or alternative compliance request(s) and supporting materials for foster homes for which a true finding has been upheld and the child(ren) will remain in that home due to it being in the best interest of the child(ren);
D. Grant or deny approval for policy waiver and/or alternative compliance request(s) as appropriate; and,
E. If approved, forward the request(s) to the DCFS Director or designee for approval.

The Resource Worker will:

A. Conference with the FSW, FSW Supervisor, and Resource Worker Supervisor regarding at what point the foster home will be closed;
B. Complete the necessary documents for requesting that the foster home be granted an alternative compliance and/or policy waiver (see Appendix 8: Alternative Compliance and Policy Waiver Protocol for more information), if needed to allow the foster home to remain open for the child(ren) involved in the report because it is in their best interest to remain in that home;
C. Complete CFS-475-F: True Reports of Child Maltreatment Against Foster Family Members and file it in the provider record;
D. Forward all applicable case information for the alternative compliance and/or policy waiver request, including investigative outcomes, CANS, and the corrective action plan for the foster home, to the Resource Worker Supervisor for review;

E. Inform the FSW and FSW Supervisor of the outcome of the alternative compliance and/or policy waiver request.
    1) Close any foster home that is denied a policy waiver and/or alternative compliance approval at any point during the request review and document in CHRIS that the home is closed.
        a) Provide the reason for closure in the comment box in the Provider Services Tab.
    2) Update CHRIS contacts regarding the results of the alternative compliance and/or policy waiver request and as otherwise necessary; and,
F. Complete CFS-475-G: Checklist for Foster Home Closure, as applicable, and file the form in the provider record.
    1) Complete all other required steps to close a foster home.

The Resource Worker Supervisor will:

A. Conference with the FSW, FSW Supervisor, and Resource Worker regarding at what point the foster home will be closed;
B. Review the alternative compliance and/or policy waiver requests and supporting documentation, if applicable; and,
C. Forward the alternative compliance and/or policy waiver requests and supporting documentation, if applicable, to the Area Director.

The Assistant Director of Community Services will:

Notify the DCFS Director or designee of the decision regarding placement of the children and availability status of the foster home.

The Division Director or designee will:

A. Review received policy waiver and/or alternative compliance request(s) and supporting materials;
B. Grant or deny approval for policy waiver and/or alternative compliance request(s) as appropriate; and,
C. If approved, forward any alternative compliance request(s) to the Placement and Residential Licensing Unit (PRLU) Manager and staff.

The Placement and Residential Licensing Unit (PRLU) Manager or designee will:

A. Review the request for an alternative compliance; and,
B. Place the request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board (CWARB).

POLICY VII-L: CHANGES IN OUT-OF-HOME PLACEMENT

08/2013

The Division recognizes that stable placements for children in DHS custody result in a lesser amount of trauma to and better long-term outcomes for children who must come into foster care. Family preservation services or formal respite services shall be utilized if necessary to address issues in the out-of-home placement in order to prevent disruption. Notice will be provided as outlined below whenever a child has a change in out-of-home placement excluding normal age appropriate activities, stays with a Foster Family Support System, or informal respite stays.

FOSTER PARENT REQUEST FOR PLACEMENT CHANGE
When foster parents request a child in foster care be removed from their home, excluding an emergency that places the child or a family member at risk of harm, the foster parents must attend a staffing within 48 hours of the request to discuss what services or assistance may be needed to stabilize the placement. This staffing does not impact other required staffings and should only be conducted to help stabilize the placement and /or planning for the child's placement.

The child in foster care, the child's attorney ad litem, and a CASA, if appointed to the case, shall be notified so they can attend and participate in the staffing and planning for the child's placement. Other participants may be invited to the staffing as appropriate (e.g., child's therapist, teacher, etc.).

If the placement cannot be stabilized as a result of the staffing, then the foster parents will continue to provide for the child in foster care until an appropriate alternative placement is located, but this shall not be longer than five business days from the day the staffing was held. Written notifications of any placement changes will be provided to all required parties as described below.

NON-EMERGENCY PLACEMENT CHANGES
Non-emergency placement changes include a planned transfer to another foster home or residential setting that better meets the child's needs, a trial home placement, and a return to the parent/legal custodian when a child exits care. Changes in placement shall be made only after notification to the age-appropriate child, foster parent, the court, the OCC attorney, attorney ad litem, and the child's birth parents. Notices shall be sent in writing two weeks prior to the proposed change. The notice shall:

A. Specify reasons for the proposed change
B. Provide to the attorney ad litem the address of the proposed new out-of-home placement
C. Provide to the child the name and telephone number of the attorney ad litem

Exceptions to the advance notice requirement will be made if the health or welfare of the child would be endangered by delaying a change in placement (including court-ordered placements; see below for information regarding emergency placement changes) or if the child is placed in a placement intended to be temporary until a stable placement can be located for the child.

The age-appropriate child will be notified of the right to appeal the change and to request assistance from the attorney ad litem. Pre-placement visits shall be conducted when possible before a change in placement.

If a placement change is occurring because the child is exiting foster care, then as with all closures of out-of-home placement cases, discharge planning must be conducted to ensure the health and safety of the child at case closure. The health and safety assessment and risk assessment are tools to be used in determining case closure. Discharge planning must be done at the staffing to close the case.

Minimum licensing standards require that a discharge summary be completed on each child and a copy given to the child's parents if the Division has not been granted Termination of Parental Rights by the court. A copy of the discharge summary must become a part of the child's case file.

EMERGENCY PLACEMENT CHANGES

Within 24 hours of the emergency change in placement, DHS shall notify the birth parent(s), the OCC attorney and the child's attorney ad litem of the change. Within 72 hours of the emergency change in placement, DHS shall provide written notice to the OCC Attorney and attorney ad litem with the name and address of the new out-of-home placement provider and the specific reasons justifying the change of placement without advance notice.

If an agent, employee, or contractor of DHS fails to comply with the emergency notice of change in placement requirements, then an action for violation of the requirement may be filed by any party to the action against the person who failed to comply with the requirement. The court will determine the assessment of punishment with the most probable punishment being cited as contempt of court. In addition, if the court finds the agent, employee, or contractor of DHS failed to comply with the requirement, then the court may order DHS or the agent, employee, or contractor to pay all of the costs of the proceedings brought under this requirement.

NOTIFICATION OF PLACEMENT CHANGES TO DCFS ELIGIBILITY UNIT

The DCFS Eligibility Unit will be notified automatically via CHRIS when placement changes that are entered into CHRIS affect the child's Medicaid eligibility. This includes when the child moves to an out-of-state placement, is placed in a DYS facility or juvenile detention center, is on runaway status, is on a trial home visit, returns home, is adopted, or otherwise exits foster care. The child's Medicaid case will close the date the child's foster care case is closed.

PROCEDURE VII-L1: FOSTER PARENT REQUEST FOR PLACEMENT CHANGE

08/2013

If a request for removal is made by the foster parent, the Family Service Worker will:

A. Remove the child immediately without holding a staffing if the request for removal from the foster parent meets the definition for "imminent harm." Imminent harm is defined as an emergency that places the child or a family member at risk of harm.
B. Prepare for a staffing to be held within 48 hours of notification of a request for removal from the foster parent and immediately notify the OCC attorney, attorney ad litem, CASA, and the child in foster care (if age appropriate) of the staffing date, time, and location.
C. If appropriate, request by phone, fax, or email that a licensed mental health professional or private mental health provider attend, or otherwise participate, in the staffing.
D. Hold a staffing within 48 hours of notification of a request for removal from the foster parent. If the request is made on the weekend or a holiday, the staffing must be held by the close of business of the next working day.
E. Make an appropriate alternative placement within five (5) business days from the date of the staffing, if the placement cannot be stabilized.
F. See Procedures VII-K2 and VII-K3, as applicable, for information regarding providing written notices of placement changes to appropriate parties.

The Family Service Worker Supervisor will:

A. Conference with FSW as necessary regarding change in placement.

PROCEDURE VII-L2: NON-EMERGENCY CHANGES IN OUT-OF-HOME PLACEMENT

08/2013

The Family Service Worker will:

A. Conference with supervisor as necessary regarding change in placement.
B. Provide written notice to the child's birth parent(s) at least two (2) weeks prior to any placement changes via the completed CFS-300: Parent Notification of Change in Placement.

C. Provide written notice to the child (if age appropriate), the foster parents, the child's attorney ad litem, the child's OCC attorney, and the court at least two (2) weeks prior to any placement changes via the completed CFS-300-A: Attorney Ad Litem/CASA, and Child Notification of Change in Placement. .
D. Place copies of the completed CFS-300: Parent Notification of Change in Placement and CFS-300-A: Attorney Ad Litem/CASA Notification of Change in Placement.in the child's record.
E. Select the out-of-home placement that best fits the needs of the child.
   1) A child who has been identified as an Exempted from Finding Underaged Juvenile Offender or Sexual Offender must not be placed in a foster home with other children, unless the child's therapist provides written notification that the child is no longer a danger to other children.
      a) Place any written notifications from the child's therapist in the child's hard copy file.
   2) If the recommended placement is a facility, the facility must receive information regarding the allegations.
      a) Document in the Recommend Placement screen in CHRIS that facility received information regarding allegations for a child with an Exempted from Finding Underaged Juvenile Offender or Sexual Offender.
F. Arrange for a pre-placement visit.
G. Provide new address to attorney ad litem.
H. Inform age-appropriate child of the right to appeal a change in placement.
I. Update child placement information in CHRIS (updating the placement information will open a response window to notify the Eligibility Unit of the placement change).
J. Document submission of the CFS-300: Parent Notification of Change in Placement and CFS-300-A: Attorney Ad Litem/CASA Notification of Change in Placement in the CHRIS Document Tracking Screen.

The Family Service Worker Supervisor will:
A. Conference with FSW as necessary regarding change in placement.

PROCEDURE VII-L3: EMERGENCY CHANGES IN OUT-OF-HOME PLACEMENT

08/2013

The Family Service Worker will:
A. Notify the FSW Supervisor immediately of the emergency placement change.
B. Notify the child's birth parent(s), OCC Attorney, and attorney ad litem by phone or in person within 24 hours of the emergency placement change.
   1) If the whereabouts of the parent are unknown, reasonable diligence to locate the parents must be made and documented.
C. Provide the attorney ad litem with the name, address, and telephone number of the new foster home or placement provider within 24 hours of the emergency placement change.
D. Provide written notice to the child's birth parent(s) within 72 hours of the emergency placement change via the completed CFS-300: Parent Notification of Change in Placement.
E. Provide written notice within 72 hours of the emergency placement change to the attorney ad litem via the completed CFS-300-A: Attorney Ad Litem/CASA, and Child Notification of Change in Placement.
F. Place a copy of the completed CFS-300-A: Attorney Ad Litem/CASA Notification of Change in Placement.in the child's record.
G. Update child placement information in CHRIS. Updating the placement information will open a response window to notify the Eligibility Unit of the placement change.
H. Document submission of the CFS-300: Parent Notification of Change in Placement and CFS-300-A: Attorney Ad Litem/CASA Notification of Change in Placement in the CHRIS Document Tracking Screen.

The Family Service Worker Supervisor will:
A. Conference with the FSW as necessary regarding change in placement.

POLICY VII-M: FINANCIAL SUPPORT TO FOSTER PARENTS

01/2012

Title IV-E foster care maintenance payments for a child in foster care may cover the costs of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to the child, and reasonable travel to the child's home for visitation with family or other caretakers. Local travel associated with the preceding list of items is also an allowable expense.

When a youth in foster care has a child who is placed in the same foster home or public/private child placement or child care agency, foster care maintenance payments made on behalf of the youth shall include and be limited to amounts that cover allowable cost (as defined above) for the child.

The Division shall review the amount of payment made for foster care maintenance every five (5) years to assure continued appropriateness.

The Division shall provide foster parents with a monthly board payment as an aid to cover the items listed above for each child receiving out-of-home placement services. When foster parents are caring for a child with special needs and the child's needs cannot be met with the regular board payment, the Division may provide the foster parents with an additional payment to cover the extra expenses incurred. The amount of these higher, special board rates will be based on the nature and extent of the child's special needs. The amount of this additional monthly payment will not exceed $460.00 above the standard board rate for the child's age group. However, if the child is SSI eligible, the rate may exceed the SSI rate by up to $460.00 if approved by the DCFS Assistant Director of Community Services or designee.

A special board rate is approved for a specific placement and need and will be periodically reviewed and adjusted. A change in placement will require a new request and review.

PROCEDURE VII-M1: Financial Support to Foster Parents

11/09

DCFS shall pay foster parents a monthly board rate according to the following chart; these rates are effective for board payments of November 2009 and after:

Birth through 5 years	**$410.00 Monthly**
Board and Care	350.00
Clothing	45.00
Personal Needs	15.00
6 through 11 years	**$440.00 Monthly**
Board and Care	365.00
Clothing	50.00
School and Personal Needs	25.00
12 through 14 years	**$470.00 Monthly**
Board and Care	380.00
Clothing	60.00
School and Personal Needs	30.00
15 through 17* years	**$500.00 Monthly**
Board and Care	395.00
Clothing	70.00
School and Personal Needs	35.00

*Refer to Policy VIII-B for requirements to continue board payments for youth age 18-20 (board payments must end the day the youth elects to leave foster care or the end of the month of his 21st birthday).

PROCEDURE VII-M2: Requesting a Special Board Rate

02/2012

The Family Service Worker will:

A. Check documentation of the child's special need(s) and the additional activities required of the foster parents to meet the need(s).
B. Complete the CFS-304: Justification of Special Board Rate by determining the level of care needed in each of the three need categories and adding the three levels.
C. Submit the request for a special board rate with documentation attached to the County Supervisor for review and recommendation.
D. Once approved, review the continuing need for the request on a quarterly basis and, if appropriate, resubmit for reevaluation by the County Supervisor and the Area Director.

The County Supervisor will:

A. Review the request for completeness and appropriateness and recommend approval or disapproval within three working days of receipt.
B. If approved, forward the request to the Area Director for review and approval or disapproval.
C. If disapproved, forward the request with a recommendation for disapproval to the Area Director for review and action as appropriate.
D. Once approved, review the continuing need for the request and, if appropriate, resubmit the request on a quarterly basis for reevaluation by the Area Director.
E. Inform the foster parent in writing of the ultimate approval or disapproval of the request and the reason for that decision, noting that approval is only for 90 days and the documentation of continuing need must be reviewed quarterly.

The Area Director will:

A. Receive requests from the County Supervisor.
B. Review the request for completeness and appropriateness, consider the County Supervisor's recommendation and either approve or disapprove the request within three working days.
C. Have the authority to approve all Special Board Rates up to $960.00.
D. Refer the request to the Foster Care Unit Manager for a second-party review if the Area Director cannot decide on approval or disapproval. Inform the requesting County Supervisor of the request's disposition and reasons for approval, disapproval, or referral to the Foster Care Unit Manager. A Special Board Rate becomes effective the day the Area Director or Assistant Director, as appropriate, approves it. Retroactive payments will be determined on a case-by-case basis and must be approved by the Assistant Director of Community Services.
E. Once approved, assure that the special board rate is reevaluated on a quarterly basis for continued appropriateness.
F. Maintain a file for each approved special board rate. The file should contain the requesting memo, supporting documentation, CFS-304: Justification of Special Board Rate, Notification of Approval memo, and a printout of the computer entry of the special board rate.
G. Maintain a log of special board rate approvals including the following column headings: Child's Name, Case Number, County, Effective Date, Termination Date, Rate, and Reason.

The DCFS Assistant Director of Community Services will:

A. Have the authority to approve or disapprove all Special Board Rates over $960.00.
B. Receive completed request packets for special board rates over $960.00 from Area Directors.
C. Check each request packet for completeness to include:
    1) A completed CFS-304: Justification for Special Board Rate.

2) Clear and convincing documentation of any emotional, physical and/or auxiliary problems the child has that may justify a special board rate.
3) The Area Director's dated signature on the CFS-304: Justification for Special Board Rate as evidence of his review.
4) A Cover Memo from the Area Director to the Assistant Director that:
5) Identifies the proposed subsidy as over $960.00.
6) Provides a justification for the proposed special subsidy, and
7) Makes a recommendation regarding approval or disapproval.

D. Review the request for appropriateness and consider the Area Director's recommendation
E. Refer the request to the Foster Care Unit Manager for technical assistance if desired.
F. Reach a disposition regarding the request within three working days.
G. Inform the requesting Area Director in writing of the request's disposition and reasons for approval or disapproval.

The Foster Care Manager will:

A. Provide only technical assistance when requested regarding special board rates.
B. Return the request to the Area Director or Assistant Director, as appropriate, for decision and action.

CHRIS Procedures

If the special board rate is approved for the initial entry date at the Provider placement service, the Family Service Worker will complete the Provider Recommendation screen in CHRIS. The FSW will:

A. In the Payment Scale Information grouping, select the **Child requires Special Rate** checkbox.
B. Enter the total approved Special Board Rate monthly amount in the **Monthly Authorized Amount field.**
C. Select the appropriate **Reason for Special Rate** pick list value of Special Board Rate Justification or Other.
D. Enter a brief justification for the Special Board Rate in the **Explanation for Special Rate** text box. This is mandatory if 'Other' is selected as the Reason for Special Rate.
E. Click Add button
F. Click Approval button to check the Request for Approval checkbox.

If the special board rate is approved **after** the initial entry date at the Provider placement service, the Family Service Worker will complete the Payment Scale screen in CHRIS. This can also be completed if the Special Board Rate was approved but was not entered on the Provider Recommendation screen as it should have been. The FSW will:

A. Enter the End Date of the open Payment Scale (such as Normal or Clothing and Personal Allowance) and click Change button;
B. Select the Ok button to the following message:
   382-This is the open placemen for this client. Please open a new Payment Scale or remove the End Date for the last Payment Scale.
C. Click Clear button to complete the following:
   - Select the **Child requires Special Rate** checkbox.
   - Select the appropriate **Reason for Special Rate** pick list value of Special Board Rate Justification or Other.
   - Enter the total approved Special Board Rate monthly amount in the **Monthly Authorized Amount field**.
   - Enter a brief justification for the Special Board Rate in the **Explanation for Special Rate** text. This is mandatory if 'Other' is selected as the Reason for Special Rate.
   - Enter the start date of the approved Special Board Rate in the **Begin Date** field.
   - Enter the Review Date if deemed necessary.
D. Click Add button
E. Click Approval button to check the Request for Approval checkbox.

The Special Board Rate Approvals are three-tier – FSW Requests, Supervisor Recommends, and Area Director Approves. The FSW Request portion was described in the procedures above. To complete this three-tier process, the following operations should occur:

A. Family Service Worker Supervisor will:
   1) Highlight the Payment Scale Request for Approval in their Supervisor Approvals' Box and click Show button
   2) Review information for accuracy and click Approval button to click Recommend checkbox
   3) If information is not accurate, click Approval button to click Deny checkbox and enter Denial Reason. If denied, the denied Special Board Rate Payment Scale must be end dated and a new one entered.
B. Area Director will:
   1) Highlight the Payment Scale Request for Approval in their Supervisor's Box and click Show button
   2) Review information for accuracy and click Approval button to click Approve checkbox.
   3) If information is not accurate, click Approval button to click Deny checkbox and enter Denial Reason. If denied, the denied Special Board Rate Payment Scale must be end dated and a new one entered.

POLICY VII-N: CHILD MISSING FROM AN OUT-OF-HOME PLACEMENT

01/2017

Occasionally there are instances when a child or youth may leave an out-of-home placement without authorization. Any of these instances will result in immediate action from the placement provider as outlined for the various circumstances below.

In all instances of missing children, the Division of Children and Family Services (DCFS) will collaborate with the placement provider, law enforcement, and the National Center for Missing and Exploited Children (NCMEC) in an effort to locate the child.

Children in foster care who are located after they run away from Interstate Compact on the Placement of Children (ICPC) approved placements in another state are handled by the DCFS ICPC office. However, if a pick- up order is issued, the Interstate Compact for Juveniles (ICJ) applies.

Neither ICJ nor ICPC are applicable to children who are not in foster care and are kidnapped (by either a custodial or non-custodial parent) in one and taken to another state. These situations are a matter between the legal custodian and law enforcement. However, for children with whom the Division comes into contact due to an interference with custody issue not related to a child who is in DHS custody, please refer to Policy VI-I: Interference with Custody.

Child Who May Have Been Taken from an Out-of-Home Placement
If the placement provider has reason to believe the child was taken from the placement without authorization by another individual, then the placement provider will immediately notify the youth's primary Family Service Worker (FSW) caseworker and primary FSW caseworker's supervisor. The out-of-home placement provider will also begin an immediate search for the child/youth. The search will entail the following actions:

A. Searching the immediate premises; and,
B. Searching the community and contacting the child's friends and other contacts who may know of, or have information regarding the child's whereabouts.

Upon notification from the placement provider, the youth's primary FSW caseworker and primary FSW caseworker's supervisor will ensure the following individuals are notified of the child's disappearance:

A. Area Director
B. Assistant Director of Community Services or designee

The primary FSW caseworker will then follow the steps outlined in Procedure VII-N1 below.

The Assistant Director of Community Services or designee will then notify the DCFS Director.

Child Who May Have Run Away
If the placement provider has reason to believe the child left the out-of-home placement of his or her own accord (i.e., run away), then the out-of-home placement provider will begin an immediate search for the child/youth. The search will entail the following actions:

A. Searching the immediate premises; and,
B. Searching the community and contacting the child's friends and other contacts who may know of or have information regarding the child's whereabouts.

If the child is located within one (1) hour of initiating the search, the placement provider will notify the primary FSW caseworker and primary FSW caseworker's supervisor of the incident no later than the next calendar day. The child's primary FSW caseworker will document the incident (i.e., child ran away but was located within one (1) hour) accordingly in CHRIS contacts. The primary FSW caseworker, or secondary FSW caseworker, as appropriate, will also conduct a visit with the child and placement provider by the next business day to assess why

the child ran away and what immediate steps may need to be taken to better support both the child and placement provider.

If the child who is believed to have run away of his/her own accord cannot be located within one (1) hour of initiating the search, then at that point the out-of-home placement provider will immediately notify the youth's primary Family Service Worker (FSW) caseworker and primary FSW caseworker's supervisor. The primary FSW caseworker will then follow the steps outlined in Procedure VII-N1 below, to include ensuring the Area Director is also notified of the child's disappearance.

PROCEDURE VII-N1: When a Child is Reported Missing from an Out-of-Home Placement

01/2017

After receiving notification of the child's disappearance by the placement provider, the primary FSW caseworker will:

A. Notify the child's secondary FSW and TYS Coordinator (if applicable) and attorney ad litem within two (2) hours via email, phone, or text.
B. Notify the child's custodial/non-custodial parent(s) within two (2) hours, or sooner depending on the age of the child, of the discovery of the child's disappearance by phone or, preferably, a visit to the home if at all possible.
    1) If the parents currently reside in a county outside the primary FSW caseworker's county, the secondary FSW caseworker and/or an appropriate FSW supervisor may conduct the home visit to notify the parents that their child is currently missing.
    2) If the custodial/non-custodial parent(s) current or correct address or telephone number is unknown, a letter will be written to the parent's last known address.
C. Notify the state police, local police department, and/or sheriff's office, as applicable, within two hours after receiving information on missing or abducted children or youth. The notification, which may occur via email, text, or phone will include:
    1) Child's name
    2) A physical description of the child;
        a) A picture of the child may be released to assist with identification provided that the child is not identified as a child in foster care.
    3) Child's date of birth
    4) Circumstances of the missing child's disappearance, including the date the child went missing or was last seen and if the child indicated a destination (and, if so, what the destination is)
    5) Any other factual, biographical, or historical information that may assist with locating the missing child
    6) A request for law enforcement to enter the information into the National Crime Information Center (NCIC) database of the Federal Bureau of Investigation
D. Once a police report has been filed, contact the National Center for Missing and Exploited Children (NCMEC) at 1-800-THE-LOST (1-800-843-5678) no later than 24 hours after receiving information on missing or abducted children or youth to provide the following information to NCMEC per the Memorandum of Understanding (MOU) between DCFS and NCMEC:
    1) Child's name
    2) Photo of the child, if available
    3) Child's date of birth
    4) Name and contact information of the primary FSW caseworker and FSW supervisor
    5) Investigating Law Enforcement Agency Name, Contact Information, and Case Number (i.e., Missing Person Report number)
    6) Circumstances of the missing child's disappearance, including the date the child went missing or was last seen

7) Any other factual, biographical, or historical information that may assist with locating the missing Child

E. Upon NCMEC's request, release to NCMEC any additional requested information and/or records in its possession that are relevant to locating the missing child.
F. Keep NCMEC informed with up-to-date information regarding the missing child.
G. Contact local OCC and request OCC to complete and file a pick-up order for the child no later than 24 hours after receiving notification of a missing child.
    1) The motion requesting the pick-up order and the proposed order will put the court on notice that the child is missing.
H. Update the child's placement information in CHRIS within two (2) business days, to include completion of fields regarding the required reports made to local law enforcement and NCMEC.
    1) Even when the child is placed on runaway status, the child's Medicaid case will remain open. If the child is still on runaway status at the time of his/her Medicaid redetermination (i.e., the anniversary of his/her entering foster care), then the Medicaid case will be closed at that time.
I. Communicate regularly with the child's secondary FSW caseworker and TYS Coordinator, if applicable.
J. When an Arkansas child in foster care has run away and is located in another state, notify the Administrator of the Interstate Compact for Juveniles (ICJ) of the Division of Youth Services.
    1) ICJ will process all out-of-state runaways probationers, runaways, and children in foster care.
K. If the child is not found:
    1) Continue to call previously contacted parties and inquire for information, furnish further information that becomes available, and if appropriate, extend the search to other counties and states.
    2) Update the custodial/non-custodial parents to assure them that the search continues no less than weekly when current contact information for the custodial/non-custodial parents is available. This requirement does not apply to parents whose parental rights have been terminated.

After receiving notification of the child's disappearance by the placement provider, the secondary FSW (if applicable) will:

A. Notify the local police department and/or sheriff's office, as applicable, within two (2) hours after receiving information on missing or abducted children or youth. The notification, which may occur via email, text, or phone will include:
    1) Child's name
    2) A physical description of the child
        a) A picture of the child may be released to assist with identification provided that the child is not identified as a child in foster care.
    3) Child's date of birth
    4) Circumstances of the missing child's disappearance, including the date the child went missing or was last seen and if the child indicated a destination (and, if so, what the destination is)
    5) Any other factual, biographical, or historical information that may assist with locating the missing child
    6) A request for law enforcement to enter the information into the National Crime Information Center (NCIC) database of the Federal Bureau of Investigation

After receiving notification of the child's disappearance by the placement provider, the Family Service Worker supervisor will:

A. Notify the Area Director and Assistant Director of Community Services or designee of the child's disappearance.
B. Conference with the FSW as needed.

PROCEDURE VII-N2: When a Child Missing from an Out-of-Home Placement is Located

01/2017

When a child missing from an out-of-home placement is located, the primary Family Service Worker will:

A. Ensure the child has a physical exam by his/her primary care physician, if possible, within 72 hours of locating the child or immediately in the case of a medical emergency.
B. Notify immediately (but no later than 24 hours after the child has been located) all parties and individuals previously notified of the child's disappearance that the child has been located to include, but not limited to:
    1) Secondary FSW, if applicable
    2) TYS Coordinator, if applicable
    3) FSW Supervisor
    4) Area Director
    5) Placement provider
    6) Local OCC attorney
    7) Child's attorney ad litem
    8) Custodial and/or non-custodial parents
    9) Law enforcement
    10) NCMEC
        a) This notification may occur via email, phone, or text as appropriate.
C. Conduct a visit with the child and placement provider by the next business day after the child has been located to determine what immediate needs the child and/or placement provider may have and what immediate steps may need to be taken to better support both the child and placement provider (this visit may be conducted by the secondary FSW caseworker as appropriate).
D. Update the child's placement screen in CHRIS within two (2) business days of locating the child.
E. Determine the primary factors that contributed to the child's running away or otherwise being absent from foster care to include:
    1) Updating the child's CANS assessment including completion of the runaway CANS module within 30 days of locating the child.
    2) Determining if the child is a possible sex trafficking victim based on responses to the updated CANS and any other information gathered.
        a) If there is reason to believe the child is, or is at risk of being, a victim of sex trafficking:
            i. Document accordingly in CHRIS and conference with the FSW supervisor to determine appropriate next steps for additional screening related to sex trafficking victims and/or referral to appropriate services.
            ii. Report information on children or youth who have been identified as being a sex trafficking victim to local law enforcement immediately, and in no case later than 24 hours after receiving the information.
            iii. Document in CHRIS contacts when local law enforcement is notified of a child being identified as a sex trafficking victim.
F. Communicate regularly with the child's secondary FSW caseworker and or TYS Coordinator, if applicable.

When a child missing from an out-of-home placement is located, the secondary Family Service Worker caseworker will:

A. Collaborate with the primary FSW as needed to ensure:
    1) The child has a physical exam by his/her primary care physician, if possible, within 72 hours of locating the child.
    2) All appropriate parties are notified that the child has been located.

The Family Service Worker Supervisor(s) will:

A. Conference with the FSW(s) as needed.

B. Notify the Assistant Director of Community Services or designee.

VIII. SERVICES TO PROVIDE OTHER PERMANENT LIVING SITUATIONS
POLICY VIII-A: TRANSITIONAL YOUTH SERVICES

01/2011

The purpose of Transitional Youth Services (TYS) is to better prepare youth in DCFS custody, who are in an out-of-home placement or whose adoption or guardianship is finalized at age 16 or after, for successful transition to adulthood and to ensure that youth have access to an array of resources. The Division of Children and Family Services shall ensure that each youth in foster care who reaches age 14, or who enters foster care at or after age 14, shall be provided the opportunity to take an active role in planning for his or her future. Youth entering foster care between the ages of 14 and 18 will be immediately referred to the Transitional Services Coordinator (TSC).

The Division shall:

- **A. Provide the youth with the opportunity to be actively engaged in all case/client plans impacting his or her future, including, but not limited to a Transitional Plan and a Life Plan.**
- **B. Empower the youth with information regarding all available services and options and provide the youth with the opportunity to participate in services tailored to his or her individual needs and designed to enhance his or her ability to acquire the skills necessary to successfully enter adulthood.**
- **C. Assist the youth in developing and maintaining healthy relationships and life connections with nurturing adults who can be a resource and positive guiding influence in his or her life after leaving foster care.**
- **D. Provide the youth with basic information and documentation regarding his or her biological family and personal history.**
- **E. Provide the youth with information that relates to the health care needs of youth aging out of foster care, including options for health insurance after exiting care and the importance of designating another individual to make health care treatment decisions on behalf of the youth, if he or she becomes unable to participate in such decisions and does not have, or does not want, a relative who would otherwise be authorized to make such decisions; provide the youth with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under State law.**
- **F. Inform the youth of his or her right to stay in care until age 21.**

Each youth shall be given the opportunity to create a Transitional Plan which encompasses all the life skills, resources, and future-planning for the youth's successful transition into adult life. The Transitional Plan will be created with the support of the youth's Transitional Team which will consist of adults whom the youth identifies as significant. The youth's primary Family Service Worker shall be responsible for the coordination of the youth's Transitional Team and is responsible for the Transitional Plan and case plan as reflected in the court report. The Transitional Services Coordinator is an appropriate support for some of the youth's transitional plans and may serve on the Transitional Team if appropriate. Because APPLA is the least permanent goal for a youth, the case plan and Transitional Plan shall address life connections.

The Transitional Plan shall allow for client protection. If a youth is identified as legally impaired and likely to become endangered, the Transitional Plan shall include automatic referrals to Developmental Disabilities Services and/or Adult Protective Services as appropriate. For youth with significant mental health issues, the Transitional Plan shall consider appropriate referrals and applications for post-care services (e.g. adult SSI).

The youth and his or her attorney shall have the right to attend all staffings and to fully participate in the development of the Transitional Plan, to the extent that the youth is able to participate medically and developmentally.

Chafee Services

Each youth in DHS custody, age 14 or older, is eligible for Chafee services. All Chafee services are voluntary. Services provided are primarily education- and training-oriented and are intended to keep youth in school while they obtain life skills and participate in other life preparation activities and plans to promote a successful transition to adulthood.

Chafee provides support for three (3) groups of the foster care population:

- **A. Youth in foster care, beginning at age 14 and continuing until the youth completes high school or other secondary educational program, may receive services such as life skills assessment, basic life skills training, and other services such as tutoring that can be approved on a case-by-case basis.**
- **B. Youth may choose to remain in care until the age of 21 and are eligible for Chafee services if they meet any of the following conditions:**
  - **1) Youth is completing secondary education or a program leading to an equivalent credential**
  - **2) Youth is enrolled in an institution which provides post-secondary or vocational education**
  - **3) Youth is participating in a program or activity designed to promote, or remove barriers to, employment**
  - **4) Youth is employed for at least 80 hours per month**
  - **5) Youth is incapable of doing any of the above described activities due to a medical condition, which incapability is supported by regularly updated information in the case plan**
- **C. If a youth was in foster care on his or her 18th birthday, and the foster care case is closed, he or she will be eligible for After Care services and support until age 21**

Chafee also provides support for youth whose adoption or guardianship is finalized at age 16 or after. Such youth are eligible for ETV (Education Training Voucher) and may attend youth development activities and life skills classes.

Assessments begin at age 14 and transitional services may begin at age 14 for youth already in foster care. In cases where a youth younger than 14 needs life skills training, the DCFS Director or designee may grant a waiver for services.

DCFS shall provide, either directly or through contract, those services identified in the life skills assessment that are indicated to help the youth achieve independence. The case plan and/or Transitional Plan must identify and address the specific skill needs of each youth. Each youth age 14-17 receiving Transitional Services shall be assessed annually using an appropriate life skills assessment tool; however, an individualized assessment shall be conducted every six months to determine the youth's progress in acquiring basic life skills and the skills necessary for a successful transition to adulthood. Basic life skills will be assessed at each staffing held for a youth age 14 and older. When the youth turns 18, assessments will be highly individualized.

If a youth was in foster care on or after his 16th birthday and was adopted before his 18th birthday, he will be eligible for services until his 21st birthday.

While incarcerated youth (prison, jail, DYS custody) are ineligible for Chafee funding, the youth shall still be given the opportunity to plan for his or her future.

Opportunities shall be available for each foster parent caring for, or interested in caring for, a youth age 14 or older, and each Family Service Worker responsible for any youth, age 14 or older, in helping youth acquire basic life skills.

Within 30 days after the youth leaves foster care, the Division shall provide the youth the following:

- **A. A full accounting of all funds held by the department to which he or she is entitled**
- **B. Information on how to access the funds**
- **C. When the funds will be available**

PROCEDURE VIII-A1: Referral for Transitional Services

01/2011

The Family Service Worker will:

A. Complete the CFS-001: Referral for Transitional Services & Support on all youth entering foster care between the ages of 14 and 18. The CFS-001: Referral for Transitional Services & Support will be completed also on youth who turn 14 while in foster care. All youth must be assessed for life skills within 30 days of entering care or within 30 days after their 14th birthday.
B. Forward the completed and signed CFS-001: Referral for Transitional Services & Support to the TSC. The youth must sign the CFS-001: Referral for Transitional Services & Support to be eligible for Chafee-specific services and support.
C. If the youth chooses to participate, notify the TSC Supervisor and he or she will assign the TSC, as appropriate.
D. Assist the youth in completing a life skills assessment within 30 days of entering care or within 30 days after their 14th birthday.
E. After case plan is completed, initiate a Transitional Team Meeting and document on the Contact Screen and in the Transitional Plan as appropriate.
F. Ensure that each youth age 14-17 is individually assessed every six (6) months to:
   1) Review their Life Plan.
   2) Determine what life skills they have attained.
   3) Determine what life skills they still need.
G. Ensure that each youth age 14-17 is assessed annually using the appropriate life skills assessment tool.
H. Share the reassessment results with the TSC and document the reasons for non-completion.
I. Coordinate logistics for life skills training or other youth development activities with the foster parent or caretaker.
J. Prepare the youth for Transitional Team meetings.
K. Enter date into CHRIS in a timely manner.

If the youth makes a planned move (e.g. college) to another county, the supervisor in the primary county should communicate with the supervisor in the placement county before the youth moves.

If the youth makes an unplanned move to another county, the supervisor in the primary county should notify within ten (10) days, by email, the supervisor in the placement county. The receiving supervisor should then make secondary caseload assignments to the FSW and the TSC and directly notify them of the assignment. All workload assignments will go through the Coordinator's immediate supervisor and not the individual county supervisors.

If a youth is transferred to another Area/County not designated as primary, the FSW in the residence Area/County should:

A. Assist in obtaining an assessment/reassessment if the date occurs while the client is in the other county.
B. Transfer case files and all records of life-skills training sessions attended, skills acquired or mastered, and copies of assessment results to the FSW and the TSC in the secondary county to ensure that training needs and goals will continue to be addressed.
C. Assist youth in completing the NYTD survey, if applicable.

The Transitional Services Coordinator will:

A. Update the Contact Screen in CHRIS each time contact is made with a youth. Contacts include group training sessions, face-to-face contact, phone contact, the youth's attendance in life-skills training, transitional team meetings, or ETV consultation. Indicate the title or content and information concerning the youth's participation.
B. Complete Education and Employment Screens when appropriate.
C. Develop life skills training resources.
D. Complete the CFS-035: Coordinator Monthly Summary.
E. Submit the CFS-035 to the TSC Supervisor and the TYS Program Manager by the sixth day of the month.

F. Coordinate and support transitional activities with the FSW when appropriate.
G. Document the completion of the initial life skills assessment and any reassessments on the IL Checklist Screen and that the results were routed to the youth, FSW, and foster parents/provider in the Document Tracking screen.
H. Document all transitional activities and services on the Client Contact Information Screen.

PROCEDURE VIII-A2: Youth Transitional Plan & Life Plan

08/2012

The Family Service Worker will:

A. Develop a Transitional Plan with all youth in foster care between the ages of 14 and 21, and for all youth who turn 14 while in foster care, within 90 days of entering care or within 90 days after their 14th birthday.
B. Assist the youth in developing a Transitional Team to include individuals identified by the youth as significant (e.g. foster parents, bio family, AAL, CASA, mentors, therapists, TSC, teachers, coaches).
C. Review the Transitional Plan every six months to ensure consistency with education plan, case plan, and life plan and coordinate with the youth's school at least annually, until the youth exits foster care or secondary school.
D. Determine, based on the youth's age, maturity, disabilities, and other factors, what shall be appropriate to include in the Transitional Plan.
E. Determine at which point in the youth's development to include the following components: (All components must be present by the time the youth is 17 years old.)
    1) Education component
    2) Employment component
    3) Health component to include information on:
        a) Options for health insurance
        b) Documentation of a health care power of attorney or health care proxy if the youth chooses to designate one
    4) Housing component
    5) Lifelong Connections component
    6) Written confirmation that the youth has been informed of his right to stay in foster care after reaching 18 years of age for education, treatment, work, or other specific programs and services, including but not be limited to the John H. Chafee Foster Care Independence Program and other transitional services
    7) The youth's court case record, including information on:
        a) His or her biological family
        b) Foster care placement history
        c) Tribal information, if applicable
        d) Whereabouts of siblings, if any, unless a court determines that release of information pertaining to siblings would jeopardize the safety or welfare of the sibling
    8) List of significant individuals in the youth's life
    9) Assistance in obtaining a free credit report and if the youth has a bad credit report because of identity theft, assistance in correcting the credit report
F. Assist the youth or arrange for assistance in:
    1) Procuring life skills training
    2) Completing applications for:
        a) ARKids First, Medicaid, or assistance in obtaining other health insurance
        b) Referrals to transitional housing, if available, or assistance in securing other housing
        c) Assistance in obtaining employment or other financial support
    3) Applying for admission to a college or university, or to a vocational training program, or another educational institution and in obtaining financial aid, when appropriate
    4) Developing and maintaining relationships with individuals who are important to the youth and who may serve as a resource to the youth based on his or her best interests

G. Discuss with the youth the importance of designating someone to make health care decisions on their behalf when they exit from foster care, if they become unable, or if they do not have or do not want, an otherwise authorized relative to do so.
H. Assist the youth in contacting the individual(s) who they would like to serve as their health care power of attorney or health care proxy and completing documentation authorizing a health care power of attorney or health care proxy. (DHS serves as the youth's health care power of attorney or health care proxy until the youth exits foster care.)
I. With court permission and if the youth desires, facilitate visits between the youth and his relatives.
J. Assist all youth in or entering foster care at age 14 or above or in the 9th grade, whichever comes first, within 90 days after their 14th birthday or 90 days after entering the 9th grade, in developing a Life Plan (CFS-002: Life Plan and Agreement for Youth in Transition).
   1) The Life Plan shall be youth-driven.
   2) The Life Plan shall contain a concrete to-do list for youth, staff, and stakeholders.
   3) The Life Plan should be adopted by the Transitional Team within six (6) months of the youth's 16th birthday or entry into foster care, whichever comes first.
K. Hold a final Transitional Team meeting within 90 days of youth's planned exit from foster care.
L. Invite the youth's TSC to the Transitional Team Meeting to discuss Chafee After Care support and ETV.
M. At the final Transitional Team meeting, complete CFS-003: Checklist for Youth Exiting Care and provide the youth with the following and obtain his signature and that of his attorney ad litem confirming receipt:
   1) Social security card
   2) Certified birth certificate or verification of birth record, if available or should have been available
   3) Family photos in the possession of the Division
   4) All the youth's health records for the time the youth was in foster care and any other medical records that were available or should have been available to the Division. A youth who chooses to remain in foster care after reaching age 18 may request that his or her health records remain private
   5) All of the youth's educational records for the time the youth was in foster care and any other educational records that were available or should have been available to the Division
   6) Driver's license and other picture identification
   7) Transitional Resources Book and Life Book, if applicable
   8) Life Plan
   9) If the youth elected not to designate a health care power of attorney or health care proxy before aging out of care (whether at 18 or 21), contact information for legal services if at a later point the youth decides to designate someone to make health care decisions on his or her behalf, if he or she becomes unable to participate in such decisions and does not have, or does not want, a relative who would otherwise be authorized to make such decisions
   10) All information contained within the youth's case plan (current or former, as requested)
   11) A list of all the youth's former placements
N. Document a current address and contact information for youth who reside outside the foster home in order to study, work, or for any other reason. This information must be kept current.
O. Within 72 hours of case closure, notify the Eligibility Unit of the case closing and provide the Trust Coordinator with any information requested.

The Transitional Youth Services Unit Manager or designee will:

A. Review CHRIS report regarding TYS credit check alerts monthly to determine when to run an annual credit check on youth who are 16 and older:
   1) Submit information on each appropriate youth to each of the three (3) nationwide Credit Reporting Agencies (CRAs) – Transunion, Equifax, and Experian – in succession (i.e., do not contact all three (3) CRAs at the same time) in order to request a credit check. This process will begin within 30 days of the youth's 16th birthday or within 30 days of the youth coming into care, whichever comes first, until the youth exits care.
      a) One (1) CRA must be contacted, the credit check information received from that CRA, and any inaccuracies corrected before the next CRA is contacted. Ensure that one full year has passed since accessing the previous year's report before viewing the current year's report.

b) Obtain a copy of the credit report, if one exists (the majority of youth under the age of 18 should not have a credit report), from each of the three (3) Nationwide Credit Reporting Agencies (CRAs) -- TransUnion, Equifax, and Experian -- for each youth (information must be obtained from each CRA in succession (i.e., all three (3) CRAs are not to be contacted at the same time regarding a particular youth)).

B. If problems or inaccuracies are detected on a youth's credit report, contact the CRA that issued the report to resolve any inaccuracies found in the report.
   1) Explain that the child is a minor and cannot legally enter into any type of contract.
   2) To prove that the child is a minor, send the CRA:
      a) A copy of the child's birth certificate or other documentation of age, such as a court order
      b) A letter asking them to remove all accounts, application inquiries, and collection notices from the credit report associated with the child's name or personal information
      c) Documentation verifying that the youth is in foster care and the agency is authorized to act of the youth's behalf
   3) Discuss with the CRA the appropriate course of action and initiate applicable next step for the action(s).
C. Share relevant information with the youth and the youth's FSW and TSC.
D. Document credit report review in contacts screen in CHRIS.

The Eligibility Unit Trust Coordinator will, within 30 days after the youth leaves foster care, provide the youth with the following information:

A. A full accounting of all funds held by the department to which he or she is entitled
B. How to access the funds
C. When the funds will be available

PROCEDURE VIII-A3: Interagency Support for Youth with Disabilities

06/2011

In order to promote continuity of care for youth with disabilities, Adult Protective Services (APS), DCFS, Division of Youth Services (DYS), Division of Developmental Disability Services (DDS), and Division of Behavioral Health Services (DBHS) have signed a Memorandum of Understanding that describes each Division's roles and responsibilities.

The Family Service Worker will:

A. Arrange an interagency case staffing and initiation of transition plan following youth's 14th birthday.
B. Arrange an interagency case staffing within 30 days to include PACE determination and DD diagnosis identified for individuals taken into custody after age 14.
C. Arrange an interagency review every six (6) months for youth likely to require state custody status as an adult.
D. Invite the youth's TSC and any other appropriate individuals to the interagency case staffing and all subsequent interagency reviews.

APS will:

A. Review plan and identify issues requiring clarification or issues that might have been omitted and request this information from DCFS.
B. Participate in case staffing and transition plan review following client's 17th birthday.

APS, DCFS, DYS, and OCC will inform court of transition plan.

APS and DDS will review transition plan and arrange appropriate placement prior to client's 18th birthday.

POLICY VIII-B: EXTENDED FOSTER CARE

09/2013

Even after reaching the legal age of majority (i.e., 18 years of age), all youth need additional support and access to an array of resources as they continue their transition into adulthood. As such, youth ages 18 through 21 may choose to participate in extended foster care for education, treatment, work, or other programs and services as determined appropriate by their Transitional Team in order to help them achieve a successful transition into adulthood.

In order to be eligible for extended foster care, youth must meet one of the following criteria:

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

If a youth was in foster care on or after his 16th birthday and was adopted or a guardianship was put into place on behalf of the youth before his or her 18th birthday, he or she will be eligible for Transitional Youth Services until his or her 21st birthday.

Board payments for IV-E eligible youth will be made through title IV-E funds. Board payments for youth who are not IV-E eligible will be paid using State General Revenue funds.

A copy of the youth's entire record will be made available to him or her at no cost at the final Transitional Team meeting which will occur within 90 days of youth's planned exit from care.

PROCEDURE VIII-B1: Extended Foster Care

04/2012

The Family Service Worker will:

A. Consider the following issues with the youth:
   1) The school the youth will attend
   2) Living arrangements
   3) Choosing a sponsor
   4) Budgeted income/expenses
   5) Amount of board payment
   6) Start-up items
   7) Transportation needs
   8) Continued life-skills training
   9) Support needed to help youth remain in school
   10) Designating a health care power of attorney or health care proxy (if not already determined before entering extended foster care)

B. Assist the youth in locating and choosing a sponsor who may be the youth's out-of-home provider, attorney ad litem, apartment manager/owner, or a volunteer from the community.

