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The CPS Mission

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

The CPS Vision

Children First: Protected and Connected

CPS Values

Respect for Culture
Inclusiveness of Families, Youth and Community
Integrity in Decision Making
Compassion for All
Commitment to Reducing Disproportionality

Single Source Continuum Contractor: 2INgage

On May 29, 2018, DFPS awarded a Community-Based Care contract to 2INgage, a partnership between Texas Family Initiative LLC and New Horizons Ranch and Center Inc. After six months of readiness activities, 2INgage began serving children and youth as the Single Source Continuum Contractor (SSCC) for the DFPS Region 2 on December 1, 2018.

Texas Family Initiative has national experience providing foster care, adoption, case management, placement, and family preservation services. New Horizons Ranch has strong community relationships with DFPS and community leaders and has experience in providing an array of quality services in Region 2.

This partnership has combined child welfare experience of more than 95 years, and is committed to the following core principles:

- Inform and empower network agencies to see themselves as part of this community and therefore take responsibility along with the community for those children.
- Inspire a more positive, performance driven system for families and children.
- Ingage community to understand that the children entering the foster care system from their community are their children.

Texas Family Initiative brings strength through their extensive national experience providing foster care, adoption, case management, placement and family preservation services, as well as providing agency oversight to ensure accountability and quality services within a provider network. The Texas Family Initiative has experience in Texas community-based care and will bring their knowledge to promote industry innovation and grow resources in the communities within Region 2. TFI Family Services, Inc. (TFI) serves as the parent company to Texas Family Initiative LLC. TFI, founded in 1965, is a multi-state child welfare, behavioral health and administrative support organization with
licenses in good standing in five states. TFI is a 501(c)(3) private, non-profit organization accredited by the Council on Accreditation (COA).

New Horizons has strong relationships with Region 2 DFPS staff, community leaders, and community providers extending over many years. They are recognized leaders in the provision of quality services and have been involved in the development of Community Based Care for more than a decade. Their strength and focus lie in their individualized and trauma-focused services for every child and family they serve, community engagement that maximizes investment in and support of children, and development of a robust network of child and family focused organizations.

Note: Some links in this document will only work for DFPS and 2INgage staff with access to the DFPS Intranet.

Community-Based Care

This operations manual gives CPI, CPS and 2INgage staff a more in-depth look at the protocols for case actions in conservatorship cases that include placement and case management services provided through Community Based Care in Region 2.

Background

Community-Based Care is a new way of providing foster care and case management services. It's a community-based approach to meeting the individual and unique needs of children, youth, and families. Within a geographic catchment area, a single contractor (officially a Single Source Continuum Contractor or SSCC) is responsible for finding foster homes or other living arrangements for children in state care and providing them a full continuum of services.

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

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

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

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

Community-Based Care Quality Indicators

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

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

Operating Policies and Rules

The protocols detailed in this operations manual are for children from Region 2 (legal county is within Region 2) placed with and/or receiving services through 2INgage as the Single Source Continuum Contractor.

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

CPS Handbook policies and DFPS and HHSC Texas Administrative Code rules, including HHSC Child Care Licensing Minimum Standards, apply to an SSCC unless specifically waived. See Foster Care Redesign Texas Administrative Code (TAC) Rules Waiver for a listing of (TAC) rules that are waived. In the case of conflict between the CPS handbook policy requirements and this Operations Manual, the Manual will govern the operations in Region 2.

If you have any questions about any information in this manual, please contact your supervisor or Kristie Cholewinski, Region 2 Community-Based Care Administrator at (325) 201-6397 kristie.cholewinski@dfps.texas.gov.

For more information about Community-Based Care, visit the DFPS Community-Based Care website.
Legal Basis for CPS and Single Source Continuum Contractor Relationship

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

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

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

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

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

History

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

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

As of December 2019, DFPS is implementing CBC in 5 catchment areas of the state: catchment areas 1 (Lubbock/Amarillo), 2 (Abilene/Wichita Falls), 3b (Fort Worth Area), 8a (San Antonio/Bexar county), and 8b (Region 8 counties surrounding Bexar county). The latest version of the statewide Implementation Plan can be found under the Implementation Process section of the Community-Based Care public site.