C. Approve the sponsor chosen by the youth.

D. Notify the Transitional Services Coordinator of the youth's sponsor.

E. Assist the youth and his or her Transitional Team in determining appropriate housing and needed support for the first school year. (If youth intends to reside with sponsor, he or she must be an approved placement.)
F. Complete CFS-370: Residence Checklist for Youth.
G. Notify Resource Worker to initiate the youth's monthly board payments when residence is selected.
H. Develop a budget with the youth and share it with the Transitional Team.
I. Visit the youth face-to-face at least once a month.
J. Obtain approval for less than twice-monthly visits from the County Supervisor, if appropriate.
K. Maintain monthly contacts with the youth's sponsor. Contacts may be by telephone.
L. Obtain the youth's consumer credit report annually until the youth exits foster care.
    1) Access the report via www.annualcreditreport.com within 30 days of the youth's birthday or within 30 days of the youth entering care, whichever comes first; however, only access it on an annual basis (i.e., ensure that one full year has passed since accessing the previous year's report before viewing the current year's report).
    2) Review report with the youth and help youth in interpreting the report within ten (10) working days of accessing the report.
    3) Assist youth in resolving any inaccuracies found in the report.
    4) Document the credit report review in the contacts screen in CHRIS.
    5) Share relevant information with the youth's Transitional Services Coordinator.

The youth's sponsor will, as appropriate:

A. Attend and participate in Team Meetings.
B. Assist the youth in selecting the transitional living residence.
C. Assist the youth with managing their budget if selected as board payment payee.
D. Maintain regular contact with the youth.

POLICY VIII-C: AFTER CARE SERVICES & SUPPORT

01/2011

Chafee funds can be used to provide assistance and services to youth who have left foster care because they have attained 18 years of age and who have not attained 21 years of age. These services are called After Care. The youth must have been in foster care on his or her 18th birthday and not currently in DHS custody to be eligible for after care services and support.

In order to be eligible for after care, youth must meet one of the following criteria:

1. **Youth must have been in foster care at or before age 17, OR**
2. **Youth must have entered care at age 17 or after due to dependency-neglect, OR**
3. **Youth must have entered foster care at age 17 or after with a prior dependency-neglect status.**

Additionally, a youth must have a budget and a plan that includes participation in education, employment, training, or treatment in order to be eligible for after care. After care support is generally limited to $500 in any one month and may be requested for a total of $2000. After care support may include expenditures for education or training programs, housing, insurance, housing set-up, transportation, utility bills, or utility deposits. After care support is paid to the provider, not the youth. Reimbursement may be made to the youth if documentation of the expense is provided. After care support does not include amounts available through ETV. Youth eligible for after care may also participate in life skills classes.

PROCEDURE VIII-C1: After Care and Follow Up

06/2011

If the youth is still in foster care, the Family Service Worker will:

A. Work with the youth requesting after care support. Request will be made via CFS-004: Request for After Care Support.
B. Send CFS-004: Request for After Care Support to the youth's TSC.
C. Assign the TSC as the primary worker.

If the youth has already left foster care, the Transitional Service Coordinator will:

A. Work with the youth requesting after care support. Request will be made via CFS-004: Request for After Care Support.
B. Request his or her Supervisor to reopen the youth's closed child protective service case and assign the TSC as the primary worker.

Once the Transitional Services Coordinator is assigned as primary worker, he or she will:

A. Select Transitional Youth Services Program as the case type on the Case Summary Screen.
B. Complete the Contact Screen for all contacts with youth and update as appropriate.
C. Complete Education and Employment screens and update as appropriate.
D. Update Client Contact Information as appropriate.
E. Document in the Client Contact Information Screen, the type and extent of financial assistance to be provided.
F. Assist the youth in selecting a residence that is appropriate for his or her immediate needs, if needed.
G. Complete a CFS-370: Residence Checklist for Youth to assure the residence and location are acceptable and document in the Document Tracking screen in CHRIS.
H. Provide the youth with available alternatives for meeting their immediate housing needs, if appropriate.
I. Recommend and assist in arranging for personal or community support as requested.
J. Assist the youth in applying for assistance if he or she wishes to start or continue a post-secondary educational program.

K. Document purchase requests in the Document Tracking screen, and if approved, document in Client Contact Information Screen. Payment is not made directly to the youth, except for approved travel reimbursement.
L. Forward after care support requests to Financial Support Unit at least two (2) weeks before payment is due.
M. Maintain monthly contact with the youth.

POLICY VIII-D: TERMINATION OF PARENTAL RIGHTS

08/2013

All children have a right to a safe, permanent family. The Division of Children and Family Services shall develop and implement permanency plans for children. One option is to terminate parental rights to a child for adoptive placement, when it has been determined that reunification with the family is not a viable option. The court may consider a petition to terminate parental rights (TPR) if the court finds that there is an appropriate permanency placement plan for the child. A court may terminate the rights of one (1) parent and not the other parent if the court finds that it is in the best interest of the child.

It is not required that a permanency planning hearing be held as a prerequisite to the filing of a petition to terminate parental rights, or as a prerequisite to the court considering a petition to terminate parental rights.

The Division will file a petition to terminate parental rights under the following circumstances:

- **A. A child (of any age) has been in an out-of-home placement for 15 of the most recent 22 months. The petition must be filed by the end of the child's 15th month in foster care. In calculating when to file a petition for TPR, the Division:**
  - **1) Will calculate the 15 out of the most recent 22-month period from the date the child entered foster care;**
  - **2) Will use a cumulative method of calculation when a child experiences multiple exits from and entries into foster care during the 22-month period;**
  - **3) Will not include trial home visits or runaway episodes in calculating 15 months in foster care.**
- **B. The parent is found by a court of competent jurisdiction to:**
  - **1) Have committed murder of any child;**
  - **2) Have committed manslaughter of any child;**
  - **3) Have aided or abetted, attempted, conspired, or solicited to commit such a murder or such an act of manslaughter;**
  - **4) Have committed a felony battery that results in serious bodily injury to any child or have aided or abetted, attempted, conspired, or solicited to commit felony battery that results in serious bodily injury to any child;**
  - **5) Have subjected any child to aggravated circumstances (see Appendix 1: Glossary);**
  - **6) Have had his or her parental rights involuntarily terminated as to a sibling of the child;**
  - **7) Have abandoned an infant, as defined at A.C.A. § 9-27-303(2) (the petition to TPR will be made within 30 days of the judicial determination that the child is an abandoned infant).**

The petition to terminate parental rights will be made within 30 days of a judicial determination that reasonable efforts to reunify the child and parent are not required.

The Division may elect not to file or join a petition to terminate parental rights if:

- **A. The child is being cared for by a relative, the relative has made a long-term commitment to the child, and the relative is willing to pursue guardianship or permanent custody of the juvenile; or,**
- **B. The child is being cared for by his or her parent who is in foster care, and TPR is not in the best interest of the child;**
- **C. The Division has documented in the case plan a compelling reason why filing such a petition is not in the best interest of the child and the court approves the compelling reason as documented in the case plan; or,**
- **D. The Division has not provided to the family of the child, consistent with the time period in the case plan, such services as the Division deemed necessary for the safe return of the child to the child's home if reunification services were required to be made to the family.**

If a juvenile is the subject of an open case filed under the Arkansas Juvenile Code, OCC will file all subsequent petitions (i.e., TPR, adoption, guardianship) in that same circuit court and case.

If the court adopts the goal of termination of parental rights, the Division shall file a petition to terminate parental rights within 30 days from the date of the entry of the order establishing such goal.

If the court finds that the child should remain in an out-of-home placement, either long-term or otherwise, the child's case shall be reviewed every six (6) months, with an annual permanency planning hearing. Additionally, if the child has been in an out-of-home placement 15 of the last 22 months, and a termination petition has been filed by another party, the Division will seek to join the petition. Concurrent with the filing of a termination petition, the Division will identify, recruit, process and approve a qualified family for adoption.

PROCEDURE VIII-D1: DCFS Initiates Termination of Parental Rights

09/2008

The Family Service Worker will:

A. Consult the OCC Attorney to determine if legal grounds exist for disposition recommendation of termination of parental rights.
B. Schedule and conduct a permanency planning staffing prior to the permanency planning hearing to determine if continuing contact with the custodial/non-custodial parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the custodial/non-custodial parent(s), attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, attorney ad litem, and foster parents.
C. Obtain written consent of the Area Director, if applicable.
D. Prepare a CFS-6024: Permanency Planning Court Report and submit it to the OCC Attorney at least 14 days before the Permanency Planning Hearing.
E. Work with the OCC Attorney to file a petition to terminate parental rights.
F. Work with the OCC Attorney to prepare for termination of parental rights hearing within 30 days from the date of the entry of the court order.
G. Provide the OCC Attorney with information on the CFS-408: Federal Parent Locator System Information regarding the custodial/non-custodial parent(s) or putative parent so that notice of the termination petition can be provided.
H. Provide the OCC Attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Policy III-B: Notification of Relatives and Fictive Kin When a Child is Taken into Custody by the Division and related procedures.
I. Refer to Policy VIII-G or VIII-H if termination of parental rights with power to consent to adoption is granted.

The Adoption Specialist will:

A. Participate in the staffing if adoption is to be considered as a permanent plan for a child.
B. Work with the OCC Attorney to prepare for the termination of parental rights hearing.

PROCEDURE VIII-D2: Court Initiates Termination of Parental Rights

Sometimes the court will determine that the goal should be termination of parental rights when it is not the recommendation of DHS. In these instances the following procedures will apply.

The Family Service Worker will:

A. Work with the OCC Attorney to file a petition to terminate parental rights within 30 days from the date of the entry of the court order.
B. Notify the Area Director in writing with a copy of the order attached.
C. Consult the County Supervisor and OCC Attorney immediately if the order should be appealed or if a rehearing is appropriate.
D. Work with OCC Attorney to prepare for termination of parental rights hearing.

E. Schedule and conduct a staffing, if applicable, to determine if continuing contact with the birth/legal parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the birth/legal parent, attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, attorney ad litem and foster parents.
F. Provide the OCC Attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Policy III-B: Notification of Relatives and Fictive Kin When a Child is Taken into Custody by the Division and related procedures.
G. Provide the OCC Attorney with the name and last known address of a birth/legal parent(s) or putative parent(s) so that notice of the termination petition can be provided.
H. Refer to Policy VIII-G or VIII-H if termination of parental rights with power to consent to adoption is granted.

PROCEDURE VIII-D3: Custodial/Non-Custodial Parent(s) Requests Termination of Parental Rights

When parents want to relinquish custody to DHS and free a child for a permanent placement (refer to Policy VIII-F), the Family Service Worker or the Adoption Specialist (for unborn or newborn infants only) will:

A. Discuss service options and offer services to maintain the family unit.
B. Read to the parent the section of the consent form that explains the right to withdraw consent to termination of parental rights form.

   The consent to terminate parental rights shall state the person has the right to withdraw consent, within ten (10) calendar days from the signature date, by filing an affidavit with the clerk of the Juvenile Division of Circuit Court in the county designated by the consent as the county in which the termination of parental rights will be filed, and providing the address of the juvenile court clerk of the county in which the termination of parental rights will be filed.

   The Family Service Worker will assist the parent in filing the affidavit to withdraw parental consent.
   If the 10-day period ends on a weekend or legal holiday, the parent may file the affidavit the next working day. No fee shall be charged for the filing of the affidavit.
C. Notify OCC Attorney.

If the parents still wish to relinquish custody to DHS (refer to Policy VIII-F) after efforts to preserve the family have been offered, the Family Service Worker or the Adoption Specialist (for unborn or newborn infants only), will:

A. Present an OCC-410: Consent to Termination of Parental Rights to the parents and explain the form.
B. Notify County Supervisor in writing if parents sign OCC-410, with a copy attached.
C. Notify OCC Attorney in writing with the original OCC-410 attached.
D. Schedule and conduct a staffing, if applicable, to determine if continuing contact with the custodial/non-custodial parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the custodial/non-custodial parent(s), attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, attorney ad litem and foster parents.
E. Obtain written consent of the Area Director, if applicable.
F. Work with the OCC Attorney to prepare for termination of parental rights hearing.
G. Provide the OCC Attorney with the name and last known address of a custodial/non-custodial parent(s) or putative parent(s) so that notice of the termination petition can be provided.
H. Refer to Policy VIII-G or VIII-H if termination of parental rights with power to consent to adoption is granted.

PROCEDURE VIII-D4: Fast Track Adoption under Garrett's Law

07/09

During the course of an investigation of a Garrett's Law allegation or when DCFS has custody of a child through a Garrett's Law investigation, and the mother has notified the FSW that she wants to place the child for adoption through DHS, an adoption agency, a private attorney or a physician, the FSW should contact OCC immediately.
If a report of neglect under A.C.A. § 12-18-103 is made to the Arkansas State Police Child Abuse Hotline, or if a newborn is taken into the custody of the Division as the result of a call to the Hotline reporting neglect, the mother has the option to place the newborn for:

A. Adoption through a licensed child placement agency, including DCFS, under A.C.A. § 9-28-402(7), or
B. A private adoption through a person licensed to practice medicine or law.

If the Family Service Worker determines, pursuant to the Child Maltreatment Act, that the child may not safely remain in the home, the Family Service Worker shall:

A. Place the newborn in a licensed or approved DCFS foster home or allow the newborn to be placed in a private foster home that is licensed or approved under A.C.A. § 9-28-401 et seq. until:
    1) The proposed adoptive family, including relatives, has completed the adoptive home study process
    2) A court has issued an order transferring custody to the proposed adoptive family, if the child is in a DCFS licensed or approved foster home
B. If DCFS is handling the adoption, conduct the required home study on the proposed adoptive family as prescribed by Policy VIII-H and subsequent procedure.
    1) This home study on a relative may not be waived.
C. Be aware that an adoption by a relative of the newborn shall be denied unless:
    1) The proposed relative adoptive parents have an approved home study or the Division approves the adoption under state law on adoption, child welfare agency licensing law and regulations, and department policy and procedures
    2) The court determines the proposed relative adoptive parents have the capacity and willingness to abide by orders regarding care, supervision, and custody so that child protection will not be an issue if the adoption is granted
    3) The court enters an order describing the level of contact, if any, that is permitted between the birth parent and the proposed relative adoptive parents and the consequences for violation of the order of contact under A.C.A. § 5-26-502
D. If the mother withdraws her consent to the adoption, initiate an action to ensure protection of the child, including without limitation, taking the child in to custody if custody is warranted to protect the health and safety of the child.
E. Follow all other adoption procedures as outlined under Policies and Procedures VIII-G and VIII-H.

POLICY VIII-E: DECISIONS INVOLVING CHILDREN IN DHS CUSTODY WITH PARENTAL RIGHTS TERMINATED

08/2013

The Department of Human Services has designated the Area Director or designee as having the authority to give consent for major decisions for children whose parental rights have been terminated.

PROCEDURE VIII-E1: Decisions Involving Children in DHS Custody with Parental Rights Terminated

08/2013

The Area Director or designee must:

A. Give written consents in the following decisions involving children in DHS custody with parental rights terminated:
   1) Goal Changes in the CFS-6010: Case Plan
   2) Marriage, if appropriate
   3) Driver's license issuance
   4) Entry into the Armed Forces
   5) Travel inside or outside the United States
   6) Retention of child in school grade
   7) Expenditure of child's funds
   8) Birth control
   9) Media release
   10) Major medical consents; however, Division staff shall not make any of the following decisions without receiving approval from the court:
      a) Consent to the removal of bodily organs, unless the procedure is necessary to save the life of the child
      b) Consent to withhold life-saving treatments
      c) Consent to withhold life-sustaining treatments
      d) The amputation of any body part

PROCEDURE VIII-E2: Financial Benefits

The Family Service Worker, or the Adoption Specialist, (if the child has been placed with an adoptive family), will work with appropriate DHS financial staff if the Department is to be made the payee of proceeds or if payee changes.

PROCEDURE VIII-E3: Travel

The Family Service Worker, or the Adoption Specialist, (if child has been placed with an adoptive family), will:

A. Provide written consent from the Supervisor to the adult with whom the child is traveling.
B. Provide information on how to reach the Family Service Worker or Adoption Specialist in an emergency.

PROCEDURE VIII-E4: Arrest of Child

The Family Service Worker, or the Adoption Specialist, (if the child has been placed with an adoptive family), will:

A. Notify the Supervisor and the OCC Attorney when a child is arrested.
B. Learn where the child is being held, the place and time of hearings, and inform the Area Director, Manager of Adoption Services Unit, if the child is placed for adoption, OCC Attorney, and the attorney ad litem immediately of the information.
C. Assist in obtaining legal counsel for the child if applicable.

D. Determine that the child understands his or her legal rights.
E. If appropriate, attempt to have the child released on bond or to the foster parents, adoptive parents, or a therapeutic environment consistent with the child's needs.
F. Attend all hearings with the child.
G. Visit the child weekly while incarcerated to ascertain the child's well-being.
H. Provide adequate personal care items.
I. Prepare and route an "Incident Report" (DHS-1910).
J. Update child placement information in CHRIS. Updating the placement information will open a response window to notify the Eligibility Unit of the placement change.

PROCEDURE VIII-E5: Education

The Family Service Worker, or the Adoption Specialist, (if the child has been placed with an adoptive family), will:

A. Notify the school principal in writing to request that a surrogate parent be appointed for a child who receives special education if one has not been previously appointed.
B. Contact the Education Liaison, Community Services, State Office, prior to placement of a child out-of-state, if the child receives special education, to assure appropriate compliance to procedures and law.
C. Notify the Supervisor of problems identified at school conferences.
D. Notify the Supervisor when a child is expelled or suspended and if the needs of a child receiving special education are not being met to determine if a due process hearing should be requested.
E. Participate in Individual Education Plan (IEP) conferences.
F. Consult with the Education Liaison, Community Services, State Office, about a child who receives special education services if problems or questions arise.

PROCEDURE VIII-E6: Standby Guardianship

Stand-by Guardianship is a legal mechanism which allows a parent who is chronically ill or near death to appoint a guardian for the parent's minor children. The guardianship will prevent children from coming into out-of-home placement at a later date when the parent becomes unable to care for the children.

The guardian's authority will take effect:

A. Upon the death of the parent
B. Upon the mental incapacity of the parent
C. Upon the physical debilitation of the parent with the parent's consent

Referrals should be made to legal services for the preparation of a guardianship. This is NOT a function of OCC.

PROCEDURE VIII-E7: Children with Disabilities Approaching Adulthood in Need of a Guardian

09/2011

The Family Service Worker will:

A. Find a responsible person who will accept guardianship by contacting contracted agencies whose purpose is to find a guardian.
B. Contact the OCC attorney for specific procedures to establish guardianship.

PROCEDURE VIII-E8: Discharge of Guardianship for Children Placed in Guardianship of DHS

The Family Service Worker, or the Adoption Specialist (if the child has been placed with an adoptive family), will:

A. Schedule and conduct a staffing.

B. Notify OCC attorney to take action to discharge guardianship.

POLICY VIII-F: BIRTH PARENTS RELINQUISHING INFANTS FOR ADOPTION

The Division shall provide services to birth/legal parents who are planning to relinquish infants for adoption or who have relinquished their infant to a medical provider or law enforcement agency under the provisions of the Safe Haven Act.

The Safe Haven Act allows a parent of a child who is 30 days old or younger to voluntarily leave or deliver the child to a medical provider or law enforcement agency. Although the statute does not require a court order, DHS will petition the court for an order of emergency custody. The parent must not express any intent to return for the child. DHS takes custody of the child.

PROCEDURE VIII-F1: Birth Parents Relinquishing Infants for Adoption

The Family Service Worker will:

A. Refer birth/legal parents planning to relinquish an expected infant for adoption to the Adoption Specialist.

The Adoption Specialist will:

A. Complete an Intake Study and the CFS-456: Birth Family Background Information through one or more face-to-face interviews with parents within two weeks of referral. If the parent is under 18 years of age and so desires, involve a relative or concerned advocate in the intake interview. Document the Intake Study if the parent is unavailable, uncooperative, etc. The Intake Study will include the following information on the birth mother, legal father, and/or putative father:
   1) Personal information (names, birth dates, sex, race, marital status and religion of each parent and their parents, siblings, other children of either parent, Social Security numbers and address of each parent).
   2) Specific problems and needs.
   3) Assessment of the family's strengths and relationships and relevant social, economic and cultural circumstances pertinent to placement.
   4) Reasons for placement of the child and attitudes of parents toward relinquishment.
   5) Available physical, developmental, educational and occupational history of parents and other members of the family.
   6) Available medical and psychological history of each member of the family.
   7) Assessment of alternatives to adoptive placement and description of services which have been provided to the family and child in order to preserve and strengthen the family.
   8) Assessment of the effect of placement on the parents and other family members.
   9) Parents' short and long range goals of the placement.
   10) Summary of contacts between parents and DCFS to include date, location, purpose, and results of contact.
B. Help parents understand their retained legal rights and obligations and those designated to DCFS by the court. Provide this information to parents in clear, simple writing. Document these actions in the Intake Study and how the information is understood by the parents.
C. Obtain an affidavit of paternity. Advise the putative father of the Putative Father's Registry at the Department of Health. Document in the Intake Study.
D. Comply with the Indian Child Welfare Act if there is Indian ancestry in either parent's family.
E. Develop a CFS-6010: Case Plan with the birth/legal parents, preferably prior to the infant's birth, which will address:
   1) counseling services;
   2) health services;
   3) post-placement services;
F. Give "Arkansas Mutual Consent Voluntary Adoption Registry" brochure. Document in the Intake Study.
G. Assist mother in applying for Medicaid for her medical expenses. If ineligible for Medicaid, refer the mother to the private licensed adoption agencies.
H. Apply for Medicaid for the infant as soon as possible after birth.
I. Advise medical providers not to bill the parents for the infant's medical expenses if the parent relinquishes parental rights. Give provider a copy of the custody order.

J. Notify medical providers of the infant's Medicaid number when approved.
K. Give parents a blank "Consent to Termination of Parental Rights" (OCC-410) before birth.
L. Contact OCC Attorney to make arrangements for the appointment of an attorney ad litem for a minor birth mother and the minor father if he is the legal father of the infant.
M. Wait at least 24 hours after the infant's birth, and until the mother is lucid, to present OCC-410 for signature. Explain her right to withdraw her consent within 10 calendar days for the signature date.
N. Obtain legal father's signature on the OCC-410. Explain his right to withdraw consent within 10 calendar days from the signature date.
O. Obtain signature of minor birth mother's attorney ad litem on the OCC-410 if in agreement with the adoption. Obtain signature of minor birth father's attorney ad litem on the OCC-410 if the minor is the legal father.
P. Advise OCC Attorney if the minor's birth parents do not agree with the adoption.
Q. Route the signed, notarized OCC-410s to the OCC Attorney to start termination of parental rights proceedings.
R. Notify OCC Attorney immediately if the birth mother or legal father revokes her/his consent during the days allowed by law.
S. Name the infant if the mother does not and advise the hospital of the infant's name.
T. Advise the hospital staff of parents' wishes concerning contact with the infant.
U. Prepare an adoption packet about the infant (see Appendix 2).
V. Contact parents at least once during 10-day revocation period.
W. Contact parents monthly for at least six months.
X. Maintain a record of parents who request to relinquish an infant for adoption to include:
    1) personal information including medical history;
    2) social history;
    3) copy of the Intake Study;
    4) strengths and needs of the parents and the services required;
    5) Adoption Specialist's assessment and initial case plan;
    6) signed documents between DCFS and the parents;
    7) summary of dates of contact and progress toward goals;
    8) case review reports;
    9) discharge summary;
Y. Select an adoptive family (Policy VIII-H).
Z. Maintain a record of denials of application for services and reasons for denial.

PROCEDURE VIII-F2: Voluntary Delivery of an Infant under the Provisions of the Safe Haven Act

04/2018

Any medical provider or law enforcement agency shall, without a court order:

A. Take a 72 hour hold of a child who is:
    1) 30 days old or younger; and,
    2) Left with or voluntarily delivered to them by the child's parent, who does not express intent to return for the child.
B. Perform any act necessary to protect the physical health and safety of the child.
C. Immediately notify the Division of Children and Family Services.

The Family Service Worker will:

A. Notify OCC immediately upon taking possession of such a child in order to initiate a dependency petition.
B. Utilize the Arkansas Attorney General's Missing Children Services Program and any other national and state resources to determine whether the child is a missing child.
C. Refer the relinquished infant for adoption services by assigning the case secondary to the Adoption Specialist Supervisor's inbox.

The Adoption Specialist Supervisor will:

A. Assign an Adoption Specialist to the case within 24 hours.
B. Ensure that an appropriate adoptive home is sought to meet the needs of the infant.

The Adoption Specialist will:
Carry out the same actions as those listed for the Adoption Specialist in Procedure VIII-F1.

POLICY VIII-G: FOSTER PARENT, PROVISIONAL FOSTER PARENT, AND RELATIVE ADOPTION

08/2013

The Division supports adoption by a foster parent or provisional foster parent, who has a well-established relationship with the child in his or her care and who expresses an interest in adoption, without regard to any racial or ethnic differences if such a placement is in the best interest of the child. The Division also supports adoption by a relative, who is not presently caring for the child and who expresses an interest in adoption if such a placement is in the best interest of the child.

Each family and child will be carefully assessed and prepared for adoption. The Division provides pre-placement services for relative adoptions to move children into adoptive families in a timely manner. A child in foster care placed in an adoptive home continues status as a child in foster care until finalization of the adoption and the adoption subsidy is initiated. Prior to the finalization of the adoption, post-placement services are provided and services to preserve adoptive families are offered after the adoption is finalized. A child in foster care who resides in residential or long-term care facility due to illness or disability may be adopted by a person who has been approved by the Division.

Before placement of a child in the home of the adoptive parent, DCFS will conduct a home study. The purpose of the home study is to evaluate the prospective adoptive parent's ability to meet the child's needs as well as evaluate their compliance with Minimum Licensing Standards and DCFS policy requirements for adoptive homes. If the prospective adoptive home is found to be out of compliance with a licensing standard or a DCFS policy, this non-compliance issue must be addressed. However, if the Adoption Specialist, or the individual conducting the home study, determines that the non-compliance issue would not endanger the safety or well-being of children placed in a home, an alternative compliance or policy waiver may be requested as appropriate. (An alternative compliance is a request for approval from the Child Welfare Agency Review Board to deviate from a minimum licensing standard, while a policy waiver is a request to deviate from a DCFS policy or procedure.) For more information on requesting an alternative compliance or policy waiver, see Appendix 8.

If there is a pending child maltreatment report on the family, the Adoption Specialist will stop proceedings until a determination is made. The investigation is to be reviewed and discussed with the Adoption Supervisor and the Adoption Manager.

Criteria for consideration in determining the appropriateness of adoptive homes include, but are not limited to the following:

***Jurisdiction* - DCFS will participate in the adoption of a minor who is in DHS custody or for whom the Court has retained jurisdiction only if either the person seeking to adopt the child, or the child, is currently a resident of Arkansas.**

***Residency Requirements for Adoption in Arkansas* - The family planning to adopt may live in Arkansas or reside out-of-state and have an approved adoption home study from a licensed adoption agency in their state. The family's home study must be on file in the Adoption Services Unit.**

Residency to determine jurisdiction over an adoption may be established in accordance with one of the three following sets of criteria:

- **A. A child under the age of six months is a resident of Arkansas if:**
  - **1) The biological mother resided in Arkansas for more than 4 months prior to the child's birth, and**
  - **2) The child was born in Arkansas or in any city which adjoins the state line or is separated only by a navigable river from an Arkansas city which adjoins the state line, and**
  - **3) The child remains in this state until the interlocutory decree has been entered. Or in the case of a nonresident adoptive family, upon receipt of ICPC approval, the child and the prospective adoptive**

parents may go back to their state of residence and subsequently may return to Arkansas for a hearing on the petition for adoption.

B. A child over the age of six months is a resident of Arkansas if that child:
   1) Has resided in this state for at least six months, and
   2) Currently resides in Arkansas, and
   3) Is present in this state when the petition for adoption is filed and heard by a court of competent jurisdiction.

C. A person seeking to adopt is a resident of Arkansas if that person:
   1) Occupies a dwelling within the state, and
   2) Has a present intent to remain within the state for a period of time, and
   3) Manifests the genuineness of that intent through an ongoing physical presence within the state together with indications that the person's presence is not merely transitory in nature.

Age

A. Applicant is at least 21 years old.

B. Applicant is a primary caregiver that is at an age so that it can be anticipated that the caregiver can actively parent the child into adulthood. This assessment will be made by the Adoption Specialist when determining what is in the best interests of the child(ren) to be adopted.

C. Generally, at least a 10-year age difference and no more than a 45-year age difference between the child and adoptive applicant is preferred.

Relationship Stability

A. In a two-parent home, both parents shall be joint applicants and both applicants shall actively participate in the approval process. The couple shall demonstrate a stable relationship. In assessing relationship stability, considerations may include major life changes such as:
   - **Death or serious illness among family members**
   - **Marriage, separation, divorce, or other significant changes in the couple's relationship**
   - **Addition of household members (e.g., birth, adoption, aging relative moving in)**
   - **Loss of or change in employment**

B. In a single parent home, the major life changes listed above shall also be considered when assessing the person's ability to be an effective adoptive parent.

A pre-adoptive home may not house or admit any roomer or boarder. A roomer or boarder is:

A. a person to whom a household furnishes lodging, meals, or both, for a reasonable monthly payment; and,

B. Not a household member.

A household member is a resident of the home who:

A. owns or is legally responsible for paying rent on the home (household head); or,

B. is in a close personal relationship with a household head; or,

C. is related to a household head or a to person in a close personal relationship with a household head.

Any household member who resides in the home for more than 3 cumulative months in a calendar year must clear the following background checks: Arkansas Child Maltreatment Central Registry, Arkansas Adult Maltreatment Registry, Arkansas State Police Criminal Record Check, and FBI Criminal Background Check.

***General Physical and Mental Health* - Members of the household must not have a health condition or disability that would interfere with the family's ability to parent the child. Each member of the household shall have a physical examination by a physician within six months prior to the approval of the adoption home study on the prospective adoptive family, and annually thereafter until placement of a child.**

Housing

A. **Space must be adequate to promote health and safety. Each bedroom should have at least 50 square feet of space per occupant.**
B. **All firearms must be maintained in a secure, locked location separate from ammunition.**
C. **All water hazards and dangerous pets will be assessed. Safeguard measures will be implemented, as appropriate.**
D. **Children of opposite sexes shall have their own separate bedrooms if either child is four years old or older, except for a mother in foster care with her child(ren).**
E. **Water must be provided by public water system or approved by the Department of Health.**

***Smoking Restrictions* - DCFS shall not place or permit a child to be placed in a home if the prospective adoptive parent smokes or allows anyone else to smoke in the presence of the child unless it is in the child's best interest to be placed in or remain in the adoptive home. If the adoptive parent indicates smoking will not occur in the presence of a child placed in their home, then DCFS will designate the home a "non-smoking" adoptive home. If a adoptive parent indicates that smoking will occur in the presence of a child placed in the home, the home will be designated a "smoking" adoptive home, and no child may be placed or remain in the adoptive home unless it is in the child's best interest. Second hand smoke is detrimental to a child's health and, as such, it is generally not in a child's best interest to be placed in a home that permits smoking in the presence of a child in care. In addition, state law prohibits smoking in a vehicle if a child in the car is under the age of 14.**

BACKGROUND CHECKS

Please note that a household member is defined as any person who stays in a foster home for more than three cumulative months in a calendar year (e.g., an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for six weeks twice a year.

Central Registry Checks

A. **Each member of the household 14 years of age and older, excluding children in foster care, must agree to a Child Maltreatment Central Registry Check in his or her state of residence and any state of residence in which the person has lived for the past <u>five</u> years, and in the person's state of employment, if different. These checks must be made prior to approval and shall be repeated every two years thereafter until the adoption decree has been issued at which point repeat checks will no longer be required. However, if the home wishes to continue to keep its adoption service open in order to potentially adopt additional children, the Central Registry checks on all household members 14 years of age and older will continue to be run every two years. The person must have no history of true abuse and/or neglect.**
B. **Each member of the household age 18 and one-half years and older, excluding children in foster care, who resides in Arkansas must be cleared through the Arkansas Adult Maltreatment Central Registry. The Arkansas Adult Maltreatment Central Registry check shall be repeated every two years thereafter until the adoption decree is issued at which point repeat checks will no longer be required. However, if the home wishes to continue to keep its adoption service open in order to potentially adopt additional children, the Arkansas Adult Maltreatment Central Registry Checks on all household members 18 and one-half years of age and older will continue to be run every two years.**

Criminal Background Checks

A. **Each member of the household 18 and one-half years of age and older, excluding children in foster care, must agree to an Arkansas State Police Criminal Record Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the Arkansas State Police Criminal Record Check must be initiated to ensure results are received by the time that household member reaches 18 and one-half years of age. These checks must be made prior to approval and shall be repeated annually thereafter until the adoption decree has been issued at which point repeat checks will no longer be required. However, if the home wishes to continue to keep its adoption service open in order to potentially adopt additional children, the Arkansas State Police Criminal**

Record Checks on all household members 18 and one-half years of age and older will continue to be run every year.

B. **Out-of-state adoptive families do not need to do an Arkansas State Police Criminal Record Check if they have never resided in Arkansas. Adoptive parents and each member of the household 18-and-one-half years of age and older, excluding children in foster care, residing out of the state shall provide state police criminal record checks from their state of residence. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the state police criminal record check from their state of residence must be initiated to ensure results are received by the time that household member reaches 18-and-one-half years of age. These checks must be made prior to approval and shall be repeated annually thereafter until the adoption decree has been issued at which point repeat checks will no longer be required. However, if the out-of-state adoptive home wishes to continue to keep its adoption service open in order to potentially adopt additional children from Arkansas, the state police criminal record checks from their state of residence will continue to be run every year on all household members 18 and one-half years of age and older.**

C. **Each member of the household 18 and one-half years of age and older, excluding children in foster care, must agree to a fingerprint-based FBI Criminal Background Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the FBI Criminal Background Check from their state of residence must be initiated to ensure results are received by the time that household member reaches 18-and-one-half years of age. These checks must be made prior to approval and need not be repeated. If a legible set of fingerprints cannot be obtained after a minimum of two attempts, a name-based FBI check will be used instead.**

D. **See Appendix 8 for information regarding prohibited offenses for prospective foster and adoptive parents and those offenses requiring Alternative Compliances from the Child Welfare Agency Review Board.**

***Resources* - The applicant must have sufficient resources to meet the financial, medical, physical, educational, emotional, and shelter needs of the child without depending solely on state or federal financial assistance (e.g., SNAP, SSI, SSA, etc.) to meet those needs (although such forms of assistance may be used to supplement a family's income). A recent check stub and the previous year's income tax return are required to verify income and employment. While an adoption subsidy may be a resource for a child who meets the eligibility criteria, adoptive parents should have sufficient resources to care for a child even without a subsidy. The adoption subsidy shall not be considered a part of the adoptive family's income.**

***Other* – The prospective adoptive family must be willing to meet the child's needs to have continuity with the birth family, if applicable, and if in the child's best interest. The family must also be able to appropriately deal with interference from the child's birth family. Geographic location of the prospective adoptive family should not present any risks for the child to be harmed by the birth family. Additionally, if the prospective adoptive family plans to continue as a foster home, they must demonstrate that they will also be able to continue to meet their adoptive child's needs.**

Pre-Service Training

A. **The applicant must complete pre-service training.**
B. **The applicant must be willing to complete any further training in order to meet a child's specific needs.**

Before placement for adoption, the Adoption Specialist shall compile and provide a disclosure packet to the prospective adoptive parents, which is a detailed, written, health history and genetic and social history of the child which excludes information which would identify custodial/non-custodial parent(s) or members of a custodial/non-custodial parent(s)' family. The information shall be set forth in a document that is separate from any document containing information identifying the custodial/non-custodial parents or members of the custodial/non-custodial parents' family.

The detailed, written health history and genetic and social history shall be identified as such and shall be filed with the clerk before the entry of the adoption decree. Upon order of the court for good cause shown, the clerk

of the circuit court may tender to a person identified by the court a copy of the detailed, written health history and genetic and social history.

When a child in a pre-adoptive placement dies prior to the finalization of the adoption decree, the presumptive adoptive parents may be entitled to an adoption decree and birth certificate for the deceased child.

If the child's death is a result of abuse or neglect on the part of the pre-adoptive parent(s), the adoption decree will not be finalized through the Division.

All records of any adoption finalized in the state of Arkansas shall be maintained for 99 years. The Juvenile Division of Circuit Court shall retain jurisdiction to issue orders of adoption, interlocutory or final, when a juvenile is placed outside the state of Arkansas, unless the Court allows for finalization in the receiving state.

PROCEDURE VIII-G1: Staffing and Recommendations

02/2011

The Family Service Worker will:

A. Invite Adoption Specialist to permanency planning staffing.
B. Notify the Adoption Specialist within 14 days prior to TPR staffing and hearing.
C. Notify the Adoption Specialist in writing within two working days of the court hearing that termination of parental rights with power to consent to adoption has been granted if the Adoption Specialist was not at the hearing.
D. Determine if the foster parent, provisional foster parent, or a relative is interested in adopting the child if parental rights have been terminated.
E. Submit the CFS-343: Notification of Court Appearance to all parties entitled to notice within 10 calendar days of any review hearing to be held with respect to a child in their care. Send the CFS-343 through certified mail for all Permanency Planning Hearings.
F. Present a CFS-489: Request for Consideration to Adopt to the foster parent or provisional foster parent if they are interested in adopting the child.
G. Schedule and conduct a staffing within 10 working days from the court hearing that terminates parental rights, being sure to include the Adoption Specialist, foster parent, provisional foster parent, relative, age-appropriate child, County staff, attorney ad litem, OCC Attorney, CASA, and other professionals, if applicable. The staffing is to determine if this type of adoption is an appropriate referral for an adoptive family assessment.

The Adoption Specialist will:

A. Participate in the staffing.

If the recommendation from the staffing supports the foster parent, provisional foster parent, or relative adoption, the FSW will:

A. Forward the following to the Adoption Supervisor within five working days of the staffing:
    1) Written summary which provides the date of the staffing, names/titles of persons participating, findings on compliance to the placement criteria and recommendation.
    2) Completed CFS-489: Request for Consideration to Adopt on a foster parent or provisional foster parent.
    3) Initial family assessment/home study on a foster parent or provisional foster parent.
    4) Most recent reevaluation assessment/home study on a foster parent.
    5) All reevaluation assessments/studies on a foster parent.

If the recommendation from the staffing does not support the foster parent, provisional foster parent, or relative adoption, the Adoption Supervisor will:

A. Assess the recommendation and request any additional information.

B. Notify the foster parent, provisional foster parent or relative in writing within 10 working days of the decision and state the reason(s) for the decision and internal review procedures.
C. Send a copy of this written notification to the Family Service Worker, County Supervisor, Adoption Specialist, Adoption Manager, and OCC Attorney.

If those attending the staffing disagree about whether or not to support the foster parent, provisional foster parent, or relative adoption, the Adoption Supervisor will:

A. Consult with the Adoption Manager and the Division Director.
B. Schedule another staffing within 10 working days to include the Area Director, Adoption Manager, Division Director, and any other appropriate parties.
C. Depending on the outcome of the staffing, follow the procedures listed above.

PROCEDURE VIII-G2: Assessment and Preparation

08/2013

The Family Service Worker will:

A. Ensure, prior to the permanency planning staffing, that the child's out-of-home placement record is up to date and that all attachments which are required for an adoption packet (see Appendix 2-B) are in the child's record and are copied and forwarded to the Adoption Specialist within three working days of the permanency planning hearing.
B. Send additional attachments to the Adoption Specialist once the initial adoption packet is completed in order to maintain current information until a decision is made.
C. Document in the child's out-of-home placement record, and in CHRIS, the efforts to secure needed attachments and the reason for an attachment not being available.
D. Provide information requested by the Adoption Specialist in the preparation of the child's adoption summary.
E. Prepare the child for adoption and assist in preparing the foster parent, provisional foster parent, or relative for adoption.
F. Assure compliance with the Indian Child Welfare Act, if applicable, by notifying and working with the OCC attorney.

The Adoption Specialist will:

A. Prepare the child's adoption packet (adoption summary and attachments—see Appendix 2) within 30 days from the permanency planning hearing.
B. Send a copy of the adoption summary to the Family Service Worker.
C. Provide the following forms as needed to the foster parent, provisional foster parent, relative, or fictive kin immediately after the staffing that is conducted within ten working days from the hearing that terminates parental rights (if the staffing supports the adoption):
    1) FBI Fingerprint card (if not using harvester)
    2) APS-0001: Authorization for Adult Maltreatment Central Registry for each household member age 18 and one-half years and older, excluding children in foster care.
    3) CFS-316: Request for Child Maltreatment Central Registry Check for each member of the household 14 years of age and older, excluding children in foster care, but including any other state of residence in the last five years and any other state where they work or have worked in the last five years.
    4) CFS-341: Certification of Absence of Criminal Record (household members ages 10-17)
    5) CFS-342: State Police Criminal Record Check and an FBI fingerprint-based criminal record check for each member of the household 18 and one-half years of age and older, excluding children in foster care.
    6) CFS-409: Foster/Adoptive Family Preference Checklist
    7) CFS-404: General Medical Report for each member of the household
    8) CFS-455: Request/Consent for Health Department Services, if applicable
    9) CFS-480: Alternate Compliance of Water Supply Agreement, if applicable
    10) CFS-425: Application for Adoption Subsidy, if applicable

11) CFS-426: Statement of Income and Resources for Adoption Subsidy, if applicable

D. Document the review and assessment of the home on the CFS-446: In-Home Consultation Visit Report.
E. Complete the assessment and preparation process with the foster parent, provisional foster parent, or relative.
F. Send the adoption home study, recommendations, completed forms, reference letters, child's adoption packet and CFS-414: Change of Status to the Adoption Supervisor within four months of the court hearing that terminates parental rights.
G. Make at least two visits in person with the prospective adoptive family with at least one visit being in the home. Have a separate, face-to-face interview with each prospective adoptive parent. Interview each household member in person who is 10 years of age or older.
H. Refer a relative or fictive kin who has not been approved as a foster parent or provisional foster parent to pre-service training. Complete the assessment and preparation process with the relative or fictive kin and send the adoption home study, recommendation, completed forms, reference letters, child's adoption packet, and CFS-414: Change of Status to the Adoption Supervisor within four to six months of the court hearing that terminates parental rights (there may be extenuating circumstance which could lengthen the time frame, such as availability of pre-service training).
I. In CHRIS, complete the Affidavit of Disclosure screen on the child in the child's protective service case. If Foster Parent Adoption, be sure to check the Foster Parents Adoption checkbox.
J. Prepare and present to the foster parent, provisional foster parent, relative, or fictive kin, one non-identifying copy of the child's adoption packet and a complete CFS-471: Disclosure for Adoption during the assessment and preparation process.
K. Review and discuss the adoption packet with the foster parent, provisional foster parent, or relative or fictive kin.
L. Secure signatures on the CFS-471: Disclosure for Adoption and ensure a copy is provided.
M. Assist in preparing the child for adoption and prepare the foster parent, provisional foster parent, or relative for adoption.
N. Notify the foster parent, provisional foster parent, relative, or fictive kin in writing if the adoption home study cannot be completed within 60 days of the final home visit and explain the reason.
O. Send a copy of this notification to the Adoption Supervisor and Family Service Worker.
P. Discuss any delays in completing the assessment and preparation process with the Adoption Supervisor and document reasons.
Q. Complete the packet to determine eligibility for adoption subsidy, if applicable, during the adoption assessment and preparation process and forward to the Adoption Subsidy Coordinator, Adoption Services Unit.

PROCEDURE VIII-G3: Foster Parent, Provisional Foster Parent, Relative, or Fictive Kin Adoption Decision

08/2013

The Adoption Supervisor will:

A. Make a decision to approve or deny the foster parent, provisional foster parent, relative, or fictive kin's application to adopt within ten working days of receiving the completed adoption home study and send a written notification to the foster parent, provisional foster parent, or relative.
B. Send a copy of the approval or denial notification to the Adoption Manager, Adoption Specialist, Area Director, Family Service Worker, County Supervisor, and OCC Attorney.
C. Explain in the written notification the reason(s) for denial and the internal review procedures.
D. Send a written notification to the foster parent, provisional foster parent, relative, or fictive kin if a decision to approve or deny the application cannot be made within 60 days of the final home visit and explain the reason(s).
E. Send a copy of this written notification to the Adoption Specialist and Family Service Worker.

The Family Service Worker will:

A. Update and transfer the out-of-home placement case record (paper record and CHRIS) to the Adoption Specialist within five working days of receiving the written notification of the approval for foster parent, provisional foster parent, or relative adoption.
B. In CHRIS:
   1) Assign the Adoption Specialist as Primary Worker in the Assign/Transfer Screen. The child remains in the current foster parent placement until finalization.
   2) Enter current foster parent or relative as an adoptive resource completing the Resource Screens.
   3) If child is to exit current foster care placement to enter relative's adoptive home, exit child from current foster parent placement and enter child into the relative's adoptive home in the Placement screens in the child's protective service case.

The Adoption Specialist will:

A. Forward a CFS-414: Change of Status to the Adoption Coordinator, Adoption Services Unit, within five working days of receiving notification of approval to report approval of the placement.
B. Assume primary case management once written notification of approval has been received.

PROCEDURE VIII-G4: When a Foster Parent, Provisional Foster Parent, Relative, or Fictive Kin Files a Petition to Adopt Without Prior Knowledge or Consent of DCFS

08/2013

The Family Service Worker or Adoption Specialist, when learning about the petition, will:

A. Notify immediately the Area Director, Adoption Supervisor, OCC Attorney and Adoption Manager and follow up with written notification.

The child's caseworker will:

A. Arrange a staffing to determine if adoptive placement is appropriate to consider.
B. Submit the results and recommendations from the staffing to the Area Director and Adoption Manager.
C. Direct staff to follow procedures outlined above.
D. Work with the OCC Attorney in regard to pending litigation if it appears the foster parent, provisional foster parent, relative, or fictive kin would not be a suitable adoptive parents for the child.
E. Notify the Adoption Supervisor if information regarding other prospective adoptive families for the child is needed.

PROCEDURE VIII-G5: Post-Placement Services

08/2013

The Adoption Specialist will:

A. Provide casework counseling, support, and referral to needed resources and services until the adoption is finalized.
B. Visit weekly during the first month of placement, and monthly thereafter, and make contacts as needed with the family until the adoption is finalized.
C. Document in narrative, place and dates of post-placement contacts, activities, progress, concerns, etc. Narrative entries regarding visits and services will be approved in CHRIS by the Adoption Supervisor.
D. Notify pre-adoptive family of the date for a judicial review.
E. Recommend initiation of procedures to finalize the adoption upon receipt of approval of the adoption by the Adoption Supervisor and approval of adoption subsidy, if applicable, if the child has resided with the foster parent, provisional foster parent or relative for at least six months (however residence in the home

is not required for a minor to be adopted if in DHS custody and the minor must reside outside the home to receive medically necessary health care).