Authority

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

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

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

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

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

Under Texas statute, DFPS will, at a minimum:

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

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

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

Region 2 INV/FBSS staff will work directly with 2INgage upon determining that a child is entering DFPS conservatorship. This section outlines protocols for referrals for new paid placements, kinship placements and other non-paid placement settings.

INV/FBSS staff must follow CPS Handbook policy related to the assessment, consideration, and selection of the least restrictive placement for every child’s initial placement in substitute care. For more information, see CPS Handbook policies:

- 4114 Required Factors to Consider When Evaluating a Child’s Possible Placement
- 4114.4 Preference for the Least Restrictive Setting

2INgage is responsible for assessing the service level needs of children (policy 4410 Service Level Determinations and Reauthorizations) in conservatorship and providing a continuum of care and services to each child. CPS Handbook policies and other items related to requesting a service level for a child are, therefore, waived. See Foster Care Redesign Texas Administrative Code (TAC) Rules Waiver for more information.

Placement of Children When CVS is Not Obtained/Temporary Placement is Needed

Under special situations, a child or youth may need a temporary, paid foster care placement. A child or youth’s legal region may not be from the Region XX catchment area or DFPS Conservatorship has not been obtained. If this occurs, CPI will refer the child or youth needing paid foster care placement to the SSCC per current protocols outlined in New Referrals for Placement.

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

- If the child or youth has emergency medical needs, then the CPI will ensure written consent is received from the child or youth’s parent/managing conservator, as needed;
- If the child or youth is hospitalized, CPI will work with STAR Health (Superior) to cover the expenses related to the days spent in the hospital.
  - If a child or youth needs a hospital sitter, CPI will request and pay for this service.
  - If a foster parent needs to be trained or needs time to bond with the child or youth while the child or youth is in the hospital, CPI will notify SSCC and SSCC will determine a proper course of action.

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

Note: Unless DFPS has custody or in the process of obtaining custody, CPI maintains possession of the child until a placement is located by the SSCC and will be responsible for all related care activities, including transport. The 4- and 7-hour CBC contract requirements do not apply for youth in this section, as this is courtesy assistance from the SSCC and the child/youth is not under the SSCC continuum of care.
General Requirements for all SSCC Placements

Regardless of the type of placement, INV/FBSS workers must staff the child’s case and specific needs with their supervisor and Program Director and obtain approval prior to requesting any type of substitute care placement and case management services from 2INgage.

- In situations where the removal worker has identified that a child may require substitute care placement, the Program Director (PD) may direct the INV/FBSS worker to provide 2INgage advance notification of a child’s need for possible placement.
- The INV/FBSS worker will notify 2INgage by email or phone within 1 hour of the initial referral /call if it is determined that placement is not needed.

Child Sexual Aggression Designation Related to Removals and Placement

2INgage’s Vice President of Permanency is the designated individual responsible for determining if a child or youth’s behavior meets the definition of being sexually aggressive and has specific protocols and definitions that guide in that decision. If a child or youth is determined to have sexually aggressive behavior, 2INgage’s Vice President of Permanency must document the behavior in the child or youth’s case record and in the Sexual Aggression tab in IMPACT.

If DFPS staff have a child/youth entering DFPS conservatorship from a Region 2 county who needs to be assessed for sexually aggressive behavior, DFPS must:

- Contact one of the 2INgage Vice Presidents of Permanency, Randy Neff, Rneff@2INgage.org (940) 765-1164 or Kaycee Robles, krobles@2ingage.org 325-721-9804.
- 2INgage Vice President of Permanency is responsible for the CSA designation in IMPACT for any child or youth legally from Region 2.
- As soon as the removal worker is made aware of possible sexual aggression they will alert their chain of command and the removal Program Director will email 2INgage Vice President of Permanency to set up a child sexual aggression staffing.
- 2INgage Vice President of Permanency will schedule the staffing within 48 hours of notification.

Participants include:
- DFPS Removal Worker (required)
- DFPS Supervisor (required)
- DFPS Program Director (required)
- 2INgage Permanency Case Manager (required)
- 2INgage Permanency Supervisor
- 2INgage Director of Permanency.

- The removal worker will be prepared to share all known information required for the staffing.
- 2INgage Vice President of Permanency will be responsible for documenting the staffing in IMPACT and, if determined, adding the designation in IMPACT.

For additional information regarding Child Sexual Aggression please refer to CPS Policy 6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse and the Child Sexual Aggression Resource Guide.

If the designation is determined at the time of removal

- And the child or youth has not been placed, DFPS worker updates the abbreviated version of the Application for Placement (form 2087ex) thoroughly before submission to 2INgage for placement.
- If the child or youth has already been placed, and the placement is not aware of the child or youth’s behavior, the DFPS worker IMMEDIATELY notifies the 2INgage Permanency Case Manager and the placement about the child or youth’s behavior and documents the notification in IMPACT.
If the designation is determined after the child or youth is in conservatorship

- And the child or youth is pending a new placement, 2INgage staff launches a new application for placement. The new application for placement will autofill with the information from the sexual aggression page in IMPACT.
- And the child or youth is currently in placement, the 2INgage Permanency Case Manager updates Child Plan of Service (CPOS) for the child or youth who was determined to have sexually aggressive behaviors and the child or youth who was the victim of child sexual aggression to include services and supports.

Within 24 hours of the child or youth being identified as being sexually aggressive, 2INgage’s Vice President of Permanency will send an email to the 2INgage Director of Permanency asking that they confirm that the Permanency Case Manager has updated the application for placement, updated the Child Plan of Service, and notified the placement and Provider Child Case Manager by providing the Form 2279 and Attachment A form.

The Director of Permanency will have 24 hours to respond to the Vice President of Permanency confirming the above activities required of the Permanency Case Manager have been completed.

Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

Initial Placements

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

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

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

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

- INV/FBSS Worker will provide 2INgage with a printed copy of the DFPS Placement Summary Form 2279 and Child Sexual History Attachment A.
- 2INgage, or their designee, will be responsible for discussing information in the DFPS Placement Summary Form 2279 and Child Sexual History Attachment A with the caregiver at the time of placement.
- Obtain signatures from the receiving caregiver
- Provide copy to caregiver
- When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form 2279b will be signed.
• 2INgage will upload signed DFPS Placement Summary Form 2279 with Child Sexual History Attachment A into OneCase in IMPACT.

**Subsequent Placements**

• 2INgage will update all information under the person detail page tabs prior to the placement change.
• 2INgage (or designee) will be responsible for discussing information in the 2INgage Region 2 Placement Change Form and Child Sexual History Attachment A with the caregiver at the time of placement.
• Obtain the signature of the receiving caregiver on the 2INgage Region 2 Placement Change Form and the Child Sexual History Attachment A Form.
• When a child with a history of sexual victimization or behaviors of sexual aggression is under the care of an alternate, temporary or GRO caregiver, form 2INgage Region 2 Placement Change Form and Child Sexual History Attachment A will be signed.
• Upload a signed copy of 2INgage Region 2 Placement Change Form with Child Sexual History Attachment A into OneCase in IMPACT.