F. Inform the family about post-adoption services (provide brochure).

PROCEDURE VIII-G6: Disruption of Foster Parent, Provisional Foster Parent, Relative, or Fictive Kin Adoption

08/2013

If disruption (prior to finalization) of an adoptive placement is imminent, the family's Adoption Specialist will:

A. Provide appropriate services to preserve the family and prevent disruption, if applicable.
B. Notify the Adoption Supervisor, County Supervisor, Family Service Worker, Adoption Manager, OCC Attorney and attorney ad litem.
C. In CHRIS:
   1) Document the staffing, reason for disruption, and all contacts with adoptive family in the Contacts Screen.
   2) Exit child from current adoptive home placement selecting Placement Resource Requested Removal or Child Requested Change of Placement in the Enter/Exit Screen.
   3) Transfer the case back to the last Primary Assigned Family Service Worker in the Assign/Transfer Screen.
D. Schedule and conduct a staffing to include those listed above and the foster parents, provisional foster parent(s) or relative, any age appropriate child, and any other significant individuals.
E. Return case management responsibility to the Family Service Worker of the initiating county and transfer primary worker designation in CHRIS back to the Family Service Worker if it is not the plan to immediately select another adoptive family, and disruption occurs. Return the child's paper record back to the Family Service Worker within five working days of the disruption.
F. Prepare the adoptive family for the disruption and provide casework counseling and referrals for needed services.

PROCEDURE VIII-G7: Finalization of an Adoption

02/2011

The Adoption Specialist will forward the following to the Adoption Supervisor when submitting the recommendation to finalize the adoption:

A. CFS-432: Checklist for Recommendation for Finalization
B. CFS-414: Change of Status
C. Initial adoption home study of the adoptive family and all updates
D. Adoption summary of the child and all updates
E. Signed disclosure form
F. Post-placement narrative
G. Court order terminating parental rights
H. Certified birth certificate of child
I. FBI and state criminal record checks as applicable
J. CFS-428: Adoption Assistance if applicable.

The Adoption Specialist will:

A. Inform the family of post-adoption services.
B. Document in case record narrative the plan of action to resolve barrier to finalizing the adoption (if the Adoption Supervisor does not agree with the recommendation). Inform the family of the recommendation.
C. Monitor and document the implementation of the plan of action and progress toward achieving the plan.

D. Assist OCC Attorney in completing the adoption coupon and securing the fee from the family for an amended birth certificate.
E. Forward the child and adoptive family records to the Adoption Services Unit when the adoption is finalized.
F. The final decree of adoption shall be entered into the child's record prior to forwarding any records.
G. In CHRIS:
    1) Child Protective Service Case:
        a) Exit child out of current 'pre-adoptive' placement by selecting Adoption as Exit Reason and entering the finalized adoption date as Exit Date.
        b) Close child protective service case in Case Summary screen if all children are adopted and no other child protective services are being offered to birth family or siblings.
    2) Adoption Case:
        a) Open New Adoption Case with adoptive parents and adoptive child as clients.
        b) Complete Client General Information Screens on all clients; retrieve the adoptive child's characteristics, eligibility and affidavit of disclosure screens from old child protective service case.
        c) Complete Adoption Subsidy Screens if adoptive parents are receiving an adoption subsidy.
        d) Document contacts with adoptive family in Contacts Screen.

The Adoption Supervisor will:
A. Assess the information and recommendation, which has been forwarded by the Adoption Specialist, within five working days.
B. Sign the CFS-414: Change of Status if it is agreed that procedures to finalize the adoption should be initiated.
C. Send a copy of the signed CFS-414: Change of Status to the Adoption Specialist.
D. Prepare and sign a consent for adoption if it is agreed that procedures to finalize the adoption should be initiated.
E. Notify the Adoption Specialist in writing to explain if there is disagreement to initiating the procedures to finalize the adoption.
F. Formulate with the Adoption Specialist a plan of action to resolve the barriers to finalizing the adoption.

The Adoption Specialist will:
A. Forward within five working days a packet of information to the OCC Attorney or Private Agency Attorney which includes:
    1) Signed consent to the adoption
    2) Certified birth certificate of child
    3) Termination of parental rights court order
    4) Adoption home study of the adoptive family
    5) Child's adoption summary (The child's adoption summary serves as the detailed, written health history and genetic and social history and must be filed with the clerk before the entry of the adoption decree.)
    6) CFS-428: Adoption Assistance if applicable
    7) FBI and state criminal record checks as applicable
    8) Post-placement narrative

PROCEDURE VIII-G8: Post-Adoption Services

09/2011

After an adoption has been finalized, the following services may be offered to help preserve adoptive families:
A. Adoption subsidy
B. Mutual Consent Voluntary Adoption Registry
C. Casework management
D. Information about, and referral to, service providers
E. Respite care
F. Education and training
G. Adoptive parent support groups

H. Resource library
I. Intensive Family Services;
J. Family Support Services

The Adoption Specialist will:
A. Arrange these services upon request from the adoptive family.
B. Assist the adoptive family in completing forms and in following procedures.
C. Document contacts, activities, progress, concerns, etc.

PROCEDURE VIII-G9: When a Child Dies Prior to Finalization of Adoption

Pre-adoptive parents may request that DCFS petition the court to make a final decree of adoption on a child placed in their home for adoption, but who died prior to the finalization. Pre-adoptive homes include:
A. Placements where the child has been placed in foster care for pre-adoption with parental rights terminated.
B. Foster homes in which the parents have made a formal request (CFS-489: Request for Consideration to Adopt) to adopt a child currently placed in their home for foster care.
C. Any home in which a provisional foster parent with custody has submitted official notice of intent to adopt the child placed with them.

The following criteria and guidelines apply to any post-mortem adoption in which DCFS provides legal assistance:
A. All adoptions require DCFS consent.
B. An adoption subsidy will not be paid. (This does not refer to legal assistance provided by the Office of Chief Counsel when finalizing the adoption decree.)

Adoption staff will include the following documents in the adoption packet:
A. An approved home study or a pre-study for relative/provisional pre-adoptive parents
B. Most recent background check of appropriate household members
C. Notarized DHS Consent form, specifically naming the deceased child
D. Adoption Summary (if available)
E. Birth certificate
F. Death Certificate or medical notes recording the death
G. Putative Father Registry document provided by OCC
H. Any additional materials or documents required by the court

The Adoption Supervisor may approve the adoption consent. Any denial of a post mortem adoption decree must be reviewed by the Division Director.

Actions to be Taken in Response to Death:
When a child dies in a pre-adoptive home and there is no probable cause to suspect abuse or neglect, adoptive parents eligible for post-mortem adoption may request additional court approved services and accommodations.

The caseworker will inform the adoptive parent(s) that:
A. The adoption decree may be finalized.
B. The child's last name may be legally changed to that of the adoptive family and may be inscribed on a headstone or other memorial marker.
C. The child may be buried in a location specified by the family.
D. The Division will pay for reasonable, ordinary, and necessary funeral expenses.

The Adoption Specialist will inform the pre-adoptive parents that:
A. They have 30 days to request that DCFS finalize the adoption.
B. After 30 days, they may seek finalization through the court.

POLICY VIII-I: ADOPTION SUBSIDY

08/2014

The Division provides a federal (title IV-E) or state funded adoption subsidy as a service to assist in making adoption possible for a child, who, with special needs, might not otherwise be adopted and for whom a family is not readily available. A child in foster care placed in an adoptive home continues status as a child in foster care until finalization of the adoption and the adoption subsidy is initiated.

CHILD WITH SPECIAL NEEDS

A child with special needs is defined as a child who is free for adoption and belongs to a group of children for whom the Division does not have an adequate resource of approved applicants to provide a pool of available waiting adoptive families. Other children may be eligible for adoption assistance under this category if they have severe medical or psychological needs that require ongoing rehabilitation or treatment. These children include:

- **A. a Caucasian child nine years or older,**
- **B. a healthy child of color who is two years or older,**
- **C. a member of any sibling group being placed together who share at least one biological parent and who have either lived together or otherwise developed a bond prior to adoptive placement, and the child is:**
  - **1) legally free for adoption with parental rights terminated,**
  - **2) under 18 years old and whose adoption has not been finalized prior to approval of the subsidy,**
  - **3) (for the purposes of a State Subsidy only), in DHS custody, or**
  - **4) a member of a Non-Custody/Out-of-Home Placement Services case, or**
  - **5) who is SSI eligible at the time the adoption petition is filed.**

Children at high risk for the development of a serious physical, mental, developmental or emotional condition may be considered special needs if documentation of the risk is provided by a medical professional specializing in the area of the condition for which the child is considered at risk, but no subsidy payment will be made without documentation that the child has developed the actual condition (see Procedure VIII-I1).

Adoption subsidies can be funded through federal title IV-E adoption assistance or state funds depending on the child's eligibility.

Any individual who is adopting or who is considering adopting a child who is in foster care will be notified of their potential eligibility for a Federal Adoption Tax Credit.

Adoption assistance payments may be made to parents who adopt a child with special needs. A child will not be considered special needs unless:

- **A. The state has determined the child cannot or should not be returned to the home of his parents;**
- **B. The state has determined that a specific factor or condition exists with respect to the child (such as ethnic background, age or membership in a minority or sibling group; or the presence of factors such as medical conditions or physical, mental, or emotional disabilities) because of which it is reasonable to conclude that such a child cannot be placed for adoption without providing adoption assistance or medical assistance under title XIX; and,**
- **C. A reasonable, but unsuccessful, effort has been made to place the child without providing assistance except where it would be against the best interest of the child due to such factors as the existence of significant emotional ties with prospective adoptive parents while in the care of such parents as a child in foster care.**
- **D. For the purpose of this policy, "AFDC" refers to the AFDC program as in effect 7-16-1996.**

ELIGIBILITY

There are five ways that a child can be eligible for title IV-E adoption assistance:

A. The child is AFDC-eligible and meets the definition of a child with special needs.

Adoption assistance eligibility that is based on a child's AFDC eligibility is predicated on a child meeting the criteria both at the time of removal and in the month the adoption petition is initiated. At the time adoption proceedings were initiated, the child must have been removed from the home of a specified relative as a result of a judicial determination to the effect that continuation therein would be contrary to the welfare of the child. For the purpose of adoption assistance, a child must meet the AFDC criteria in the specified relative's home from which he or she is removed. In addition, the special needs determination must be made prior to finalization of the adoption.

B. The child is eligible for Supplemental Security Income (SSI) benefits and meets the definition of a child with special needs.

A child is eligible for adoption assistance if, at the time the adoption petition is filed, the child meets the requirements for title XVI SSI benefits, and prior to the finalization of the adoption is determined by the state to be a child with special needs. There are no additional criteria that a child must meet to be eligible for title IV-E adoption assistance when eligibility is based on a child with special needs meeting SSI requirements. Specifically, how a child is removed from his home or whether the state has responsibility for the child's placement and care is irrelevant in this situation. The child's eligibility for SSI benefits must be established no later than at the time the adoption petition is filed.

C. The child is eligible as a child of a minor parent and meets the definition of a child with special needs.

A child is eligible for title IV-E adoption assistance in this circumstance if:

1) The child's parent is in foster care and receiving title IV-E foster care maintenance payments that cover both the minor parent and the child at the time the adoption petition is initiated, AND

2) Prior to the finalization of the adoption, the child of the minor parent is determined by the state to meet the definition of a child with special needs.

There is no requirement that a child must have been removed from the home as a result of a judicial determination. However, if the child and minor parent have been separated in foster care prior to the time of the adoption petition, the child's eligibility for title IV-E adoption assistance must be determined based on the child's current and individual circumstances.

D. The child is eligible due to prior title IV-E adoption assistance eligibility and meets the definition of a child with special needs.

In the situation where a child is adopted and receives title IV-E adoption assistance, but the adoption later dissolves or the adoptive parents die, a child may continue to be eligible for title IV-E adoption assistance in a subsequent adoption. The only determination that must be made by the state prior to the finalization of the subsequent adoption is whether the child is a child with special needs. Need and eligibility factors must not be re-determined when such a child is subsequently adopted because the child is to be treated as though his circumstances are the same as those prior to his previous adoption. Since title IV-E adoption assistance eligibility need not be reestablished in such subsequent adoptions, the manner of a child's removal from the adoptive home, including whether the child is voluntarily relinquished to an individual or private agency, is irrelevant.

E. Due to changes in federal guidelines, some children in foster care who are currently receiving a state-funded subsidy may be eligible for a federal IV-E adoption maintenance subsidy.

Beginning federal fiscal year 2010, which started October 1, 2009, newly adopted children who have been in foster care for at least 60 consecutive months and/or who are 16 years of age or older will be eligible for IV-E adoption assistance as long as they meet their state's definition of special needs and meet other requirements for IV-E eligibility. These requirements include 1) for court-ordered placements, that the initial placement in care was in the child's best interests and that reasonable efforts to prevent removal were made or are not required to be made and 2) for all placements, that reasonable efforts to finalize the permanency plan were made (and updated every year). Further, children placed with siblings who qualify due to age or length of time in care will also be considered IV-E eligible for adoption assistance.

As shown below, eligibility will be phased in by age over a nine-year period. Children become eligible if they turn the listed age any time during the fiscal year. The federal fiscal year begins the first day of October each year and ends the last day of September the following year.

Federal Fiscal Year	Age of Eligibility	Date of Birth
2010	16 and older	October 1, 1994
2011	14 and older	October 1, 1997
2012	12 and older	October 1, 2000
2013	10 and older	October 1, 2003
2014	8 and older	October 1, 2006
2015	6 and older	October 1, 2009
2016	4 and older	October 1, 2012
2017	2 and older	October 1, 2015
2018	All children	

By 2018, newly adopted children of all ages who meet the other IV-E eligibility requirements will be eligible for federal adoption assistance.

If eligible, the Division will make adoption assistance payments to adoptive parents in amounts so determined through an adoption assistance agreement. The amount of such payment:

1) **Will take into account the circumstances of the adopting parents and the needs of the child being adopted;**
2) **May be adjusted periodically with the concurrence of the adoptive parents to reflect changing circumstances; and**
3) **May not exceed the foster care maintenance payment, which would have been paid during the period if the child with respect to whom the adoption assistance payment is made had been in a foster home.**

A state funded adoption subsidy may be available to a child who is not IV-E eligible provided that the child is in DHS custody and meets the special needs definition.

A state legal subsidy may be defined as OCC legal services provided for children in DHS custody. A legal subsidy does not include the use of a private attorney. The children are eligible for a legal subsidy whether or not they meet the criteria for special needs and without regard to eligibility for IV-E, state maintenance subsidy, or non-recurring subsidy. Adoption assistance payments may be terminated if it is determined that:

A. **The child has attained the age of 18;**
B. **The parents are no longer legally responsible for the support of the child; or,**
C. **The child is no longer receiving support from the adoptive parents.**

Adoption assistance payments may be extended to the age of 21, if the child has a mental or physical disability which warrants continuation and a federally-funded subsidy or state maintenance is received.

In addition, if the child was adopted at age 16 or older, the adoption subsidy may be extended until age 21 under the following circumstances:

- **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 child meets these employment or education requirements. 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.

The adoptive parents are required to inform the Division of circumstances that would make them ineligible for adoption assistance payments or eligible for adoption assistance payments in a different amount.

No payment may be made to parents with respect to any applicable child that is not a citizen or resident of the United States and was adopted outside of the United States or was brought into the United States for the purpose of being adopted. A child that is not a citizen or resident of the US and was adopted outside the US or brought into the US for the purpose of being adopted may be eligible for adoption assistance payments if the initial adoption of the child by the parents is a failure and the child is subsequently placed into foster care.

ADOPTION ASSISTANCE AGREEMENT

An Adoption Assistance Agreement, a written binding agreement between the adoptive parents, the Division, and other relevant agencies must be in place prior to the finalization of the adoption.

The Adoption Assistance Agreement must:

- **A. Be signed by the adoptive parents and the Division and be in effect before adoption assistance payments are made under title IV-E, but no later than the finalization of the adoption;**
- **B. Specify the duration of the agreement;**
- **C. Specify the amount of the adoption assistance payment (if any) and the nature and amount of any other payments, services, and assistance to be provided (including non-recurring adoption expenses in agreements that became effective on or after January 1, 1987, for expenditures incurred by the parents on or after that date);**
- **D. Specify the child's eligibility for title XIX and title XX;**
- **E. Specify, with respect to agreements entered into on or after October 1, 1983, that the agreement remains in effect regardless of the state of residence of the adoptive parents;**
- **F. Contain provisions for the protection of the interests of the child in case the adoptive parents and child should move to another state while the agreement is in effect; and for agreements entered into on or after October 1, 1983, if needed.**

If the service specified in the agreement is not available in the new state of residence, the state making the original assistance payment remains financially responsible for providing the specified service(s).

However, in cases of unknown medical and psychiatric conditions that surface after finalization, applications for federally funded assistance may be submitted. For adoption subsidies that are requested and approved after adoption finalization has occurred, the Adoption Assistance Agreement (and, therefore, subsidy payments) will go into effect based on the adoption subsidy application approval date (i.e., not the adoption finalization date). This includes both IV-E and non-IV-E subsidies.

Any Adoption Assistance Agreement put into place after finalization of an adoption must:

- **A. Be signed by the adoptive parents and the Division and be in effect before adoption assistance payments are made under title IV-E;**
- **B. Specify the duration of the agreement;**
- **C. Specify the amount of the adoption assistance payment (if any) and the nature and amount of any other payments, services, and assistance to be provided (including non-recurring adoption expenses in agreements that became effective on or after January 1, 1987, for expenditures incurred by the parents on or after that date);**
- **D. Specify the child's eligibility for title XIX and title XX;**
- **E. Specify, with respect to agreements entered into on or after October 1, 1983, that the agreement remains in effect regardless of the state of residence of the adoptive parents;**
- **F. Contain provisions for the protection of the interests of the child in case the adoptive parents and child should move to another state while the agreement is in effect; and for agreements entered into on or after October 1, 1983, if needed.**

If any application for an adoption subsidy for a child under the age of 18 is initially denied, in accordance with federal regulations, the adoptive family may appeal the decision.

The types of situations that would constitute grounds for an appeal include:

- **A. Relevant facts regarding the child, the biological family or the child's background were known, but not presented to the adoptive parents prior to the adoption's finalization;**
- **B. Any subsidy decision which the adoptive parents deem adverse to the child;**
- **C. Erroneous determination by the Division that a child is ineligible for adoption assistance; and,**
- **D. Failure by the Division to advise adoptive parents of the availability of adoption assistance.**

If an appeal is upheld, the child may be eligible for a federal (title IV-E) or state subsidized adoption. The effective date of a federal (title IV-E) retroactive subsidy payment will be the date of finalization or a date subsequent to finalization.

For foster parent and relative adoptions, it is not necessary to determine that without subsidy the child would not otherwise be adopted.

Payments for a maintenance subsidy and special services subsidy are to meet the needs of the child. In addition, payments for one-time expenses, known as a non-recurring adoption subsidy, may be obtained in order to reimburse the family for out-of-pocket pre-adoptive/finalization expenditures.

MEDICAL COVERAGE

The Division will ensure health insurance coverage for any child determined to be a child with special needs for whom there is an adoption subsidy agreement in effect. Federal title IV-E Medicaid will be utilized to provide medical coverage for a title IV-E eligible child. Medical coverage, for a non-title IV-E eligible child who has a special need for medical or rehabilitative care, may be provided under the Medicaid category *Non-title IV-E Special Needs Adoptive Child* if the child is eligible for state maintenance subsidy and meets specified Medicaid eligibility requirements (see Medical Services Policy 6590.2 Eligibility Requirements). If the child does not qualify for

Medicaid under federal title IV-E or Non-title IV-E Special Needs Adoptive coverage, the family may make application for Medicaid under a different category.

Medicaid coverage associated with the adoption subsidy will cease when the subsidy case is closed. The child may qualify for other categories of Medicaid if certain eligibility criteria are met. However, once the adoption subsidy case is closed, it is the responsibility of the child/child's family to apply for other categories of Medicaid at their local DHS county office via the Division of County Operations. Medicaid coverage through the local DHS county office is not guaranteed.

Any eligible child for whom there is an adoption assistance agreement in effect is deemed to be a dependent child and is deemed to be a recipient of AFDC (per AFDC requirements in effect 7-16-1996). Any child of such eligible child will be eligible for such services.

The Division shall access resources as necessary in Arkansas, the region and nation to find adoptive families for children with special needs.

PROCEDURE VIII-I1: Initial Application for Adoption Subsidy

08/2013

The Adoption Specialist will:

A. Follow the same subsidy-related policy and procedures, including subsidies for non-recurring legal expenses, regardless if the adoption is being handled in-state or out-of-state.
B. Ensure close coordination with the other state's adoption worker, if applicable.
C. Determine that the child has a special need in relation to adoption planning, is between the age of birth to 18 years, is in the custody of DHS (for state subsidy only), and is legally free for adoption.
D. Determine if the child is eligible for federal IV-E adoption maintenance subsidy first. If ineligible for title IV-E, determine if the child is eligible for state funded adoption maintenance subsidy.
E. Determine that a reasonable, but unsuccessful, effort has been made to place the child without providing adoption subsidy. Such an effort might include the use of adoption exchanges, referral to appropriate specialized adoption agencies, or other such activities. There are exceptions to this requirement when applying for a title IV-E maintenance subsidy. These exceptions are
    1) It would not be in the best interests of the child because of such factors as the existence of significant emotional ties with prospective adoptive parents while in the care of those parents as a child in foster care.
    2) Another circumstance is adoption by a relative, in keeping with the statutory emphasis on the placement of children with relatives. Review the adoption subsidy program with the adoptive parent.
F. Determine what type of adoption subsidies are needed and complete all application procedures at the same time the adoption assessment is being completed for a foster parent, provisional foster parent, relative, or fictive kin adoption and within 60 days of placement for all other adoptions.
G. Review and sign the CFS-425: Application for Adoption Subsidy after the adoptive parent completes it.
H. Request title IV-E verification of eligibility from the DCFS Eligibility Unit.
I. Assist the adoptive parents in completing the CFS-426: Statement of Income and Resources for Adoption Subsidy
J. Attach to the CFS-426 verification of family income when a state funded adoption special subsidy is requested. The CFS-426 is not required for a federal funded adoption maintenance subsidy.
K. Review the adoptive parents' health insurance policy if a special subsidy is requested to determine if it will allow for any medical, dental, or psychological costs and, if so, to what extent. Document on the CFS-426.
L. Be clear in the discussion with the family that they will only be screening for a determination of special needs, subsidy eligibility, and making a recommendation to the Adoption Services Unit. **Under no circumstances will the Adoption Specialist give the adoptive family the subsidy determination prior to receipt of approval from the Adoption Services Unit.** The Adoption Specialist must also explore other

resources and assistance that may be available for the child and adoptive family when screening for a subsidy.

M. Complete the CFS-427: Determination of Eligibility for Adoption Subsidy and attach the following to the CFS-427:
   1) Verification of the costs for a private attorney to finalize an adoption whether in-state or out-of-state, if applicable.
   2) Verification of court costs to finalize an adoption if applicable.

N. Complete the following:
   1) CFS-429: Special Adoption Subsidy Determination to verify the child's medical, dental, psychological, etc. condition by a professional which includes the diagnosis, prognosis, and costs of treatment for one year if a special subsidy is requested. Children at high risk for the development of a serious physical, mental, developmental, or emotional condition may be considered special needs if documentation of the risk is provided by a medical professional specializing in the area of the condition for which the child is considered at risk, but no subsidy payment will be made without documentation that the child has developed the actual condition. In order to be eligible for special needs subsidy based on developmental delay, documentation must be provided, current within 6 months, attesting to the fact that the child has a delay of 24% or more in two major developmental categories.
   2) Statement that lists the child's financial resources source and amount other than foster care board payment, if applicable.
   3) Verification from the appropriate agency which explains the child's eligibility for financial benefits (SSI, other types of Social Security benefits, VA, etc.) once the adoption is finalized, if applicable (provide the agency with the amount of the adoptive parent's income in order that a statement can be prepared.). Once a child has been determined eligible for a federal subsidy, the adoptive parents cannot be rejected for adoption assistance or have payments reduced without their agreement because of their income or resources or the child's resources.
   4) Verification from Children's Medical Services (CMS) which explains the child's eligibility for services once the adoption is finalized, if applicable (provide CMS with the amount of the adoptive parent's income in order that a statement can be prepared).

Special subsidies are state funded, and the Adoption Subsidy Coordinator, Adoption Services Unit, will consider the child's eligibility on a case-by-case basis. The consideration will be based on the information developed during the Adoption Specialist's determination of the child's special needs in relation to adoption planning. The adoptive parent's gross income will be considered as well as other financial resources and health insurance in determining eligibility for a special subsidy.

O. Complete the CFS-426: Statement of Income and Resources for Adoption Subsidy for all special subsidy requests.

P. Utilize the following scale to determine the amount of a full monthly adoption maintenance subsidy payment based upon the standard foster care board payment. These rates are effective for board payments of November 2009 and after. New rates will not be paid until the child reaches the next age range.

AGE of CHILD	Amount of MONTHLY Maintenance
Birth through 5 years	$410.00
6 through 11 years	$440.00
12 through 14 years	$470.00
15 through 17* years	$500.00

*Inform the adoptive parents that subsidy payments may continue until the day the child elects to leave foster care or until the end of the month of the child's 21st birthday if he or she meets one of the established criteria listed below:
   1) The child has a mental or physical disability which warrants continuation and a federally-funded subsidy or state maintenance is received; or
   2) The child was adopted at age 16 or older and
      a) Is completing secondary education or a program leading to an equivalent credential; or
      b) Is enrolled in an institution which provides post-secondary or vocational education; or

c) Is participating in a program or activity designed to promote, or remove barriers to, employment; or
d) Is employed for at least 80 hours per month; or
e) Is incapable of doing any of the above described activities due to a medical condition.

However, eligibility for this extension must be made within six months of the child's 18th birthday through a subsidy redetermination request (see Procedure VIII I2: Title IV-E Redetermination). The Division will ensure that the child meets these employment or education requirements. 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.

A request for a larger monthly adoption maintenance subsidy may be made for a child who has received a higher than standard monthly foster care board payment. A monthly subsidy payment cannot exceed the child's foster care board rate which is in effect at the time a subsidy is approved.

Special Board Rate formulas and procedures will be used strictly as guides in determining an appropriate nonstandard rate to discuss with the family and to use in negotiating a lower rate (when appropriate). No subsidy will exceed $460.00 above the standard board rate for the child's age group. However, if the child is SSI eligible, the rate can go up $460.00 above the SSI rate.

Q. Provide the following documentation with the initial adoption subsidy application packet:
1) Emergency Petition
2) Emergency Order or other initial custody court order
3) Petition and Order for Termination of Parental Rights with Power to Consent to Adoption
4) A copy of the CMA Worksheet in CHRIS or, if applicable, award letter for SSI
5) A copy of the approved selection form for an adoption that is NOT a foster parent, provisional foster parent, relative, or fictive kin adoption that documents efforts to place the child without adoption subsidy (not required for a foster parent, provisional foster parent, relative. or fictive kin adoption).

R. Prepare a narrative entitled "Subsidy Family Profile" about the adoptive family to include:
1) Type of adoption (foster parent, provisional foster parent, non-foster parent, relative, fictive kin);
2) Type of subsidy (maintenance, special, non-recurring, non-IV-E Medicaid);
3) Funding source (federal or state);
4) Child to receive subsidy (first name, age, race, developmental information, description of special needs, problems, limitation, reasons for being in out-of-home placement, and brief description of out-of-home placement history);
5) Adoptive father (name, age, education, employment and health);
6) Adoptive mother (name, age, education, employment and health);
7) Other children in family (adopted, birth, custody, out-of-home placement, name, age, education, and health);
8) Others in household (explain if applicable);
9) Marriage (length and comments about the quality of the relationship);
10) Housing (brief description);
11) Income/resources (sources and amounts, health insurance coverage, etc.);
12) Exploration of other resources and assistance that may be available for the child and adoptive family when screening for a subsidy;
13) Family and adoptive child relationship (description to include strengths and challenges);
14) Reason for adoption subsidy (explain reason child needs adoption subsidy and reason for the adoptive parent requesting it);
15) Subsidy request (maintenance costs per month and for not more than a year), special subsidy type of service and costs for not more than a year, legal assistance, if the OCC Attorney is requested to finalize the adoption, court costs, etc., other subsidy requests and costs;
16) Recommendation to approve or deny.

S. Submit the completed packet to the Adoption Field Services Supervisor for review and comment.

Upon completion of supervisory review, the Adoption Field Services Supervisor will send completed forms, narrative, documents, and other attachments to the Adoption Subsidy Coordinator.

The Adoptive Subsidy Coordinator will:

A. Assess all submitted forms and documentation, make a recommendation to approve or deny the adoption subsidy application, and provide written notification to the Adoption Specialist of the recommendation within 15 working days of receiving the initial application packet from the Adoption Specialist. Contact the Adoption Specialist if additional information/forms are needed.
B. Prepare the CFS-428: Adoption Assistance Agreement and route the CFS-428 to the Manager of the Adoption Services Unit for approval, then send the CFS-428 to the DCFS Director or designee for signature.
C. Send signed CFS-428: Adoption Assistance Agreement to the Adoption Specialist with written instructions.
D. Notify the adoptive parent in writing if the application is denied and explain the reason and the internal review procedures and Administrative Fair Hearing procedures.
E. Send a copy of the notification of denial to the Adoption Specialist.

Upon receipt of approval of the adoption subsidy, the Adoption Specialist will

A. Meet with the adoptive parent to explain an approval.
B. Review the CFS-428: Adoption Assistance Agreement.
C. Secure the adoptive parent's signature on the CFS-428 within 10 working days from receipt of the agreement or prior to finalization.
D. Send the Adoption Subsidy Coordinator and adoptive parent a copy of the signed CFS-428 within three working days upon receipt.
E. Contact the Adoption Subsidy Coordinator in writing within three working days from the meeting if the adoptive parent has a disagreement with the contents of the CFS-428.
F. Meet with the adoptive parent to explain a denial, review the decision, and explain internal review procedures within 10 working days from receipt of written notification to deny.
G. Send a copy of the Adoption Petition for and Final Decree of Adoption to the Adoption Subsidy Coordinator within five working days upon receipt.
H. In CHRIS:
    1) Open a new adoption case on adoptive family entering the adoptive parents and adoptive child as clients. If child was in the custody of DHS, retrieve the child's eligibility, medical and characteristics screens from the closed child protective service case by entering the child's protective service case and client numbers in the child's General Information screen. If child was not in foster care prior to being adopted, the adoptive child's Characteristic and Medical screens must be completed to identify the special needs.
    2) Complete the Adoption screens: General Information screen, Affidavit of Disclosure screen, and Subsidy screen. Request for Approval of subsidy from Adoption Field Services Supervisor after finalization.

PROCEDURE VIII-I2: Title IV-E Redetermination

06/2011

The federal title IV-E adoption assistance program does not require re-determinations of a child's eligibility. Although, the title XIX Medicaid Program and the programs that, in part, may qualify a child initially for adoption assistance, such as AFDC and SSI, require re-determinations, they are unnecessary for the purpose of maintaining a child's eligibility for title IV-E adoption assistance. Once a child has been determined eligible and is receiving title IV-E adoption assistance, the state may terminate the assistance only under the following circumstances:

A. Upon the adoptive parent(s)' request;

B. Upon the child's death;
C. Upon the death of the adoptive parent(s) of the child (one parent if a single parent family and both in a two-parent family);
D. At the cessation of legal responsibility of the adoptive parent(s) for the child;
E. If the Division determines that the child is no longer receiving support from the adoptive parent(s);
F. When the child reaches the age of 18 unless
   1) The child's subsidy was extended (per the adoption subsidy agreement) past the age of 18 due to a mental or physical disability which warranted continuation of a federally-funded subsidy or state maintenance to be received, in which case the adoption subsidy would be terminated when the child attains the age of 21; or,
   2) The child's subsidy was extended past the age of 18 (per the adoption subsidy agreement) because the child was adopted at age 16 or older, in which case the child's subsidy would be terminated when the child attains the age of 21, provided that the child also met one of the following circumstances from 18 years of age through 21 years of age:
      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 child meets these employment or education requirements. 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.

PROCEDURE VIII-I3: Criteria for SSI Eligible Private Agency and Independent Adoptions

02/2010

A child who is SSI eligible and is part of an independent adoption (i.e., not in the custody of a public or private agency) is eligible for a title IV-E subsidy.

If a child received title IV-E adoption assistance in a previous adoption that dissolved or in which the adoptive parents died, the child is eligible for title IV-E assistance when he or she is subsequently adopted (see Adoption Subsidy Policy VIII-I). The Adoption Subsidy Coordinator must be contacted for an application packet.

The Adoption Subsidy Coordinator will:

A. Accept and review referrals for independent adoption and private agency subsidy applications.
B. Assess all submitted forms and documentation, make a recommendation to approve or deny the adoption subsidy application, and provide written notification to the applicant, the person who arranged the independent adoption or the private agency representative of the decision within 15 working days of receiving the initial application packet from the Adoption Specialist.
C. Contact the applicant, the person who arranged the independent adoption or private agency representative if additional information/forms are needed.
D. Prepare the CFS-428: Adoption Assistance Agreement if it is recommended the adoption subsidy application be approved and route the CFS-428 to the Manager of the Adoption Services Unit and Service Quality Section Administrator for approval, then send the CFS-428 to the DCFS Director or designee for signature.
E. Send signed CFS-428: Adoption Assistance Agreement to the Applicant and Private Agency representative, if applicable, with written instructions.

F. Notify the adoptive parent in writing if the application is denied and explain the reason for denial and the internal review and Administrative Fair Hearing procedures.
G. In CHRIS:
   1) Enter the adoptive parents and adoptive child as clients in the newly opened Adoption Case.
   2) Complete the adoptive child's Characteristic screen to identify the special needs.
   3) Complete the Adoption screens (General Information, Affidavit of Disclosure, and Subsidy) and request the approval of the adoption subsidy.

PROCEDURE VIII-I4: Amendment to an Adoption Subsidy

02/2010

The Adoption Support Specialist will:

A. Follow the same subsidy-related policy and procedures, regardless if the adoption is being handled in-state or out-of-state.
B. Ensure close coordination with the other state's adoption worker, if applicable.
C. Amend a subsidy if there is documentation that an "at risk" child has developed a serious physical, mental or emotional condition.
D. Determine with adoptive parent if an amendment to the existing adoption subsidy is needed. (An amendment may be requested at any time.) The adoptive family must consent to any subsidy amendment (title IV-E only).
E. Determine if there has been a significant change in type of condition of the child to amend a federally funded subsidy A state may renegotiate an adoption assistance agreement if the adoptive parents request an increase in payment due to a change in type of condition of the child and a higher foster care rate would have been paid on behalf of the child if the child had still been in foster care. Review and sign the CFS-425: Application for Adoption after the adoptive parent completes it.
F. Assist the adoptive parents in completing the CFS-426: Statement of Income and Resources for Adoption Subsidy. Attach verification of family income to the CFS-426 when a state funded adoption special subsidy is requested. The CFS-426 is not required for a federal adoption maintenance subsidy. Note that an amendment for an increase of a state subsidy will not exceed the amount the child would have received for a special board rate if in foster care. The amount of any amendment will not exceed $460.00 above the standard board rate for the child's age group. However, if the child is SSI eligible, the rate can go up $460.00 above the SSI rate.
G. Carefully review all requests for increases in payment for state funded subsidies and special subsidies. As state dollars are limited, an exploration of other resources is required and must be documented in the narrative when submitting an amendment request. The Division Director can review extraordinary circumstances at his or her discretion.
H. Review the adoptive parent's health insurance policy if a special subsidy is requested to determine if it will allow for any medical, dental, or psychological costs and, if so, to what extent. Document the information on the CFS-426.
I. Complete the CFS-427: Determination of Eligibility for Adoption Assistance if a special subsidy is requested.
J. Complete a narrative to address the type of subsidy needed, the source of funding, the reason for the subsidy, the costs, and recommendation.
K. Send all requests, the forms, narrative, and any other documents to the Adoption Subsidy Coordinator within 20 working days from the initial contact with the adoptive parent. For requests of special board rate increases, forward completed packets to the Adoption Subsidy Coordinator for review and comment. Communicate with the adoptive parent to explain an approval, to review the CFS-428: Adoption Assistance, and to secure the adoptive parent's signature on the CFS-428 within 10 working days from receipt of the agreement.
L. Send the Adoption Subsidy Coordinator and adoptive parent a copy of the signed CFS-428.
M. Send the Adoption Subsidy Coordinator a written notification within three working days from the meeting with the adoptive parent to explain a disagreement with the contents of the CFS-428.

N. Meet with the adoptive parent(s) to explain a denial, review the decision, and explain internal review procedures within 10 working days from receipt of the written notification to deny.
O. In CHRIS, if subsidy amendment is approved, change the Subsidy Ending Date on the Adoption Subsidy screen to stop the existing adoption subsidy. Then, click Clear and enter the new amended subsidy with the new Beginning and Ending dates and the subsidy amount. Request the Approval for the amended subsidy amount.
P. Prepare the CFS-428: Adoption Assistance Agreement if the adoption subsidy application is approved, and route the CFS-428 to the Manager of the Adoption Services Unit for approval, then send the CFS-428: Adoption Assistance Agreement to the DCFS Director or designee for signature.
Q. Notify the adoptive parent in writing if the application is denied and explain the reason and the internal review and Administrative Fair Hearing procedures.

PROCEDURE VIII-I5: Request for Continuation of Federal and State Funded Adoption Maintenance Subsidy after Age 18

08/2014

In some cases, a federal adoption maintenance subsidy or state funded maintenance subsidy may be continued for adoptees 18 to 21 years old. Medicaid, however, cannot be extended past age 18 for state funded subsidies. While the foster care Medicaid cannot be extended beyond the month the child turns 18, the family may apply for another type of Medicaid at their local county office via the Division of County Operations. Medicaid coverage through the local DHS county office is not guaranteed.

If the adoptive parent requests that the adoption subsidy be continued past the child's 18th birthday, the following criteria must be met:

A. The adoptive parent must be receiving a federal or state-funded adoption maintenance subsidy prior to the child's 18th birthday.
B. The adoptive parent must provide proof that the child:
   1) Has a mental or physical disability which warrants continuation; or
   2) Was adopted at age 16 or older and
      a) Is completing secondary education or a program leading to an equivalent credential; or
      b) Is enrolled in an institution which provides post-secondary or vocational education; or
      c) Is participating in a program or activity designed to promote, or remove barriers to, employment;
      d) Is employed for at least 80 hours per month; or
      e) Is incapable of doing any of the above described activities due to a medical condition.

The Division will ensure that the child meets these employment or education requirements. 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.

The Adoption Support Specialist will:

A. Include the above documentation and recommend whether the adoption subsidy should be continued past the child's 18th birthday.
B. If the adoption subsidy is approved to continue past the child's 18th birthday:
   1) Prepare the CFS-428-A: Adoption Assistance Agreement for State Funded Payments or CFS-428-B: Adoption Assistance Agreement for Federal IV-E Funded Assistance, as appropriate.
   2) Route the CFS-428-A: Adoption Assistance Agreement for State Funded Payments or CFS-428-B: Adoption Assistance Agreement for Federal IV-E Funded Assistance, as appropriate, to the Adoption Services Unit Manager for review.

3) If the Adoption Services Unit Manager and DCFS Director approve the CFS-428-A or CFS-428-B, as appropriate:
   a) Change the Subsidy Ending Date on the Adoption Subsidy screen in CHRIS to continue subsidy past child's 18th birthday.

C. If the adoption subsidy is not approved to continue past the child's 18th birthday by either the Adoption Support Specialist, Adoption Services Unit Manager, or DCFS Director:
   1) Notify the adoptive parent in writing and explain the reason for denial.
   2) Document the denial in CHRIS.

The Adoption Services Unit Manager will:

A. Approve or deny the CFS-428-A: Adoption Assistance Agreement for State Funded Payments or CFS-428-B: Adoption Assistance Agreement for Federal IV-E Funded Assistance, as appropriate.
B. If the Adoption Assistance Agreement is approved, send to the DCFS Director or designee for signature.
C. If the Adoption Assistance Agreement is denied, notify the Adoption Support Specialist and explain the reason for denial.

The DCFS Director will:

A. Approve or deny the CFS-428-A: Adoption Assistance Agreement for State Funded Payments or CFS-428-B: Adoption Assistance Agreement for Federal IV-E Funded Assistance, as appropriate.
D. Return the CFS-428-A: Adoption Assistance Agreement for State Funded Payments or CFS-428-B: Adoption Assistance Agreement for Federal IV-E Funded Assistance, as appropriate, to the Adoption Services Unit Manager

PROCEDURE VIII-I6: Interstate Compact on Adoption and Medical Assistance (ICAMA)

08/2013

A child who is receiving Medicaid as a result of an adoption subsidy may continue to receive the subsidy if the child moves to or from another state.

The Adoption Support Specialist will:

A. Contact the ICAMA Coordinator or refer an adoptive parent to the ICAMA Coordinator in the DCFS Adoption Services Unit.
B. Provide the ICAMA Coordinator with the adoptive family's new address, phone number, and the effective date of the move.

The ICAMA Coordinator will:

A. Complete the ICAMA forms in relation to a child who is moving from the state and forward the forms to the new state of residence. Forward the following: (1) Form 6.01 (Notice of Medicaid Eligibility/Case Activation), (2) Form 6.02 (Notice of Action), and (3) Form 6.03 (Change in Child/Family Status), if applicable.
B. Forward completed ICAMA forms to the Eligibility Unit in relation to a child who moves into the state. Forward the following: (1) Form 6.01 OR a COBRA Letter and (2) a copy of the Adoption Subsidy Agreement.

PROCEDURE VIII-I7: Termination of Adoption Subsidy

06/2011

Termination of an adoption subsidy will occur:

A. Upon the adoptive parent(s)' request;

B. Upon the child's death;
C. Upon the death of the adoptive parent(s) of the child (one parent if a single parent family and both in a two-parent family);
D. At the cessation of legal responsibility of the adoptive parent(s) for the child;
E. If the Division determines that the child is no longer receiving support from the adoptive parent(s).
F. When the child reaches the age of 18 unless
   1) the child's subsidy was extended past the age of 18 due to a mental or physical disability which warranted continuation of a federally-funded subsidy or state maintenance to be received, in which case the adoption subsidy would be terminated when the child attains the age of 21; or,
   2) the child's subsidy was extended past the age of 18 (per the adoption subsidy agreement) because the child was adopted at age 16 or older, in which case the child's subsidy would be terminated when the child attains the age of 21, provided that the child also met one of the following circumstances from 18 years of age through 21 years of age:
      a) The youth is completing secondary education or a program leading to an equivalent credential; or
      b) The youth is enrolled in an institution which provides post-secondary or vocational education; or
      c) The youth is participating in a program or activity designed to promote, or remove barriers to, employment; or
      d) The youth is employed for at least 80 hours per month; or
      e) The youth is incapable of doing any of the above described activities due to a medical condition,

The Division will ensure that the child meets these employment or education requirements. 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.

The Adoption Specialist will assess any change in the adoptive family's circumstances, which would warrant termination of the adoption subsidy. The Adoption Specialist will:

A. Determine if termination of the adoption subsidy is necessary.
B. Conduct a staffing with the Adoption Manager.
C. Provide written notification to the adoptive parent to explain the reason for the termination of the adoption subsidy and the internal review procedures.
D. In CHRIS:
   1) If adoption subsidy is terminated, change the Subsidy Ending Date on the Adoption Subsidy screen to stop the existing adoption subsidy.
   2) If there are other adoptive siblings with existing adoption subsidies, end-date the adoptive child's Involvement in Case selecting the appropriate reason on the Child's General Information screen.
   3) If there are no other adoptive siblings with existing adoption subsidies, close the adoption case on the Case Summary screen selecting the appropriate reason.

PROCEDURE VIII-I8: Payment for Non-recurring Adoption Expenses and Special Subsidy

01/2013

The Adoption Specialist will:

A. Submit a billing packet to the Adoption Subsidy Coordinator for non-recurring adoption expenses (non-recurring adoption expenses shall not exceed a total of $1,500.00) within 60 days after the finalization of the adoption.
B. For non-travel related expenses, the packet will include the DHS-1914, original invoice, a copy of the CFS-428-A: Adoption Assistance Agreement For State Funded Subsidy Payments or CFS-428-B: Adoption Assistance Agreement For Federal IV-E Funded Assistance, as applicable, and final adoption decree.

C. For travel related expenses the packet will include the DHS-75, TR-1, receipts, a copy of the 428-A: Adoption Assistance Agreement For State Funded Subsidy Payments or CFS-428-B: Adoption Assistance Agreement For Federal IV-E Funded Assistance and the final adoption decree.
D. For payment of a special subsidy, the packet will include: DHS-1914, original invoice, copy of the 428-A: Adoption Assistance Agreement For State Funded Subsidy Payments or CFS-428-B: Adoption Assistance Agreement For Federal IV-E Funded Assistance and the final adoption decree.

The Adoption Subsidy Coordinator will:

A. Review, code, and forward each completed billing packet within 10 working days and forward to the manager of the Adoption Services Unit for approval.

The Manager of the Adoption Services Unit will:

A. Forward the approved packet to the office of finance for payment within 10 working days of receipt from the subsidy coordinator.

POLICY VIII-J: MUTUAL CONSENT VOLUNTARY ADOPTION REGISTRY

The Division recognizes that some adults who were adopted as children and some birth parents who voluntarily or involuntarily relinquished a child for adoption, as well as relatives within the second degree to the adoptee, may wish to be identified to each other. The Division also recognizes that some adult adoptees, birth parent(s), and/or relatives to the second degree of the adoptee are unwilling to be identified. The Division further recognizes that some adult adoptees, birth parent(s) of the adoptee, adoptive parent(s), or, in the event of their death, guardians of the adoptee may wish to obtain non-identifying information pertaining to the birth family. In order to protect the privacy of those who choose not to be identified and to attempt to meet the needs of those who do wish to be identified and to provide non-identifying formation, the Adoption Services Unit administers the Mutual Consent Voluntary Adoption Registry in accordance with Act 957 of 1985 and Act 1060 of 1987. The Division will keep records of every adult adoptee and birth parent reunited through the use of the Mutual Consent Voluntary Adoption Registry.

A.C.A. §9-9-505 Requires compilations of non-identifying histories of adoptions be available upon request, throughout the time the agency is required to maintain records, to the following persons only: (a) The adoptive parents of the child or, in the event of death of the adoptive parents, the child's guardian; (b) The adoptee; (c) In the event of the death of the adoptee, the adoptee's children, the adoptee's widow or widower, or the guardian of any child of the adoptee; (d) The birth parent of the adoptee; (e) Any child welfare agency having custody of the adoptee. Any additional non-identifying information which may have been added on health or on genetic and social history, but which excludes information identifying any birth parent or member of a birth parent's family or the adoptee for any adoptive parent of the adoptee, shall be made available ONLY to the persons listed in this paragraph.