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

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

<table>
<thead>
<tr>
<th>Type of Setting</th>
<th>Who must review and sign the 2279 and Attachment A</th>
<th>Additional Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unverified Kinship Home</td>
<td>All adults in the home who have unsupervised access to the child.</td>
<td>If anyone is not present at the time that the information is presented, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This may be done electronically.</td>
</tr>
<tr>
<td>Foster Home</td>
<td>All foster parents</td>
<td>If all foster parents are not present at placement, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This may be done electronically.</td>
</tr>
<tr>
<td>General Residential Operation (includes Emergency Shelters and any licensed facility that is not a foster family home)</td>
<td>Administrator Intake staff Case Manager</td>
<td>Depending on the size of the operations, some of these roles may be held by the same individual. In those instances, notate that on the form. If anyone who is required to review and sign the documents is not present, DFPS has 3 business days to review the information and obtain signatures of the missing individuals. This can be done electronically.</td>
</tr>
<tr>
<td>Other Facilities. This includes Juvenile Detention Settings, Psychiatric Hospitals, State</td>
<td>Individual responsible for admissions</td>
<td>Caseworkers must review the information with the staff who is admitting the child and make</td>
</tr>
<tr>
<td>Type of Setting</td>
<td>Who must review and sign the 2279 and Attachment A</td>
<td>Additional Guidance</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>----------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Supported Living Center, and Medical Hospitals</td>
<td></td>
<td>efforts to have them sign the documents. If they refuse to sign, document who the information was provided to, their title, date, and indicate their refusal to sign. If the caregiver admits the child, staff must review the information and obtain signatures upon notification of the admission.</td>
</tr>
</tbody>
</table>

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

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

For further guidance on caregiver notification of sexual abuse history, review the appropriate policy:
- 4121.2 Prepare the Current and New Caregivers for the Move
- 4121.3 Complete the Placement Summary Form
- 4133 Provide and Discuss the Placement Summary (Form 2279)
- 4152.2 Meeting the Needs of a Child or Youth without Placement
- 4231.1 Notifying a Facility Regulated by Another State Agency of a Child’s Sexual Victimization and Sexual Aggression History
- 6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse

**Evaluating a Possible Placement**

The safety of the child or youth is the paramount consideration in any placement selection. When evaluating potential placements, the 2INgage/Designee must consider substitute caregiver’s history of abuse and neglect allegations. For foster homes, this includes history of abuse and neglect allegations while verified with previous child placing agencies, if applicable; and substitute caregiver’s licensing variances


**IMPACT and CLASS History Checks**

The 2INgage/Designee must complete a Residential Child Care Investigations (RCCI) investigation history check of all potential placements using CLASS to consider compliance history. The 2INgage/Designee also checks IMPACT for any pertinent abuse or neglect history.

The 2INgage/Designee must review the results of the history checks and confer with the caseworker or supervisor if the history checks return results such as:
- Pending licensing investigations.
- Investigations that were closed as reason to believe or unable to determine, or any patterns in the investigation history that cause concern.
• History of licensing violations.

If Residential Child Care Licensing placed a general residential operation (GRO) on probation, 2INgage must not place a child or youth in that GRO, unless the Associate Commissioner or Deputy Associate Commissioner of CPS or the Deputy Commissioner or Commissioner of DFPS approves the placement or a court orders it. See 4151 Court-Ordered Placements in Unapproved Facilities.

2INgage may not place a child or youth in a foster home with more than six children unless there is an approved 24-hour awake supervision plan and the director of conservatorship services approves the placement in advance.

2INgage must not place a child or youth in a foster home or foster group home if the child placing agency (CPA) that verifies the home has put its verification on inactive status.

See DFPS Rules, 40 T.A.C. §700.1311(c)

CLASS Variance Checks
The 2INgage/Designee must review all licensing variances, including variances pertaining to caregiver ratio, supervision, and training, when determining if the placement can meet the child’s individual needs. The 2INgage/Designee must review and confer with the Permanency Case Manager or Supervisor if the variance checks return results that may impact the placement’s ability to meet the child’s individual needs.

Heightened Monitoring
SSCC will follow steps outlined in policy 4211.6 Placements into Operations on Heightened Monitoring (HM) when:
• A child is already placed in a child placing agency (CPA), or a general residential operation (GRO), including a residential treatment center (RTC), and the operation is placed on heightened monitoring, OR
• For prospective placements, if a GRO, RTC, or CPA is on heightened monitoring at the time of the placement search.