Any affidavits filed for placements on the registry and any other information collected shall be retained for 99 years following the date of registration. Any qualified person may choose to remove his name from the Registry at any time by filing a notarized affidavit with the Registry.

PROCEDURE VIII-J1: Mutual Consent Voluntary Adoption Registry and Related Services

The Registry Administrator will:

A. Prepare forms to be shared with administrators of other agencies.
B. Prepare monthly, quarterly, or annual demographic reports.
C. Host a meeting of other Registry Administrators at least once every 12 months.
D. Prepare policies and procedures related to the operation of the Registry.
E. Establish office procedures which will assure the confidentiality of the Registry, its records, and identifying information.
F. Put the information for the affidavit form for placement on the Mutual Consent Voluntary Adoption Registry (MCVAR) at the Department of Human Services Internet website by one of two methods:
   1) Print, fill out and send the CFS-434: MCVAR Affidavit/Registration to the web site manager, or
   2) Fill out the CFS-434 directly on the website electronically.
G. Ensure that information contained in the Registry or obtained by Registry staff consists of non-identifying information only.
H. Send information packets, which have registration requirements and procedures and an affidavit to any person who inquires about registration.
I. Have access to the agency's closed adoption records and to court records limited to the act of verifying a Registry match or for compilation of non-identifying information.
J. Collect fees for registration services and accept affidavits for registration.
K. Provide written notification to qualified registrants within 20 working days as to the status of the initial search of all registrants who wish to be identified.
L. Send notification to match registrants by certified mail, return receipt, restricted delivery.

M. Determine if non-identifying information is available and if the registrant is eligible to receive it.
N. Provide non-identifying genetic, health and social history of the adoptee within 65 working days from the date of registration.
O. Mail non-identifying information to the registrant by certified mail, restricted delivery, return receipt requested.
P. Maintain copies of non-identifying information in a secured location.
Q. Keep records of every adult adoptee and birth parent reunited through the use of Mutual Consent Voluntary Adoption Registry.
R. Provide a copy of the foster care record to the adoptee upon request. De-identify the names of any reporters of child abuse and/or neglect.
S. Arrange for an adoptee to review his foster care record upon request. This access is NOT available to adoptees who were placed as infants for the sole purpose of adoption.

The Adoption Specialist will:

A. Refer any person who inquires about the Registry to the Registry Administrator, Adoption Services Unit.

B. Provide a minimum of no less than one hour of counseling to Registry applicants for receipt of identifying information and sign the affidavit to verify the service.

POLICY VIII-K: INTERNATIONAL ADOPTIONS

07/2010

The Adoption Services Unit shall provide assistance with Inter-Country Adoptions. However, federal IV-E funds shall not be used to support Inter-Country Adoptions.

PROCEDURE VIII-K1: International Adoptions

07/2010

The Adoptions Manager or designee will:

A. Respond to inquiries/referrals about international adoptions.
B. Provide list of licensed private adoption agencies who will complete adoption assessments for inter-country adoptions.
C. Determine if an adoption assessment prepared by a qualified licensed social worker or others designated by the court meet child placement licensing requirements for adoption in Arkansas. (Licensed adoption agencies are exempt from this review.)
D. Provide an approval letter to the United States Citizenship and Immigration Service (USCIS) upon request to verify compliance to licensing requirements.
E. Maintain permanent adoption files.
F. Train staff with licensed private adoption agencies, licensed social workers, and others designated by the court involved with inter-country adoption.

The Adoption Specialist will:

A. Refer inter-country adoption inquiries/referrals to the Adoptions Manager or designee.

POLICY VIII-L: SUBSIDIZED GUARDIANSHIP

01/2020

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 and fictive kin 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 or fictive kin 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 guardians who initially served as an approved relative or fictive kin foster home may apply for a guardianship subsidy. For the purposes of determining eligibility for a guardianship subsidy, the necessary degree of relationship is satisfied by a relative or fictive kin as defined in A.C.A. § 9-28-108: A relative means a person within the fifth degree of kinship by virtue of blood or adoption (the fifth degree is calculated according to the child). Fictive kin is defined as a person selected by the Department who is not related to a child by blood or marriage and has a strong, positive, and emotional tie or role in the child's life or the child's parent's life if the child is an infant.

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 or fictive kin home. The child who qualifies for a guardianship subsidy does not necessarily have to be placed at the same time as his or her siblings in the relative or fictive kin home. The guardianships for each child in the same relative or fictive kin 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 or fictive kin guardian(s) which is eligible to receive payments on behalf of the child (i.e., the prospective relative or fictive kin 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 or fictive kin 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. **The youth, if more than twelve (12) years of age, signs 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 or fictive kin is the intended permanency goal for a child and the relative or fictive kin 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 or fictive kin 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 or fictive kin foster parent as a more permanent alternative to legal guardianship and, in the case of a relative or fictive kin 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 or fictive kin 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.**

ADDITIONAL REQUIREMENTS FOR SUBSIDIZED GUARDIANSHIP WHEN PROPOSED GUARDIAN RESIDES OUT-OF-STATE

If a guardianship supported by a subsidy is being pursued with a relative or fictive kin who resides outside of Arkansas, that relative or fictive kin must identify a willing resident agent for service within Arkansas. The resident agent for service is a person who must accept service of any action or suit with respect to the guardianship, as applicable, on behalf of the out-of-state guardian. The resident agent of service must provide any action or suit with respect to the guardianship received as the resident agent to the out-of-state guardian. Any individual who agrees to serve as the resident agent for service must accept his or her designation in writing and this designation will be filed with the court.

SUBSIDIZED GUARDIANSHIP PAYMENTS

The Division will provide subsidized guardianship payments on behalf of eligible children and their siblings (when placed in the same relative or fictive kin home) to approved relatives or fictive kin 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 or fictive kin 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.**

In addition, guardianship subsidy payments may also continue for a child up to the age of 21 if the State determines that the child has a mental or physical handicap that warrants the continuation of assistance. If the state determines the youth has a mental or physical handicap that warrants the continuation of the guardianship subsidy assistance up to the age of 21, that youth is not subject to the education and employment requirements listed above for youth ages 18-21. Requests for extension of subsidy agreements up to age 21 due to a mental or physical handicap must be submitted by the guardian(s) to the Subsidized Guardianship Coordinator or designee at least three (3) months prior to the termination of the current subsidy agreement. Such extension requests received after this time frame (to include after the youth has turned 18 but not yet reached the age of 21) may still be considered. However, any subsidy agreement that is extended past the age of 18 due to a mental or physical handicap will take effect on the date the new subsidy agreement reflecting the extension is signed. Any monthly subsidy payments that were not made between the end date of the initial subsidy agreement and the date of the new subsidy agreement reflecting a subsidy extension past age 18 will not be made retroactively.

The Division will ensure that the relatives or fictive kin 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 or has a mental or physical handicap(s), 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. The sibling of a child eligible for subsidized guardianship does not need to meet any subsidized guardianship eligibility requirements him or herself.

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 or fictive kin 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. Any child receiving a subsidized guardianship payment may have his or her guardianship subsidy adjusted per Arkansas rate structure based on the child's age or the child's special needs. The subsidy shall not be greater than the amount which the child would have received had the child remained in a foster family home.**
- **C. The relative or fictive kin guardians may not draw both an SSI payment and a subsidized guardianship payment. The relatives or fictive kin shall determine which form of assistance best meets the needs of the child.**
- **D. The relative or fictive kin 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 or fictive kin 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 or fictive kin guardians.

The relative or fictive kin 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 or fictive kin 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 or fictive kin 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 or fictive kin home) who receives a subsidized guardianship payment as the child must be eligible for and receiving IV-E guardianship subsidy payments in order to be categorically eligible for Medicaid. 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 or fictive kin 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 or fictive kin, the Division shall then determine if the child (and his or her siblings if applicable) and prospective relative or fictive kin guardian(s) may qualify for a subsidized guardianship. If the child's FSW believes the child and relative or fictive kin guardians may qualify based on the subsidized guardianship eligibility and case plan criteria, he or she will make a referral to the DCFS Subsidized Guardianship Coordinator or designee.

If the DCFS Subsidized Guardianship Coordinator 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 or fictive kin guardian(s) and ensure that eligibility and case plan criteria for the program are met. The DCFS Subsidized Guardianship Coordinator 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 Subsidized Guardianship Coordinator 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 Subsidized Guardianship Coordinator 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 the guardianship and subsidized guardianship agreement.

SUBSIDIZED GUARDIANSHIP AGREEMENT

Once guardianship with a specific relative or fictive kin 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 or fictive kin 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 or fictive kin 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 or fictive kin guardian(s), based on the circumstances of the relative or fictive kin guardian and the needs of the child;**
- **C. The additional services and assistance that the child and relative or fictive kin 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 or fictive kin 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 or fictive kin guardian;**
- **I. That the relative or fictive kin guardian(s) are required to respond to guardianship agreement review requests from the Division so that the Division can file an annual report with the court as required in law;**
- **J. Designated successor guardian(s), if desired, for the child in the event that the current relative or fictive kin guardian is no longer able to fulfill guardianship responsibilities.**
  - **1) Successor guardian(s) 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.**
    - **a) In the event the initial relative or fictive kin guardian dies or is otherwise incapacitated, placement with the successor guardian identified in the initial guardianship agreement (or any amendments to the agreement) may be pursued, as appropriate. After a new guardianship subsidy agreement is signed by the successor guardian and DCFS and the new guardianship is subsequently entered before the court, the subsidized guardianship assistance payments will continue to the successor guardian.**

      However, the child must also continue to meet all subsidized guardianship eligibility criteria in

order to move forward with a subsidized guardianship arrangement with the identified successor guardian.

ANNUAL PROGRESS REPORT and REVIEW of SUBSIDIZED GUARDIANSHIP AGREEMENT

An annual progress report and review of the subsidized guardianship agreement are required annually in order for the subsidized guardianship and subsidized guardianship payments of any amount or payment rate to continue. The progress report and review shall be provided to the guardian(s) by the Division of Family Services (DCFS) Subsidized Guardianship Coordinator or designee. Upon receipt of the completed progress report and review, the Subsidized Guardianship Coordinator or designee will send those documents to the appropriate court so that the progress report can be filed with the court as required in law. An accounting of the guardianship subsidy is not required. The subsidized guardianship payments granted at the time of the annual progress report 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 or fictive kin 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 Subsidized Guardianship Coordinator 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 or fictive kin 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 or fictive kin guardian home) excluding when a child 18 or older lives in an approved transitional 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 or fictive kin 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 who has extended subsidy (i.e., up to age 21) is no longer determined to have a mental or physical handicap which warrants the continuation of assistance; or,**
- **H. If the child who has an extended subsidy (i.e., up to the age of 21), upon reaching the age of 18 years or older requests the guardianship be terminated; or,**
- **I. If the child becomes an emancipated minor; or,**
- **J. If the child marries; or,**
- **K. If the child enlists in the military; or,**
- **L. If the relative or fictive kin guardian(s) are no longer legally or financially responsible for the support of the child; or,**
- **M. If the guardian(s) die; or,**
- **N. If the guardianship is vacated; or,**
- **O. 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 or fictive kin 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 or fictive kin 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 or fictive kin 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 or fictive kin 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 or fictive kin 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.

The child would only be eligible for title IV-E subsidized guardianship if all eligibility criteria had been met prior to the finalization of the guardianship (including executing a subsidized guardianship agreement). Therefore, even if the Office of Hearings and Appeals orders DCFS to provide subsidized guardianship payments and services for the child, the State shall not claim FFP under title IV-E if a subsidized guardianship agreement was not in place prior to the guardianship.

PROCEDURE VIII-L1: Initial Subsidized Guardianship Program Determination

01/2020

If a goal of guardianship with a relative or fictive kin 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 or fictive kin guardians, and child's biological parents (if appropriate) to make the initial determination that the child and prospective or fictive kin relative guardians meet all subsidized guardianship eligibility requirements.
C. Update the case plan to reflect guardianship goal and other required program information (see Case Plan Requirements for Subsidized Guardianship in policy section above).
D. Submit the completed CFS-435-A to the FSW Supervisor for review and approval and attach any other documentation that would be important to the child's case (financial information, Special Board Rate Justification), but at minimum the following to complete the referral packet:
    1) Case history memorandum detailing the specifics of the child's overall situation (e.g., parent information, special needs, connection to the proposed guardian, how reunification and adoption have been ruled out, whether child is IV-E eligible, length of time placed in the approved relative or fictive kin foster home)
    2) Child's signed consent to guardianship for children 14 and older
    3) Final SAFE Home Study Report Update, as applicable
    4) Most recent Foster Home Approval Letter

5) Court Orders (documenting reasonable efforts, ruling out reunification and adoption, and establishing a goal of guardianship)
6) Notarized statement from relative or fictive kin verifying discussion of all permanency options available and understanding of those options as well as decision to elect guardianship and apply for a subsidy

E. 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 or fictive kin 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 or fictive kin foster parent as a more permanent alternative to legal guardianship and, in the case of a relative or fictive kin 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 or fictive kin 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 Subsidized Guardianship Coordinator or designee that the child and prospective relative or fictive kin guardians would like to proceed with the subsidized guardianship arrangement.
c) If the DCFS Subsidized Guardianship Coordinator 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 Subsidized Guardianship Coordinator 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 or fictive kin guardians.
B. Review the completed CFS-435-A: Subsidized Guardianship Application and Checklist and other required referral packet documentation.
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 Subsidized Guardianship Coordinator 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

01/2020

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

A. Complete and provide to the relative or fictive kin guardian applicant CFS-435-B: Notification of Subsidized Guardianship Program Denial.
B. Keep a copy of CFS-435-B: Notification of Subsidized Guardianship Program Denial in the DCFS Subsidized Guardianship Coordinator or designee's file.
C. Notify the FSW and FSW Supervisor of the decision.
D. Note in CHRIS contacts screen reason for subsidized guardianship denial.
E. Work with the family and county office, as appropriate, to determine the permanency goal that is in the child's best interest and/or how the child and/or relative or fictive kin guardian applicant may become eligible for a legal guardianship supported by a subsidy if appropriate.

PROCEDURE VIII-L3: Subsidized Guardianship Determination Meeting

01/2020

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 Subsidized Guardianship Coordinator 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 or fictive kin guardians
    3) Child's biological parents, if appropriate
    4) Any grandparent who is entitled to notice based on the conditions listed in Policy III-B: Notification of Relatives and Fictive Kin When a Child is Taken into Custody by the Division and related procedures
    5) Child's FSW
    6) FSW Supervisor
    7) Adoption Representative (if Adoption Representative did not participate in permanency planning staffing)
    8) DCFS Subsidized Guardianship Coordinator 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 Subsidized Guardianship Coordinator 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 or fictive kin guardians. The subsidy rate should not exceed the child's current foster care board payment.
D. If the prospective relative or fictive kin 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 or fictive kin 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) Submit all related forms and supporting documentation to the committee within 48 hours of the staffing of the family's intent to move forward.

PROCEDURE VIII-L4: Subsidized Guardianship Oversight Committee Review

01/2020

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 Subsidized Guardianship Coordinator. 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 Subsidized Guardianship Coordinator 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, ask the FSW to work with the local OCC attorney to file a petition for guardianship (and determine a court date for the guardianship hearing if date has not already been set) 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 to finalize the guardianship and the subsidized guardianship agreement by providing the OCC attorney with a copy of the CFS-435-A: Subsidized Guardianship Application and Checklist that includes the DCFS Subsidized Guardianship Coordinator or designee's signature.
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

01/2020

The DCFS Subsidized Guardianship Coordinator or designee will:

A. Complete the CFS-435-D: Recommendation for Finalization of Guardianship and submit to the appropriate OCC attorney who will use the information on the form to prepare the guardianship petition.
B. Draft and complete the CFS-435-F: Subsidized Guardianship Agreement with the prospective guardians and FSW prior to the guardianship hearing.
C. Submit the CFS-435-F: Subsidized Guardianship Agreement to the Adoption's Manager or designee for review and approval.
D. Sign the CFS-435-F: Subsidized Guardianship Agreement.

The Adoption Manager or designee will:

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

The FSW will:

A. Assist the DCFS Subsidized Guardianship Coordinator 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: Subsidized Guardianship Agreement 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

01/2020

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 participants (e.g., foster parents, other relatives, etc.) at least 14 calendar days before the guardianship hearing. OCC will provide notice to parties to the legal case.
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 or fictive kin guardians:
    1) Discuss the court orders with the family.
    2) File the CFS-435-F: Subsidized Guardianship Agreement in the provider record.
    3) Provide a copy of the CFS-435-F: Subsidized Guardianship Agreement to the relative or fictive kin 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 or fictive kin 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 or fictive kin 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 or fictive kin 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: Subsidized Guardianship Agreement 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

01/2020

The DCFS Subsidized Guardianship Coordinator or designee will:

A. Mail the relative guardians the CFS-435-G: Annual Progress Report and 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 envelope addressed to the Subsidized Guardianship Coordinator or designee:
   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,
      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. Document in CHRIS date the CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review is mailed to the relative guardians.
C. If the family has not returned the completed CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and required documentation within 30 calendar days from the date the form was mailed, contact the family by phone to ensure that said documents will be delivered to the DCFS Subsidized Guardianship Coordinator or designee within two weeks.
D. Review the completed CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and related supporting documentation prior to the anniversary date of finalization of the family's subsidized guardianship agreement:
   1) If the supporting documentation shows that the child's condition has not changed:

a) Send completed copy of CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review with DCFS Subsidized Guardianship Coordinator or designee's signature to the family noting that the subsidized guardianship agreement will continue unchanged for the forthcoming year.
b) Send the original CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review with signatures to the appropriate court for filing.
c) Maintain a copy of the completed CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review with signatures in guardian record.
d) Enter appropriate CHRIS updates.

2) If the supporting documentation shows that the child's condition or status within the home has changed and the change(s) warrant a revision of the subsidized guardianship agreement or termination of the agreement:
   a) Schedule a meeting with the relative or fictive kin guardians and Adoption Manager or designee to discuss needed revisions or termination including any requests for special subsidy rates.
      i. If a request for a special subsidy rate has been made, the subsidy will remain the same until the special subsidy is approved. Approval is not guaranteed.
   b) Revise CFS-435-F: Subsidized Guardianship Agreement if appropriate and complete CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review.
      i. Provide copy of completed CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and new CFS-435-F: Subsidized Guardianship Agreement to family.
      ii. Provide original CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review with signatures to the appropriate court for filing.
      iii. Maintain a copy of completed CFS-435-F: Subsidized Guardianship Agreement and CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review in the guardian record.
   c) Enter appropriate CHRIS updates.

E. If relative or fictive kin guardian(s) does not submit CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and/or requested documentation within the required timeframe:
   1) Complete CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and CFS-435-H: Notice of Modification or Termination to Subsidized Guardianship Agreement.
   2) Send the family a copy of the completed CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and CFS-435-H: Notice of Modification or Termination to Subsidized Guardianship Agreement indicating termination of the agreement and associated payments and benefits.
   3) File the original CFS-435-G: Annual Progress Report and Subsidized Guardianship Agreement Review and CFS-435-H: Notice of Modification or Termination to Subsidized Guardianship Agreement in the guardian record.
   4) Enter appropriate CHRIS updates including termination of subsidized guardianship payments.

The Adoption Manager or designee will:

A. Conference with the DCFS Subsidized Guardianship Coordinator or designee as needed regarding decisions related to annual reviews of subsidized guardianship arrangements.
B. Participate in meetings with the relative or fictive kin guardians and DCFS Subsidized Guardianship Coordinator 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

01/2020

The information below does not apply to situations in which the initial guardian dies or is otherwise incapacitated.

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

A. Notify the DCFS Subsidized Guardianship Coordinator that the child has re-entered care.
B. Consult with the DCFS Subsidized Guardianship Coordinator or designee and appropriate FSW supervisor as to whether:
   1) It is appropriate for the child to work toward reunification with the initial relative or fictive kin 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 or fictive kin 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 Subsidized Guardianship Coordinator as to whether a subsidized guardianship arrangement with the initial relative or fictive kin 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 Subsidized Guardianship Coordinator as to whether a subsidized guardianship arrangement with the initial relative or fictive kin 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 Subsidized Guardianship Coordinator or designee will:

A. Consult with the FSW, FSW Supervisor, and Area Director as to whether a subsidized guardianship arrangement with the initial relative or fictive kin 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

01/2020

If the family wishes to appeal a decision regarding their subsidized guardianship agreement, the DCFS Subsidized Guardianship Coordinator 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: Notice of Modification or Termination to Subsidized Guardianship Agreement).
B. Keep the family and Adoption Manager or designee informed to any further proceedings related to the appeal request.

POLICY VIII-M: Resumption of Services Post-Termination and Reinstatement of Parental Rights

01/2020

OVERVIEW

Given that behavior change and the work of change is a part of the child welfare system's daily challenge, the Division recognizes that there may be parents who previously had their parental rights terminated, but at a later point in time significantly alter the life circumstances that contributed to the removal of their children and the subsequent termination. These parents may qualify for resumption of services as described in the policy below. Based on the outcome of the resumption of services, the court may then consider reinstatement of parental rights. Resumption of services and a subsequent reinstatement of parental rights may provide additional permanency options for children in foster care, particularly for youth who have been in the foster care system for an extended period of time without finding a permanent family.

INITIAL ELIGIBILITY

The Department of Human Services, Division of Children and Family Services (DCFS) or an attorney ad litem may file a motion to resume services for a parent whose parental rights were previously terminated. Resumption of services may be considered if the child:

- **A. Is currently in the custody of the Department;**
- **B. Is not in an adoptive placement, pre-adoptive placement, or under another permanent placement and there is some evidence that the child is not likely to achieve permanency within a reasonable period of time as viewed from the child's perspective; or,**
- **C. Was previously adopted, appointed a permanent guardian, or placed in the permanent custody of another individual and the adoption, guardianship, or custodial placement was disrupted or otherwise dissolved.**

In addition, at least three years must have passed between the date the order terminating parental rights was entered and the date a motion to resume services on behalf of that parent is filed. The three-year waiting period may be waived by the court if it is in the best interest of the child. It must also be determined that the parent in no way interfered with the child's ability to achieve permanency prior to the consideration of resumption of services.

ASSESSMENT

If all of the criteria above are met, the agency must then assess whether the parent and child are appropriate candidates for resumption of services before DCFS requests to file a motion to resume services. This will be determined, at a minimum, through:

- **A. An initial walk-through of the parent's home to identify any safety factors or risk concerns;**
- **B. Discussions with the parent, child, parties to the case, and relevant stakeholders (e.g., child's therapist, child's teacher, etc.); and,**
- **C. The completion of a home study.**

The home study will include background checks to identify current issues and differentiate between current maltreatment and criminal issues versus issues occurring prior to the termination of parental rights.

Through the assessment above, it must be determined that the parent is appropriate at the time of filing the motion for resumption of services. DCFS Area Director approval must be obtained prior to moving forward with a petition for resumption of services.

When determining whether to grant or deny a motion to resume services, the court will consider:

- **A. Efforts made by DCFS to achieve adoption or other permanent placement for the child, including any barriers preventing permanency from being achieved;**
- **B. Current status of the parent, including the extent to which the parent has remedied any conditions that led to the termination of parental rights (TPR);**

C. Willingness of the parent to participate in services offered; and,
D. The child's wishes regarding resumption of contact, visitation, or placement with the parent.

RESUMPTION OF SERVICES
If an order granting a motion for resumption of services is entered, a staffing will be held within 30 days. An updated Child and Adolescent Needs and Strengths (CANS) assessment and corresponding case plan will also be developed within 30 days. Extensive services or supports should not be required to establish parental fitness. Rather, services and supports offered through a case plan for resumption of services will be designed to help facilitate the re-establishment of the parent-child bond. Examples may include regular visitation and family counseling. Such services and supports will be put in place through the case plan in an effort to work toward a reinstatement of parental rights, if appropriate, and, ultimately, a stable and permanent reunification.

If multiple counties have been involved over the life of a case that is deemed appropriate for resumption of services, the applicable DCFS Area Directors will collaborate to determine which county will serve as primary regarding the development, execution, and oversight of the case plan.

A parent will not be named as a party to a motion filed for resumption of services, but the parent will have the right to be heard at a hearing on the motion. The court may order the parent to pay for some or all of the costs associated with the court-ordered family services.

REINSTATEMENT OF PARENTAL RIGHTS
Based on the outcome of the resumption of services, the court may then consider reinstatement of parental rights, as appropriate. Services to the family must continue for at least 180 days before DHS or an attorney ad litem may file a petition to reinstate parental rights. A petition to reinstate parental rights will be filed in the circuit court that had jurisdiction over the petition to terminate parental rights. Parental rights may be reinstated if the court finds by clear and convincing evidence that:
A. Reinstatement of parental rights is in the best interest of the child; and,
B. There has been a material change in circumstance for the parent since TPR.

If parental rights are reinstated, the case will remain open until the child has resided with the parent for at least six months.

An order reinstating parental rights restores all rights, powers, privileges, immunities, duties, and obligations of the parent as to the child, including custody, control, and support of the child. However, an order reinstating parental rights does not vacate or affect the validity of a previous order terminating parental rights.

PROCEDURE VIII-M1: Resumption of Services Post-Termination

04/2018

The Family Service Worker will:
A. Determine if the juvenile qualifies for a motion for resumption of services (see Initial Eligibility above).
B. Contact the parent who is the subject of the motion for resumption of services and determine if the parent is fit by:
    1) Conducting a walk-through of the family home and identifying any safety factors or risk concerns;
    2) Discussing the motion for resumption of services and determine if the parent is willing to participate in the resumption of services;
        a) Detail for the parent the financial and logistical implications for the parent if the parent agrees to a motion for resumption of services.
    3) Identifying any evidence that the parent engaged in conduct that interfered with the child's ability to achieve permanency;
    4) Identifying any barriers to placement of the juvenile in the parent's home and determining if the barriers may be remedied with limited assistance from the Department;

5) Determining whether the parent has remedied the conditions that existed at the time of the termination of his or her parental rights.

C. Consult with County Supervisory staff and Area Director to obtain DCFS position on appropriateness of resumption of services based on information gathered.
   1) Area Director approval must be obtained in writing prior to moving forward with a petition for resumption of services.
D. Complete a home study on the parent who is the subject of the motion for resumption of services.
E. Provide the completed home study to OCC and request that the attorney take action to file a motion for resumption of services.
F. Upon receipt of a written order to resume services to the parent:
   1) Update the CANS assessment with input from the family, parties to the case, and other stakeholders;
   2) Develop a case plan with input from the family, parties to the case, and other stakeholders;
   3) Hold a staffing within thirty (30) days of the date on which the order granting a motion for resumption of services is entered to review the CANS and case plan and discuss other relevant information related to the resumption of services;
   4) Complete visits to the parent's home as outlined in POLICY VII-J until parental rights have been re-established or the resumption of services has been dismissed by the court and the juvenile has returned to a licensed out-of-home placement;
   5) Complete a court report and provide to all parties seven (7) business days prior to each hearing;
   6) Attend review hearings every ninety (90) days until the court has closed the court case.
   7) Monitor the case for a minimum of six (6) months prior to recommending reinstatement of parental rights.

The FSW Supervisor will:

A. Participate in internal staffing with FSW and Area Director to determine if a motion to resume services is in the juvenile's best interest based on information presented during the staffing.
B. Ensure all DCFS court reports demonstrate best interest for the juvenile.

The Area Director will:

A. Participate in internal staffing with FSW and FSW Supervisor to determine if a motion to resume services is in the juvenile's best interest based on information presented during the staffing.
B. Provide a best interest determination in writing upon conclusion of the staffing.

PROCEDURE VIII-M2: Reinstatement of Parental Rights

04/2018

The Family Service Worker will:

A. Seven (7) business days prior to any hearing on the motion, provide the parent, parent's counsel, attorney ad litem, court-appointed special advocate, and any other parent to the petition with a written report that includes:
   1) The efforts made by the Department to achieve adoption or another permanent placement for the child, including any barriers to the adoption or permanent placement of the child;
   2) The extent to which the parent who is the subject of the petition has complied with the case plan and order of the court as of the date on which services were ordered to be resumed;
   3) The impact of the resumed services on the parent and on the health, safety, and well-being of the child; and,
   4) Recommendations of the Department.
B. Monitor the family for at least six (6) months after a reinstatement of parental rights has been granted to ensure a successful reunification.

The FSW Supervisor will:

A. Ensure DCFS maintains consistent contact with the family while the juvenile is placed in the parent's home.
B. Ensure all DCFS court reports are provide to the parties timely and demonstrate best interest for the juvenile.

IX. SERVICES ACCOUNTABILITY

POLICY IX-A: INTERNAL REVIEW & ADMINISTRATIVE HEARING PROCESS

07/2009

Determination of certain adverse actions as defined below shall be subject to an Internal Review process. Decisions made by the Director regarding an Internal Review are final and are not appealable. Appeals of decisions regarding child maltreatment are not subject to Internal Review and will be considered only through the Appeals and Hearings process.

PROCEDURE IX-A1: Internal Review of Adverse Action

01/2013

The internal review process is as follows:

A. The individual who is the subject of an adverse action may request verbally or in writing an Internal Review from the appropriate manager or administrator.
B. The manager or administrator will review the request and forward it with a recommendation to the appropriate Assistant Director for review within ten (10) business days of receipt of request and any supporting materials.
C. The Assistant Director will notify the applicant in writing of the decision of the review within ten (10) business days of receiving the request.
D. If the decision is unfavorable to the individual, the Assistant Director will inform the individual that he or she has 15 business days in which to submit a written appeal to the DCFS Director.

The DCFS Director will notify the individual within ten (10) business days of the appeal decision. This is a final action and is not appealable.

Actions subject to Internal Review are:

A. Closure of a foster home due to any circumstance
B. Removal of a child from the foster home without appropriate cause and/or or without appropriate notice
C. Failure by DCFS to share appropriate information with foster parents
D. Failure by DCFS to provide necessary support to foster parents
E. Failure by DCFS to keep the terms of the initial written agreement with the foster home (CFS-462: Initial Foster Home Agreement and CFS-462A: Foster Home Agreement Addendum)
F. Denial of a home study, including ICPC, which results in a decision not to open the home of any relative within the third degree of kinship
G. Denial of an adoption application
H. Denial of name removal from Child Maltreatment Central Registry after one (1) year
I. Additionally, an age-appropriate child or his attorney ad litem on his or her behalf, may appeal a change in his out-of-home placement, according to Policy VII-K

PROCEDURE IX-A2: Appeals and Hearings of Unfavorable Decisions

01/2013

Certain unfavorable decisions may be appealed through the Appeals and Hearings process. Actions which may be appealed are:

A. True child maltreatment determinations
B. Denials of adoption subsidies
C. Denials or modifications of guardianship subsidies

An individual must request an Administrative Hearing within 30 calendar days of receiving a notice of an unfavorable decision from DCFS. The appeal must be made in writing to Department of Human Services, Office of Chief Counsel, Appeals and Hearings Administration Section, P.O. Box 1437, Slot N401, Little Rock, AR 72203-1437.

The Appeals and Hearing Section will notify DCFS when an appeal has been filed. Upon receiving notice of an appeal, the following entities will immediately prepare a file and make it available to the petitioner, any representative, the OCC Attorney, and the Appeals and Hearings Section:

A. In Child Maltreatment-related appeals: Central Registry
B. In adoption subsidy denials: Adoptions Unit
C. In guardianship subsidy denials or modifications: Foster Care Unit (Permanency Specialist)

At least ten (10) days prior to the administrative hearing, the alleged offender and the department will share any information with the other party the party intends to introduce into evident at the hearing that is not contained in the record.

The Appeals and Hearings section will send a notice of hearing which contains the time, date, and place of the hearing and the name of the hearing officer who will conduct the hearing. The hearing will be held by telephone if neither party requests that the hearing be conducted in person. If the hearing is held in person, the location will be in an office of the department nearest to the petitioner's residence unless the Administrative Law Judge determines that the hearing will be conducted via video teleconference.

PROCEDURE IX-A3: Appeals and Hearings of True Child Maltreatment Decisions

08/2013

The Appeals and Hearings Section will notify DCFS that an appeal has been filed. The DCFS investigator responsible for the case will prepare an Investigative File immediately and make it available to the petitioner, any representative, the OCC Attorney and the Appeals and Hearings Section.

At least ten (10) days prior to the administrative hearing, the alleged offender and the Department will share any information with the other party the party intends to introduce into evidence at the hearing that is not contained in the record. Additionally, if any child served with a subpoena to be a witness in an administrative hearing is a party to an open dependency-neglect case, the child's attorney ad litem will be provided a copy of the subpoena.

The Appeals and Hearings section will send a notice of hearing which contains the time, date, and place of the hearing and the name of the hearing officer who will conduct the hearing. The hearing will be held by telephone if neither party requests that the hearing be conducted in person. If the hearing is held in person, the location will be in an office of the Department nearest to the petitioner's residence unless the Administrative Law Judge determines that the hearing will be conducted via video teleconference.

Upon receipt of notice that a true child maltreatment determination is the subject of an appeal, the DCFS investigator and DCFS Supervisor or CACD investigator and CACD supervisor (as appropriate), OCC Attorney and the Area Director will consult to review the evidence used to establish the true determination and ascertain the impact of any subsequent events of the case after the determination was made. If the consultation reveals no merit for defending the true finding, the Area Director will complete the CFS-313: Office of Chief Counsel Review of Administrative Hearing Investigative Determination and provide a copy to the County Supervisor, OCC attorney, and Assistant Director of Community Services. The OCC attorney will inform Appeals and Hearings of the decision not to defend. The CFS-313 will be included in the investigative file. If the consultation reveals merit for defending the true finding, the appropriate office/unit must designate a representative who must be familiar with the circumstances leading to the adverse decision and must be able to summarize the pertinent aspects of the situation and present the documentation to support the basis for the findings. The representative will be able to answer questions posed by the petitioner or the hearing officer relative to the issue and should be prepared to cross-examine witnesses.

The Department must notify the hearing officer and respondent of the status of any proceeding of the Juvenile Division of the Circuit Court if the child maltreatment at issue in the administrative hearing proceeding is also an issue in the juvenile division of the circuit court proceeding. The notice may include issues such as whether a 72-hour hold was exercised on the victim, whether the child was released, or if a petition for emergency custody or dependency-neglect was dismissed.

Office of Chief Counsel will assign an attorney to represent the investigative agency at the hearing only if the petitioner has an attorney. If the petitioner appears at the hearing with an attorney without having first notified the Department, the investigator shall ask for a continuance so that an OCC attorney may be appointed.

If the petitioner fails to appear for the hearing and does not contact the Appeals and Hearings Section prior to the date of the hearing, the appeal will be dismissed.

PROCEDURE IX-A4: Regular Administrative Hearing Process

08/2013

A Hearing Officer from the Appeals and Hearings Section will conduct the hearing in an informal but orderly manner. The Hearing Officer will explain the hearing procedure.

The petitioner may be accompanied by friends or other persons and may be represented by a friend, legal counsel, or other designated representative.

The hearing officer may not review material prior to the hearing unless the material is also made available to the petitioner or his representative.

The representative will read the Administrative Hearing Statement and will then present the Department's case, which includes introducing evidence and questioning witnesses subpoenaed to the hearing as well as cross-examining the petitioner's witnesses.

After completion of DCFS' case, the petitioner's case will be presented. This includes the opportunity to present witnesses, advance arguments, offer additional evidence, question the agency representative, and confront and cross-examine witnesses. Questioning of all parties will be confined to the issues involved.

In all cases, the petitioner will be advised of the right to judicial review in the event of an adverse ruling.

The ALJ may amend an investigative determination during (but not after) an administrative hearing to conform with the evidence presented. If the alleged offender could not reasonably infer the amended investigative determination from the investigative record and information submitted by the Division, the ALJ may grant a request for continuance to the alleged offender.

The hearing officer will prepare a hearing decision based on a comprehensive report of the proceedings. The format will consist of an Introduction, Findings of Fact, Conclusions of Law, and a Decision. Final administrative action must be completed within 180 calendar days from the receipt of the appeal by the Appeals and Hearings Section with the following exceptions:

A. The 180-day limit will not apply if upon request of any party a stay is granted as permitted pursuant to A.C.A. § 12-18-801 et seq. The Administrative Law Judge may stay the case upon a showing by any party that there is an ongoing criminal or delinquency investigation regarding the occurrence that is the subject of the child maltreatment report.
B. If a criminal or delinquency proceeding is filed regarding the occurrence that is the subject of the child maltreatment report and a request for a stay is accompanied by the written notification of the date the criminal or delinquency proceeding was filed by a party, the administrative hearing shall be stayed for a period of not more than one (1) year from the date the criminal or delinquency proceeding is filed.

1) The stay shall be lifted and the case set for a hearing upon the earlier of:
    a) A petition and showing by any party that there is good cause to conduct the administrative hearing before the conclusion of the criminal or delinquency proceeding
    b) The final disposition of the criminal or delinquency proceeding
    c) The expiration of one (1) year from the date the criminal or delinquency proceeding was filed
2) A stay granted per the rules described above may be extended after the one (1) year expiration upon a written notice from the requesting party that the criminal or delinquency proceeding is still ongoing.
3) It is the duty of the petitioner to report the final disposition of the criminal or delinquency proceeding to the DHS Office of Appeals and Hearings for a stay as described above. The case shall be dismissed and the petitioner's name placed on the Child Maltreatment Central Registry if the petitioner fails to provide a file-marked copy of the final disposition of the criminal or delinquency proceeding within thirty days of the entry of the final disposition.

Delays in completing the administrative hearing that are attributable to either party shall not count against the limit of the 180 days if the administrative law judge determines that good cause for the delay is shown by the party requesting the delay and the request for delay is made in writing and delivered to the DHS Office of Appeals and Hearings and all other parties.

Failure to complete the hearing process in a timely fashion shall not deprive the department or a court reviewing the child maltreatment determination of jurisdiction to make a final agency determination or review a final agency determination pursuant to the Administrative Procedures Act.

If a court of competent jurisdiction adjudicates a question that is an issue to be determined by the DHS Office of Appeals and Hearings, the prevailing party to the judicial adjudication who is also a party to the administrative adjudication shall file a certified copy of the judicial adjudication with the office. The office shall determine whether and to what extent the judicial adjudication has preclusive effect on the administrative adjudication by applying the principles of claim preclusion and issue preclusion. The office shall not re-adjudicate any precluded issue. If the judicial adjudication is modified or reversed, the office shall determine whether and to what extent any issue in the administrative adjudication remains precluded and shall schedule a hearing with respect to any matter that is no longer precluded.

The decision becomes final unless appealed and subsequently overturned in a court of law.

Upon request by the petitioner, DCFS shall provide a list of persons who were told previously that the report was "True". The Family Service Worker will provide a copy of the administrative hearing order upon request by a subject of the report.

PROCEDURE IX-A5: Expedited Hearing Process

08/2013

If the alleged offender requests a hearing, DCFS may then request an expedited hearing if the alleged offender is engaged in child-related activities or employment or is employed or a volunteer with persons with disabilities, persons with mental illness or elderly persons and those persons are at risk of harm because of the alleged offender's employment or volunteer activities. DCFS will notify the alleged offender using certified mail within three (3) business days of the request via the CFS-233-T: Child Maltreatment Expedited Hearing Notice to Alleged Offender that an expedited hearing has been requested. The alleged offender will have five days from receipt of the notice of the request to object to the request to expedite the administrative hearing. The alleged offender must notify the Department in writing via mail, fax or e-mail of his objection.

The Area Director or CACD Area Manager will determine if the request for the expedited hearing should be submitted to the Office of Appeals & Hearings. The request for the expedited hearing should be made using the CFS-232-T EH:

Expedited Hearing Request. If approved for an expedited hearing, Office of Appeals and Hearings will notify the alleged offender of the date of the hearing.

If approved for an expedited hearing, the investigator shall provide the alleged offender with a complete copy of his file. The department may charge a reasonable fee not to exceed $10.00 for researching, copying, or mailing records from a child maltreatment investigative file; and a reasonable fee for reproducing copies of electronic media, such as audio tapes, video recordings, compact discs, or DVDs and photographs. However, no fee may be charged to a person who is indigent.

The investigator shall document when the file was made available to the alleged offender. The file is considered to have been made available when notification is made to the offender or his attorney that a copy of the investigative record is available for pickup at the Department office in the county in which the alleged offender resides or in the Department office in the county designated by the alleged offender or his attorney.

The expedited hearing may not be held until 30 days have elapsed since DCFS made available to the alleged offender a complete copy of his file. The alleged offender may waive the requirement for the 30-day wait period.

PROCEDURE IX-A6: Preliminary Administrative Hearing

01/2020

If DCFS is unable to notify the alleged offender of the investigation determination, the Area Director may request a preliminary hearing using the CFS 232-T PH to allow provisional placement of the alleged offender's name in the Child Maltreatment Central Registry.

The Area Director will determine if the request for the preliminary hearing should be submitted to the DHS Office of Appeals and Hearings.

DCFS must prove:

A. That it diligently attempted to notify the alleged offender of the investigative determination. This means that DCFS used a reasonable degree of care to discover the alleged offender's whereabouts and notify the alleged offender. Documentation would include proof that a process server was unsuccessful in locating the alleged offender.
B. That a child, an elderly person, or a person with a disability or mental illness may be at risk of maltreatment.

The DCFS representative must tell the ALJ if there is any criminal action pertaining to the investigation. A preliminary administrative hearing shall proceed even if:

A. There is an ongoing criminal or delinquency investigation regarding the occurrence that is the subject of the child maltreatment investigation
B. Criminal or delinquency charges are filed or will be filed regarding the occurrence that is the subject of the child maltreatment investigation

At the preliminary hearing, the ALJ will determine whether there is a prima facie case that:

A. The offender committed child maltreatment, that is, whether the evidence, if not contradicted, is sufficient to support a judgment that the allegations are true
B. A child, an elderly person, or a person with a disability or mental illness may be at risk of maltreatment.

If the ALJ determines that there is a prima facie case, DCFS will provisionally place the offender's name in the Child Maltreatment Central Registry. DCFS will make notification of the determination to persons as described in Procedure XIV-A7: Notices that Offender's Name Will Be Placed in the Child Maltreatment Central Registry. The Division will continue to attempt to notify the alleged offender using the CFS-292-N: Notice of Name Placement on Central Registry to Offender no less frequently than once a year for no fewer than three (3) years from the date the

name is placed on the Child Maltreatment Central Registry. After three (3) years, no further contact will be made and the alleged offender's name will provisionally remain on the Child Maltreatment Central Registry.

Within 30 days of receiving notice of the determination of his/her listing in the Child Maltreatment Central Registry, the offender may request a hearing as outlined in the notice. If the offender fails to request a regular administrative hearing within thirty days of receipt of the notice of the investigative determination, the ALJ may determine that the provisional designation is removed and the offender's name be officially placed in the Child Maltreatment Central Registry.

If the ALJ determines that there is no prima facie case, DCFS will not place the alleged offender's name in the Child Maltreatment Central Registry. DCFS will continue to provide notice to the alleged offender using the CFS-232-T1: Notice to Alleged Adult Offender of True Maltreatment Investigative Determination of the true investigation hearing and the opportunity for a regular administrative hearing no less frequently than once a year for no fewer than three (3) years from the date the name is placed on the Child Maltreatment Central Registry.

PROCEDURE IX-A7: Investigative File for the Administrative Hearing

08/2013

The file prepared for the hearing will contain all information obtained during the course of the investigation.

The office that prepares the investigative file will present evidence to support the decision that is the subject of disagreement. For a hearing request based on a child maltreatment investigation report, the file will contain a copy of the:

A. CFS-6001: Referral Information Report
B. CFS-212-A: Notice of Child Maltreatment Allegation to Alleged Offender
C. CFS-384-LEA: Notification to LEA
D. CFS-320: Administrative Hearing Statement
E. CFS-232-T1: Notice to Alleged Adult Offender of True Maltreatment Investigative Determination

A copy of the return receipt verification (green card) or documentation of delivery by a process server must also be attached to the file. The CFS-313: Office of Chief Counsel Review of Administrative Hearing Investigative Determination will be included with the investigative file if the agency has decided that the true child maltreatment determination will not be defended.

The CFS-320: Administrative Hearing Statement will summarize the nature of the complaint, a summary of the Child Maltreatment Investigation, and the decision. The CFS-320: Administrative Hearing Statement, however, is not evidence. Complete documentation will be required in the investigative file to support the Administrative Hearing Statement.

If the Investigative File prepared is incomplete the ALJ may grant a continuance and direct the Division to make diligent inquiry and obtain the missing information and provide it to the offender.

County staff will have ten (10) calendar days to respond to a request from Central Registry for a copy of the investigative file. The investigative file shall include any copies of pictures, audio tapes, and video tapes that are a part of a particular file.

County staff must complete the CFS-320: Administrative Hearing Statement upon request by Central Registry for the investigative file. Staff will route the CFS-320: Administrative Hearing Statement directly to Appeals and Hearings, with a copy to the OCC attorney, if an attorney is assigned. If the name of the assigned OCC attorney is not known, the copy of the CFS-320: Administrative Hearing Statement should be sent to the County Legal Operations Coordinator.

The individual requesting the hearing (the petitioner) will be advised by the Appeals and Hearings Section that the petitioner has ten (10) calendar days to provide a witness list.

An OCC attorney may provide assistance in case preparation even if the attorney will not be at the hearing. OCC will provide relevant information pertinent to the defense of the determination on CFS-313: Office of Chief Counsel Review of Administrative Hearing Investigative Determination.

Department employees will be expected to attend hearings and present testimony without the benefit of a subpoena and will be notified by the Appeals and Hearings Section of their required presence at the hearing.

The DCFS representative will be notified of any witness requested by the petitioner requesting the hearing. The DCFS representative will have five (5) calendar days from receipt of this notice to request a for-rebuttal witness list.

The Department of Human Services, Office of Chief Counsel, will issue the subpoenas under the authority of Ark. Code Ann. § 20-76-201 and 12-18-802. The Chief Counsel of DHS may designate someone to sign subpoenas issued for administrative hearings on child maltreatment.

Administrative hearing decisions and all exhibits submitted at the hearing are confidential and may be used or disclosed only as provided in A.C.A. §12-18-809.

PROCEDURE IX-A8: Request for Investigation Review by Child Maltreatment Investigations Oversight Committee

03/2018

Pursuant to A.C.A. §10-3-3202 the Division of Children and Family Services (DCFS) will work with the Child Maltreatment Investigations Oversight Committee to promote transparency and efficiency concerning procedures of child maltreatment investigations in the state. The Child Maltreatment Investigations Oversight Committee will review and evaluate the conduct of child maltreatment investigations completed by DCFS or the Crimes Against Children Division (CACD) of the Department of Arkansas State Police and service delivery to children and families involved in an investigation of child maltreatment. The committee meetings are closed and confidential.