If the operation is also on probation (in addition to heightened monitoring), the approval of the associate commissioner or deputy associate commissioner of CPS is also required before placement. This request should be submitted at the same time.

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

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

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

(2) the child has extraordinary service needs that far exceed the traditional residential child care settings (example: major eating disorders, severe medical/psychiatric needs); or

(3) the SSCC has performed an exhaustive search and placement cannot be located without the use of a child-specific contract whose rate exceeds the contemplated rate structure of the blended rate.

The SSCC will electronically submit the request to seek approval of the exception care rate for all youth entering an exertional care placement after the effective date. The SSCC should expect a response from the Director of Placement for CPS within one to two (1-2) business days of the submission. A third day may be required if the request is for a rate over $1,000. If the request is denied, the Director of Placement for CPS will submit a written response to the SSCC detailing the basis for the denial and include a recommendation concerning placement for the subject child. In addition, should the subject child be denied an exceptional care rate, the SSCC retains and reserves the right to have the contract-approved Third-Party Vendor review the DFPS denial and issue a subsequent opinion and recommendations with respect to placement. This review process shall occur within three (3) days of the SSCC receiving notice of the denial for the exceptional care rate. This Third-Party recommendation shall be submitted to DFPS for re-consideration concerning the subject child.

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

Please see the SSCC Exceptional Foster Care Approval Flow Chart in the Appendix.

Children/Youth under SSCC Supervision

SSCC must establish policies/procedures for safely caring for children/youth and meeting their needs while a placement is being located. Policies/procedures must comply with CPS policy_4152.2 Meeting the Needs of a Child or Youth until a Placement Is Secured and all of its sub-items.

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

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

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

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

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

• The CPS Rights of Children and Youth in Foster Care, also known as the Bill of Rights, is an important document that outlines the rights children and youth have when they are placed in foster care. It is required by federal law, Texas law, and policy (CPS Handbook 6420).
• Every time it is reviewed with the child or youth, it must be signed by the child or youth, the caseworker, and the caregiver.

Initial Placement-INV/FBSS Caseworker is responsible for:
• Reviewing the Bill of Rights with the child or youth within 72 hours of the child or youth entering foster care (i.e. at initial placement following the child’s removal).
• Review orally in the child’s primary language, if possible. There are no exceptions for age or disability.
• Provide accommodations where needed, such as translators or sign language interpreters.
• If a child cannot sign the Bill of Rights (such as infants, for example), this must be noted on the form by the caseworker. The review must still occur with the caregiver and a signed copy must still be uploaded into OneCase and included in the physical case file.
• The Bill of Rights contains language and words that will not necessarily be understood by all children and youth. Some notable examples from the Bill of Rights are:
  o 13. “Participate in… unsupervised childhood and extracurricular activities.”
  o 20. “Healthy foods in healthy portions for my age and activity level.”
  o 27. “Be informed of emergency behavioral intervention policies in writing…”
  o 45. “Make calls, reports, or complaints” to
    ▪ The HHSC Ombudsman for Children and Youth currently in Foster Care at 1-844-286-0769.
    ▪ The DFPS Office of Consumer Affairs at 1-800-720-7777.
• The caseworker should check for understanding and explain anything the child or youth does not understand in a developmentally appropriate way.
• The review of the Bill of Rights can be done via virtual meeting, in-person/face-to-face, over the phone, or an app such as FaceTime (available on DFPS-issued iPhones).

Subsequent Placements and CPOS-2Ingage Permanency Case Manager is responsible for:
• Reviewing the Bill of Rights with the child or youth within 72 hours of the child or youth changing placements.
• Every time the Child’s Plan of Service (CPOS) is reviewed, including the first time the CPOS is developed. The Bill of Rights is included with the CPOS when the CPOS is generated from the Forms drop-down in IMPACT 2.0.
• When the Bill of Rights is reviewed as part of the CPOS, the signed CPOS along with the accompanying Bill of Rights must be uploaded into OneCase as one document in the Child Service Plans tab in OneCase. The stand-alone Form 2530 must be uploaded in the Child Placement Records tab in OneCase.
• The 2Ingage Permanency Case Manager must review the Bill of Rights orally and in the child’s primary language, if possible. There are no exceptions for age or disability.
• Case Managers will need to provide accommodations where needed, such as translators or sign language interpreters. If a child cannot sign the Bill of Rights (such as infants, for example), this must be noted on the
form by the caseworker. The review must still occur with the caregiver and a signed copy must still be uploaded into OneCase and included in the physical case file.

- The Bill of Rights contains language and words that will not necessarily be understood by all children and youth. Some notable examples from the Bill of Rights are:
  - “Participate in... unsupervised childhood and extracurricular activities.”
  - 20. “Healthy foods in healthy portions for my age and activity level.”
  - 27. “Be informed of emergency behavioral intervention policies in writing…”
  - 45. “Make calls, reports, or complaints” to
    - The HHSC Ombudsman for Children and Youth currently in Foster Care at 1-844-286-0769.
    - The DFPS Office of Consumer Affairs at 1-800-720-7777.
- The 2INgage Permanency Case Manager should check for understanding and explain anything the child or youth does not understand in a developmentally appropriate way.
- The review of the Bill of Rights can be done via virtual meeting, in-person/face-to-face, over the phone, or an app such as FaceTime (available on DFPS-issued iPhones).

Rights of Children and Youth in Foster Care – Form 2530
CPS Handbook Policy 6420 Rights of Children and Youth in Foster Care

SSCC Contracts with Non-Paid Residential Providers

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

Foster Care Placement:

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

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

General Residential Placement (GRO):

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

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

After INV/FBSS determines, with Supervisor and Program Director approval, that the child requires placement the worker must determine if the child needs placement in a Kinship Placement, Paid Placement or other Non-Paid Placement. Once initial placements are made, 2INgage takes responsibility for all subsequent placements.

Notification of Non-Emergency Hearings

- 2INgage requests notification of all Non-Emergency Hearings.
- INV/FBSS will notify 2INgage of all Non-Emergency Hearings by sending an email to the following box: CMD 2INgage cmd@2INgage.org

Paid Placement Needed

This paid placement process is used when INV/FBSS worker makes a referral to 2INgage for a child or youth who is in immediate need for paid foster care placement and case management services and is not currently served by 2INgage. This process will be used for all emergency and non-emergency removals.

Notification & Referral

INV/FBSS Worker will contact 2INgage Care Management at (877) 254-6135 and follow-up by email at CMD@2INgage.org using Subject line “Emergency Placement Referral – Last name of oldest child being referred” and will:

- Provide their contact information
- Provide back-up worker’s contact information (i.e. supervisor)
- Request name of 2INgage Care Management Department Placement Specialist to be assigned as primary on the FSU and SUB stage in IMPACT
- Provide 2INgage initial information (can be verbal)
- Open the FSU and SUB stages in IMPACT
- Create 2INgage Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning 2INgage worker identified as primary on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
- If sexual aggression is identified, follow the child sexual aggression designation process above.
- If applicable, complete the trafficking information in IMPACT prior to completing the DFPS Placement Summary Form 2279 and printing the Child Sexual History Attachment A Form.
- Complete the child’s placement information in IMPACT by creating either:
  - Application for Placement of Children in Residential Care or
  - Alternative Application for Placement of Children in Residential Care and
  - Child Sexual History Attachment A for all initial placements
- Based on the child's needs, notify relevant regional CPS Subject Matter Experts (e.g. Nurse, Developmental Disability Specialist, Well-Being Specialist, Education Specialist, etc.). For additional guidance, see Placing Children Who Have Intellectual and Developmental Disabilities or Primary Medical Needs.

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

*Verbal 2INgage placement referral must be followed up by documented 2INgage referral in IMPACT within 1 hour and email notification to 2INgage once the 2INgage referral is complete in IMPACT.