Upon receipt of a request from the Child Maltreatment Investigations Oversight Committee to review an investigation, the CPS Manager will:

A. Report the review request to the Assistant Director of Prevention and Reunification and the Assistant Director of Community Services immediately.
B. Immediately (within 24 hours or as required by the Director) print out the Prosecuting Attorney Report pertaining to the identified investigation and inquire for additional information from the following entities, as appropriate:
    1) Area Director
    2) Office of Chief Counsel
    3) Office of Appeals and Hearings
    4) Quality Assurance Unit
    5) Central Registry Unit
C. Document the request for review of the investigation from the Child Maltreatment Investigations Oversight Committee in the contact screen for each investigation to be reviewed.
D. Within 48 hours, ensure that the investigation which is to be subject of the review meets criteria for review by ensuring the investigation:
    1) Is a completed investigation of child maltreatment with no pending due process
    2) Is not associated with a pending dependency-neglect case
E. Request updated information from the counties as needed.
F. Schedule a meeting with DCFS staff to ascertain information involving facts surrounding the investigation determination if needed. The meeting will include the following:

1) FSW
2) County Supervisor/Investigative Supervisor
3) Area Director
4) Assistant Director of Community Services or designee
5) DCFS Director or designee
6) Appropriate staff as needed

G. Work with the chair of the Child Maltreatment Investigations Oversight Committee as appropriate in coordinating logistics and necessary reports for presentation to the Child Maltreatment Investigations Oversight Committee.
H. Prepare a report of the identified information as well as all records related to the investigation review request and send the information to the members of the Child Maltreatment Investigations Oversight Committee at least ten (10) calendar days prior to a scheduled committee meeting.
    1) This information may be sent as hard copies or electronically.
I. Prepare a summary of information learned during the review of the investigation by the Child Maltreatment Investigations Oversight Committee to include any DHS actions and recommendations for the Child Maltreatment Investigations Oversight Internal Review Committee prior to each meeting of the review committee.

The Director of DCFS, or designee, will:

A. Participate in the Child Maltreatment Investigations Oversight Committee Meetings.
B. Ensure reports made by the Child Maltreatment Investigations Oversight Committee to the Senate Committee on Children and Youth and the House Committee on Aging, Children and Youth, Legislative and Military Affairs do not contain information that identifies the subject of a report of child maltreatment or the person who made the report of child maltreatment.

PROCEDURE IX-A9: Disclosure of Information on Overturned True Findings of Child Maltreatment to the Legislative Oversight Committee

03/2018

Pursuant to A.C.A. §12-18-713 the Department of Human Services, Division of Children and Family Services and the Arkansas State Police Crimes Against Children Division will submit two (2) reports annually on true investigative determinations that are administratively or judicially overturned to the Senate Committee on Children and Youth and the House Committee on Aging, Children and Youth. Legislative and Military Affairs.

Twice annually, on or about June 1 and December 1, the Division of Children and Family Services Director or designee will:

A. Request a report summarizing by county the true investigative findings which have been overturned administratively or judicially for the reporting period. This report will include:
    1) County of report origin
    2) Number of true reports with the finding overturned judicially
    3) Number of true reports with the finding overturned administratively
B. Provide the completed report to the Senate Committee on Children and Youth and the House Committee on Aging, Children and Youth, Legislative and Military Affairs.
C. Respond to subsequent requests for information from the Senate Committee on Children and Youth and the House Committee on Aging, Children and Youth, Legislative and Military Affairs pertaining to the reported overturned true findings by county.

INFORMATION NOT TO BE RELEASED

Concerning true findings which have been overturned administratively or judicially, the Department of Human Services shall not release:

A. Information identifying the individual family or child.

B. Information identifying the individual investigator.
C. Any information if release of such information would identify the individual investigation or individual investigative parties.

The Quality Assurance Unit will:

A. Compile a report twice annually, on or about June 1 and December 1, summarizing by county the true investigative findings which have been overturned administratively or judicially for the reporting period. This report will include:
    1) County of report origin
    2) Number of true reports with the finding overturned judicially
    3) Number of true reports with the finding overturned administratively
B. Provide the completed report to the Director of the Division of Children and Family Services, or designee.
C. Respond to subsequent requests for information from the Director of DCFS, or designee, pertaining to the reported overturned true findings by county.

POLICY IX-B: CHILD NEAR FATALITIES AND FATALITIES

07/2018

Although an infrequent occurrence, near fatalities and fatalities of children who are receiving services or who have recently received services from the Division do occur. Fatalities may occur due to an illness or other medical condition, as a result of child neglect or abuse, or because of a non-child maltreatment related accident. Regardless of the cause of a near fatality or fatality, these events are extremely traumatic for the family of the child, the foster family (if applicable), Division staff, and service providers. Division staff will be supportive and helpful to those who have had a meaningful and/or legal relationship with the child including relatives and foster parents. Division leadership and management will recognize the importance of appropriately supporting staff who worked directly with the child and encourage those staff members to seek appropriate, individualized services as needed.

Pursuant to A.C.A. §12-18-103 a near fatality (also referred to in DHS Policy 1090 as a serious injury) means an act that, as certified by a physician, places a child in serious or critical condition. As such, the Division will rely on the involved medical facility's designation of the child's condition in determining if a particular incident meets the criteria of near fatality as defined by law.

The Division of Children and Family Services County Office will immediately (within one hour) notify the appropriate Area Director or designee and the Assistant Director of Community Services or designee and initiate action to ensure the safety of other children in the home when DCFS becomes aware of a child near fatality or fatality that may be the result of maltreatment and:

- **A. The child or sibling of the child is a subject of a pending child maltreatment investigation or a child maltreatment investigation within the preceding 24 months.**
- **B. The child or sibling of the child is a client in any open supportive or protective services or out-of-home case.**
- **C. The child or sibling of the child was a client in a supportive, protective services, or out-of-home case during the previous 24 months.**

The Assistant Director of Community Services or designee will immediately (within one hour) notify the Division Director who will notify the DHS Deputy Director, DHS Chief Counsel (per DHS Policy 1090) and the DHS Director of Communications. As such, the Division will not automatically issue press releases on cases of child near fatality or fatality related to maltreatment but will respond to requests for information as they are received in consultation with the DHS Director of Communications.

The Division will ensure that DHS Policy 1090 adhered to regarding all near fatalities and fatalities.

When a fatality occurs in an open out-of-home case, the Division will respectfully assist and support the parents in making funeral arrangements or take other actions deemed necessary by the Area Director.

Because quality improvement and accountability guides the work of DCFS, an internal team of DCFS staff will meet following a child fatality that meets at least one of the criteria established in items A-C above. The team will review the case and identify systemic issues, public health concerns, and where practice could have been improved in that particular case in an effort to prevent future child fatalities and near fatalities.

Following a DCFS internal near fatality or fatality review, the Division will also be responsible for holding a meeting with the External Child Near Fatality and Fatality Review Team to review any certified near fatality or fatality for which there is a current child death investigation (i.e., related to child maltreatment).. The External Child Near Fatality and Fatality Review Team will conduct a comprehensive review of the circumstances leading to the near fatalities and fatalities of children who have been reported through the Arkansas Child Abuse Hotline. Based on the findings of the reviews, the External Child Near Fatality and Fatality Review Team will develop

recommendations and actions, as appropriate, to be implemented to prevent other child near fatalities and fatalities.

The External Child Near Fatality and Fatality Review Team will be comprised of the following members:

- **A. DCFS Director or designee;**
- **B. DCFS Assistant Director of Community Services or designee;**
- **C. DCFS Family Service Worker (FSW) Supervisor designated by the DCFS Director;**
- **D. DCFS FSW Investigative Supervisor designated by the DCFS Director;**
- **E. Crimes Against Children Division Commander or designee;**
- **F. Arkansas Commission on Child Abuse, Rape, and Domestic Violence Executive Director or designee;**
- **G. Children's Advocacy Centers of Arkansas Director or designee;**
- **H. Arkansas CASA Association Director or designee;**
- **I. Arkansas Children's Hospital's Team for Children at Risk and Arkansas Children's House Director or designee;**
- **J. Dependency-Neglect Attorney Ad Litem Director or designee;**
- **K. Office of Chief Counsel Director or designee;**
- **L. The Governor's Senior Advisor for Child Welfare;**
- **M. A member of the Arkansas Child Death Review Panel;**
- **N. A member of the Arkansas Department of Health;**
- **O. A member appointed by the chair of the House Subcommittee on Children and Youth of the House Committee on Aging, Children and Youth, and Legislative and Military Affairs;**
- **P. A member appointed by the Chief Justice of the Arkansas Supreme Court.**

This External Child Near Fatality and Fatality Review Team will meet at least quarterly each calendar year. The committee meetings will be closed and information discussed at the meeting will be confidential. Individuals who are not members of the External Child Near Fatality and Fatality Review Team will not be allowed to attend or otherwise participate in a committee meeting unless a majority of the members vote to request the attendance or participation of a non-committee member.

These external reviews will provide the Division and other stakeholders involved with child serving systems with an additional opportunity to collaboratively review the facts surrounding the fatality and accurately assess child deaths, work to improve systemic issues, address public health concerns, and determine recommendations to improve practice and work together as a system to prevent future child fatalities and near fatalities.

PROCEDURE IX-B1: Near Fatality of Child

07/2018

In the case of a child near-fatality the county office will:

- A. Report maltreatment or any suspected maltreatment to the Child Abuse Hotline immediately if it has not already been called into the Child Abuse Hotline.
- B. Notify the Area Director of the near fatality of the child immediately.

The Area Director will:

- A. Schedule and hold the internal review of the near fatality within 14 calendar days (or earlier upon the DCFS Director's request) with DCFS staff to ascertain information involving facts surrounding the near fatality. The meeting will include:
    - 1) FSW
    - 2) County Supervisor/Investigative Supervisor
    - 3) Area Director
    - 4) Child Protective Services (CPS) Manager
    - 5) Assistant Director of Community Services or designee
    - 6) Other appropriate staff as needed

The individuals above may participate in the meeting by phone as appropriate.

B. Immediately (within 24 hours or as required by the Director) prepare CFS-307: Near Fatality/Fatality Disclosure Case Briefing Summary and the CFS-309: Children and Family Services Internal Review of Child Near Fatality/Death and fax or email it to the CPS Manager.
C. Ensure the completion of CFS-306: Documentation of Child's Medical Episode Related to Near Fatality by the child's attending physician or other attending medical personnel who treated the child during the child's medical episode.

The CPS Manager will:

A. Review the completed CFS-307: Near Fatality/Fatality Disclosure Case Briefing Summary and forward it to:
    1) Assistant Director of Community Services or designee
    2) Assistant Director of Prevention and Reunification or designee
    3) Quality Assurance Unit Manager or designee
B. Request updated information from the counties as needed.
C. Review the CFS-306: Documentation of Child's Medical Episode Related to Near Fatality.
D. Work with the chair of the External Child Near Fatality and Fatality Review Team as appropriate in coordinating logistics and necessary reports for the quarterly External Child Near Fatality and Fatality Review Team.
E. Prepare the list of all certified near fatalities as well as all records related to the child and send the information to the members of the External Child Near Fatality and Fatality Review Team at least fourteen calendar days prior to a scheduled committee meeting.
    1) This information may be sent as hard copies or electronically.

The Quality Assurance Unit will:

A. Enter information regarding near fatalities related to maltreatment on the Child Fatality /Near Fatality Disclosure Log.

PROCEDURE IX-B2: Disclosure of Information on Near Fatalities

08/2013

PENDING

Upon request, the Division shall release the following information via the DHS Director of Communications to the general public when an investigation is pending on a report of a near fatality of a child to the Child Abuse Hotline:

A. Age, race, and gender of the child
B. Date of the child's near fatality
C. Allegations or preliminary cause of the near fatality
D. County and type of placement of the child at the time of incident leading to the near-fatality
E. Generic relationship of the alleged offender to child
F. Agency conducting the investigation
G. Legal action taken by the department
H. Services offered or provided by the department presently and in the past

TRUE REPORTS

Upon request, the Department of Human Services shall release the following information via the DHS Director of Communications to the general public when the investigative determination is true on a report of a near fatality of a child:

A. A non-identifying summary of any previous child maltreatment investigations;
B. A non-identifying summary of the current child maltreatment investigation, including:
    1) The nature and extent of the child's present and past injuries; and,
    2) Medical information pertaining to the incident;
C. Information about criminal charges, if known; and,

D. Any action taken by the department or the Crimes Against Children Division of the Department of Arkansas State Police, including personnel action and licensing action.

UNSUBSTANTIATED REPORTS
Upon request the Department of Human Services shall release the following information via the DHS Director of Communications to the general public when the investigative determination is unsubstantiated on a report of a near fatality of a child:

A. A non-identifying summary of any previous child maltreatment investigations;
B. A non-identifying summary of the current child maltreatment investigation;
C. Information about criminal charges, if known; and,
D. Any action taken by the department or the Crimes Against Children Division of the Department of Arkansas State Police, including personnel action and licensing action.

INFORMATION NOT TO BE RELEASED
Concerning the near fatality of a child, the Department of Human Services shall not release:

A. Information on siblings of the child;
B. Attorney-client communications; or,
C. Any information if release of such information would jeopardize a criminal investigation.

PROCEDURE IX-B3: Child Fatality Notification

07/2018

The Crimes Against Children Division will:

A. Investigate child maltreatment allegations according to established procedures.
B. If safety concerns are identified, immediately contact DCFS to conduct the remaining components of the Health and Safety Assessment (Safety Planning and Investigation Risk Assessment) as appropriate.
   1) DCFS will then be assigned as the secondary investigator on that particular investigation.
C. Coordinate with law enforcement and relinquish their case to them if the possibility of criminal charges is involved and law enforcement prefers to assume responsibility.
D. Initiate needed affidavits for legal action.
E. Keep the county office advised of the status of the investigation, including initial notification when appropriate.
F. Share all information with the parents, offender, and victim, as appropriate.

The Family Service Worker assigned as secondary to the investigation will:

A. If CACD contacted DCFS to conduct the remaining components of the Health and Safety Assessment (Safety Planning and Investigation Risk Assessment), immediately ascertain the safety of other children remaining under the care of the alleged offender and develop a protection plan or pursue protective custody, as appropriate.
B. Provide any services to the family as needed.
C. Enter all contacts with the family into the CHRIS.
D. Share all information about prior contacts with the family with agency staff and law enforcement who are investigating the case.

In the case of a fatality of a child the county office will:

A. Immediately notify the Area Director by phone.
B. Report maltreatment or any suspected maltreatment to the Child Abuse Hotline immediately if it has not already been called into the Child Abuse Hotline.
C. Immediately (within 24 hours or as required by the DCFS Director) complete CFS-307: Child Near Fatality/Fatality Disclosure Case Briefing Summary and CFS-308: Child Fatality Review Packet Checklist and forward the CFS-307 and CFS-308 and all required documents listed on CFS-308 to the CPS Manager.
D. Place copies of CFS-307 and CFS-308 in the child's record.

E. If the child fatality is a result of a prior near fatality event and the fatality occurred more than 24 hours after the near fatality, ensure the completion of CFS-306-A: Documentation of Near Fatality Subsequently Resulting in Fatality by the child's attending physician or other attending medical personnel who treated the child during the child's medical episode.
F. Fax or email the completed CFS-306-A: Documentation of Original Near Fatality Subsequently Resulting in Fatality to the CPS Manager within 72 hours of the fatality, if applicable.
G. Place a copy of the CFS-306-A in the child's record, if applicable.

The Area Director or designee will:

A. Notify the Assistant Director of Community Services or designee immediately by phone.
B. Ensure employee immediately (within 24 hours or as required by DCFS Director) completes and forwards completed CFS-307: Child Near Fatality/Fatality Disclosure Case Briefing Summary and forward the CFS-307 to the CPS Manager.
C. Complete the CFS-308: Child Fatality Review Packet Checklist within seven calendar days of the fatality and fax or email both forms along with all required documents listed on the CFS-308 to the CPS Manager.
    1) Schedule and hold an Internal Fatality Review meeting with DCFS staff within 14 calendar days of the fatality in order to ascertain the facts surrounding the child's death. The meeting will include:
        a) FSW
        b) CACD Investigator
        c) County Supervisor/Investigative Supervisor
        d) CACD Supervisor
        e) Area Director
        f) CPS Manager
        g) Assistant Director of Community Services or designee
        h) Assistant Director of Prevention and Reunification or designee
        i) Any other needed staff as appropriate
D. Expeditiously provide all other information requested by CPS Manager.

The Assistant Director of Community Services or designee will:

A. Notify the DHS Director of Communications by phone within one hour of occurrence if the incident is expected to receive media attention.
B. Discuss relevant details of the case with the DHS Director of Communications to determine the type of information that will be released to the media. Pertinent information that can be released will include disclosable information as provided by the DHS Disclosure Policy (DHS Policy Group 4009).
    1) Any information concerning siblings or attorney-client communications will not be released.
C. Remain in direct contact with appropriate field personnel in order to develop a clear understanding of the circumstances surrounding the incident.

The CPS Manager will:

A. Review CFS-307: Child Near Fatality/Fatality Disclosure Case Briefing Summary.
B. Forward the CFS-307: Child Near Fatality/Fatality Disclosure Case Briefing Summary to:
    1) Assistant Director of Community Services or designee
    2) Assistant Director of Prevention and Reunification or designee
    3) DCFS Director
    4) DHS Director of Communications
    5) DHS Deputy Director over DCFS
C. Review the CFS-308: Child Fatality Review Packet Checklist and all required documents listed on CFS-308.
D. Enter information regarding the fatality on the Child Death Log and Child Death Public Disclosure Log.
E. Serve as the point of contact for follow-up and subsequent briefings of the Assistant Directors, Division Director, and DHS Deputy Director.
F. Work with the chair of the External Child Near Fatality and Fatality Review Team as appropriate in coordinating logistics and necessary reports for the quarterly External Child Near Fatality and Fatality Review Team.

G. Prepare the list of all child deaths as well as all records related to the child and send the information to the members of the External Child Near Fatality and Fatality Review Team at least fourteen calendar days prior to a scheduled committee meeting.
   1) This information may be sent as hard copies or electronically.

The Quality Assurance Unit will:

A. Enter information regarding fatalities related to maltreatment on the Child Fatality/Near Fatality Disclosure Log.

PROCEDURE IX-B4: Disclosure of Information on Fatalities

08/2013

PENDING

Upon request, the Division shall release the following information via the DHS Director of Communications to the general public when an investigation is pending on a report of a fatality of a child to the Child Abuse Hotline:

A. Age, race, and gender of the child
B. Date of the child's death
C. Allegations or preliminary cause of death
D. County and type of placement of the child at the time of incident leading to the child's death
E. Generic relationship of the alleged offender to child
F. Agency conducting the investigation
G. Legal action taken by the department
H. Services offered or provided by the department presently and in the past
I. Name of the child

TRUE REPORTS

Upon request, the Department of Human Services shall release the following information via the DHS Director of Communications to the general public when the investigative determination is true on a report of a fatality of a child:

A. A summary of previous child maltreatment investigations, but the disclosure shall not include the name of the offender(s);
B. A summary of the current child maltreatment investigation including:
   1) The nature and extent of the child's present and past injuries;
   2) Medical information pertaining to the death; and,
   3) The name of the offender if due process has been satisfied or the offender has been arrested.
C. All relevant risk and safety assessments completed on the child;
D. Information about criminal charges, if known; and,
E. Any action taken by the Department of Human Services or the Crimes Against Children Division of the Department of Arkansas State Police, including personnel action and licensing action.

UNSUBSTANTIATED REPORTS

Upon request, the Department of Human Services shall release the following information via the DHS Director of Communications to the general public when the investigative determination is an unsubstantiated report of a fatality of a child:

A. A summary of previous child maltreatment investigations, but the disclosure shall not include the name of the alleged offender(s);
B. A summary of the current child maltreatment investigation including medical information pertaining to the death, however, the name of the alleged offender shall not be disclosed;
C. All relevant risk and safety assessments completed on the child;
D. Information about criminal charges, if known; and,
E. Any action taken by the Department of Human Services or the Crimes Against Children Division of the Department of Arkansas State Police, including personnel action and licensing action.

INFORMATION NOT TO BE RELEASED

Concerning the fatality of a child, the Department of Human Services shall not release:

A. Information on siblings of the child
B. Attorney-client communications
C. Any information if release of such information would jeopardize a criminal investigation

POLICY IX-C: DRIVER'S LICENSE AND INSURANCE REIMBURSEMENT PROGRAMS FOR YOUTH IN OUT-OF-HOME PLACEMENT

09/2010

In accordance with A.C.A. § 27-16-702 (a) (1) (D), the DCFS Director may authorize an employee of the Department or the foster parent to sign the youth's application. The youth in out-of-home placement shall be able to meet all state requirements listed in A.C.A. § 27-16-804 (Restricted licenses, learner's licenses, and intermediate licenses):

- **A. Be at least 16 years of age;**
- **B. Have tested uncorrected visual acuity of at least 20/40 OR 20/50 with corrective lenses;**
- **C. Have tested field of vision of at least 140 degrees with two functioning eyes OR 105 degrees with one functioning eye; and**
- **D. Be free of a serious accident and conviction of a serious traffic violation in the last 12 months.**

In addition, DCFS must be provided with the following information that will be used to determine whether the Division Director will authorize an employee or foster parent to sign for a driver's license for a youth in out-of-home placement:

- **A. Delinquent acts and history of behavior;**
- **B. A minimum 2.0 [C] grade point average, OR record of regular attendance AND satisfactory progress in an adult education program, OR documentation of compliance with an Individual Education Plan;**
- **C. DCFS review and acceptance of the driving history and record of violations over the last 12 months;**
- **D. Placement stability;**
- **E. Enrollment of the youth in the Chafee Foster Care Transitional Youth Services (TYS) by the FSW; and**
- **F. Other pertinent information deemed necessary.**

DRIVER'S LICENSE PRIVILEGE

Participating in the DCFS Foster Care Driver's License Program and Driving Insurance Reimbursement Program is a privilege, not an entitlement, requiring compliance with both Arkansas state laws and DCFS policy. Any youth, age 16 or older, who is in DHS custody, may request permission to obtain a driver's license and be reimbursed for insurance. Completion of a driver's education course is not a requirement. If a foster parent elects to have the youth participate in one, DCFS funds may be utilized to pay enrollment or tuition fees on a reimbursement basis.

Youth who remain in care past the age of 18, do not need approval to apply for a driver's license.

In order to maintain the privilege of driving, the youth in out-of-home placement shall abide by the following:

- **A. Operate a motor vehicle on public streets and highways only when all passengers are wearing their seat belts;**
- **B. Not use a cell phone or any other electronic device that may distract the driver; and**
- **C. Not transport anyone under 18 years of age without licensed adult (21 years of age or older) supervision in the vehicle.**

DCFS will monitor the following items when a youth in out-of-home placement has a driver's license:

- **A. Youth's driving record;**
- **B. Youth's behavior;**
- **C. Youth's school performance; and**
- **D. Compliance with state law and DCFS requirements as outlined above.**

The Division Director may cancel the authorization for the driver's license. State law permits the Arkansas Office of Driver's Services to cancel, revoke or suspend any learner's permit or driver's license upon request.

If at any time, the youth in out-of-home placement no longer meets all of the state and DCFS requirements, the Division may take possession of the youth's learner's permit or driver's license until all requirements are again met.

If a youth enters foster care with a valid learner's permit or driver's license from any state, maintaining possession of that license is subject to meeting all state and DCFS requirements. The youth must complete the CFS-388: Application and Agreement to Participate in DCFS Foster Care Driver's License Program with all of the required attachments indicating that the youth already has a driver's license and submit the form, attachments as outlined above, and a copy of the driver's license. Upon review, the Division Director or designee may determine that the youth can continue to drive and will authorize the youth to keep possession of the driver's license. If the Division Director or designee denies the request to keep the driver's license, the FSW shall obtain possession of the driver's license and the youth will not be able to drive. DCFS will notify the appropriate state Office of Driver Services to cancel the driver's license.

INSURANCE REIMBURSEMENT PROGRAM FOR YOUTH IN OUT-OF-HOME PLACEMENT
Any motor vehicle a youth operates must be owned by the foster parent or the youth. A youth in out-of-home placement MUST be insured to drive a specific vehicle before he or she is allowed to operate that motor vehicle, and the youth MUST be included as a driver on the insurance policy for that specific vehicle. The insurance policy must meet minimum Arkansas motor vehicle liability standards or DCFS requirements, if higher, as determined by OCC. The Division will reimburse foster parents for the actual amount of the additional cost of adding a specific youth in foster care as a driver on the insurance policy for a specific motor vehicle. The foster parent must present documentation from the insurance company of the actual amount of the additional cost to qualify for reimbursement. If the youth owns his or her own car, he or she must present documentation of the cost of the policy that insures them. The Division will reimburse the youth for the actual amount of the insurance policy. All reimbursement requests will be reviewed and approved by the DCFS Director or designee.

REQUIREMENTS FOR PARTICIPATION IN THE INSURANCE REIMBURSEMENT PROGRAM
The minimum requirements to participate in the Division's Insurance Reimbursement Program are approval and permission to participate in the Driver's License Program for youth in out-of-home placement.
When participating in the Insurance Reimbursement Program, the youth agrees to give the Division authority to take possession of their driver's license, suspend driving and insurance reimbursement privileges, and to petition the Arkansas Revenue Office for revocation of their driver's license.

The Division will monitor the driving record, behavior, and school performance of all youth in DHS custody who have elected to participate in the Division's Insurance Reimbursement Program. If at any time, the youth no longer meets all of the state and DCFS requirements, the Division may elect to discontinue reimbursing the foster parents or the youth for the actual costs of insuring the youth.

PROCEDURE IX-C1: Driver's License Program for Youth in Out-of-Home Placement

The Family Service Worker will:

A. Provide written notification to every youth in out-of-home placement age 16 or older, that they may submit a request to DCFS for permission to apply for an Arkansas Learner's or Intermediate Driver's License as appropriate.
B. Advise the youth and foster parents of criteria to be considered by DCFS in determining whether to approve a request for an Arkansas Learner's or Intermediate Driver's License.
C. Provide the youth with a copy of CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program.
D. Assist OR arrange for the foster parent or other adult approved by the County Supervisor or Area Director to assist the youth in completing and submitting the CFS-388 along with all required documentation which includes:
    1) A written statement addressing placement stability
    2) The youth's report card or school transcript showing cumulative and current GPA, OR record of regular attendance and satisfactory progress in an adult education program, OR documentation of compliance with the individual education plan; the youth making the application must obtain the appropriate official document from the appropriate authority

3) Statement of behavior history. The FSW must review and write a statement concerning the youth's behavior over the last six (6) months
4) Proof of participation in Transitional Youth Services (TYS) program. The FSW must attach proof of the youth's enrollment in the TYS program. If the youth isn't already enrolled, the FSW must enroll the applicant and attach proof of enrollment.

E. If requested, assist the youth and foster parent in:
1) Finding a state approved driver's education program
2) Arranging DCFS reimbursement funding for any reasonable driver's education program cost if the location is reasonably accessible by the youth

F. Compile the original CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and supporting documents into a packet and document in CHRIS.
G. Submit the packet to the County Supervisor.
H. Ensure the youth is enrolled in the TYS. If not, the FSW must enroll the youth in TYS.
I. File a copy of the CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and supporting documents in the foster care record and provide copies to the foster parent and youth.
J. If approved, assist OR arrange for the foster parent to take the youth to an Arkansas Revenue Office.
K. Document in CHRIS.

The Youth in out-of-home placement will:

A. Inform the foster parent or FSW that he or she wants to obtain an Arkansas Learner's or Intermediate Driver's License.
B. Meet all DCFS criteria before applying for a learner's or intermediate driver's license.
C. Work with the FSW, foster parent, and/or other approved adult to complete and submit the CFS-388 and supporting documents. It will be the youth's responsibility to request and obtain the appropriate academic records and documents.

The Foster Parents will:

A. Document on the CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program if they are willing to support the youth's application for an Arkansas learner's or intermediate driver's license.
B. Assist the youth in completing and submitting the CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and supporting documents, if needed.
C. Transport the youth to and from the state approved driver's education program as needed.
D. Sign any needed documents not signed by the FSW or youth.

The DCFS County Supervisor will:

A. Review the CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and supporting documents for completeness and prepare the Request Packet.
B. Forward the Request Packet to the Area Director for review and certification.

The DCFS Area Director will:

A. Review the packet, certify its completeness and accuracy and recommend approval or disapproval.
B. Document the approval or disapproval in CHRIS.
C. Forward the packet to Central Office Vehicle Safety Coordinator.

The DCFS Vehicle Safety Coordinator will:

A. Check the youth's driving record, if any, and document any traffic violations and/or at-fault accidents.
B. Add appropriate documentation to the packet and forward it to the Director or designee for approval or disapproval.

The Director or designee will:

A. Review the packet and approve or disapprove the youth's request.

B. If the youth is approved to obtain a driver's license, the Director or designee will send a notarized letter designating the person authorized to sign the application. The youth will take the notarized letter to the Arkansas Driver's License Office.

PROCEDURE IX-C2: Insurance Reimbursement Program for Youth in Out-of-Home Placement

The Family Service Worker will:

A. Check if the youth has a valid driver's license and submit required documentation.
B. Advise the youth and foster parents that motor vehicle liability insurance is required before the youth is allowed to operate any specific motor vehicle.
C. Advise the youth and the foster parents that they may submit CFS-389: Application & Agreement to Participate in DCFS Foster Care Driving Insurance Reimbursement Program along with all required documentation which includes:
   1) A copy of the foster parents' insurance policy listing the youth as an insured driver and delineating the actual additional premium increase, OR
   2) A copy of the youth's insurance policy including the actual cost
D. Ensure that everyone has completed their part of the CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and CFS-389: Application & Agreement to Participate in DCFS Foster Care Driving Insurance Reimbursement Program, that the original forms are filed in the foster case record, and that the youth and foster parents each have a copy.
E. Ensure that the youth and the foster parents understand the program and answer any questions they may have.
F. Submit the completed CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and CFS-389: Application & Agreement to Participate in DCFS Foster Care Driving Insurance Reimbursement Program to the County Supervisor for review and approval.
G. Ensure that a copy of proof of insurance regarding each specific vehicle is received from the foster parents or the youth, if they own their own car, and filed in the case file before the youth is allowed to operate that motor vehicle.
H. Ensure that the foster parents or youth are reimbursed for the actual amount of additional costs of adding a specific youth to the insurance policy of a specific motor vehicle.
I. Monitor the youth's driving record for current and continued compliance with all state and DCFS requirements.
J. Take possession of and hold the youth's driver's license, as soon as practical, following any ticketed traffic violation, at-fault motor vehicle accident, or other legal problem involving the youth as a driver, or whenever the youth no longer meets the state's requirements.

The Youth in out-of-home placement will:

A. Sign the CFS-389: Application & Agreement to Participate in DCFS Foster Care Driving Insurance Reimbursement Program.
B. If the youth owns a vehicle, provide DCFS with proof of insurance covering the youth and his or her specific vehicle.
C. If the youth owns a vehicle, provide DCFS with documentation of the actual additional cost of insuring the youth when claiming reimbursement.
D. Carry his or her driver's license when operating any motor vehicle.
E. Follow all state motor vehicle laws.
F. Abide by all Division guidelines and program requirements.
G. Immediately report any traffic ticket received or motor vehicle accident in which they are involved in as a driver to the foster parents or FSW and give their license to the foster parent or FSW until the situation can be reviewed.

Youth who remain in care past the age of 18 will work with their FSW or TYS sponsor to complete the required documents.

The Foster Parents will:

A. Insure the youth for each specific motor vehicle that he or she will be allowed to operate.
B. Provide DCFS with proof of insurance covering the youth on each specific vehicle.
C. Provide DCFS with documentation of the actual additional costs of insuring the youth when claiming reimbursement.
D. Immediately report to the FSW any traffic ticket received by the youth or motor vehicle accident in which they are involved as a driver.
E. Immediately take possession of the youth's driver's license and give it to the FSW as soon as practical, following any ticketed traffic violation or motor vehicle accident involving the youth as a driver.

The DCFS County Supervisor will:

A. Review CFS-388: Application & Agreement to Participate in DCFS Foster Care Driver's License Program and CFS-389: Application & Agreement to Participate in DCFS Foster Care Driving Insurance Reimbursement Program and supporting documents for completeness.
B. Forward the packet to the Area Director for review and certification.
C. Notify the Division Director's office when a youth's driver's license has been taken because of a ticketed traffic violation, at-fault motor vehicle accident, or other legal problem involving the youth as a driver so that the youth's driving privileges can be reviewed.

The DCFS Area Director will:

A. Review the packet, certify its completeness and accuracy and recommend approval or disapproval.
B. Document the approval or disapproval in CHRIS.
C. Forward the packet to Central Office.

The Division Director or designee will:

B. Review the packet and approve or disapprove the youth's request.

X. SPECIAL SERVICES
POLICY X-A: HOME STUDIES AND SUPERVISION

01/2011

The Division will conduct home studies or provide supervision services when ordered by the juvenile division of the circuit court. The Division will also conduct home studies for cases in which DCFS is a party of the litigation and for Interstate Compact on the Placement of Children (ICPC) cases. A court order to conduct a home study is not required for cases in which DCFS is a party to the litigation or for ICPC cases. Requests for home studies on adoption cases requested from other states will only be conducted through ICPC.

The Division will not be required to conduct a court ordered home study, investigation or supervision related to private litigation cases (i.e. divorce, custody) unless the court has first determined that the responsible party is indigent, and the investigation, study or supervision is to take place within the state of Arkansas.

The following policy statements are in accordance to the Uniform Adoption Act. The Department or any licensed social worker shall conduct a home study before placement of a child in the home of the petitioner. Home studies on non-Arkansas residents may also be conducted by the person or agency in the same state as the person wishing to adopt as long as the person or agency is authorized under the law of that state to conduct home studies for adoptive purposes.

The Department of Human Services shall not be ordered by any court to conduct an adoptive home study, unless:

A. The court has first determined the responsible party to be indigent OR the child to be adopted is the subject of an open dependency-neglect case and the goal of the case is adoption; and
B. The person to be studied lives in the state of Arkansas.

The home study shall be prepared and submitted in conformity with regulations promulgated pursuant to the Child Welfare Agency Licensing Act § 9-28-401 et seq., as stated in PUB-04.

The home study shall not be waived when the case is a fast-track adoption of a Garrett's Law baby under A.C.A §9-9-702.

PROCEDURE X-A1: Guidelines for a Home Study

Upon receipt of a request for a home study, the Services Supervisor will:

A. Assign the case to a Family Service Worker or, if it is a request to conduct a non-relative independent adoption study, forward the request to the Adoption Unit, Slot S565 for assignment to an Adoption Specialist.
B. Contact OCC if an in-state court ordered home study request is received on a private litigation case that does not contain indigent language indicating the responsible party is unable to pay.

The Family Service Worker will:

A. Contact the family by letter to advise of the request to conduct a home study. Enclose with the letter the appropriate forms to be completed by the family. The family will be advised to return the following completed forms to the worker within seven working days:
   1) CFS-316: Request for Child Maltreatment Central Registry Check
   2) CFS-342: State Police Criminal Record Check
   3) Three positive, confidential references
   4) Home study report
B. Contact the family a second time if the family has not returned the completed forms within the seven-day period. Advise the family that the completed forms must be returned within five (5) working days. If the family does not respond to the second request, the worker will send a letter to the requesting party advising that the family has not responded to efforts to conduct the home study. Completion of the home study

should not proceed if the information forms are not completed. Any assistance in completion of the forms should be provided or arranged by the worker in situations of physical or mental disabilities or illiteracy.

C. Contact the family to schedule a home interview upon receipt of the completed forms.
D. Interview the family. Follow the guidelines as outlined in policy for completing a home study. The home study is to be completed within 30 working days of receipt of the request. Notify the requesting party if additional time will be required to complete the home study.
E. Forward the completed home study with a cover letter to the court and the requesting party if different. A copy of the home study will be retained in the county office case file.
F. In CHRIS:
    1) Enter the family as a Resource by completing the General Information screen, Status screen, and Homes screens.
    2) Close the family as a Resource on the General Information screen upon completion of the home study.

PROCEDURE X-A2: Content of the Home Study

A. Purpose of the Home Study: Discuss the basis of the action and primary persons involved.
B. Motivation: The individual's (individuals') motivation for opening his or her home.
C. Household Composition: The full legal names of everyone residing in the home, birth dates, relationships to one another, and a brief physical description.
D. Housing: Address and location, type of structure, length of time at residence, upkeep and housekeeping standards, future residence plans, and sleeping arrangements.
E. Safety Hazards: An assessment of the safety of the home and grounds including water hazards, swimming pools, hot tubs, dangerous pets, and other hazardous items/areas.
F. Income and Expenses: Employment history for the last six years (duration, salary, duties/title, degree of job security, hours), other sources of income, monthly living expenses, outstanding debts, and insurance. A recent check stub and the previous year's income tax return are required to verify income and employment.
G. Health: Current health of each family member, prior illnesses or medical problems, disabilities, clinic or doctor utilized and frequency of use, counseling (when and purpose), and hospitalization for alcohol abuse, drug abuse, or mental illness.
H. Education: Family members' educational attainment, future educational plans, parenting classes attended, child's school, child's teacher (verification with school personnel on how the child is doing, academically and behaviorally), child's current school grades, child's educational functioning, any school problems or successes experienced by the child.
I. Child Care Arrangements or Plans: Current arrangement or proposed arrangement as it relates to their working hours and income.
J. Child Rearing Practices: Purpose of discipline, correction methods, how they show affection, how they handle stress, allowance, chores, and homework.
K. Daily Schedule: Routines, sleeping habits, feeding habits, personal hygiene habits and consistency with routine.
L. Social History: Highlights and verification regarding action of marriages and divorces, children, relationships' support system, future plans, any significant extended family members not living in the home, and any significant personal, developmental, personality or legal problems.
M. Family Activities: Religious interests, social organizations, activities with children, and family roles.
N. Collateral and Reference Contacts: Discuss the results of contacts with the CFS-316: Request for Child Maltreatment Central Registry Check, CFS-342: State Police Criminal Record Check (this check is also required), school, child care providers, and reference letters for the home study. Any problems or concerns identified through collateral or reference contacts should be shared when appropriate with the family for clarification and further discussion.
O. Impressions, Conclusions and Recommendations: Evaluate the family's situation and ability to provide for a child based on the information obtained during the home study.
P. Approval: If the agency approves the foster parents(s), the agency shall specify in the home study the number age sex and other characteristics of children for whom the home is approved to provide care.

PROCEDURE X-A3: Supervision Record

The Family Service Worker or Adoption Specialist will:

A. In CHRIS, document services delivered and activities conducted on the Services Provided to Resource screen in Resource.
B. Maintain a file containing the court order, correspondence, narrative and any forms.

XI. DCFS EDUCATIONAL LEAVE & EDUCATIONAL ASSISTANCE
POLICY XI-A: DCFS EDUCATIONAL LEAVE & EDUCATIONAL ASSISTANCE

06/2004

DCFS Policy No. XI-A establishes guidelines for administering the DCFS Educational Leave and Educational Assistance Programs. This policy addresses the types of leave and assistance available, the application and selection processes and criteria, related personnel and contract processes, and participant benefits and responsibilities under the program. Also included is information on the role of the employee performance evaluation and procedures associated with completion of the program.

In administering the DCFS Educational Leave and Educational Assistance Program, DCFS will adhere to all provisions of the Americans with Disabilities Act. The program will comply with titles VI and VII of the Civil Rights Act and will be administered without regard to age, religion, disability, political affiliation, veteran status, sex, race, color, or national origin.

PROCEDURE XI-A1: Educational Leave

Full-Time Educational Leave - Full-time educational leave may be granted to an employee to attend an accredited educational institution to pursue a Master of Social Work (MSW) degree. When on approved full-time educational leave, the employee is granted time off on a full-time basis (40 hours per week). Upon completion of the educational leave program, the employee agrees to work for DCFS in a direct service position. The work commitment will be calculated at the rate of two months for each month of educational leave. Attendance in any part of a month will be considered as a full month.

Part-Time Educational Leave - Part-time educational leave is granted to an employee to attend an accredited educational institution to pursue a Master of Social Work (MSW) degree. The employee is granted 20 hours or less time off from work. Upon completion of the educational leave program, the employee agrees to work for DCFS in a direct service position. The work commitment will be calculated at the rate of one month for each month of educational leave. Attendance in any part of a month will be considered as a full month.

PROCEDURE XI-A2: Educational Assistance

The Child Welfare Student Stipend Program is available to eligible students entering their senior year of study. Students selected to receive a stipend must enter into a contract and commit to employment with DCFS and remain employed with the Division for a minimum of one year following graduation.

POLICY XI-B: DCFS MSW EDUCATIONAL LEAVE PROGRAM

The purpose of the DCFS MSW Educational Leave Program is to enable the Division to employ an increased number of persons who possess the MSW degree to work in programs throughout the state that serve title IV-E children. Full-time or part-time educational leave may be approved for an employee pursuing an MSW to attend the University of Arkansas at Little Rock MSW Program, located in Little Rock (UALR), or the UALR off-campus program, located at the University of Arkansas at Fayetteville (UAF) School of Social Work. The DCFS Director can grant an employee special approval to attend accredited Schools of Social Work in bordering states if the school is in close proximity to Arkansas and is readily accessible by the employee.

The participants in the DCFS MSW Educational Leave Program are responsible for satisfying identified academic requirements and fulfilling specific obligations to DCFS while on educational leave. Failure to meet these responsibilities constitutes a violation of the Educational Leave Contract (DCFS-4331) and will result in contract termination.

PROCEDURE XI-B1: Eligible Employees

The DCFS MSW Educational Leave Program is limited to current DCFS employees with a minimum of two consecutive years of full-time regular status DCFS employment working in child welfare prior to January 1 of the year of application. Preference will be given to employees who are in Family Service Worker, Family Service Worker Specialist, and Family Service Worker Supervisor positions. To be eligible to apply for the DCFS Educational Leave Program, the employee must currently occupy a position designated as a grade 22 or lower.

PROCEDURE XI-B2: Full-Time and Part-Time MSW Educational Leave

Under the full-time DCFS MSW Educational Leave Program, the selected employee is relieved of all duties for the duration of the program and allowed to attend the UALR MSW Program, at either the Little Rock or Fayetteville campus, on a full-time basis to pursue a MSW degree. While in the program, the participant will occupy a position at a salary determined by the DCFS Director and retain all benefits normally afforded a regular status employee, unless specifically stated in policy (see Procedure XI-B13 Rights and Benefits Retained).

The part-time MSW Educational Leave Program affords the selected employee the opportunity to attend the UALR MSW Program, at either the Little Rock or Fayetteville campus, on a part-time basis and relieves the employee of partial responsibility for job duties, in proportion to the number of semester hours attempted. The part-time educational leave program must be completed within three calendar years. The part-time participant receives a salary and retains all rights and benefits while in the program, except where stated otherwise in policy (see Procedure XI-B13-Rights and Benefits Retained).

Employees who already are enrolled in the UALR MSW Program may apply for acceptance in the MSW Educational Leave Program if they meet all other eligibility requirements for the program.

Tuition, fees, and books will be provided by DCFS through a contract with UALR. The Division will not pay for parking or non-required student activity fees.

PROCEDURE XI-B3: Application Process

Participation in the MSW Educational Leave Program requires successful completion of a two-fold application and approval process, as follows:

A. Application and acceptance into the UALR MSW Program; and
B. Application and acceptance into the DCFS MSW Educational Leave Program.

The employee must follow both the UALR and Divisional procedures described in Procedure XI-B4 and Procedure XI-B5 below.

PROCEDURE XI-B4: UALR/UAF MSW Procedures

Obtaining Application Forms - The employee must obtain the necessary admissions packet from UALR. Application forms for the UALR MSW Program are needed for the full-time and part-time programs at the Little Rock and Fayetteville campus. Application forms requesting entrance into the UALR off-campus program in Fayetteville must be obtained from the Graduate Coordinator at the UALR MSW Program.

Admission Criteria - The employee must be accepted into the UALR MSW Program prior to acceptance into the DCFS MSW Educational Leave Program on either a full-time or part-time basis. Information on admissions criteria can be obtained directly from UALR.

Completion/Submission of Application Forms - The required application forms must be completed and submitted as indicated by UALR. Pre-application assistance is available through the UALR MSW Program. Upon submission of the required application forms, the employee must forward a Letter of Interest to the DCFS Professional Development Unit.

Deadline for Submission of Forms - Application forms must be submitted within the time frames established by UALR. Typically, forms must be submitted by March 1 to be considered for the MSW program beginning in August of the same year.

Testing Requirements - The employee is required to take and pass either the Miller Analogy Test (MAT) or the Graduate Record Exam (GRE). The employee must pay all costs associated with the testing and is responsible for submitting the entrance examination score to the UALR MSW Program.

Acceptance/Non-Acceptance - UALR will notify the employee regarding the status of his/her application. Upon acceptance, the employee must forward a copy of the notification letter from UALR to the DCFS Professional Development Unit.

PROCEDURE XI-B5: Divisional Procedures – MSW Educational Leave Program

Recruitment -On an annual basis, DCFS will publicize the availability of educational leave positions and accept applications for full-time and part-time MSW educational leave from qualified DCFS employees. The DCFS Professional Development Unit will distribute the information that generally describes the DCFS MSW Educational Leave Program and the process necessary for acceptance. The process includes successful completion of: 1.) An initial screening, 2.) Application submission, 3.) Selection and recommendation by the DCFS Educational Leave Committee, and 4.) Final approval by the Division Director.

Initial Screening Process - The DCFS employee must submit a Letter of Interest to the Program Coordinator/Manager of the DCFS Professional Development Unit. The Letter of Interest may be submitted at any time after the statewide announcement, but no later than April 1 of the year in which the employee plans to matriculate. The Letter of Interest should contain the following, at a minimum:

A. A statement expressing the employee's desire to be considered for participation in the DCFS MSW full-time or part-time program, and a request for an application for admission.
B. An affirmation that to the best of the employee's knowledge, the employee meets the following minimum eligibility requirements:
    1) Is a current DCFS permanent employee with at least two consecutive years of full-time regular status employment with DCFS working in child welfare prior to January 1 of the year of application.
    2) Occupies a grade 22 position or less.
    3) Has accrued no more than three disciplinary points for infraction of Departmental conduct standards during the past two years.
C. A statement explaining why the employee is interested in obtaining a MSW degree and how obtaining such a degree would benefit the Division.

D. A statement asserting an understanding of and a willingness to fulfill the required work commitment to DCFS if educational leave is granted.
E. A statement relating the status of employee's application for admission to the UALR MSW Program.

Within 10 working days from receipt of the Letter of Interest, the DCFS Professional Development Unit will determine if the employee meets the minimum eligibility requirements.

If the employee meets the minimum eligibility requirements, the Manager of the DCFS Professional Development Unit will:

A. Send the employee a letter acknowledging receipt of the Letter of Interest and confirming that the employee meets the minimum eligibility requirements;
B. Include a copy of the DHS-1188: Application for Part-Time or Full-Time Educational Leave;
C. Include a blank copy of CFS-4331: Arkansas Department of Human Services Division of Children and Family Services Educational Leave Contract (Full-time/Part-time MSW Student) for review;
D. Forward a copy of the letter confirming the employee's eligibility for consideration of acceptance to the UALR MSW Program.

If the employee does not meet the minimum eligibility requirements for consideration of acceptance, the Program Coordinator/Manager of the DCFS Professional Development Unit will notify the employee by letter.

Completion/Submission of Application Forms - Upon notification of acceptance to the UALR MSW Program, the employee will forward the following documentation to the DCFS Professional Development Unit:

A. A completed DHS-1188 "Application for Part-Time or Full-Time Educational Leave," signed by the immediate supervisor(s) and the Area Director, if applicable;
B. A written recommendation from the supervisor attesting to the employee's attitude, work ethic, and future potential, as required on the DHS- 1188; or
C. A written narrative from the supervisor stating reasons for disapproval, as required on the DHS- 1188, if applicable;
D. A copy of the application and other information submitted to the UALR MSW Program; and,
E. A copy of the Letter of Acceptance from the UALR MSW Program.

In the event the employee does not receive supervisory approval on the DHS-1188, the employee's denied application and other documentation should be routed to the DCFS Professional Development Unit. Upon receipt, the Program Coordinator or Manager of the DCFS Professional Development Unit will forward the denied application to the Division's Assistant Director for Community Services and/or Director for review and disposition.

Deadline for Submission of Forms – Completed application forms must be submitted to the DCFS Professional Development Unit within 10 days of receipt of the Letter of Acceptance from the UALR MSW Program. Applications must be received by June 1 to be considered for the MSW program beginning in August of the same year.

Routing Forms - The routing of the applications will follow prescribed Departmental routing procedures, as detailed in the instructions in the DHS-1188.

Notification to Applicants – The DCFS Professional Development Unit will notify each applicant regarding the status of his/her application (DHS-1188) within 10 working days of receipt. Upon acceptance, the applicant will be advised that the application will be submitted to the DCFS Educational Leave Committee for further consideration. When an applicant is rejected, the reason for non-acceptance will be provided.

PROCEDURE XI-B6: The Selection Process

The following describes the selection process by which a participant is chosen for the DCFS MSW Educational Leave Program. This section includes the composition and responsibilities of the DCFS Educational Leave Committee and the in-person interview.

Committee Responsibilities – The DCFS Educational Leave Committee will review all applicants who have been accepted by UALR and have met the established criteria for the DCFS MSW Educational Leave Program. The review will include conducting in-person interviews to prioritize applicants.
Committee Composition – Committee members will be appointed on a yearly basis by the Division Director. The committee will consist of seven individuals, as follows:

A. One Assistant Director
B. One representative from the Community Services Section
C. One graduate from the DCFS MSW Educational Leave Program
D. Two Area Directors
E. One Family Service Worker or Family Service Worker Specialist
F. One representative from the University Partnership

Criteria for Selection – The committee will assess each application using the following criteria:

A. Type of position occupied, with preference given to individuals in Family Service Worker, Family Service Worker Specialist, and Family Service Worker Supervisor positions.
B. Length of service with DCFS, with an emphasis on years/months spent in direct service positions.
C. Performance evaluation rating from the previous two years.
D. Supervisory recommendations.
E. Demonstration of the likelihood of continued employment with DCFS in a program serving title IV-E eligible children, for the contracted period of time following the completion of the educational plan.
F. Writing skills.
G. Information obtained and observations made during the in-person interview.

Deadlines for Review Process – Completion of the committee review, including the screening and interviewing phases, must occur within 20 working days after the DCFS eligibility letters are sent to the applicants.

Determining Number of Selectees - The maximum number of educational leave positions available is seven for the full-time program and three for the part-time program. The DCFS Director has discretion to increase or decrease the number of participants in the program.

Committee's Recommendation - The DCFS Professional Development Unit will submit committee recommendations and applicant rankings to the DCFS Director within five working days of notification of applicants selected by the committee.

Notification to Applicants - Applicants will be notified in writing within 10 working days following the selection or non-selection of applicants by the DCFS Director.

Orientation - The Division will hold an orientation session for all selected applicants. The DCFS Professional Development unit will notify each selected applicant of the date and location of the orientation. The orientation agenda will address the following:

A. A discussion of relevant personnel issues.
B. An explanation of responsibilities of both the selected employee and the Division.
C. An explanation of the CFS-4331: Educational Leave Contract.
D. A period for questions and answers.
E. Signing and notarizing the CFS-4331.

PROCEDURE XI-B7: Grade Point Requirements

Minimum Grade Point to be Attained - The participant must meet all academic requirements of UALR and the UALR MSW program. A minimum grade point average of 3.0 (on a scale of 4.0) must be maintained to remain in the full-time or part-time DCFS MSW Educational Leave Program.

Reporting Grade Point - The participant must submit each semester's grades to the DCFS Professional Development Unit within 10 working days after final grades are received each semester.

PROCEDURE XI-B8: Class Attendance Requirements

Each participant in the DCFS MSW Educational Leave Program is expected to attend scheduled classes. A maximum of three classes may be missed during a given semester. In case of a serious illness or emergency, the participant must contact the DCFS Professional Development Unit. Failure to attend scheduled classes will result in contract termination. The participant is considered a regular student and will take the same holidays as authorized by the university. Under the DCFS MSW Educational Leave Program, the participant is required to attend all scheduled summer sessions.

PROCEDURE XI-B9: Supervision While on Educational Leave

The DCFS Professional Development Unit will be responsible for monitoring the performance and conduct of full-time educational leave participants for the duration of the program. The part-time participant will continue to receive direction from the participant's supervisor during assigned work hours.

PROCEDURE XI-B10: Documentation Required as Evidence of Graduation

The MSW student must provide the DCFS Professional Development Unit with official notification of graduation no later than 10 days prior to the scheduled graduation date.
Upon graduation from the DCFS MSW program, the participant must arrange for UALR to furnish an official transcript to the DCFS Professional Development Unit. This must be provided within 20 working days following graduation. The original transcript will be placed in the employee's official personnel file, housed at the DHS Office of Human Resources.

PROCEDURE XI-B11: Placement into a Position

Following graduation from the UALR Graduate School of Social Work, DCFS will place the employee into a regular position, according to the guidelines listed below. Participation in the normal DHS competitive hiring process is not required for new graduates of the DCFS MSW Educational Leave Program but will be required for any subsequent position.

Application Process Requirements - The graduating employee will complete an internal job application. The completed application must be sent to the DCFS Professional Development Unit six weeks prior to the expected date of graduation. The DCFS Professional Development Unit will forward the document to the Assistant Director, Community Services, and the DCFS Personnel Unit.

Identification of Appropriate Position - Within three weeks of receiving an internal application, the DCFS Personnel Unit will review the Division's vacancies and identify a position of equal or higher grade than the position the employee held prior to acceptance into the DCFS MSW Educational Leave Program. After the review, the DCFS Personnel Unit will forward the vacancy listing to the DCFS Assistant Director for Community Services and the DCFS Professional Development Unit. In addition to qualifications presented on the application, the geographic preference indicated by the employee will be a consideration in locating an appropriate placement.

Within two weeks prior to graduation, the Assistant Director for Community Services, the DCFS Professional Development Unit, and the appropriate Area Director will meet to make recommendations for placement. Placement interviews will be scheduled prior to the day on which the employee is scheduled to report to work.

Time Frames Related to Placement – The DCFS Professional Development Unit will notify the student of the assigned county and the date for reporting to work. The employee will be placed into a DCFS position within 30 calendar days following the date that the Division is notified of his/her graduation.

Personnel Documentation Requirements - The DCFS Personnel Unit will complete and process the Request for Personnel Action (DHS-1161) and will ensure that all necessary approvals and documentation are attached. The DCFS Director must approve each placement before the employee is notified of the assigned position. A copy of the DHS-1161 indicating placement of the MSW graduate will be sent to DCFS Professional Development Unit for placement in the graduate's file.

PROCEDURE XI-B12: Work Commitment to the Division

Terms of Employee Obligation - As stipulated in the CFS-4331: Educational Leave Contract, the graduating employee must accept employment with DCFS in a direct service position. The employee must work the equivalent of two months for each month of full-time educational leave and one month for each month of part-time educational leave. Attendance in any part of a month will be considered as a full month.

Consequences if Employee Violates Terms of Agreement - Failure by the employee to honor the work commitment constitutes a contract violation and will result in the employee becoming responsible for reimbursing DCFS for the full amount expended during the contract period. (See XI-B13 B2 Breach of Contract/Contract Termination).

PROCEDURE XI-B13: Personnel Processes Related to the DCFS Educational Leave Program

Designating Educational Leave Positions - Educational leave participants will be placed in a position determined by the DCFS Director.

Contracting Requirements - In order to formalize an employee's participation in the DCFS MSW Educational Leave Program, a contract between the Division and the employee is required, according to the following guidelines:

Requirements for Formal Contract - Acceptance into the DCFS MSW Educational Leave Program is not considered official until the DCFS Director and the selected employee enter into a formal contract. Employees entering either the full-time or part-time educational leave program must sign and adhere to the provisions of the CFS-4331: Educational Leave Contract.

The agreement will detail the responsibilities and obligations of both parties in relation to the DCFS MSW Educational Leave Program. Contract stipulations will address the following:

A. Duration of the educational leave.
B. Authorized salary and other benefits to be afforded the participant.
C. Post-educational-leave work commitment to the Division.
D. Provisions for premature contract termination.

Breach of Contract/Contract Termination - Violation of the terms of the Educational Leave Contract by the employee is considered a breach of the contract with DCFS. The Division will report a breach of contract simultaneously to the DHS Office of Administrative Services and the DHS Office Chief Counsel. The employee will be required to make restitution to the Division for contract violations. Contract violations include, but are not limited to, being placed on academic or disciplinary probation or failing to meet the commitment for continued employment following graduation. The employee will be required to reimburse DCFS for salary and benefits and for all educational expenses, including tuition, books, academic fees, and other related expenses, for the completed period of educational leave. If an employee violates the terms of the contract after starting the work commitment, repayment will be calculated according to the months worked.

At the discretion of DCFS, the contract may be terminated or renegotiated following 30 calendar days written notice to the employee. Circumstances leading to contract termination or re-negotiation may include insufficient funds, a reduction in force, or other reasons identified by DCFS.

Salary Received - DCFS provides a salary and benefits for each employee in the DCFS MSW Educational Leave Program for the duration of the employee's participation in the program.

Determining Salary Amount - The salary amount to be paid a participant in the full-time and part-time programs will be determined by the DCFS Director. This amount may not exceed the employee's salary prior to acceptance into the program.

Performance-based Merit Raises and Cost-of-Living Salary Increases - The employee on full-time or part-time educational leave will not qualify for any performance-based merit raise program legislated by the Arkansas General Assembly.

Income Tax and Social Security Deductions - DCFS will continue to withhold income tax and Social Security taxes from the employee's salary while the employee is a participant in the DCFS Educational Leave and Educational Assistance Program.

Rights and Benefits Retained - An employee on full-time or part-time DCFS MSW educational leave will retain all regular-status rights and benefits, unless otherwise noted.

Annual/Sick Leave Accrual – Employees on full-time MSW educational leave will not accrue annual or sick leave. However, if an emergency situation occurs and a full-time student is unable to attend class, the student shall contact the DCFS Professional Development Unit to discuss available options. A participant in the part-time educational leave program will accrue annual and sick leave on a pro-rated basis.

Retirement - Retirement deductions, if applicable, will continue to be withheld for an employee on educational leave. The formula for calculating length of service for retirement purposes will not be affected by an employee's participation in the DCFS Educational Leave Program.

Insurance - A participant's insurance coverage contribution will continue to be withheld while the employee remains on educational leave. DCFS will continue to assume responsibility for a portion of the employee's insurance.

Personnel Performance Evaluation System - The full-time participant in the DCFS MSW Educational Leave Program will not be subject to the annual evaluations required by the Arkansas Personnel Performance Evaluation System (PPES). The part-time participant will be evaluated only if actual work is performed for an equivalent of six or more months, as determined by the employee's PPES rating period.

POLICY XI-C: CHILD WELFARE STUDENT STIPEND PROGRAM

01/2010

The Division of Children and Family Services (DCFS) participates in a child welfare student stipend program in order to hire more employees with degrees in social work and social work-related fields on a state-wide basis to work in DCFS programs serving title IV-E eligible children. Any student awarded a stipend is under contract with the Division and will be required to work for DCFS after graduation. During the one year of employment following graduation, the employee (former student) shall not be placed as a primary investigator or protective services worker per Title IV-E regulations.

Eligible applicants may attend any participating degree program in the State of Arkansas. The Division and the University Partnership will determine yearly the number of stipends awarded. The Division, in conjunction with title IV-E university staff, will determine which students will receive stipends.

Students in the BSW and other participating bachelor's degree programs are awarded stipends during their senior year.

DCFS may approve stipends for second year MSW students provided that any DCFS educational leave positions are not filled and the number of MSW stipend students does not exceed the number of vacant educational leave positions.

The following information provides the procedures governing the Child Welfare Student Stipend Program.

PROCEDURE XI-C1: Process for Receiving a Stipend

Students interested in the Child Welfare Student Stipend Program are required to complete the CFS-4332: Child Welfare Student Stipend Application. Applications are reviewed and recommendations made by the title IV-E university staff and the DCFS Area Directors. Upon selection the university will submit a copy of the CFS-4332: Child Welfare Student Stipend Application and the original CFS-4330: Child Welfare Student Stipend Agreement to the DCFS Professional Development Unit for review. After review, the DCFS Professional Development Unit will forward the CFS-4330 to the DCFS Director for approval and signature.

The student is required to enter into a contract with the Division upon awarding of the stipend. The student must sign and adhere to the provisions of the CFS-4330: Child Welfare Student Stipend Agreement. If the student violates the terms of the contract, the Division will employ remedies to address the identified breach.

PROCEDURE XI-C2: Selection Criteria

The decision to award a stipend will be based on the following:

A. Academic success. The student cannot be on probation or in jeopardy of not graduating.
B. Interest in child welfare; e.g., volunteer work, attendance at workshops, special training, related work experiences, independent study projects.
C. Completion, or plan to complete, one or more courses/seminars with an emphasis in child welfare.
D. Willingness to work, following graduation, in any county based on the needs of the Division.
E. Agreement by student to complete the number of hours required by the university for field placement, while based in an assigned DCFS county office under the joint supervision of a university field instructor and DCFS supervisor.
F. The approval of MSW stipends will occur as outlined in Procedure XI-B6 "The Selection Process".

PROCEDURE XI-C3: Student Commitment to DCFS

A. The student commits to fulfill field hours in a DCFS county office, as required by the participating university program.
B. The student commits to accept employment with DCFS for a minimum of one year following graduation.

PROCEDURE XI-C4: DCFS Commitment to Student

The Division agrees to provide the student with the opportunity to complete the required field hours at a DCFS county office under the joint supervision of a university field instructor and DCFS supervisor.

PROCEDURE XI-C5: Employment with DCFS

A. All stipend recipients must complete a "State of Arkansas Employment Application" and send it to the DCFS Professional Development Unit six weeks prior to the expected date of graduation.
B. DCFS reserves the right to designate counties where staff are needed and require students to apply in those counties identified by DCFS.
C. DCFS reserves the right to specify the minimum number of counties in which students must state on the "State of Arkansas Employment Application" that they will accept employment.
D. On the State employment application, the student will list the job title as "Family Service Worker" and designate the minimum number of counties required by DCFS in which the student is willing to accept employment.
E. Students must accept interviews, answer questions, and otherwise actively participate in the hiring process in an ethical manner. The university designee will coordinate with the DCFS Professional Development Unit to keep students abreast of employment opportunities with the Division and help them follow-through with their commitment to the Division.
F. If the student is not offered a Family Service Worker position within 60 days following graduation, the student no longer is obligated to accept employment or repay the stipend.
G. The student must repay any stipend monies received if a field placement is terminated or employment denied due to the results of:
    1) An Arkansas Child Maltreatment Central Registry check,
    2) An Arkansas State Police Criminal Record check (and, if required, an FBI Background Check),
    3) A drug/alcohol screen, or
    4) The provisions of the State Vehicle Safety Program are violated.
H. If the student becomes employed by DCFS but chooses to leave prior to fulfilling the stipend commitment, the student must repay the stipend pro-rated according to the number of months worked.

XII. SERVICES TO CHILDREN OF IMMIGRANT FAMILIES
POLICY XII-A: SERVICES TO CHILDREN OF IMMIGRANT FAMILIES

02/2008

There will be special situations when DCFS will be required to respond to child welfare related emergencies that occur in the immigrant community. DCFS may provide needed services to families in the community, including Information and Referral, Supportive, Protective, and Foster Care services to children (birth to 17 years of age). Any children at immediate risk of harm or apparently in need of protection will receive DCFS services, regardless of the immigration status of the child or their parent(s).

DCFS staff members are not required to verify any client's citizenship or immigration status. If a DCFS worker has any reason to suspect that a client is in the United States illegally, the worker will ask the client to verify his or her citizenship or immigration status. The DCFS staff member will accept the client's documentation or verbal response at face value without further questioning and will document all information provided (documents or verbal statements) regarding the client's citizenship and/or immigration status in CHRIS.

If it is believed that a client child is an undocumented immigrant, the case will be reviewed by the DCFS worker, county supervisor and Area Director. If they believe that the child is an undocumented immigrant, they will refer the case to the Special Assistant to the Director. The Special Assistant to the Director will discuss the case with the attorney designated to handle Special Immigrant Juvenile Status (SIJS) cases to determine if the case is appropriate for SIJS. If the case is appropriate, the OCC attorney will prepare and submit the SIJS application to the appropriate agency.

PROCEDURE XII-A1: DCFS Response to Children of Actual or Suspected Undocumented Immigrants

Maltreatment Reports:
DCFS will accept a maltreatment report regarding a suspected undocumented immigrant.

Protective Services:

A. DCFS will open a case as appropriate and ask for documentation of the parent and child's birth.
B. The funding source for services to undocumented immigrants will be State General Revenue.
C. Staff will contact their Area Director to receive approval from DCFS Administrative Services prior to any purchase of services for suspected undocumented immigrants.
D. Contact the Division of County Operations (DCO) and request any available information regarding the identity and citizenship or immigration status of the family members.
E. If any family members involved in the case are in the United States illegally, the worker will report them through the County Supervisor and Area Director. The Area Director will discuss the case with the OCC attorney designated to handle such cases. The DCFS worker will make every reasonable effort to keep the family together.

Supportive Services:

A. Will be available to undocumented immigrants. Ask the client to verify his or her citizenship or immigration status and accept their documents or verbal statement without further questioning. If any family member involved in the case is in the United States illegally, report them through the County Supervisor and Area Director. The Area Director will discuss the case with the OCC attorney designated to handle such cases.
B. All requests for exception must go up through the supervisory chain and be referred to the DCFS Director for the same processing as a request for alternative compliance (see Appendix 8 for protocol for requesting an Alternative Compliance or a Policy Waiver).

Foster Care:

A. Document citizenship status in CHRIS.
B. Address the issue of resolving alien status in the case plan.
C. Judicial proceedings - If the parent of the child in foster care is deported and it is not in best interest of the child to be returned to the parent and parent's country, DCFS may request special immigrant juvenile status (SIJS) if the child is an undocumented immigrant.
D. Hold a staffing to determine if reunification is in the child's best interest or if the child's goal should be Another Planned Permanent Living Arrangement (APPLA), adoption, or guardianship.
E. If the child's goal is APPLA, adoption, or guardianship, SIJS must be applied for if the child in care is an undocumented immigrant. Contact the Area Director for assistance in completing the application for Special Immigrant Juvenile Status.
F. Immigrant status must be verified for Chafee services.

Adoption:

A. A child whose immigration status is in question may be eligible for a State Adoption Subsidy.
B. If the child is granted SIJS the child will be Medicaid eligible and may be IV-E eligible.

FINS:

A. Verify immigrant status on FINS cases when working with immigrant population.

CHRIS:

A. Documenting citizenship in CHRIS is done on the Client General Information Screen for each specific client in a case. There is a field called Citizenship/Alienage, which has picklist choices, which are listed below. To the right of the Citizenship/Alienage field is a blank box called "Alien Registration Number". That box is used to input the client's specific alien registration number, if he or she has one.
B. To select a Citizenship/Alienage picklist choice and insert an associated alien registration number, the worker must do the following:
C. Go to the workload toolbar in CHRIS to select case and click on the Client button. The "select client" box will come up.
D. Highlight the correct client and click Show.
E. Click on the Gen Info button, which will bring up the Client Information screen for that specific client.
F. The Citizenship/Alienage picklist field and the Alien Registration Number box are at the bottom of the client information screen in the Citizenship grouping.
G. Click on the Citizenship/Alienage picklist field and select the appropriate choice. If the client has an alien registration number, type it into the Alien Registration Number" box.

Citizenship/Alienage: (picklist choices)

1) U.S. Citizen
2) Qualified Alien
3) Non-Qualified Alien

XIII. CHILD MALTREATMENT CENTRAL REGISTRY

POLICY XIII-A: CHILD MALTREATMENT CENTRAL REGISTRY

01/2020

The Child Maltreatment Central Registry is established within the Department of Human Services for the collection of records of cases involving allegations of child maltreatment which are determined to be true pursuant to A.C.A. § 12-18-901. The Division of Children and Family Services (DCFS or Division) maintains the statewide Child Maltreatment Central Registry. Reports made to the Division are confidential and may be disclosed only as provided by A.C.A. § 12-18-909-910.

Names of offenders and alleged offenders shall be placed on the Child Maltreatment Central Registry as specified by A.C.A. § 12-18-903. Names will be removed automatically or at the request of the offender according to A.C.A. § 12-18-908.

PROCEDURE XIII-A1: Requests for Central Registry Information

01/2020

All requests for Child Maltreatment Central Registry information will be made through the Child Maltreatment Central Registry Unit in the DCFS Central Office.

PROCEDURE XIII-A2: Central Registry Fees

01/2020

The Division may charge a reasonable fee, not to exceed $10.00 for research, copying, and mailing records of the investigative files of child maltreatment cases and Central Registry information. DCFS may also charge a reasonable fee for reproducing copies of electronic media, such as audio tapes, video recordings, compact discs, or DVDs and photographs.

No fee will be charged to a:

A. Nonprofit or volunteer agency that requests searches of the investigative files;
B. Person who is indigent.

PROCEDURE XIII-A3: Placement of Name on the Child Maltreatment Central Registry

01/2020

An offender's name shall be placed in the Child Maltreatment Central Registry in the following cases, as provided by A.C.A. § 12-18-903:

A. After notice, the offender 18 years of age or older at the time the act or omission occurred does not request an administrative hearing within 30 days.
B. The offender was a child age 14 to 17 at the time of the act or omission and the child or his/her legal guardian waived the administrative hearing.
C. The administrative law judge upheld the investigative determination of true pursuant to a preliminary administrative hearing.
D. Upon completion of the administrative hearing process, the Division's determination of true is upheld.

In addition to the requirements above, the name of an offender will be placed in the Child Maltreatment Central Registry only if the Department determines pursuant to A.C.A. § 12-18-26 702 that the offender may pose a risk of maltreatment to a vulnerable population that includes without limitation children, the elderly, persons with a disability, and persons with a mental health illness.

PROVISIONAL PLACEMENT
An offender's name shall be placed provisionally in the Child Maltreatment Central Registry as specified by A.C.A. § 12-18-905 when directed by an Administrative Law Judge (ALJ) after the determination of a prima facie case in a preliminary administrative hearing (refer to Procedure XIV-A1 and IX-A6). The alleged offender may request a regular administrative hearing within 30 days of receipt of the notice of the investigative determination. Failure to do so shall result in a finding by the ALJ that the provisional designation shall be removed and the offender's name shall be officially placed in the Child Maltreatment Central Registry.

If an alleged offender's name is provisionally placed in the Child Maltreatment Central Registry, any disclosure by the Child Maltreatment Central Registry shall include the notation that the name has only been provisionally placed in the Child Maltreatment Central Registry.

PERMANENT PLACEMENT
An offender shall always remain in the Child Maltreatment Central Registry in the following cases, pursuant to A.C.A. §12-18-908:

A. If an adult offender is found guilty of, pleads guilty to, or pleads nolo contendere to an act that is the same act for which the offender is named in the Child Maltreatment Central Registry regardless of any subsequent expungement of the offense from the offender's criminal record, unless the conviction is reversed or vacated.
B. If an offender who was a child age 14 to 17 at the time of the act or omission that resulted in a true finding of child maltreatment is found guilty of, pleads guilty to, or pleads nolo contendere to a felony in a circuit court as an adult for the act that is the same act for which the offender is named in the Child Maltreatment Central Registry, unless the conviction is reversed or vacated.

PROCEDURE XIII-A4: Automatic Name Removal from Child Maltreatment Central Registry

01/2020

CRITERIA FOR REMOVAL
The offender's name will be automatically removed from the Child Maltreatment Central Registry for the following types of child maltreatment, as designated by A.C.A. § 12-18-908, dependent upon the offender having not had a subsequent true report of this type for one year and more than one year having passed since the offender's name was placed on the Child Maltreatment Central Registry:

A. Educational Neglect-Priority II
B. Environmental Neglect – Priority II
C. Inadequate Clothing- Priority II
D. Inadequate Food- Priority II
E. Inadequate Shelter-Priority II
F. Inadequate Supervision-Children six (6) years or older-Priority II

(A.C.A. § 12-18-908 allows these to be set at the discretion of the Director of the Department. However, these can only be changed through normal promulgation *after* a special review by the House Interim Committee on Aging, Children and Youth, Legislative and Military Affairs and the Senate Interim Committee on Children and Youth [A.C.A. § 12-18-908].)

NOTIFICATION OF REMOVAL
The County Supervisor or designee is responsible for notifying offenders of the automatic removal of their name from the Child Maltreatment Central Registry, and will:

A. Check monthly report of Automatic Removals from the Central Registry in CHRIS.
B. Send CFS-327: Notification of Name Removal from the Child Maltreatment Central Registry to offenders identified for his/her respective county within ten (10) days of receiving the CHRIS report.

PROCEDURE XIII-A5: Child Maltreatment Central Registry Review Team

01/2020

If the offender's name is not eligible to be automatically removed from the Child Maltreatment Central as described in Procedure XIII-A7 above, the Child Maltreatment Central Registry Review Team shall review removal requests. The Child Maltreatment Central Registry Review Team shall operate as follows:

A. The Director of DCFS will appoint the members of the Child Maltreatment Central Registry Review Team.
   1) The Review Team will be made up of DCFS central office and field staff and CACD.
   2) There will be five members with alternates in case of scheduling conflicts.
   3) A representative of OCC may provide legal advice and assistance to the team but will not be a member of the Child Maltreatment Central Registry Review Team.
B. The Review Team will select an alternating chairperson for each quarter.
C. The Review Team will determine a regular meeting schedule for the review any requests that meet all criteria but shall meet no less-frequently than on a quarterly basis.
D. Review requests must be received 60 days in advance of the review meeting, and all Review Team members will be provided with the case information 15 days prior to the review team meeting. All decisions will be by a majority vote of the team members.
E. All team decisions will be sent in writing by the Central Registry Manager or designee.
   1) Denials will be sent to the applicants by certified mail within 15 days of the review team meeting.
   2) Approvals will be sent to the applicants by regular mail within 15 days of the review team meeting.

PROCEDURE XIII-A6: Name Removal from Child Maltreatment Central Registry by an Adult Offender's Request

01/2020

REMOVAL CRITERIA
An adult offender is defined as a person age 18 years or older at the time of the act or omission that resulted in a true finding of child maltreatment.

An adult offender may request his or her name be removed from the Child Maltreatment Central Registry when:

A. The individual has not had a subsequent true report of this type for one year; and,
B. More than one year has passed since the adult offender's name was placed on the Child Maltreatment Central Registry.

However, the adult offender may not request removal from the Child Maltreatment Central Registry if any of the following apply:

A. The adult offender was placed into the Child Maltreatment Central Registry for any type of child maltreatment that resulted in a child fatality as a direct result of the offender's act or omission.
B. The adult offender is still involved in an open protective services or foster care case for the type of maltreatment for which he or she was placed into the Child Maltreatment Central Registry.
C. The adult offender was placed into the Child Maltreatment Central Registry for any of the child maltreatment types listed below and his or her parental rights were subsequently terminated either voluntarily or involuntarily:

- Abuse with deadly weapon
- Bone fractures
- Brain Damage/Skull Fracture
- Burns/scalding
- Immersion
- Inadequate supervision – children less than 6 years of age
- Interfering with a child's breathing
- Internal injuries
- Malnutrition
- Oral sex
- Poison/noxious substances
- Presence of illegal substance in child or its mother at time of birth resulting from mother's knowing use of the substance
- Sexual exploitation
- Sexual penetration
- Shaking a child age 3 or younger
- Striking a child with a closed fist
- Subdural hematoma
- Suffocation

(A.C.A. § 12-18-908 allows the types of maltreatment that may be considered for removal to be set at the discretion of the Director of the Department. However, these can only be changed through normal promulgation *after* a special review by the House Interim Committee on Aging, Children and Youth, Legislative and Military Affairs and the Senate Interim Committee on Children and Youth [A.C.A. § 12-18-908]).

Finally, per A.C.A. § 12-18-908, If an adult offender is found guilty of, pleads guilty to, or pleads nolo contendere to an act that is the same act for which the offender is named in the Child Maltreatment Central Registry regardless of any subsequent expungement of the offense from the offender's criminal record, the offender shall always remain in the Child Maltreatment Central Registry unless the conviction is reversed or vacated.

APPLICATION FORMAT FOR AN ADULT OFFENDER

An application for name removal from the Child Maltreatment Central Registry shall conform to the following:

A. The adult offender will submit his or her request to the DCFS Director via the CFS-328-A: Request for Name Removal from the Child Maltreatment Central Registry by Adult Offender and shall also submit:
   1) A personal letter describing:
      a) The offender's reason for the removal request;
      b) The events and circumstances surrounding the child maltreatment finding; and,
      c) The offender's rehabilitation; and,
      d) Why the offender does not pose a risk of maltreatment to vulnerable populations, including without limitation, children, the elderly, persons with a disability, and persons with a mental health illness;
   2) Arkansas Child Maltreatment Central Registry results free from a true finding of the same maltreatment type for the preceding year;
   3) Child Maltreatment Registry results from the offender's current state of residence and/or any state in which the offender has resided in the preceding year free from a true finding of the same maltreatment type for the preceding year;
   4) Arkansas Crime Information Center (ACIC) background check results free from child maltreatment-related offense for the preceding one year;

5) State background check results from the offender's current state of residence and/or any state in which the offender has resided in the preceding year free from child maltreatment-related offense for the preceding one year;
6) Description and documentation (e.g., court records, letter from the adult offender's attorney, probation officer, or prosecuting attorney) of any current pending criminal charges, if applicable;
7) Evidence of the offender's rehabilitation, including, but not limited to:
   a) Documentation proving completion of treatment, remediation, or rehabilitation programs as related to the specific offense if applicable.
      i. For removal requests related to sexual abuse, proof of rehabilitation must include documentation from a licensed mental health professional that:
         a) States that the requestor has participated in therapy with the licensed mental health professional to address the issues related to the sexual abuse offense;
         b) States total length of time the requestor has participated in therapy with the licensed mental health professional to address the issues related to the sexual abuse offense and the frequency of therapy sessions during that period of time;
         c) Indicates whether a sex offender specific assessment was conducted during the therapy period (e.g., the Vermont Assessment of Sex Offender Risk (VASOR), Clarke Sex History Questionnaire for Males-Revised, Hare Psychotherapy Scale*) (note: the use of such an assessment is not necessarily a requirement for removal but the presence or absence of such an assessment will be considered)*;
         d) Provides the licensed mental health professional's assessment of the requestor's participation during the therapy period.
   b) One to three letters of reference from professionals (not to include DCFS employees), employers, spiritual counselors, friends, or family describing the offender's rehabilitation and whether the offender poses a risk of maltreatment to vulnerable populations, including without limitation, children, the elderly, persons with a disability, and persons with a mental health illness.
      i. No more than one letter of reference can be submitted from a family member.

The Child Maltreatment Central Registry Review Team, as described in Procedure XIII-A6, may select additional, non-child maltreatment-related offenses which prevent name removal from the Child Maltreatment Central Registry.

DETERMINATION OF NAME REMOVAL REQUEST BY AN ADULT OFFENDER

The Child Maltreatment Central Registry Review Team will consider requests for removal of names from the Registry. In determining whether or not to remove an offender from the Child Maltreatment Central Registry the Review Team shall consider any relevant evidence, which may include, but is not limited to the following:

A. The circumstances surrounding the maltreatment;
B. The seriousness of the harm caused by the maltreatment to the child or children;
C. The probability of the offender engaging in future maltreatment;
D. Evidence of the offender's completion of training, rehabilitation, and efforts to learn effective strategies to care for children;
E. And any other information that is relevant to the specific offense.

If the child maltreatment type is in the removal-by-request category, and the adult offender has not had a subsequent true report of this type for one year and more than one year has passed since the offender's name was placed on the Child Maltreatment Central Registry, he will have a right to a review of the case.

If the Review Team denies the request-for-removal of the name from the Child Maltreatment Central Registry, the Review Team shall send a denial letter to the adult offender explaining the reason for denial as it relates to:

A. The circumstances surrounding the maltreatment;
B. The seriousness of the harm caused by the maltreatment to the child or children;
C. The probability of the offender engaging in future maltreatment;
D. Evidence of the offender's completion of training, rehabilitation, and efforts to learn effective strategies to care for children;
E. Any pending criminal charges surrounding the maltreatment;

F. And any other information that is relevant to the specific offense.

The adult offender shall wait one year from the date of the request for removal before filing a new petition with the Division requesting the offender's name be removed from the Child Maltreatment Central Registry. However, if the Review Team needs additional information from the adult offender in order to make the determination as to whether to remove his or her name from the Child Maltreatment Central Registry, the Review Team may request that the adult offender provide the additional information without requiring the adult offender to wait an additional year to file a new petition. The Review Team shall inform the adult offender in writing of the specific additional information requested. The adult offender shall have ten (10) calendar days from the date of the request to submit the requested additional information. If the request is sent via mail, the adult offender shall be given an additional three (3) calendar days to submit the information. If the requested information is not submitted within the specified timeframe, then the adult offender shall wait one year from the date of the request to file a new petition requesting his or her name be removed from the Child Maltreatment Central Registry.

If the Review Team denies the request-for-removal of the name from the Child Maltreatment Central Registry, the adult offender may request an administrative hearing within 30 days from the receipt of the Division's decision.

PROCEDURE XIII-A7: Name Removal from Child Maltreatment Central Registry for a Juvenile Offender

01/2020

REMOVAL CRITERIA
Pursuant to A.C.A. § 12-18-908, the name of an offender who was a juvenile at the time of the offense shall not be removed from the Child Maltreatment Central Registry if the offender was found guilty of, pleaded guilty to, or pleaded nolo contendere to a felony in circuit court as an adult for the act that is the same act for which the offender is named in the Child Maltreatment Central Registry unless the conviction is reversed or vacated.

However, the name of an offender who was a juvenile at the time of the offense shall be removed from the Child Maltreatment Central Registry, as provided by A.C.A. § 12-18-908, when:

A. The juvenile has reached the age of 18 or more than one year has passed from the date of the act or omission that caused the true finding of child maltreatment and there have been no subsequent acts or omissions resulting in a true finding of child maltreatment; and,
B. The juvenile offender can prove by a preponderance of the evidence that he/she has been rehabilitated.

APPLICATION FORMAT FOR A JUVENILE OFFENDER
An application for name removal from the Child Maltreatment Central Registry shall conform to the following:

A. The juvenile offender will submit his request to the DCFS Director via the CFS-328-B: Request for Name Removal from the Child Maltreatment Central Registry by Juvenile Offender and shall also submit:
    1) Arkansas Child Maltreatment Central Registry results free from a true finding of the same maltreatment type for the preceding year;
    2) Child Maltreatment Registry results from the offender's current state of residence and/or any state in which the offender has resided in the preceding year free from a true finding of the same maltreatment type for the preceding year;
    3) Arkansas Crime Information Center (ACIC) background check results free from child maltreatment-related offense for the preceding one year;
    4) State background check results from the offender's current state of residence and any state in which the offender has resided in the preceding year free from child maltreatment-related offense for the preceding one year;
    5) Evidence of the offender's rehabilitation, which may include, but is not limited to:
        a) A personal letter from the offender describing his rehabilitation;

b) Documents proving participation in treatment, remediation, or rehabilitation programs;
c) One to three letters of reference from professionals (not to include DCFS employees), employers, spiritual counselors, friends, or family describing the offender's rehabilitation.

DETERMINATION OF NAME REMOVAL REQUEST BY A JUVENILE OFFENDER

The Child Maltreatment Central Registry Review Team will consider requests for removal of names from the Registry. In determining whether or not to remove a juvenile offender's name from the Child Maltreatment Central Registry, the Review Team shall consider the following:

A. Whether the criminal history reveals any convictions as an adult for the same act for which the offender is named in the registry; and,
B. Whether the juvenile offender has reached the age of eighteen (18); or, one year has passed from the date of the act or omission that caused the true finding of child maltreatment; and,
C. There have been no subsequent acts or omissions resulting in a true finding of child maltreatment; and,
D. The information submitted proves, by a preponderance of the evidence, that the juvenile offender has been rehabilitated.

If the Review Team denies the request-for-removal of the name from the Child Maltreatment Central Registry, the Review Team shall send a denial letter to the juvenile offender explaining the reason for denial. The juvenile offender shall wait one year from the date of the request for removal before filing a new petition with the Division requesting the offender's name be removed from the Child Maltreatment Central Registry. If the Review Team denies the request-for-removal of the name from the Child Maltreatment Central Registry, the juvenile offender may request an administrative hearing within 30 days from the receipt of the division's decision.

However, if the Review Team needs additional information from the juvenile offender in order to make the determination as to whether to remove his or her name from the Child Maltreatment Central Registry, the Review Team may request that the juvenile offender provide the additional information without requiring the juvenile offender to wait an additional year to file a new petition. The Review Team shall inform the juvenile offender in writing of the specific additional information requested. The juvenile offender shall have ten (10) calendar days from the date of the request to submit the requested additional information. If the request is sent via email, the juvenile offender shall be given an additional three (3) calendar days to submit the information. If the requested information is not submitted within the specified timeframe, then the juvenile offender shall wait one year from the date of the request to file a new petition requesting his or her name be removed from the Child Maltreatment Central Registry.

XIV. CHILD MALTREATMENT NOTICES
POLICY XIV-A: NOTICES REGARDING CHILD MALTREATMENT

08/2013

The Division of Children and Family Services will issue notices regarding child maltreatment allegations, child maltreatment investigative findings and appeal decisions to all persons pursuant to A.C.A. 12-18-703 et seq. The Division will issue notices in such a way as to ensure the rights to due process of the alleged offender and to protect others who may be at risk of harm from the alleged offender.

PROCEDURE XIV-A1: Notices of Allegations of Child Maltreatment

Upon receipt of an initial report of child maltreatment, the investigating agency shall notify the following:

A. Law Enforcement
   1) Type of Allegation — Severe maltreatment only
   2) What Information — Name of each alleged victim
Name of alleged offender
Type of Maltreatment
   3) When — Immediately, by telephone
   4) Form (optional) — CFS-201-A: Notice of Child Maltreatment Allegation to Law Enforcement and Prosecuting Attorney or CACD-201-A: Notice of Child Maltreatment Allegation to Law Enforcement and Prosecuting Attorney as appropriate

B. Prosecuting Attorney
   1) Type of Allegation — Severe maltreatment only, unless the prosecuting attorney has provided written notice to the Department that the Department need not send notification of the initial maltreatment report
   2) What Information — Name of each alleged victim
Name of alleged offender
Type of maltreatment
   3) When — Within five business days
   4) Form — CFS-201-A: Notice of Child Maltreatment Allegation to Law Enforcement and Prosecuting Attorney or CACD-201-A: Notice of Child Maltreatment Allegation to Law Enforcement and Prosecuting Attorney as appropriate

C. Facility Director or Licensing or Registering Authority or DHS Division Director
   1) Type of Allegation — All maltreatment, only if the maltreatment occurred at the facility or if the alleged offender holds a license or registration from the authority.
   2) What Information — Name of alleged offender
Type of maltreatment
   3) When — Immediately, by telephone
   4) Form (optional) — CFS-202-A or CACD-202-A as appropriate

D. Legal parent or legal guardian of alleged offender in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-204-A: Notice of Child Maltreatment Allegation to Licensing/Registering Authority or CACD-204-A: Notice of Child Maltreatment Allegation to

Licensing/Registering Authority as appropriate

E. Current Foster parent of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-204-A: Notice of Child Maltreatment Allegation to Licensing/Registering Authority or CACD-204-A: Notice of Child Maltreatment Allegation to Licensing/Registering Authority as appropriate

F. Legal parent or legal guardian of alleged victim in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-205-A: Notice of Child Maltreatment Allegation to Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Alleged Victim(s) in Foster Care

G. Current Foster parent of alleged victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-205-A: Notice of Child Maltreatment Allegation to Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Alleged Victim(s) in Foster Care

H. Attorney ad litem of alleged victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-206-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim(s)

I. Court appointed special advocate of alleged victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-206-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim(s)

J. Counsel in Dependency Neglect or FINS Case if alleged victim has an open court case
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-206-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim(s)

K. Attorney ad litem of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-208-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem and CASA of Alleged Offender

L. Court appointed special advocate of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-208-A: Notice of Child Maltreatment Allegation to Attorney Ad Litem and CASA of Alleged Offender

M. Attorney ad litem of child in foster home where maltreatment is reported or where an alleged juvenile offender or Underaged Juvenile offender is placed
   1) Type of Allegation — All maltreatment
   2) What Information — Name of child represented by AAL only
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — Notice of Child Maltreatment Allegation to AAL or CASA of Child in Foster Home Where Maltreatment Is Reported or Where an Alleged Juvenile Offender or Underaged Juvenile Offender is Placed

N. Court appointed special advocate of a child in a foster home where maltreatment is reported or where an alleged juvenile offender or Underaged Juvenile offender is placed
   1) Type of Allegation — All maltreatment
   2) What Information — Name of child represented by the CASA only
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — Notice of Child Maltreatment Allegation to AAL or CASA of Child in Foster Home Where Maltreatment Is Reported or Where an Alleged Juvenile Offender or Underaged Juvenile Offender is Placed

O. Counsel in Dependency Neglect or FINS case if alleged offender has an open court case
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 5 business days
   4) Form — CFS-210-A: Notice of Child Maltreatment Allegation to Coordinator of Multidisciplinary team for Alleged Victim or Offender; and Counsel in Dependency Neglect or FINS Case for Alleged Offender

P. Multi-Disciplinary Team for alleged victim or offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Name of alleged victim

		Type of maltreatment
3)	When	Within 5 business days
4)	Form	CFS-210-A: Notice of Child Maltreatment Allegation to Coordinator of Multidisciplinary team for Alleged Victim or Offender; and Counsel in Dependency Neglect or FINS Case for Alleged Offender

Q. School where any child who comes into DHS custody is enrolled, only if the Division exercises a 72-hour hold, or if court awards DHS custody of a child

1)	Type of Allegation	All maltreatment
2)	What Information	Name of child in custody
3)	When	By next business day
4)	Form	CFS-384-LEA: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events or CACD-384-LEA: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events as appropriate

R. School where alleged juvenile offender is enrolled
   1) No notice is given until due process is satisfied

S. Alleged Offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged offender Name of alleged victim Type of maltreatment
3)	When	Hand deliver at initial contact with alleged offender
4)	Form	CFS-212-A: Notice of Child Maltreatment Allegation to Alleged Offender or CACD-212-A: Notice of Child Maltreatment Allegation to Alleged Offender as appropriate

PROCEDURE XIV-A2: Notices of At Risk Determinations

08/2013

If it is determined that the alleged offender is a juvenile or works with children or is otherwise engaged in paid or volunteer child-related activities or works with the elderly or an individual with a disability or mental illness (see Policy II-E for more information regarding how to make at risk determination), the investigator will:

A. Complete applicable sections of CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender and immediately submit to his/her supervisor.
B. If notified by the Area Director that the DCFS Director or designee has confirmed the at-risk determination via CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender:
   1) Issue the at-risk determination notice as applicable via CFS-214: Notice of Child Maltreatment Allegation to Employer, Volunteer Coordinator, or Licensing or Registering Authority.
   2) Place a copy of the CFS-214: Notice of Child Maltreatment Allegation to Employer, Volunteer Coordinator, or Licensing or Registering Authority and completed CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender in the investigative file.

The supervisor will:

A. Review CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender immediately upon receipt.
B. Conference immediately with the investigator regarding the at-risk determination.

C. Complete applicable sections of CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender and immediately submit to his/her Area Director.

The Area Director or designee/ CACD Administrator or designee will:

A. Review CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender immediately upon receipt.
B. Conference immediately with the supervisor regarding the at-risk determination.
C. Consult with OCC as necessary prior to making a notice of at-risk determination.
D. Complete applicable sections of CFS-215-R: Risk Determination of Certain Individuals Under Care of Alleged Offender.
E. Fax CFS-215-R: Risk Determination to the DCFS Director or designee immediately.
    1) If DCFS Director or designee confirms the at-risk determination in writing via CFS-215-R:
        a) Give written approval to the investigator and supervisor to issue the at-risk determination notices as applicable via CFS-214: Notice of Child Maltreatment Allegation to Employer, Volunteer Coordinator, or Licensing or Registering Authority.
        b) Ensure investigator receives completed CFS-215-R: Risk Determination (with DCFS Director or designee signature) for placement in investigative file.

The DCFS Director or designee will:

A. Immediately confirm or deny at risk determination via completion of application sections of CFS-215-R: Risk Determination.
B. Immediately fax completed CFS-215-R: Risk Determination to Area Director or designee or CACD Administrator or designee, as applicable.

PROCEDURE XIV-A3: Follow-up Notices of At Risk Determinations

08/2013

If upon further investigation the investigator concludes children, the elderly, or individuals with a disability or mental illness under the care of the alleged offender are not at risk, the “at risk” determination will be changed and the investigator will immediately:

A. Notify his/her supervisor the determination that children are not at risk.
B. If the Area Director notifies

The supervisor will:

A. Conference immediately with the investigator regarding the new determination of child not at risk.
B. Immediately notify the Area Director regarding the new determination of child not at risk.

The Area Director or designee/CACD Administrator or designee will:

A. Conference immediately with the supervisor regarding the new determination of children not at risk.
B. Immediately notify the DCFS Director or designee regarding the new determination of child not at risk.
C. If the DCFS Director or designee agrees that children are no longer determined to be at risk:
    1) Immediately notify the investigator and supervisor to immediately issue CFS-214-R1: Follow-Up Notice to Employer, Volunteer Coordinator, or Licensing or Registering Authority Regarding Child Maltreatment Allegation, as applicable.

The DCFS Director or designee will:

A. Immediately confirm or deny determination that children are no longer at risk.
B. Immediately notify Area Director or designee or CACD Administrator or designee, as applicable.

PROCEDURE XIV-A4: Notices of True Investigative Findings

08/2013

When a preponderance of the evidence found during an investigation indicates that an allegation should be determined true, the investigating agency shall notify certain persons as noted below or may notify the certain persons as noted below if the department determines the notification is necessary to ensure the health or safety of a child or confirm the investigative determination upon request as noted below. These notices may be made prior to satisfaction of due process for the alleged offender. If notice cannot be made to the alleged offender, see Procedure IX-A5, Expedited Hearing Process.

Any person or agency to whom disclosure is made may not disclose to any other person a report or other information included in the notices. However, the person or agency is permitted to consult his or her own attorney regarding the information in any notice provided to them.

A. Law Enforcement

1)	Type of Allegation	Severe maltreatment only
2)	What Information	Name of each victim Name of alleged offender Type of Maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-221-T: Child Maltreatment True Investigative Determination Notice to Law Enforcement and Prosecuting Attorney or CACD-221-T: Child Maltreatment True Investigative Determination Notice to Law Enforcement and Prosecuting Attorney as appropriate

B. Prosecuting Attorney

1)	Type of Allegation	Severe maltreatment only
2)	What Information	Name of each victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-221-T: Child Maltreatment True Investigative Determination Notice to Law Enforcement and Prosecuting Attorney or CACD-221-T: Child Maltreatment True Investigative Determination Notice to Law Enforcement and Prosecuting Attorney as appropriate

C. Facility Director or Licensing or Registering Authority

1)	Type of Allegation	All maltreatment, only if the maltreatment occurred at the facility or if the alleged offender holds a license or registration from the authority Information
2)	What information	Name of alleged offender Type of maltreatment
3)	When	Upon request or if department determines notification is necessary to ensure the health or safety of the child
4)	Form	CFS-234-T: Child Maltreatment True Investigative Determination Notice to Licensing or Registering Authority and Employer or Volunteer Coordinator or CACD-234-T: Child Maltreatment True Investigative Determination Notice to Licensing or Registering Authority and Employer or Volunteer Coordinator as appropriate

D. Facility Director

1) Type of Allegation	All maltreatment, only if the maltreatment occurred at the facility and the facility is licensed or registered by, or is operated by or operated under contract with the State of Arkansas.
2) What Information	Name of alleged offender Type of maltreatment
3) When	Upon request or if department determines notification is necessary to ensure the health or safety of the child
4) Form	CFS-222-T: Child Maltreatment True Investigative Determination Notice to Facility Director or CACD-222-T: Child Maltreatment True Investigative Determination Notice to Facility Director as appropriate

E. DHS Division Director

1) Type of Allegation	All maltreatment, only if the maltreatment occurred at a facility operated by or operated under contract with the Department
2) What Information	Name of alleged offender Name of alleged victim Type of maltreatment
3) When	Upon request or if department determines notification is necessary to ensure the health or safety of the child
4) Form	CFS-230-T: Child Maltreatment True Investigative Determination Notice to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case for Alleged Offender

F. Alleged underaged juvenile offender (under 14 years of age)

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Name of alleged victim Type of maltreatment
3) When	Within 10 business days of determination
4) Form	CFS-223-T1: Child Maltreatment True Investigative Determination Notice to Underaged Juvenile Offender (Under 14 Years old) or CACD-223-T1: Child Maltreatment True Investigative Determination Notice to Underaged Juvenile Offender (Under 14 Years old) as appropriate

G. Alleged juvenile offender 14-17 years of age

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Name of alleged victim Type of maltreatment
3) When	Within 10 business days of determination
4) Form	CFS-223-T3: Child Maltreatment True Investigative Determination Notice to Alleged Juvenile Offender 14- 17 Years of Age or CACD-223-T3: Child Maltreatment True Investigative Determination Notice to Alleged Juvenile Offender 14- 17 Years of Age as appropriate

H. Alleged juvenile offender (at time of offense) currently 18 or older (at time of notification)

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Name of alleged victim
3) When	Within 10 business days of determination
4) Form	CFS-223-T4: Child Maltreatment True Investigative Determination Notice to

Alleged Juvenile Offender Currently 18 or Older or CACD-223-T4: Child Maltreatment True Investigative Determination Notice to Alleged Juvenile Offender Currently 18 or Older as appropriate

I. Legal parents and legal guardians of alleged underaged juvenile offender (under 14 years of age)
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Name of alleged victim
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-224-T1: Child Maltreatment True Investigative Determination Notice to Legal Parents and Guardians of Underaged Juvenile Offender (under 14 years old) or CACD-224-T1: Child Maltreatment True Investigative Determination Notice to Legal Parents and Guardians of Underaged Juvenile Offender (under 14 years old) as appropriate

J. Legal parents and legal guardians of alleged juvenile offender 14-17 years of age
   1) Type of Allegation — Sexual abuse
   2) What information — Name of alleged juvenile offender
      Name of alleged victim
   3) When — Within 10 business days of determination
   4) Form — CFS-224-T3: or CACD-224-T3: as appropriate

K. Current foster parent of alleged offender in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-224-T4: Child Maltreatment True Investigative Determination Notice to Current Foster Parents of the Alleged Offender in Foster Care

L. Current foster parent of alleged offender in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-224-T4: Child Maltreatment True Investigative Determination Notice to Current Foster Parents of the Alleged Offender in Foster Care

M. Legal parents or legal guardians of alleged victim in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Name of alleged victim
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim or CACD-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim as appropriate

O. Victim, if 14 years of age or older
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim

		Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim or CACD-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim as appropriate

P. Custodial, non-custodial parent, guardians, legal custodians of victim, regardless of the age of the child

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim or CACD-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim as appropriate

Q. Victim, if 10 years of age or older

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim or CACD-225-T1: Child Maltreatment True Investigative Determination Notice to Victim, Legal Parent(s), and Legal Guardian(s) of the Alleged Victim as appropriate

R. Attorney ad litem of alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Upon request or if department determines notification is necessary to ensure the health or safety of the child
4)	Form	CFS-226-T1: Child Maltreatment True Investigative Determination Notice to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

S. Court appointed special advocate of alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Upon request or if department determines notification is necessary to ensure the health or safety of the child
4)	Form	CFS-226-T1: Child Maltreatment True Investigative Determination Notice to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

T. Juvenile division of circuit court with jurisdiction of an ongoing dependency neglect or FINS case of alleged victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim over whom the court has jurisdiction
      Name of alleged offender
      Type of maltreatment
   3) When — Upon request
   4) Form — CFS-226-T1: Child Maltreatment True Investigative Determination Notice to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

U. Juvenile division of circuit court with jurisdiction of an ongoing dependency neglect or FINS case of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender over whom the court has jurisdiction
      Type of maltreatment
   3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
   4) Form — CFS-230-T: Child Maltreatment True Investigative Determination Notice to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case for Alleged Offender

V. Attorney ad litem of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
   4) Form — CFS-228-T: Child Maltreatment True Investigative Determination Notice to Attorney Ad Litem and CASA of Alleged Offender

W. Court appointed special advocate of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
   4) Form — CFS-228-T: Child Maltreatment True Investigative Determination Notice to Attorney Ad Litem and CASA of Alleged Offender

X. Counsel in Dependency Neglect or FINS Case of an alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Name of alleged victim
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-230-T: Child Maltreatment True Investigative Determination Notice to DHS

Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case for Alleged Offender

Y. Counsel in Dependency Neglect or FINS Case of an alleged victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged offender
Name of alleged victim
Type of maltreatment
3) When — Within 10 business days of determination
4) Form — CFS-226-T1: Child Maltreatment True Investigative Determination Notice to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

Z. Attorney ad litem of child in foster home where maltreatment is reported
1) Type of Allegation — All maltreatment
2) What Information — Name of child represented by the AAL only
3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
4) Form — CFS-229-T: Child Maltreatment True Investigative Determination Notice to Attorney Ad Litem and CASA for Child in Foster Home Where Maltreatment Is Reported

AA. Court appointed special advocate of child in foster home where maltreatment is reported or when alleged juvenile offender or under-aged juvenile offender is placed in the same placement as client
1) Type of Allegation — All maltreatment
2) What Information — Name of child represented by the CASA only
Type of maltreatment
3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
4) Form — CFS-229-T: Child Maltreatment True Investigative Determination Notice to Attorney Ad Litem and CASA for Child in Foster Home Where Maltreatment Is Reported

BB. Multidisciplinary Team for Alleged Offender or Victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Name of alleged offender
Type of maltreatment
3) When — Upon request or if department determines notification is necessary to ensure the health or safety of the child
4) Form — CFS-230-T: Child Maltreatment True Investigative Determination Notice to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case for Alleged Offender

CC. Offender, (*see "True Determination and special process for Notice to Offender" below)*
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Name of alleged offender
Type of maltreatment
3) When — Within 10 business days of determination

4)	Form	CFS 232-T1: Child Maltreatment True Investigative Determination Notice to Alleged Adult Offender and CFS-232-T1-A: Witness Statement of Notice of Investigative Determination or CACD-232-T1: Child Maltreatment True Investigative Determination Notice to Alleged Adult Offender and CACD-232-T1-A: Witness Statement of Notice of Investigative Determination as appropriate

DD. School where alleged juvenile offender is enrolled
1) No notice at this time

EE. Offender, 13 years of age and older (*see "True Determination and special process for Notice to Offender" below)*

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS 232-T1: Child Maltreatment True Investigative Determination Notice to Alleged Adult Offender and CFS-232-T1-A: Witness Statement of Notice of Investigative Determination or CACD-232-T1: Child Maltreatment True Investigative Determination Notice to Alleged Adult Offender and CACD-232-T1-A: Witness Statement of Notice of Investigative Determination as appropriate

FF. Offender, Exempt, Garrett's Law or Religious

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-232-T2: True but Exempt Child Maltreatment Investigative Determination Notice to Offender or CACD-232-T2: True but Exempt Child Maltreatment Investigative Determination Notice to Offender as appropriate

TRUE DETERMINATION AND SPECIAL PROCESS FOR NOTICE TO OFFENDER

If the investigation is determined true and not exempt, the offender must be notified of the right to request an administrative hearing within 30 days of the investigative determination.

If the alleged offender is a juvenile age 14 or older at the time of the act or omission, the notification must include a statement that the matter has been referred for an automatic administrative hearing. The hearing may be waived by the juvenile offender or his/her parent in writing. This hearing may not be waived by the Department if the child is in foster care, but may be waived by the attorney of the child in foster care.

The investigator may elect to provide notice via certified mail with restricted delivery, or by face-to-face meeting. If either or both methods fail to make contact with the offender, the investigator should utilize a process server.

Upon completion of the investigation, the investigator will:

A. Go into the Document Tracking screen in CHRIS, click on the "standard" line, go to the pick-list and select the CFS-232-T1: Notice to Offender of True Child Maltreatment Investigative Determination or Expedited Hearing. Enter the date. The CFS-232-T1 will be mailed or presented in a face-to-face meeting in the "Date Requested" field.
B. Provide the alleged offender a copy of the CFS-232-T1: Notice to Offender of True Child Maltreatment Investigative Determination or Expedited Hearing within 10 business days of determination.

Notice via Certified Mail
If the investigator elects to mail the notice to the offender, he shall send the CFS-232-T1: Notice to Offender of True Child Maltreatment Investigative Determination or Expedited Hearing to the offender via certified mail with restricted delivery.

Notice via Face-to-Face Meeting

A. If the investigator elects to hand deliver the notice to the offender in the county office or at a safe location outside the office, he must use the CFS-232-T1: Notice to Offender of True Child Maltreatment Investigative Determination.
   1) When the investigator has presented the CFS-232-T1: Notice to Offender to the offender in the county office, and if the offender refuses to sign the form, the CFS-232-T1-A: Witness Statement of Notice of Investigative Determination must be used; the investigator must obtain a DHS employee in the county office who is unbiased and available to witness that the offender has been presented with the notice, but refuses to sign. The available DHS county office employee will fill-out the CFS-232-T1-A in the presence of the offender and the investigator who is attempting to provide notice.
      a) If the investigator schedules a meeting to present notice to the offender in the county office and the offender does not keep the appointment, then the investigator should attempt to deliver by certified mail restricted delivery. If the certified mail delivery is unsuccessful, the investigator should utilize a process server.

2) If the investigator elects to hand deliver the notice at a safe location outside the county office, he must be accompanied by an available DHS county office employee. When the investigator has presented the CFS-232-T1: Notice to Offender to the offender, and if the offender refuses to sign the form, the accompanying DHS employee will fill out the CFS-232-T1-A in the presence of the offender and the investigator who is attempting to provide notice.
   a) If an investigator isn't able to make contact with the offender outside the office, he should utilize a process server.

Notice via Process Server
The investigator should utilize a process server only after

A. the postal service returns the green card unsigned; or
B. the investigator was unsuccessful in making make face-to-face contact with the offender.

Upon successfully providing notification of the determination to the alleged offender, the investigator will:

A. Enter the date the offender received the notice in the "Date Received/Issued" field on CHRIS after the postal service returns the green card (return receipt); or
B. Enter the date the offender was provided with the notice in a face-to-face meeting.

Continuing Attempts to Notify When Unable to Locate Offender
If the process server is unable to serve the offender, the Division shall continue to attempt to notify the offender no less-frequently than once a year for no fewer than three years.

TRUE DETERMINATION AND CHILDREN, THE ELDERLY, OR INDIVIDUALS WITH DISABILITIES OR MENTAL ILLNESS AT RISK
Upon satisfaction of due process and if the investigative determination is true, if the offender is a juvenile or is engaged in child-related activities or employment, works with the elderly, an individual with disabilities or mental illness, or is a juvenile and the department has determined that children, the elderly, or individuals with disabilities or mental illness under the care of the offender appear to be at risk of maltreatment by the alleged offender, the department may notify the following of the investigative determination upon receiving written approval from the DCFS Director or designee.

A. Alleged offender's employer, entity or person in charge of the alleged offender's paid or volunteer activity; a licensing or registering authority to the extent necessary to carry out its official responsibilities
   1) Type of Allegation All maltreatment;

2)	What Information	Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-234-T: Child Maltreatment True Investigative Determination Notice to Licensing or Registering Authority and Employer or Volunteer Coordinator or CACD-234-T: Child Maltreatment True Investigative Determination Notice to Licensing or Registering Authority and Employer or Volunteer Coordinator as appropriate

If the Division later determines that there is not a preponderance of the evidence indicating that children under the care of the alleged offender appear to be at risk, the Division shall immediately notify the previously notified person or entity of that information.

PROCEDURE XIV-A5: Notices of Unsubstantiated Allegations of Child Maltreatment

08/2013

When a determination that an allegation of child maltreatment is not supported by a preponderance of evidence and is determined to be unsubstantiated, the investigating agency shall notify as outlined below or confirm upon request as outlined below, only if notice of the allegation was given:

A. Law Enforcement

1) Type of Allegation	Severe maltreatment only
2) What Information	Name of each victim Name of alleged offender Type of Maltreatment
3) When	Within 10 business days of determination
4) Form	CFS-241-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney or CACD-241-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney as appropriate

B. Prosecuting Attorney

1) Type of Allegation	Severe maltreatment only
2) What Information	Name of each victim Name of alleged offender Type of maltreatment
3) When	Within 10 business days of determination
4) Form	CFS-241-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney or CACD-241-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney as appropriate

C. Licensing or Registering Authority

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Type of maltreatment
3) When	Upon request
4) Form	CFS-242-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Licensing or Registering Authority or CACD-242-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Licensing or Registering Authority as appropriate

D. Facility Director

1) Type of Allegation	All maltreatment, only if the maltreatment occurred at the facility and the facility is licensed or registered by, or is operated by or operated under contract with the State of Arkansas
2) What Information	Name of alleged offender Type of maltreatment
3) When	Upon request
4) Form	CFS-243-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Facility Director or CACD-243-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Facility Director as appropriate

E. DHS Division Director

1)	Type of Allegation	All maltreatment, only if the maltreatment occurred at a facility operated by or operated under contract with the Department
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Upon request
4)	Form	CFS-250-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge or Counsel in Dependency Neglect or FINS Case for Alleged Offender

F. Alleged Underaged Juvenile Offender (under 14 years of age)

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-240-U1: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Underaged Juvenile Offender (under 14 Years Old) or CACD-240-U1: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Underaged Juvenile Offender (under 14 Years Old) as appropriate

G. Alleged Juvenile Offender (14-17 years of age)

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-240-U2: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Juvenile Offender (14-17 Years of age) or CACD-240-U2: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Juvenile Offender (14-17 Years of age) as appropriate

H. Legal parent or legal guardian of alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-244-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parents and Legal Guardians of Alleged Offender or CACD-244-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parents and Legal Guardians of Alleged Offender as appropriate

I. Legal parent or legal guardian of alleged victim in foster care

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Type of maltreatment
3)	When	Within 10 business days of determination

4) Form — CFS-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim or CACD-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim as appropriate

J. Current Foster parent of alleged victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Type of maltreatment
3) When — Within 10 business days of determination
4) Form — CFS-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim or CACD-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim as appropriate

K. Custodial, non-custodial parent, guardians, legal custodians of victim, regardless of the age of the child
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Type of maltreatment
3) When — Within 10 business days of determination
4) Form — CFS-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim or CACD-245-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Legal Parent(s), Legal Guardians, and Current Foster Parents of the Alleged Victim as appropriate

L. Alleged Victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged offender
Type of maltreatment
3) When — Within 10 business days of determination
4) Form — CFS-245-U-1: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Victim or CACD-245-U-1: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Victim as appropriate

M. Attorney ad litem of alleged victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Name of alleged offender
Type of maltreatment
3) When — Upon request
4) Form — CFS-246-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

N. Court appointed special advocate of alleged victim
1) Type of Allegation — All maltreatment
2) What Information — Name of alleged victim
Name of alleged offender
Type of maltreatment
3) When — Upon request

4) Form — CFS-246-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

O. Juvenile division of circuit court with jurisdiction of an ongoing dependency neglect or FINS case for alleged victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Upon request
   4) Form — CFS-246-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

P. Counsel in Dependency Neglect or FINS case if alleged victim has an open court case
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-246-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

Q. Juvenile division of circuit court with jurisdiction of an ongoing dependency neglect or FINS case for alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Upon request
   4) Form — CFS-250-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge or Counsel in Dependency Neglect or FINS Case for Alleged Offender

R. Counsel in Dependency Neglect or FINS case if alleged offender has an open court case
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged victim
      Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days of determination
   4) Form — CFS-250-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge or Counsel in Dependency Neglect or FINS Case for Alleged Offender

S. Attorney ad litem of alleged offender
   1) Type of Allegation — All maltreatment
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Upon request

4) Form CFS-248-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA for Alleged Offender

T. Court appointed special advocate of alleged offender
1) Type of Allegation All maltreatment
2) What Information Name of alleged offender
Type of maltreatment
3) When Upon request
4) Form CFS-248-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA for Alleged Offender

U. Attorney ad litem of other children in foster home where maltreatment is reported
1) Type of Allegation All maltreatment
2) What Information Name of child represented by the AAL only
Type of maltreatment
3) When Upon request
4) Form CFS-249-U:

V. Court appointed special advocate of other children in foster home
1) Type of Allegation All maltreatment
2) What Information Name of child represented by the CASA only
Type of maltreatment
3) When Upon request
4) Form CFS-249-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA of Child in Foster Home Where Maltreatment Is Reported

W. Multi-Disciplinary Team of alleged victim and alleged offender
1) Type of Allegation All maltreatment
2) What Information Name of alleged offender
Name of alleged victim
Type of maltreatment
3) When Upon request
4) Form CFS-250-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim or Offender; and Circuit Judge or Counsel in Dependency Neglect or FINS Case for Alleged Offender

X. Alleged offender
1) Type of Allegation All maltreatment
2) What Information Name of alleged offender
Name of Alleged Victim
Type of maltreatment
3) When Within 10 business days of determination
4) Form CFS-252-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender or CACD-252-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender as appropriate

Y. Alleged offender's employer when other children under the care of the alleged offender appeared to have been at risk, only if notified initially
1) Type of Allegation All maltreatment

2)	What Information	Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority or CACD-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority as appropriate

Z. Person in charge of alleged offender's paid or volunteer activity when other children under the care of the alleged offender appeared to have been at risk, only if notified initially

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority or CACD-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority as appropriate

AA. Licensing or registering authority when children under care of the alleged offender appeared to have been at risk, only if notified initially

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged offender Type of maltreatment
3)	When	Within 10 business days of determination
4)	Form	CFS-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority or CACD-254-U: Notice of Unsubstantiated Child Maltreatment Investigative Determination to Alleged Offender's Employer or Entity in Charge of Alleged Offender's Paid or Volunteer Activity; or Licensing or Registering Authority as appropriate

PROCEDURE XIV-A6: Notices of Overturned True Investigation Determination

08/2013

Due process is satisfied by providing the alleged offender with notice and an opportunity for an administrative hearing and when:

A. The Administrative Law Judge makes a decision to either uphold or overturn the "true" investigative determination;
B. 30 days have passed and the alleged offender did not request a hearing;
C. The alleged offender was a juvenile and he or his legal parent or guardian waived the administrative hearing or the administrative law judge issued a decision; OR
D. The Administrative Law Judge upheld the true determination because of a preliminary administrative hearing and allowed provisional placement of the alleged offender's name on the Child Maltreatment Central Registry.

Notices of overturned decisions may be sent only after due process is satisfied. Verification must be obtained of either the judicial determination or the fact that alleged offender prevailed in the administrative hearing. These notices serve to inform that the investigative determination was overturned.

A. Law Enforcement

1) Type of Allegation	Severe maltreatment only
2) What Information	Name of each alleged victim Name of alleged offender Type of Maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing, but only if the notice of True Determination was provided.
4) Form	CFS-261-O: Notice of Overturned True Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney or CACD-261-O: Notice of Overturned True Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney as appropriate

B. Prosecuting Attorney

1) Type of Allegation	Severe maltreatment only
2) What Information	Name of each alleged victim Name of alleged offender Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing, but only if the notice of True Determination was provided.
4) Form	CFS-261-O: Notice of Overturned True Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney or CACD-261-O: Notice of Overturned True Child Maltreatment Investigative Determination to Law Enforcement and Prosecuting Attorney as appropriate

C. Licensing or Registering Authority

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4) Form	CFS-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity or CACD-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity as appropriate

D. Facility Director

1) Type of Allegation	All maltreatment, only if the maltreatment occurred at the facility, and the facility is licensed or registered by, or is operated by or operated under contract with the State of Arkansas
2) What Information	Name of alleged offender Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4) Form	CFS-263-O: Notice of Overturned True Child Maltreatment Investigative

	Determination to Facility Director or CACD-263-O: Notice of Overturned True Child Maltreatment Investigative Determination to Facility Director as appropriate

E. DHS Division Director

1) Type of Allegation	All maltreatment, only if the maltreatment occurred at a facility operated by or operated under contract with the Department
2) What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4) Form	CFS-270-O: Notice of Overturned True Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim and Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Alleged Offender or CACD-270-O: Notice of Overturned True Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim and Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Alleged Offender as appropriate

F. Legal parent or legal guardian of an alleged offender in foster care

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged offender Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4) Form	CFS-264-O: Notice of Overturned True Child Maltreatment Investigative Determination to Legal Parent(s) and Legal Guardian(s) of the Alleged Offender or CACD-264-O: Notice of Overturned True Child Maltreatment Investigative Determination to Legal Parent(s) and Legal Guardian(s) of the Alleged Offender as appropriate

G. Legal parent or legal guardian of alleged victim in foster care

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged victim Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4) Form	CFS-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim or CACD-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim as appropriate

H. Current Foster parent of alleged victim in foster care

1) Type of Allegation	All maltreatment
2) What Information	Name of alleged victim Type of maltreatment
3) When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4) Form	CFS-265-O-2: Notice of Overturned True Child Maltreatment Investigative Determination to Current Foster Parent(s) of the Alleged Victim

I. Legal parents, custodial, non-custodial parents, guardians, legal custodians of alleged victim regardless of the age of the child

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim or CACD-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim as appropriate

J. Alleged victim, if 14 years of age or older

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4)	Form	CFS-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim or CACD-265-O-1: Notice of Overturned True Child Maltreatment Investigative Determination to Victim and Legal Parent(s) and Legal Guardian(s) of Alleged Victim as appropriate

K. Attorney ad litem of alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-266-O: Notice of Overturned True Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

L. Court appointed special advocate of alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-266-O: Notice of Overturned True Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

M. Circuit Judge with jurisdiction of an ongoing dependency neglect or FINS case of alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim over whom the court has jurisdiction Name of alleged offender

		Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-266-O: Notice of Overturned True Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

N. Counsel in Dependency Neglect or FINS Case of an alleged victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4)	Form	CFS-266-O: Notice of Overturned True Child Maltreatment Investigative Determination to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Alleged Victim

O. Circuit Judge with jurisdiction of an ongoing dependency neglect or FINS case of alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim over whom the court has jurisdiction Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-270-O: Notice of Overturned True Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim and Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Alleged Offender

P. Counsel in Dependency Neglect or FINS Case of an alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
4)	Form	CFS-270-O: Notice of Overturned True Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim and Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Alleged Offender

Q. Attorney ad litem of alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-268-O: Notice of Overturned True Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA of Alleged Offender

R. Court appointed special advocate of alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-268-O: Notice of Overturned True Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA of Alleged Offender

S. Attorney ad litem of child in foster home where maltreatment is reported

1)	Type of Allegation	All maltreatment
2)	What Information	Name of child represented by AAL only Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-269-O: Notice of Overturned True Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA of Child in Foster Home Where Maltreatment Is Reported

T. CASA of child in foster home where maltreatment is reported

1)	Type of Allegation	All maltreatment
2)	What Information	Name of child represented by CASA only Type of maltreatment
3)		When Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-269-O: Notice of Overturned True Child Maltreatment Investigative Determination to Attorney Ad Litem and CASA of Child in Foster Home Where Maltreatment Is Reported

U. Multi-disciplinary Team

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim(s) Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-270-O: Notice of Overturned True Child Maltreatment Investigative Determination to DHS Division Director; Coordinator of Multidisciplinary Team for Alleged Victim and Offender; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Alleged Offender

V. Alleged offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of alleged victim(s) Name of alleged offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing.
4)	Form	CFS-272-O: Notice of Overturned True Child Maltreatment Investigative Determination to Alleged Offender or CACD-272-O: Notice of Overturned True Child Maltreatment Investigative Determination to Alleged Offender as appropriate

W. Alleged offender's employer when other children under the care of the alleged offender may be at risk, only if they received notice
   1) Type of Allegation — All maltreatment,
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
   4) Form — CFS-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity or CACD-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity as appropriate

X. Entity or person in charge of the alleged offender's paid or volunteer activity when other children under the care of the alleged offender may be at risk, only if they received notice
   1) Type of Allegation — All maltreatment,
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
   4) Form — CFS-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity or CACD-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity as appropriate

Y. Licensing or Registering Authority when other children under the care of the alleged offender may be at risk, only if they received notice
   1) Type of Allegation — All maltreatment,
   2) What Information — Name of alleged offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives notice that the alleged offender prevailed in the administrative hearing
   4) Form — CFS-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity or CACD-274-O: Notice of Overturned True Child Maltreatment Investigative Determination to Licensing or Registering Authority and Employer or Entity in Charge of Paid or Volunteer Activity as appropriate

Z. School where alleged juvenile offender is enrolled
   1) No notice

AA. Child Safety Center, if involved in the investigation
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing

4)	Form	CFS-275-O: Notice of Overturned True Child Maltreatment Investigative Determination to Child Safety Center Involved in Investigation of Maltreatment or CACD-275-O: Notice of Overturned True Child Maltreatment Investigative Determination to Child Safety Center Involved in Investigation of Maltreatment as appropriate

PROCEDURE XIV-A7: Notices that Offender's Name Will Be Placed in the Child Maltreatment Central Registry

01/2020

Due process is accomplished by providing the alleged offender with notice and an opportunity for an administrative hearing. Due process is satisfied when

A. The Administrative Law Judge makes a decision to either uphold or overturn the "true" investigative determination;
B. 30 days have passed and the offender did not request a hearing;
C. The alleged offender was a juvenile and he or his legal parent or guardian waived the administrative hearing or the administrative law judge issued a decision; OR
D. The Administrative Law Judge upheld the true determination because of a preliminary administrative hearing and allowed provisional placement of the offender's name on the Child Maltreatment Central Registry.

These notices of name placement in the Child Maltreatment Central Registry must be sent only after due process is satisfied. Verification must be obtained that the judicial determination of the original true finding was upheld in either the regular or preliminary administrative hearing or of the fact that no hearing was requested. These notices serve to inform that the investigative determination was upheld and that the offender's name will be placed in the Child Maltreatment Central Registry, or that a prima facie case was established, allowing provisional placement of the name.

A. Law Enforcement

1)	Type of Allegation	Severe maltreatment only
2)	What Information	Name of each victim Name of offender Type of Maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-281-N: Notice of Name Placement on Central Registry to Law Enforcement and Prosecuting Attorney or CACD-281-N: Notice of Name Placement on Central Registry to Law Enforcement and Prosecuting Attorney as appropriate

B. Prosecuting Attorney

1)	Type of Allegation	Severe maltreatment only
2)	What Information	Name of each victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-281-N: Notice of Name Placement on Central Registry to Law Enforcement and Prosecuting Attorney or CACD-281-N: Notice of Name Placement on Central Registry to Law Enforcement and Prosecuting Attorney as appropriate

C. Licensing or Registering Authority (to the extent necessary for the authority to carry out its official responsibilities, when the licensing or registering authority is responsible for licensing or registering the agency or business location where the alleged abuse occurred)

1)	Type of Allegation	All maltreatment
2)	What Information	Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS- 294-N: Notice of Name Placement on Central Registry to Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity or CACD-294-N: Notice of Name Placement on Central Registry to Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity as appropriate

D. Facility Director

1)	Type of Allegation	All maltreatment, only if the maltreatment occurred at the facility, and the facility is licensed or registered by, or is operated by or operated under contract with the State of Arkansas
2)	What Information	Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-283-N: Notice of Name Placement on Central Registry to Facility Director or CACD-283-N: Notice of Name Placement on Central Registry to Facility Director as appropriate

E. DHS Division Director

1)	Type of Allegation	All maltreatment, only if the maltreatment occurred at a facility operated by or operated under contract with the Department
2)	What Information	Name of Victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-290-N: Notice of Name Placement on Central Registry to DHS Division Director; Coordinator of Multidisciplinary Team for Offender and Victim; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Offender

F. Legal parents and legal custodians of the juvenile offender (14 through 17 years of age)

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-284-N: Notice of Name Placement on Central Registry to Legal Parent(s) and Legal Guardian(s) of the Juvenile Offender (14 to 17 Years of Age) or CACD-284-N: Notice of Name Placement on Central Registry to Legal Parent(s) and Legal Guardian(s) of the Juvenile Offender (14 to 17 Years of Age) as appropriate

G. Legal parent or legal guardian of victim in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
   4) Form — CFS-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim or CACD-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim as appropriate

H. Current Foster Parent of victim in foster care
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
   4) Form — CFS-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim or CACD-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim as appropriate

I. Victim, if 14 years of age or older
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
   4) Form — CFS-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim or CACD-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim as appropriate

J. Victim, if ten (10) years of age or older
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender
      Type of maltreatment
   3) When — Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
   4) Form — CFS-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim or CACD-285-N: Notice of Name Placement on Central Registry to Victim, Legal Parent(s), Legal Guardian(s), and Current Foster Parent(s) of Victim as appropriate

K. Attorney ad litem of victim
   1) Type of Allegation — All maltreatment
   2) What Information — Name of victim
      Name of offender

		Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-286-N: Notice of Name Placement on Central Registry to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Victim

L. Court appointed special advocate of victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-286-N: Notice of Name Placement on Central Registry to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Victim

M. Circuit Judge with jurisdiction of an ongoing dependency neglect or FINS case of victim

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim over whom the court has jurisdiction Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing.
4)	Form	CFS-286-N: Notice of Name Placement on Central Registry to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Victim

N. Counsel in Dependency Neglect or FINS Case of a victim in foster care

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing.
4)	Form	CFS-286-N: Notice of Name Placement on Central Registry to Circuit Judge, Attorney Ad Litem, CASA, and Counsel in Dependency Neglect or FINS Case of Victim

O. Attorney ad litem of offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-288-N: Notice of Name Placement on Central Registry to Attorney Ad Litem and CASA of Offender

P. Court appointed special advocate of offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim

		Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-288-N: Notice of Name Placement on Central Registry to Attorney Ad Litem and CASA of Offender

Q. Circuit Judge with jurisdiction of an ongoing dependency neglect or FINS case of offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of offender over whom the court has jurisdiction Name of victim Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing.
4)	Form	CFS-290-N: Notice of Name Placement on Central Registry to DHS Division Director; Coordinator of Multidisciplinary Team for Offender and Victim; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Offender

R. Counsel in Dependency Neglect or FINS Case of an offender in foster care

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing.
4)	Form	CFS-290-N: Notice of Name Placement on Central Registry to DHS Division Director; Coordinator of Multidisciplinary Team for Offender and Victim; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Offender

S. Attorney ad litem of child in foster home where maltreatment is reported

1)	Type of Allegation	All maltreatment
2)	What Information	Name of child represented by AAL Name of victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-289-N: Notice of Name Placement on Central Registry to Attorney Ad Litem and CASA of Child in Foster Home Where Maltreatment Is Reported

T. Court appointed special advocate of child in foster home where maltreatment is reported

1)	Type of Allegation	All maltreatment
2)	What Information	Name of child represented by CASA Name of victim Name of offender Type of maltreatment
3)	When	Within 10 business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-289-N: Notice of Name Placement on Central Registry to Attorney Ad Litem and CASA of Child in Foster Home Where Maltreatment Is Reported

U. Multidisciplinary Team for Victim or Offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-290-N: Notice of Name Placement on Central Registry to DHS Division Director; Coordinator of Multidisciplinary Team for Offender and Victim; and Circuit Judge and Counsel in Dependency Neglect or FINS Case of Offender

V. School where juvenile offender, age 14 or older is enrolled

1)	Type of Allegation	All maltreatment
2)	What Information	Name of offender Type of maltreatment Services offered or provided by the Department
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-291-N2: or CACD-291-N2: as appropriate

W. School where juvenile offender, age ten (10) or older is enrolled

1)	Type of Allegation	All maltreatment
2)	What Information	Name of offender Type of maltreatment Services offered or provided by the Department
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-291-N2 or CACD-291-N2 as appropriate

X. Offender

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-292-N1: Notice of Name Placement on Central Registry to School Where Victim Is Enrolled or CACD-292-N1: Notice of Name Placement on Central Registry to School Where Victim Is Enrolled as appropriate

Y. Child Safety Center, if involved in the investigation

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-295-N: Notice of Name Placement on Central Registry to Child Safety Center Involved in Investigation of Maltreatment or CACD-295-N: Notice of Name Placement on Central Registry to Child Safety Center Involved in Investigation of Maltreatment as appropriate

Z. Mandated Reporter

1)	Type of Allegation	All maltreatment
2)	What Information	Name of victim Name of offender Type of maltreatment Services offered or provided to the victim and offender
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-293-N: Notice of Name Placement on Central Registry to Mandated Reporter or CACD-293-N: Notice of Name Placement on Central Registry to Mandated Reporter as appropriate

AA. Offender's employer when other children under the care of the offender may be at risk

1)	Type of Allegation	All maltreatment,
2)	What Information	Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing and only if a supervisor has determined that children under the care of the offender may be at risk of maltreatment by the offender
4)	Form	CFS-294-N or CACD-294-N as appropriate

BB. Entity in charge of offender's volunteer activity when other children under the care of the offender may be at risk

1)	Type of Allegation	All maltreatment,
2)	What Information	Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing and only if a supervisor has determined that children under the care of the offender may be at risk of maltreatment by the offender
4)	Form	CFS-294-N: Notice of Name Placement on Central Registry to Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity or CACD-294-N: Notice of Name Placement on Central Registry to Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity as appropriate

CC. Licensing or registering authority, if children under the care of the offender may be at risk (to the extent necessary for the authority to carry out its official responsibilities, when the licensing or registering authority is responsible for licensing or registering the agency or business location where the alleged abuse occurred or when other children at the agency or business under the care of the alleged offender are at risk or when the licensing or registering authority are responsible for monitoring the professional behavior of the registered or licensed professional who is the alleged offender)

1)	Type of Allegation	All maltreatment,
2)	What Information	Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing and only if a supervisor has determined that children under the care of the offender may be at risk of maltreatment by the offender
4)	Form	CFS-294-N: Notice of Name Placement on Central Registry to Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity or CACD-294-N: Notice of Name Placement on Central Registry to

	Licensing or Registering Authority, Employer, or Entity in Charge of a Paid or Volunteer Activity as appropriate

DD. Employer of any offender in a designated position with a state agency Per A.C.A. § 21-15-110, if a state employee is determined to be an offender or perpetrator in a true, substantiated, or founded report of child maltreatment or adult abuse and the state employee is employed in a "designated position", the investigating agency shall immediately notify the employer of that state employee.

Per A.C.A. § 21-15-101, "designated Position" means a position in which a person is employed by a state agency to provide care, supervision, treatment, or any other services to the elderly, to individuals with mental illness(es), or to individuals with developmental disabilities or to children who reside in any state-operated facility or a position in which the applicant or employee will have direct contact with a child or any individual who is elderly or any individual who has mental illness(es) or developmental disabilities.

1)	Type of Allegation	All maltreatment,
2)	What Information	Name of offender Type of maltreatment
3)	When	Within ten (10) business days after Central Registry receives the order or after 35 business days have passed and the offender did not request a hearing
4)	Form	CFS-296-N: Notice of Name Placement on Central Registry to Employer of Offender in a Designated Position with an Arkansas State Agency or CACD-296-N: Notice of Name Placement on Central Registry to Employer of Offender in a Designated Position with an Arkansas State Agency as appropriate

APPENDIX 1: GLOSSARY

01/2020

ABANDONED INFANT -- A juvenile less than nine months of age and whose parent, guardian or custodian left the child alone or in the possession of another person without identifying information or with an expression of intent by words, actions or omissions not to return for the infant.

ABANDONMENT-- Failure of the parent to provide reasonable support for a juvenile and to maintain regular contact with the juvenile through statement or contact when this failure is accompanied by an intention on the part of the parent to permit the condition to continue for an indefinite period in the future, or when the failure of a parent to support or maintain regular contact with the juvenile is without just cause, or when there is an articulated intent to forego parental responsibility. Abandonment does not include acts or omissions of a parent toward a married minor.

ABUSE -- Any of the following acts or omissions by a parent, guardian, custodian, foster parent, person 18 years of age or older living in the home with a child whether related or unrelated to the child, or any person who is entrusted with the juvenile's care by a parent, guardian, custodian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, a significant other of the child's parent, or any person legally responsible for the juvenile's welfare, but excluding the spouse of a minor:

A. Extreme or repeated cruelty to a juvenile;
B. Engaging in conduct creating a realistic and serious threat of death, permanent or temporary disfigurement, or impairment of any bodily organ.
C. Injury to a juvenile's intellectual, emotional or psychological development as evidenced by observable and substantial impairment of the juvenile's ability to function within the juvenile's normal range of performance and behavior.
D. Any history that is at variance with the history given.
E. Any non-accidental physical injury.
F. Any of the following intentional or knowing acts, with physical injury and without justifiable cause:
    1) Throwing, kicking, burning, biting or cutting a child.
    2) Striking a child with a closed fist.
    3) Shaking a child.
    4) Striking a child on the face or head.
G. Any of the following intentional or knowing acts, with or without injury:
    1) Striking a child age six or younger on the face or head.
    2) Shaking a child age three or younger.
    3) Interfering with a child's breathing.
    4) Pinching or striking a child's genital area.

NOTE: The prior list of unreasonable actions is considered illustrative and not exclusive.

H. No unreasonable action shall be construed to permit a finding of abuse without having established the elements of abuse.
I. Abuse shall not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes or restraining or correcting the child.
    1) The person exercising the restraint is an employee of an agency licensed or exempted from licensure under the Child Welfare Agency Licensing Act;
    2) The agency has policy and procedures regarding restraints;
    3) No other alternative exists to control the child except for a restraint;
    4) The child is in danger of hurting himself or others;
    5) The person exercising the restraint has been trained in properly restraining children, de-escalation, and conflict resolution techniques; and
    6) The restraint is for a reasonable period of time.
J. Reasonable and moderate physical discipline inflicted by a parent or guardian shall not include any act that is likely to cause, and which does cause injury more serious than transient pain or minor temporary marks.

K. The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable or moderate.

AGGRAVATED CIRCUMSTANCES—Aggravated circumstances exist when a child has been abandoned, chronically abused, subjected to extreme or repeated cruelty, sexually abused, sexually exploited, or a determination has been or is made by a judge that there is little likelihood that services to the family will result in successful reunification; or a child has been removed from the custody of the parent or guardian and placed in foster care or in the custody of another person three (3) or more times in the last 15 months; or, a child or a sibling has been neglected or abused such that the abuse could endanger the life of the child.

ALTERNATIVE COMPLIANCE – a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. This includes, but is not limited to, regulations that govern background checks and convictions for prohibited offenses.

CARETAKER – A parent, guardian, custodian, foster parent, or any person 14 years of age or older who is entrusted with a child's care by a parent, guardian, custodian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible for a child's welfare.

CHILD – A person who is from birth to the age of 18.

CHILD (FOR TITLE IV-E PURPOSES) –

A. For the purposes of the title IV-E foster care program, an individual:
   1) Who is in foster care under the responsibility of DHS; and,
   2) Who meets the following age parameters:
      a) Has not attained 18 years of age; or,
      b) Has attained 18 years of age but who has not attained 21 years of age and meets any of the following conditions:
      c) Is completing secondary education or a program leading to an equivalent credential.
      d) Is enrolled in an institution which provides post-secondary or vocational education.
      e) Is participating in a program or activity designed to promote, or remove barriers to, employment.
      f) Is employed for at least 80 hours per month.
      g) Is incapable of doing any of the above described activities due to a medical condition, which incapability is supported by regularly updated information in the case plan
B. For the purposes of the title IV-E adoption or guardianship assistance program, an individual:
   1) Who is under the age of 18 and is the subject of an adoption or guardianship assistance agreement entered into prior to the age of 16; or,
   2) Who is under the age of 21 and is the subject of an adoption or guardianship assistance agreement entered into after the individual attained the age of 16 and meets any of the following conditions:
      a) Is completing secondary education or a program leading to an equivalent credential.
      b) Is enrolled in an institution which provides post-secondary or vocational education.
      c) Is participating in a program or activity designed to promote, or remove barriers to, employment.
      d) Is employed for at least 80 hours per month.
      e) Is incapable of doing any of the above described activities due to a medical condition.

CHILD ABUSE HOTLINE – The Child Abuse Hotline is maintained by the State Police Crimes Against Families Division, for the purpose of receiving and recording notification made pursuant to the "Child Maltreatment Reporting Act". The Child Abuse Hotline is staffed 24 hours per day and has statewide accessibility through a toll-free telephone number.

CHILDCARE INSTITUTION – A private child care institution, or a public child care institution which accommodates no more than 25 children, and is licensed by the State in which it is situated or has been approved by the agency of such State or tribal licensing authority (with respect to child care institutions on or near Indian reservations) responsible for licensing or approval of institutions of this type as meeting the standards established for such licensing, except, in the case of a child who has attained 18 years of age, the term includes a supervised transitional living setting in which the individual is living independently. This definition must not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent.

CHILD MALTREATMENT - Physical abuse, sexual abuse, emotional abuse, neglect, sexual exploitation or abandonment of a child.

CHILD MALTREATMENT INVESTIGATION -- A fact finding assessment that occurs when an allegation of child maltreatment is received. Completion is reached when a determination is made concerning the allegations.

COURT-APPOINTED SPECIAL ADVOCATE (CASA) – Volunteer appointed by the court to advocate for the best interest of juveniles in dependency-neglect proceedings.

CUSTODIAN – A person (not a parent or legal guardian) who stands in loco parentis to the child OR an agency or institution given custody of a child through a court order.

DELINQUENT JUVENILE – Any juvenile:

A. Ten (10) years of age or older who has committed an act other than a traffic offense or game and fish violation, which, if the act had been committed by an adult, would subject the adult to prosecution for a felony, misdemeanor, or violation under the applicable criminal laws of this state or who has violated §5-73-119; OR
B. Any juvenile charged with capital murder or murder in the first degree, subject to extended juvenile jurisdiction.

DEPENDENT JUVENILES – Includes a child:

A. Whose parent is in the custody of the Department of Human Services;
B. Whose parent or guardian is incarcerated for a reason unrelated to the health, safety, or welfare of the child and the parent or guardian has no appropriate relative or friend willing or able to provide care for the child;
C. Whose parent or guardian is incapacitated, whether temporarily or permanently, such that the parent or guardian cannot provide care for the juvenile and the parent or guardian has no appropriate relative or friend willing or able to provide care for the child;
D. Whose custodial parent dies and no stand-by guardian exists;
E. Who is an infant relinquished to the custody of DHS for the sole purpose of adoption;
F. Who is a safe haven baby. (Safe Haven Act–2001);
G. Who has disrupted his or her adoption, and the adoptive parents have exhausted resources available to them; or,
H. Who has been a victim of human trafficking as a result of threats, coercion, or fraud without the knowledge of the parent.

DEPENDENT-NEGLECTED JUVENILE – Any juvenile who is at substantial risk of harm as a result of the following acts or omissions to the juvenile, a sibling, or another juvenile:

A. Abandonment
B. Abuse
C. Sexual abuse
D. Sexual exploitation
E. Neglect or parental unfitness or being present in a dwelling or structure during the manufacture of methamphetamine with the knowledge of his/her parent, guardian, or custodian, or

F. Human trafficking if they parent knew or should have known the child was a victim of human trafficking as a result of threats, coercion, or fraud.

DEVIATE SEXUAL ACTIVITY -- Any act of sexual gratification involving:

A. The penetration, however slight, of the anus or mouth of one person by the penis of another person; or
B. The penetration, however slight, of the labia majora or anus of one person by any body member or foreign instrument manipulated by another person.

DOMESTIC ABUSE -- Physical harm, bodily injury, assault or the infliction of fear of imminent physical harm, bodily injury or assault between family or household members; OR any sexual conduct between family or household members, whether minors or adults, which constitutes a crime under the laws of this state. "Family or household member" means spouses, former spouses, parents and children, persons related by blood within the fourth degree of consanguinity, any child residing in the household, persons who are presently or in the past resided or cohabited together and persons who have or have had a child in common.

EXEMPTED FROM TRUE DUE TO RELIGIOUS EXEMPTION -- Determination will be entered when the parent's decision to withhold medical treatment is based solely upon a religious belief, and the child is furnished with treatment by spiritual means alone, through prayer, in accordance with a recognized religious method of healing by an accredited practitioner. Such prohibition shall not limit the administrative or judicial authority of the State to ensure that medical services are provided to the child when the child's health requires it.

FAMILY -- A spouse, parent, child, sibling, or a person related by consanguinity to another person.

FAMILY IN NEED OF SERVICES (FINS) – Any family whose juvenile evidences behavior which includes, but is not limited to, the following:

A. Being habitually and without justification absent from school while subject to compulsory school attendance;
B. Being habitually disobedient to the reasonable and lawful commands of his parent, guardian, or custodian; OR
C. Having absented himself from the juvenile's home without sufficient cause, permission, or justification.

FAST TRACK -- Fast track implies that reunification services will not be provided or will be terminated before 12 months of services.

FEDERAL ADOPTION SUBSIDY IV-E -- Payments for a child who is categorized as IV-E (TEA/TANF, SSI-AB or SSI-AD) at the time of placement for adoption by the Division and who meets other defined special needs characteristics if it has been documented that a reasonable effort has been made to place the child without the benefit of subsidy.

FICTIVE KIN - Persons not related by blood or marriage but who have a strong, positive emotional tie to the child, and have a positive role in the child's life such as, godparents, neighbors, or family friends

FORCIBLE COMPULSION – Any act of physical force or intimidation, or any threat, express or implied, of death, physical injury, rape, sexual abuse or kidnapping of anyone committed against that person's will. The age, developmental stage and stature of the victim and the relationship of the victim to the assailant, as well as the threat of deprivation of affection, rights and privileges from the victim by the assailant, shall be considered in weighing the sufficiency of the evidence to prove compulsion.

GUARDIAN -- Any person, agency or institution so appointed by a court.

HOLISTIC -- View of the family and accompanying circumstances that take into consideration the entire family. This view includes the psychological, sociological, physical, and environmental factors which influence the functioning of the family.

HOME ASSESSMENT – The mutual selection process that involves several components including, but not limited to, an in-home consultation visit, background checks, pre-service training, a home study, and ongoing consultation with the prospective foster/adoptive parents to ensure that applicants meet all appropriate criteria related to both compliance and quality.

HOME STUDY – The specific interviewing and reporting tool used to determine if a family is ready, willing, and able to become a suitable and safe placement resource for a child. The home study must evaluate a family's dynamics in areas including, but not limited to, motivation for wanting to foster, health, education, lifestyle, daily schedules, parenting practices, support systems, and personal histories. It shall include a Vehicle Safety Check on all applicable household members, a Child Maltreatment Central Registry Check on all members of the household age 14 or older, excluding children in foster care, and an Arkansas State Police Criminal Record Check and a fingerprint-based FBI Criminal Background Check on all members of the household age 18 and one-half years or older, excluding children in foster care.

HOUSEHOLD MEMBER -- A resident of the home who:

A. owns or is legally responsible for paying rent on the home (household head); or,
B. is in a close personal relationship with a household head; or,
C. is related to a household head or a to person in a close personal relationship with a household head.
D. Any household member who resides in the home for more than 3 cumulative months in a calendar year (e.g. an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for 6 weeks twice a year) must clear the following background checks: Arkansas Child Maltreatment Central Registry, Arkansas Adult Maltreatment Central Registry, Arkansas State Police Criminal Record Check, and FBI Criminal Background Check.

ICPC -- The Interstate Compact on the Placement of Children is a legislative-enacted agreement currently entered into by all 50 states. It is used to move children in need of placement, treatment or adoption across state lines.

INACTIVE -- The child maltreatment assessment cannot be completed.

INDECENT EXPOSURE -- Exposure by a person of the person's sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or of any other person under circumstances in which the person knows the conduct is likely to cause affront or alarm.

INDEPENDENCE – Permanency planning hearing disposition known as Another Planned Permanent Living Arrangement (APPLA) for the juvenile who will not be reunited with his or her family and because another permanent plan is not in the juvenile's best interest.

JUVENILE -- A person who is between birth and age 18.

LAW ENFORCEMENT AGENCY -- Any police force or organization whose primary responsibility as established by law or ordinance is the enforcement of laws of this state and is staffed 24 hours a day.

MAINTENANCE SUBSIDY -- Established monthly payment to cover the costs of maintaining and providing for the basic needs of the child in an adoptive placement on a regular basis. The payment is not to exceed the child's foster care board rate which is in effect at the time the adoption subsidy is approved. The amount may increase in subsequent approvals depending on the child's age.

MANDATED REPORTER -- Individuals identified in the "Child Maltreatment Reporting Act" who must immediately notify the Child Abuse Hotline or law enforcement if they have reasonable cause to suspect that a child has been subjected to or died from child maltreatment, or who observe the child being subjected to conditions or circumstances which would reasonably result in child maltreatment. These individuals include:

AR State Police Crimes Against Children Division (CACD) Employee
Attorney ad litem in the course of his or her duties as Attorney ad litem
Child abuse advocate or volunteer
Child advocacy center employee
Child Care center worker
Child Care worker
Child safety center employee
Child welfare ombudsman
Clergyman*
Coroner
Court Appointed Special Advocate (CASA) program staff or volunteer
Dental hygienist
Dentist
Department of Human Services employee
DHS contractor when acting within the scope of his or her employment
Domestic abuse advocate
Domestic violence shelter employee
Domestic violence volunteer
Employee of a reproductive health care facility
Employee working under contract for the Division of Juvenile Services
Foster care worker
Foster parent
Judge
Juvenile intake or probation officer
Law enforcement official
Licensed nurse
Medical personnel who may be engaged in admission, examination, care, or treatment of persons
Mental health paraprofessional
Mental health professional
Osteopath
Peace officer
Physician
Prosecuting attorney
Rape crisis advocate or volunteer
Resident intern
School counselor
School official**
Sexual abuse advocate or volunteer
Social worker
Surgeon
Teacher
Victim assistance professional or volunteer

Victim/witness coordinator

Volunteer at a reproductive healthcare facility

*Clergyman includes a minister, a priest, rabbi, accredited Christian Science practitioner, or other similar functionary of a religious organization, or an individual reasonably believed to be so by the person consulting him, except to the extent he has acquired knowledge of suspected maltreatment through communications required to be kept confidential pursuant to the religious discipline of the relevant denomination or faith, or he received knowledge of the suspected maltreatment from the offender in the context of a statement of admission.

**"School Official" means any person authorized by a school to exercise administrative or supervisory authority over employees, students, or agents of the school. A volunteer exercising administrative or supervisory authority in a program conducted by a school is also considered a school official.

MEDICAL PROVIDER – Any emergency Department of a hospital licensed under § 20-9-214.

NEGLECT -- Acts or omissions of a parent, guardian, custodian, foster parent, or any person who is entrusted with the juvenile's care by a parent, custodian, guardian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible under state law for the juvenile's welfare, but excluding the spouse of a minor and the parents of a married minor, which constitute:

A. Failure or refusal to prevent the abuse of the child when the person knows or has reasonable cause to know the child is or has been abused;
B. Failure or refusal to provide the necessary food, clothing, or shelter, or medical treatment necessary for the child's well-being, except when the failure or refusal is caused primarily by the financial inability of the person legally responsible and no services for relief have been offered;
C. Failure to take reasonable action to protect the child from abandonment, abuse, sexual abuse, sexual exploitation, neglect, or parental unfitness where the existence of such condition was known or should have been known;
D. Failure or irremediable inability to provide for the essential and necessary physical, mental, or emotional, needs of the child, including the failure to provide a shelter that does not pose a risk to the health or safety of the child;
E. Failure to provide for the child's care and maintenance, proper or necessary support, or medical, surgical, or other necessary care;
F. Failure, although able, to assume responsibility for the care and custody of the child or participate in a plan to assume such responsibility;
G. Failure to appropriately supervise the child that results in the child being left alone at an inappropriate age creating a dangerous situation or a situation that puts the child at risk of harm; or, in inappropriate circumstances creating a dangerous situation or a situation that puts the child at risk of harm;
H. Failure, regardless of whether the parent, guardian, custodian, foster parent, or any person who is entrusted with the child's care, etc. is present, to appropriately supervise the child that results in the child being placed in inappropriate circumstances creating a dangerous situation or in a situation that puts the child at risk of harm;
I. Failure to ensure a child between six (6) and 17 years of age is enrolled in school or is legally being home schooled or as a result of an act or omission by the child's parent or guardian, the child is habitually and without justification absent from school.

NEWBORN - An infant who is 30 days of age or younger (Garrett's Law, A.C.A. §9-9-702)

NON-ACCIDENTAL OR ABUSIVE HEAD TRAUMA - Form of inflicted head trauma that can be caused by direct blows to the head, dropping or throwing a child, or shaking a child. Shaken Baby Syndrome may be a component of non-accidental or accidental head trauma.

NON-RECURRING ADOPTION EXPENSE SUBSIDY -- Payment for non-recurring adoption expenses incurred in the adoption of a child with special needs and is limited to $1,500 per child. Payment will be made to or on behalf of parents who have adopted or have accepted placement for the purpose of adoption.

ORDER OF LESS THAN CUSTODY – A court order that DCFS may seek when there are protection issues regarding a child whose health or physical well-being is in immediate danger, but the Division does not want to seek custody.

OUT-OF-HOME PLACEMENT - Placement in a home or facility other than placement in a youth services center, a detention facility, or the home of a parent or guardian of the juvenile; or placement in the home of an individual other than a parent or guardian, not including any placement where the court has ordered that the placement be made permanent and ordered that no further reunification services or six-month reviews are required.

OUTPATIENT MENTAL HEALTH EMERGENCY – Defined by the Community Mental Health Center's actions and protocol, including, but not limited to, facilitation of admission to a hospital or other appropriate 24-hour treatment facility.

PARENT -- Biological mother, an adoptive parent, a man to whom the biological mother was married at the time of conception or birth or has been found by a court of competent jurisdiction to be the biological father of the juvenile.

PERMANENT CUSTODY – Custody that is transferred to a person as a permanent disposition in a juvenile case and the case is closed.

POLICY WAIVER – a request to deviate from DCFS policy, procedures or standards. The DCFS Director approves all policy waiver requests.

PORNOGRAPHY -- Obscene or licentious material, including pictures, movies and videos. Applying contemporary community standards, the material will be considered pornographic if an average person would find that the material taken as a whole, appeals to the prurient interest or if the material depicts in a patently offensive way sexual conduct. The material must lack serious literary, artistic, political or scientific value to be considered pornographic.

PREPONDERANCE OF THE EVIDENCE – Evidence which is of greater weight or more convincing than the evidence which is offered in opposition to it; that is, evidence which as a whole, shows that the fact to be proved is more probable than not.

PROTECTION PLAN – A written plan developed by the Division in conjunction with the family and support network to protect the juvenile from harm and which allows the juvenile to remain safely in the home.

PSYCHIATRIC CRISIS – Any condition requiring greater than routine services but requiring less than hospitalization; a condition that is not homicidal or suicidal, or if it is, one that can be handled with a no-harm contract and/or a viable plan for safety.

PUTATIVE FATHER – A man who claims or is alleged to be the biological father of a juvenile but has not been so deemed or adjudicated by a U.S. court.

REASONABLE EFFORTS - Efforts to

1. Maintain the family unit and prevent the unnecessary removal of a child from his/her home, as long as the child's safety is assured;
2. Effect the safe reunification of the child and family (if temporary out-of-home placement is necessary to ensure the immediate safety of the child);
3. Make and finalize alternate permanency plans in a timely manner when reunification is not appropriate or possible.

If continuation of reasonable efforts as listed above is determined to be inconsistent with the permanency plan for the child, reasonable efforts are made to place the child in a timely manner in accordance with the permanency plan including, if appropriate, through an interstate placement, and to complete whatever steps are necessary to finalize the permanent placement of the child. They also include efforts made to obtain permanency for a child who has been in an out-of-home placement for more than 12 months or for 15 of the last 22 months.

RECEIVING PARTY -- Local agency, office, facility, or individual who will be supervising a child placed into a state under the provisions of the ICPC.

RECEIVING STATE -- State to which a child is sent for supervision under the provisions of the ICPC.

RELATIVE (FOR PROVISIONAL FOSTER HOMES) - A person within the *fifth* degree of kinship by virtue of blood or adoption (A.C.A. 9-28-402(18) & the Child Welfare Licensing Act). The fifth degree is calculated according to the child.

RELATIVE (FOR NOTIFICATION PURPOSES ONLY) - A person within the *third* degree of kinship by virtue of blood or adoption.

ROOMER/BOARDER -- A person to whom a household furnishes lodging, meals, or both, for a reasonable monthly payment; and is not a household member.

SAFEGUARD MEASURE – If, at any time during the foster/adoptive family application process, a Resource Worker or Adoption Specialist determines that any aspect of the home does not meet Minimum Licensing Standards or DCFS policy requirements, the prospective foster or adoptive family may be asked to implement a safeguard measure to ensure the home is safe and in compliance with policy and licensing standards. The safeguard measure must be implemented before the family can be approved as a foster or adoptive home.

SAFETY PLAN -- Court ordered plan developed for a moderate or high risk adjudicated delinquent sex offender - not to be confused with a plan put in place as part of a child maltreatment investigation to protect the child.

SCHOOL -- Any: (1) Elementary school, junior high school, or high school; (2) Technical institute or post-secondary vocational-technical school; or, (3) Two-year or four-year college or university.

SENDING PARTY -- Local agency, office, facility, court or individual who has custody/jurisdiction of a child and has requested or arranged for an out-of-state placement the provisions of ICPC.

SEXUAL ABUSE – Any of the following acts committed:

A. By a person 14 years of age or older to a person younger than 18 years of age:
   1) Sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
   2) Attempted sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
   3) Indecent exposure or forcing the watching of pornography or live sexual activity
B. By a person 18 years of age or older to a person not his or her spouse who is younger than 16 years of age:
   1) Sexual intercourse, deviate sexual activity or sexual contact
   2) Attempted sexual intercourse, deviate sexual activity or sexual contact
C. By a caretaker to a person younger than 18 years of age:
   1) Sexual intercourse, deviate sexual activity or sexual contact
   2) Attempted sexual intercourse, deviate sexual activity or sexual contact
   3) Forcing or encouraging the watching of pornography
   4) Forcing, permitting or encouraging the watching of live sexual activity
   5) Forcing listening to a phone sex line
   6) Committing an act of voyeurism
D. By a person younger than 14 years of age to a person younger than 18 years of age:

1) Sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
2) Attempted sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion

SEXUAL CONTACT --Any act of sexual gratification involving the touching, directly or through clothing, of the sex organs, buttocks, or anus of a person or the breast of a female; the encouraging of a child to touch the offender in a sexual manner; or the offender requesting to touch a child in a sexual manner. Normal affectionate hugging is not construed as sexual contact.

SEXUAL EXPLOITATION -- Allowing, permitting, or encouraging participation or depiction of the juvenile in prostitution, obscene photographing, filming, or obscenely depicting a juvenile for any use or purpose.

SIGNIFICANT OTHER – A person with whom the parent shares a household or who has a relationship with the parent that results in the person acting in place of the parent with respect to the parent's child or children, regardless of living arrangements.

SPECIAL NEEDS CHILD -- A child who is free for adoption and belongs to a group of children for whom the Division does not have an adequate resource of approved applicants to provide a pool of available waiting adoptive families. Other children may be eligible for adoption assistance under this category if they have severe medical or psychological needs that require ongoing rehabilitation or treatment. These children include:

A. a Caucasian child nine years or older,
B. a healthy child of color who is two years or older,
C. a member of any sibling group being placed together who share at least one biological parent and who have either lived together or otherwise developed a bond prior to adoptive placement, and the child is:
D. legally free for adoption with parental rights terminated,
E. under 18 years old and whose adoption has not been finalized prior to approval of the subsidy,
F. (for the purposes of a State Subsidy only), in DHS custody, or
G. a member of a Non-Custody/Out-of-Home Placement Services case, or
H. (For the purposes of private and independent adoptions only), who is SSI eligible at the time the adoption petition is filed.

SPECIAL SUBSIDY -- A payment to provide for the costs of special services related to the child's needs which cannot be met by the adoptive parent. It may include, but not be limited to, legal/medical/psychological/therapy services and corrective appliances – not to include orthodontic corrective appliances.

STATE ADOPTION SUBSIDY -- Payments for a child who is not categorized as IV-E or SSI eligible at the time of placement for adoption by the Division. Such a child, who meets other defined special needs characteristics, may be eligible for subsidized adoption from state moneys if it has been documented that a reasonable effort has been made to place the child without the benefit of an adoption subsidy. A child must be in DHS custody to be eligible for a State funded subsidy.

STATE LEGAL SUBSIDY – OCC legal services provided for children in DHS custody and non-custody/out-of-home placement in order to finalize an adoption. A legal subsidy **does not** include the use of a private attorney. The children are eligible for a legal subsidy whether or not they meet the criteria for special needs and without regard to eligibility to IV-E, state maintenance subsidy, or non-recurring subsidy.

SUBJECT OF THE REPORT -- The alleged offender, the custodial and non-custodial parent, guardian and legal custodians of the child who are subject to suspected maltreatment, and the child who is the subject of suspected maltreatment.

SUPERVISION -- Involves periodic visitation to the home, school, or other places to monitor or observe a child's situation or condition. This service also may include arrangement and observation of visitation.

TEMPORARY CUSTODY – Custody that is transferred to a person during the pendency of the juvenile court case when services are being provided to achieve the goal of the case plan.

TEMPORARY PLACEMENT – Placement intended to be temporary (e.g., emergency shelter) until a stable placement can be located for the child in accordance with Division policy.

TRIAL PLACEMENT -- The custody of the child remains with DHS but the child is returned to the home of a parent or the person from whom custody was removed for a period not to exceed 60 days.

TRUE -- Determination when the allegation of child maltreatment is supported by a preponderance of the evidence.

UNDERAGED JUVENILE OFFENDER – Any child younger than 14 years of age for whom a report of sexual abuse has been determined to be true for sexual abuse to another child.

UNSUBSTANTIATED -- Determination when the allegation of child maltreatment is not supported by a preponderance of the evidence.

VOYEURISM -- Looking, for the purpose of sexual arousal or gratification, into a private location or place in which a child may reasonably be expected to be nude or partially nude.

APPENDIX 2: ADOPTIONS

03/2018

GUIDELINE FOR AN ADOPTION SUMMARY- DETAILED HEALTH HISTORY AND GENETIC AND SOCIAL HISTORY

Before placement for adoption, the Division shall compile and provide to the prospective adoptive parents a detailed, written health history and genetic and social history of the child which excludes information which would identify birth parents or members of a birth parent's family. The detailed, written health history and genetic and social history shall be set forth in a document that is separate from any document containing information identifying the birth parents or members of the birth parent's family. The detailed, written health history and genetic and social history shall be clearly identified as such and filed with the clerk before the entry of the adoption decree. Upon order of the court for good cause, the clerk may tender to a person identified by the court a copy of the detailed, written health history and genetic and social history.

Adoption Summary of Child

A. Birth Information: Prenatal care, birth date, measurements at the time of birth, a description of the delivery, any complications that occurred, alcohol/drug and tobacco involvement of birth parent during pregnancy and how it affected the infant, and any birth defects. Describe the nursery progress, discharge weight and recommendations of the doctor on discharge and results of any special health screenings/tests.
B. Physical Description: Race, weight, height, hair and eye color, complexion, birthmarks, and bone structure. Describe any physical disabilities.
C. Developmental and Social History: Social, intellectual, emotional and physical development of the child, noting any delays/limitations. Early developmental milestones should be discussed. For example:

Cognitive Development

1) Recognition of significant others
2) Comprehension of fact vs. fantasy
3) Language development
4) Comprehension of concepts such as time, space, quantity, etc.

Motor Development

1) Head control
2) Kicking -- pushing feet
3) Lifting chest
4) Rolling over
5) Holding toys
6) Reaching for objects
7) Waving bye-bye
8) Sitting up
9) Eye movements
10) Walking
11) Crawling
12) Running
13) Coordination
14) Ability to skip
15) Ability to catch ball

Social/Emotional Development

1) Smiling - Laughing
2) Cooing
3) Ability to respond appropriately in social situations
4) Self-help skills

D. Health History:
   1) Medical history (diseases, conditions, disabilities, allergies, hospitalizations, serious injuries etc.), present problems/needs, future problems/needs
   2) Genetic history
   3) Dental history, present problems/needs, future problems/needs
   4) Mental health history, present problems/needs, future problems/needs
   5) Type of mental health counseling and frequency of sessions
   6) Sickle cell test results for a child with African American heritage
   7) Medications (name, dosage, and reason)
   8) Status of immunizations
   9) How health problem affects child's life
   10) Child's attitude about health problems
   11) List of special health care providers and frequency of appointments
   12) Parental demands in relation to providing for child's special health care needs
   13) Special appliances necessary to meet special needs
   14) Statement whether female's menstrual periods have begun, feelings about, hygiene practices, any complications
   15) Statement whether male is circumcised

E. Personality: general personality; for example, quiet, outgoing, withdrawn, depressed, angry, sad, happy, alert, shy, talkative, questioning, active, etc.
   1) Interests, likes, dislikes, talents, special skills
   2) Causes of depression and how expressed
   3) Causes of anger and how expressed
   4) What makes child happy
   5) How child gives and receives love/affection
   6) Child's self-esteem
   7) How child relates to adults, peers, younger and older children
   8) How child relates to siblings
   9) Type of people the child likes/dislikes
   10) Description of what is enjoyable about parenting the child
   11) Description of what is difficult about parenting the child
   12) Child's hopes, wishes, and desires
   13) Fears and worries
   14) How child relates to parental/authority figures
   15) Behavioral problems (state whether child has displayed: lying, stealing, fire setting, running away, aggression, destruction, withdrawal, bed wetting, encopresis, self-harm, suicide attempts, depression, abusiveness to animals, cursing, defiance, sexual acting out (be specific), alcohol/substance abuse, etc. and, if so, explain)
   16) How easy or difficult is the child to discipline -- what works, what doesn't
   17) How child responds to discipline; what rules is the child accustomed to following
   18) What rules are easy for the child to comply with, and which ones are difficult for the child
   19) Eating habits (ability to feed self, table manners, food likes/dislikes)
   20) Sleeping habits (bedtime routine, nightmares, night light, sleeping difficulties, etc.)
   21) Grooming/hygiene habits
   22) How child cares for belongings
   23) How child relates with pets/animals
   24) Smoking practices (if tobacco products are used)
   25) Play habits
   26) Child's behavior in social situations such as church, restaurants, department stores, etc.
   27) Knowledge child has about sex
   28) Experience with sex

F. Daily Schedule:
   1) Birth to one-year old -- Give detailed information regarding schedule. For example, when discussing sleeping, indicate not only the times the child sleeps but the length of naps; whether child is rocked, patted, etc., to sleep; whether child sleeps with a special blanket, pacifier, or toy; type of bed child sleeps in and the position child prefers to sleep in (i.e., stomach, back, etc.). Indicate the types of food the child likes/dislikes and the amount child eats and intervals between meals. Include the name of the formula.
   2) Over one-year old -- Briefly describe the child's general schedule on a typical day. Indicate whether the child follows a daily routine or has a flexible schedule.
G. Clothing:
   1) Sizes of clothing and shoes
   2) Type/preference of clothes
   3) Amount of clothing
   4) Quality of clothing (good condition, worn, etc.)
   5) Any special requirements in relation to clothing
H. Out-of-Home Placement Experiences:
   1) Date child entered Out-of-Home Placement and for what reasons
   2) Describe any child maltreatment and who was offender
   3) Statement as to how many foster homes and/or institutions child has lived in and length of time in each placement
   4) Description of reasons for moving from each foster home and/or institution
   5) Brief profile of current foster family or institutional setting -- for example, foster family composition and life style
I. School Experiences:
   1) Description of the type of school the child is attending -- for example, public school, special school (school for the deaf, blind, etc.) And whether resource classes/special education classes are utilized and its schedule (whole day, half day, or certain classes)
   2) Grade level
   3) History of school attendance (past and present)
   4) Experience with schools; for example, accomplishments, problems, etc.
   5) Attitude towards school
   6) Best subject areas as well as weak areas
   7) Relationship with school mates and teachers
   8) How teachers view child
   9) Involvement with school activities, clubs, sports, band, etc.
   10) Potential in relation to school
   11) Attitude towards homework
J. Siblings: Provide a brief description which includes first name, birth date, living arrangement and sibling status (full sibling, half sibling, step sibling, etc.). If siblings are not placed together, explain frequency of contacts.

Birth/Legal Parent(s):

Discuss each parent separately. Obtain as much information about the parents as possible. Be objective with descriptions of the parents and give factual information about them. Do not make derogatory remarks.

A. Physical and Personality Description: Include race, ethnic background, age, height, weight, eye and hair color, complexion, bone structure, outstanding features, general appearance, and dominant physical traits within the larger family group. Describe personalities and any special talents, interests or hobbies.
B. Health: Discuss any medical and mental illnesses, genetic history, allergies, alcohol/substance abuse and/or physical disabilities. Discuss any medical and mental illnesses within the extended birth family including those of a hereditary nature. Discuss any history of neglect, physical abuse and/or sexual abuse within the extended family. Discuss any alcohol/substance abuse within the extended family. If the birth/legal parent is deceased, state the cause and date.

C. Education: State highest educational level achieved. Discuss overall academic performance, best and weak subjects, and extracurricular activities. Discuss any mental retardation and/or learning disabilities in relation to the birth parent(s) and the extended birth family.
D. Religion: Provide information about religious affiliation.
E. Employment: Describe employment history.
F. Other Significant Information:
   1) Birth family's lifestyle
   2) History of criminal behavior
   3) Reasons child can't return to birth/legal family
   4) Date child last had contact with birth/legal family, type of contact, and reaction

Preparation of the Child for Adoption

A. Dealing with Birth/Legal Family Issue
   1) Reasons child gives for entering Out-of-Home Placement
   2) Reasons child has been given for entering Out-of-Home Placement
   3) Reason child gives why the child cannot return home
   4) Reason child was given why the child cannot return home
B. Child's feelings about not returning home
C. Dealing with Out-of-Home Placement Issues
   1) Reasons child gives for placement changes while in Out-of-Home Placement
   2) Child's feelings about Out-of-Home Placement experiences and placements
D. Dealing with Adoption Issues
   1) Child's understanding about the difference in birth/legal family, foster family, and adoptive family
   2) Child's feelings about accepting an adoptive family's last name
   3) Child's understanding of the adoption process (selection of a family, pre-placement visits, post-placement visits, etc.)
   4) Child's feelings, fears and worries about adoption
   5) Child expectations about adoption/an adoptive family
   6) Child's preferences in relation to an adoptive family

Recommendations

A. The Adoption Specialist may describe the type of family the child needs and state if the child should not be placed in a certain location due to proximity to birth/legal parents/relatives.
B. The Adoption Specialist may request the child be placed in a home of the same racial or ethnic heritage if indicated by an individualized determination that this placement is needed to advance the best interests of the child.
C. If there are siblings, the Adoption Specialist will explain whether they should be placed together. If separation is recommended, reasons will be stated.
D. The Adoption Specialist may state preferences in relation to pre-placement visits between the child and an adoptive family.

APPENDIX 3: FOSTER HOME RECORDS

03/2018

Special divided folders will be used for the case records of foster homes. When a foster home is approved, the foster home record should include the items listed below. All documents should be filed in chronological order with the most current on top.

Front left:

- Approval or Denial Letter
- CFS-475-A: Initial Approval Checklist for Foster Home Record
- Verification of marriage and/or divorce, if applicable
- All Records Checks:
  - Results of the CFS-316: Child Maltreatment Central Registry Check for each applicable household member, all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determinations
  - CFS-341: Certification of Absence of Criminal Record, if children age of 10 thru 17 reside in the household
  - Results of the CFS-342: State Police Criminal Record Check for each applicable household member, all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determination
    - Results of the FBI Criminal Background Check for each applicable household member, all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determinations
    - Results of the ASVSP check for each foster parent and applicable teenage driver
      - Copy of driver's license for each applicable driver
      - Documentation of current auto insurance
- CFS-446: In-Home Consultation Visit Report
- CFS-363: Foster Applicant Smoking Certification
- CFS-404: General Medical Report
- Current immunization records for all children in the home
- Documentation of current rabies vaccinations for all household pets
- CFS-409: Foster Family Preference Checklist
- CFS-455: Request/Consent for Health Department Services, when appropriate

- CFS-480: Alternate Compliance of Water Supply Agreement, when appropriate
- CFS-484: Landlord Notification of Potential Tenant Foster Care Services, when appropriate
- Written approval from Fire Department for approved alternate escape route, when appropriate
- Current floor plan
- Documentation of homeowner's or renter's insurance and general liability insurance
- Written approval from the owner of the home that the applicants may care for children in foster care, when appropriate
- Three completed, positive SAFE reference letters
- SAFE Home Study Final Report and supporting documents (e.g. SAFE Questionnaires I & II, Psychosocial Inventory)
- Alternative compliance and/or policy waiver approval, if applicable
- Current certification in CPR and Standard First Aid
- Summary with Recommendations
- CFS-462: Initial Foster Home Agreement
- CFS-462-A: Foster Home Agreement Addendum on each child currently placed in the home
- CFS-474: Provisional Foster Home Orientation Checklist (for provisionals only)
- CFS-452: Provisional Foster Home Verification (for provisionals only)

Front Right:

- Placement history

Center Left:

- CFS-475-B: Quarterly Monitoring Checklist for Foster Home
- Any documentation gathered during the quarterly visit

Center Right:

- Letter of Notification of Disposition of Reevaluation or of Closure
- CFS-475-C: Reevaluation Checklist for Foster Home
- Any documentation gathered during the reevaluation visit (e.g. updated auto insurance, updated CPR certificate, etc.)
- CFS-451: Foster Parent Reevaluation

- SAFE Update Report
- Documentation of 15 hours of continuing education
- Documentation of quarterly emergency evacuation drills
- CFS-475-G: Checklist for Foster Home Closure, when appropriate
- Reevaluation Summary or Closure Summary

Back Left:

- CFS-475-D: Transfer of a Foster Home to Another County, when appropriate
- CFS-475-E: Complaint Against Foster Family Other Than Maltreatment, when appropriate
- CFS-475-F: True Reports of Child Maltreatment Against Foster Family Members, when appropriate

Back Right:

- CFS-419: Foster Family Support System Information
- Current results of all applicable background checks for FFSS members

APPENDIX 4: CASE RECORD ORDER (Out-Of-Home Placement Cases)

03/2018

The Family Service Worker shall maintain and organize the current case record on every child in foster care in his caseload. Policy I-E: Official Record Keeping & Access to Official Records, states that a hard copy file of case information will be maintained for data not in CHRIS. Hard copy files will be created, if necessary for case review. The following is the case record order to maintain files on information not in CHRIS. This case record order will also be used when hard copy files are created for case review.

Front Left Legal Section
Original Birth Certificate
Social Security Card SS-5
Affidavit (including protection plan and TDM if applicable)
Petitions
Emergency Order
Summons
Warning Orders
Adjudication Order
6 Month Review Orders
Order Terminating Parental Rights and Granting to DHS the Power to Consent to Adoption
Court Reports (including attachments) for all hearings
Photograph of Child printed from CHRIS
Blue Face Sheet

Order Terminating Parental Rights (if applicable), next to the top, then most current court order followed by all legal documents related to that order (i.e., petition, warning orders, summons, etc.). Other information behind this is filed in chronological order with the most current on top. Behind each court order, file all legal documents and court reports related to the order. Blue face sheet should be on top of all records in this section and readily visible when the file is open.

Front Right CANS/FAST, Case Plans
Any FSNRA or Case Plans prior to CANS/FAST
CANS/FAST signed by family members, stakeholders, and parties to the case
CFS-6010: Case Plan signed by family members, stakeholders, and parties to the case
Transitional Plan (if applicable)

Order: filed in chronological order with the most current on top.

Center Left Contacts
Documentation of Efforts to Locate Family (i.e. Lexis Nexis search results)
Handwritten Contact Sheets (home visiting forms) signed by family members who were present during visit
Handwritten Notes pertaining to the case (including phone messages)
Printed CHRIS Contacts (printed for IV-E Review only)

Order: File in chronological order with the most current on top.

Center Right Correspondence
CFS-590: Invitation to Family Centered Meeting
Email verification of distribution of 590, CANS/FAST, Case Plan and Court Reports
Emails and Faxes
Incident Reports (use IRIS link on DHS Share)
Letters/Memos
Release of Information

Order: Releases of Information should be grouped on the bottom. Other documents should be filed in chronological order with most current on top.

Back Left Medical and Educational
CFS-352: Medical, Dental, Vision, Hearing and Psychological Episodic Form
CFS-353: Past Medical History Records Requested (Release of Information)
CFS-366: Health Screening/Initial Physical
CFS-368: Child Health Services Plan
CFS-456: Birth Family Background
Comprehensive Assessment Report (UAMS, PACE)
Drug Screens
Medication Logs
Placement Reports (TFC, Group Home, Residential Care)
Provider Reports (Parenting, Anger Management)
Psychological Evaluations
School Records (Report Cards, IEP, Educational Testing Reports, Early Intervention Assessments, etc.)

Order: Child's medical record on top; others intermixed with most current on top.

Note: Educational records and reports for each age appropriate child, not just those children with special educational needs, shall be filed in the foster child's case record. Reports and records include report cards, Individual Education Plan (IEP), etc.

Back Right Forms and Financial
CFS Numbered Forms (Without Specification for other Filing Instructions)
CFS-334: Authorization for Billing (Only for payments from Child's Trust Account)
Encumbrance and Service Referral Paperwork
Medicaid Application
Medical Bills
Medical Passport
Social Security Card Application
Supervisory Review Forms

Order: Intermixed with most current on top.

APPENDIX 5: PROTOCOL FOR FAMILY SERVICE WORKERS - Responding To Methamphetamine and Meth Lab Exposure of Children

06/2004

The Family Service Worker will:

A. If discovering a meth lab or suspecting the presence of chemicals being used to make methamphetamine during a home visit or child maltreatment investigation, leave the house, depart the immediate area, contact law enforcement and call the Hotline to report the child maltreatment.
B. Remain away from the house until after law enforcement has responded to the call and secured the house and the people inside.
C. Advise the law enforcement officers about any children that are in the house.
D. Do not enter the house as there may be a risk of self-contamination.
E. If called to a meth lab site by law enforcement, respond to the call, but not enter the house.
F. Be sure to put on a pair of disposable Nitrile gloves.
G. When the child(ren) are brought out of the house, touch them only with gloved hands. Discuss with law enforcement the children's estimated level of contamination and what degree of decontamination is needed.
H. If the law enforcement officers or other personnel at the scene have decontamination equipment, allow them to decontaminate the children. If there is no decontamination equipment on site, drape a non-contaminated material (e.g., blanket or plastic) around the child(ren) like a cape, head to foot before placing the children in any vehicle. (the FSW will keep a blanket or plastic sheeting in his or her car for use in these cases.) Ensure that the children have something on which to rest their feet.
I. Transport the child(ren) to an appropriate medical facility previously identified in the city/county where they can be medically examined, tested for exposure and decontaminated, if still necessary. Remember that part of the reason for the medical examination is to collect evidence that the children have been exposed to methamphetamine and/or the chemicals used in a meth lab.
J. When decontamination, medical testing and medical examination have been completed, follow the appropriate DCFS policies and procedures for placing the child(ren) in out-of-home care.
K. If the children have not yet been decontaminated, be sure to advise the foster parents of the immediate need to shower or bathe the children with soap and water. Also instruct the foster parents to clean their shower or bathtub with dishwashing liquid and water afterward. Advise the foster parents to dispose of the children's contaminated clothes. Do not try to wash the clothes, as this will spread the contamination.
L. Advise the foster parents of the immediate need for some new clothes since the child(ren) were not allowed to bring anything (clothes, toys, etc.) from the meth lab sight. In accordance with PUB-30: Foster Parent Handbook (see Clothing section) the Family Service Worker (FSW) will assess, with the foster parent, which items of clothing are needed and issue the authorized amount of clothing allowance. Purchases will be made using the DHS-1914 process. The FSW will accompany the foster parent to the store to approve the purchase.

APPENDIX 6: FOSTER/ADOPTIVE PARENT APPLICATION & ASSESSMENT PROCESS

* If at any point during the home assessment the Division determines that an applicant does not meet the standards or any other criteria of a quality foster home, DCFS will deny approval of the home.

APPENDIX 7: SAFEGUARDS FOR CHILD VICTIMS TESTIFYING IN JUDICIAL AND ADMINISTRATIVE PROCEEDINGS

02/2008

In order to facilitate testimony that is fair and accurate, the following safeguards should be implemented or used:

A. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel Attorney shall inform the child about the nature of the judicial or administrative proceeding in age appropriate language;
B. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney shall explain:
   1) The meaning of the oath that the child will take; and
   2) The judge's decision about whether the child understands the issues well enough and has the capacity to provide meaningful testimony;
C. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney shall explain to the child that if the child does not understand a question while testifying in the judicial proceeding or administrative proceeding, the child has a right to say that he or she does not understand the question;
D. The prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney may file a motion to have the child testify at a time of day when the child is most alert and best able to understand questions posed in court;
E. If it is in the child's best interest, the prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney may file a motion for the child to have a comfort item (favorite toy, transitional blanket) when testifying in a judicial or administrative proceeding;
F. If it is in the child's best interest, the prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney may file a motion for the child to have a support person present when the child testifies in a judicial proceeding or administrative proceeding; and
G. The prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney shall consider the effect upon the child when the child is subjected to argumentative or harassing questions and shall make the proper objections when appropriate to ensure the child is not subjected to argumentative or harassing questioning.

APPENDIX 8: ALTERNATIVE COMPLIANCE AND POLICY WAIVER PROTOCOL

08/2013

"Alternative Compliance" is defined as a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. This includes, but is not limited to, regulations governing background checks and convictions for prohibited offenses.

"Policy Waiver" is defined as a request to deviate from the letter of the DCFS Policy, and procedures or standards. The DCFS Director approves all policy waiver requests.

Traffic violations, other than DUI or DWI, do not require a policy waiver or alternative compliance as they are dealt with through the vehicle safety program. DUI and DWI violations require a Policy Waiver.

The procedures for requesting a Policy Waiver or an Alternative Compliance are the same, up until the point when the request is given to the Assistant Director of Community Services.

The procedures are as follows:

A. The FSW will determine if a Policy Waiver or Alternative Compliance should be requested based on their professional judgment. Issues to take into consideration on criminal convictions would include the time frame and circumstances of the offense. When an Alternative Compliance is requested for an excluded criminal offense, the police report and any other reports regarding any criminal charges or convictions must be attached as documentation.
B. If approval is recommended, the FSW will request a Policy Waiver or an Alternative Compliance using the CFS-509-B: Request For Alternative Compliance or Policy Waiver and will attach all appropriate supporting documentation, as applicable:
    1) Three personal references
    2) CFS-446: In-Home Consultation Visit Report
    3) Current home study, if one has been completed
    4) Copy of the Child Maltreatment Central Registry Check, State Police Criminal Record Check and/or FBI Background Check resulting in a hit
C. Within 10 business days of receipt of the request, the Supervisor will determine if the requested Policy Waiver or Alternative Compliance is appropriate for approval. Issues to take into consideration would include the time frame and circumstances of the offense.
    1) If approved, the Supervisor will send it to the Area Director.
    2) If denied, the Supervisor will notify the FSW and the family.
D. Within 10 business days of receipt of the request, the Area Director will determine if the requested Policy Waiver or Alternative Compliance is appropriate for approval. Issues to take into consideration would include the time frame and circumstances of the offense.
    1) If approved, the Area Director will send it to the Assistant Director of Community Services
    2) If denied, the Area Director will return it to the Supervisor.
    3) If denied, the Supervisor will notify the FSW and the family.

At this point, the procedures for requesting a policy waiver differ from the procedures for requesting an alternative compliance. The Assistant Director for Community Services or designee will determine if the requested Policy Waiver or Alternative Compliance should be approved or denied.

Policy Waivers

When a Policy Waiver has been requested, the Assistant Director of Community Services or designee will, within 10 business days of receipt of the request:

A. Deny any inappropriate request for a Policy Waiver and return it to the Area Director; or
B. Approve an appropriate request for a Policy Waiver and send to the DCFS Director for final approval or denial.

The Director's final decision will be conveyed to the FSW for appropriate action. The following require a Policy Waiver:

1) Any misdemeanor convictions, except for minor traffic violations
2) Driving under the influence (DUI) or Driving while intoxicated (DWI)
3) Any issues that are not in compliance with DCFS Policy

Alternative Compliance

When an Alternative Compliance has been requested, the Assistant Director of Community Services or designee will:

A. Deny any inappropriate request for an Alternative Compliance and return it to the Area Director; or
B. Approve an appropriate request for an Alternative Compliance and send it to the DCFS Director.

The DCFS Director will:

A. Deny any inappropriate request for an Alternative Compliance and return the request to the Assistant Director of Community Services, or
B. Approve the request and send it to the PRLU (Placement and Residential Licensing Unit) Manager and staff.

The Placement and Residential Licensing Unit (PRLU) Manager will:

A. Review the AC request to ensure all required documents are in the packet.
B. Request any missing documentation be submitted.
C. If all required documentation is included in the AC packet, place the AC request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board (CWARB).

The Foster or Adoptive Parent and FSW who made the original request for an Alternative Compliance will appear before the CWARB to answer questions.

The CWARB will give final approval or denial of the request for the Alternative Compliance.

The following crimes require an Alternative Compliance from the CWARB:

(A) Criminal attempt
(B) Criminal complicity
(C) Criminal conspiracy
(D) Criminal solicitation
(E) Assault in the first, second, or third degree
(F) Aggravated assault
(G) Aggravated assault on a family or household member
(H) Battery in the first, second, or third degree
(I) Breaking or entering
(J) Burglary
(K) Coercion
(L) Computer crimes against minors
(M) Contributing to the delinquency of a juvenile
(N) Contributing to the delinquency of a minor
(O) Criminal impersonation
(P) Criminal use of a prohibited weapon
(Q) Communicating a death threat concerning a school employee or student
(R) Domestic battery in the first, second, or third degree
(S) Employing or consenting to the use of a child in a sexual performance
(T) Endangering the welfare of a minor in the first or second degree
(U) Endangering the welfare of an incompetent person in the second degree
(V) Engaging children in sexually explicit conduct for use in visual or print media
(W) False imprisonment in the first or second degree
(X) Felony abuse of an endangered or impaired person

(Y) Felony interference with a law enforcement officer
(Z) Felony violation of the Uniform Controlled Substance Act
(A)(A) Financial identity fraud
(B)(B) Forgery
(C)(C) Incest
(D)(D) Interference with court ordered custody
(E)(E) Interference with visitation
(F)(F) Introduction of controlled substance into the body of another person
(G)(G) Manslaughter
(H)(H) Negligent homicide
(I)(I) Obscene performance at a live public show
(J)(J) Offense of cruelty to animals
(K)(K) Offense of aggravated cruelty to dog, cat, or horse;
(L)(L) Pandering or possessing visual or print medium depicting sexually explicit conduct involving a child
(M)(M) Sexual solicitation
(N)(N) Permanent detention or restraint
(O)(O) Permitting abuse of a minor
(P)(P) Producing, directing, or promoting a sexual performance by a child
(Q)(Q) Promoting obscene materials
(R)(R) Promoting obscene performance
(S)(S) Promoting prostitution in the first, second, or third degree
(T)(T) Prostitution
(U)(U) Public display of obscenity
(V)(V) Resisting arrest
(W)(W) Robbery
(X)(X) Aggravated robbery
(Y)(Y) Sexual offenses
(Z)(Z) Simultaneous possession of drugs and firearms
(A)(A)(A) Soliciting money or property from incompetents
(B)(B)(B) Stalking
(C)(C)(C) Terroristic act
(D)(D)(D) Terroristic threatening
(E)(E)(E) Theft of public benefits
(F)(F)(F) Theft by receiving
(G)(G)(G) Theft of property
(H)(H)(H) Theft of services
(I)(I)(I) Transportation of minors for prohibited sexual conduct
(J)(J)(J) Unlawful discharge of a firearm from a vehicle
(K)(K)(K) Voyeurism

An alternative compliance may not be requested by any individual who has pleaded guilty or nolo contendere to, or has been found guilty of any of the following offenses as he or she is permanently disqualified from being a foster or adoptive parent per A.C.A. §9-28-409(e)(1):

A. Abuse of an endangered or impaired person, if felony
B. Arson
C. Capital murder
D. Endangering the welfare of an incompetent person in the first degree
E. Kidnapping
F. Murder in the first or second degree
G. Rape
H. Sexual assault in the first or second degree

An alternative compliance may not be requested by any prospective foster or adoptive parent with a felony conviction for the following offenses, as no foster child in DHS custody may be placed in such an individual's home:

A. Child abuse or neglect
B. Spousal abuse or domestic battery
C. A crime against children, including child pornography
D. A crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery

A prospective foster or adoptive parent may request an alternative compliance for a felony conviction for physical assault, battery, or a drug-related offense if the offense was not committed within the past five years.

If an applicant produces evidence that a conviction has been expunged or sealed, this information must be forwarded to OCC for review.

A PRLU Licensing Specialist will monitor DCFS for continued compliance with CWAL standards and issue a corrective action notice if any deficiencies are found. The notice will state the agreement regarding the corrective action and a reasonable time frame for the violation to be corrected.

APPENDIX 9: ARKANSAS HEALTH AND SAFETY FACTORS

8/2013

1) Caretaker's behavior toward child (ren) is violent or out of control.
2) Caretaker describes or acts towards the child in predominantly negative terms or has extremely unrealistic expectations.
3) Caretaker caused serious physic al injury to the child or made a plausible threat to cause severe physical injury.
4) Caretaker's explanation for the injury is unconvincing.
5) The family refuses access to the child and there is reason to believe that the family is about to flee, or the child's whereabouts cannot be ascertained.
6) Caretaker has not, cannot, or will not provide supervision necessary to protect the child from potentially dangerous harm.
7) Caretaker is unwilling or unable to meet the child's needs for food, clothing, shelter, and/or medical, or mental, health care.
8) Child is fearful of the caretaker, other family members, or other people living in or having access to the home.
9) Child's physical living conditions are hazardous and immediately threatening, based on the child's age and developmental status.
10) Child sexual abuse is suspected and circumstances suggest that child safety may be an immediate concern.
11) Caretaker's current substance use seriously affects his/her ability to supervise, protect, or care for the child.
12) Caretaker fails to protect child (ren) from serious physical or threatened harm.
13) Caretaker's emotional stability seriously affects current ability to supervise, protect, or care for the child.
14) Caretaker has previously maltreated a child and the severity of the maltreatment or the caretaker's response to the previous incidents suggest that child safety may be an immediate concern.