*Form 2087ex must be complete in IMPACT and reviewed by the INV/FBSS Supervisor within 1 hour of referral.
*The acceptance of the official referral begins once DFPS has:

- Created the Child Referral in IMPACT (assigning 2INgage as primary and DFPS as secondary on Sub stage)
- Created the Family Referral in IMPACT (assigning 2INgage as primary and DFPS as secondary on FSU stage)
- Submitted an approved 2087ex to 2INgage (approved by 2INgage and DFPS supervisor) via IMPACT
- Provided any other requested placement information that may not be on the 2087ex or Form A in IMPACT via email to 2INgage (cc: DFPS Supervisor) is needed to begin the placement search in ECAP Client Assessment
- 2INgage will review the 2087ex within 1 hour of it being received and will notify CPI/FBSS, via email, of the acceptance of the 2087ex or any needed changes or additional information to begin the placement search process. Reminder: the 4 hour timeframe does not begin until the 2087ex is accepted by 2INgage.
- If there are any issues completing the 2087ex in IMPACT, the CPI/FBSS caseworker will obtain approval from the CPI/CPS Program Director to complete the paper form 2087ex to submit to 2INgage. The issues identified, and approval from Program Director will be communicated with 2INgage. All timeframes to complete and review the 2087ex still apply.

Removal while child/youth is in Psychiatric Hospital

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

When a child currently in a psychiatric hospital is removed:

- The removal worker will send a Non-Emergency placement referral to CMD@2INgage.org indicating whether the child is currently on acute or placement days.
- At the time of removal, the removal worker and 2INgage Intake will determine if placement days are needed.
- The removal worker will enter the hospital as the first placement within IMPACT, and the next identified placement will be considered a subsequent placement which 2INgage will be responsible for entering in IMPACT."

See Psychiatric Hospital Contact Protocol, Psychiatric Hospital Workers Safety Net, 6151.3 Notification Requirements and Schedule.

Placement of Child/Youth

2INgage Placement Option

No later than 7 hours after receiving notice official referral of the need for emergency placement, 2INgage will provide the INV/FBSS Worker with:

- Notification of a recommended placement and medical consenter by phone, followed by an email to the INV/FBSS Worker and Supervisor, or electronically (IMPACT).
- Information about the recommended placement will include:
  - Placement Name, Address, Phone and Resource ID, if known
  - Network Provider Name
  - Medical Consenter name and PID, if known
  - Information regarding other children or youth placed in the home, including if any have a child sexual aggression designation or a victim of child sexual aggression designation
*If 2INgage has not established a placement for a child within 7 hours of initial notification, 2INgage Intake Placement Specialist will notify CPS worker of status and planned strategy for finding a placement. INV/FBSS worker will notify the INV/FBSS supervisor that no placement has been found. The INV/FBSS supervisor will notify the CBC Administrator.

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

Physical Placement of the Child/Youth

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

- INV/FBSS Worker will physically transport the child to the placement.
- INV/FBSS and 2INgage (or designee i.e. Provider Case Manager) will exchange placement paperwork.
- INV/FBSS Worker will complete the physical placement and provide and review the following placement documents with the caregiver: The 2085FC and 2085 B can be generated in IMPACT if placement information and medical consenter has been entered.
  - Placement Authorization (form 2085fc) to be made out to placement
  - Designation of Medical Consenter (form 2085-B) to be signed by consenter and returned to DFPS electronically
  - Designation of Education Decision-Maker (form 2085-E) to be signed by decision maker and returned to DFPS electronically
  - DFPS Placement Summary Form 2279
  - Child Sexual History Attachment A from IMPACT
  - Discuss the Rights of Children and Youth in Foster Care (Form 2530) with child or youth
    - Obtain signature from child or youth
    - Provide copy to child or youth

- INV/FBSS Worker will upload the signed DFPS Placement Summary Form 2279 with Child Sexual History Attachment A and the Rights of Children and Youth in Foster Care Form 2530 into OneCase; and
- INV/FBSS Worker will provide scanned copies of the placement documents to 2INgage within **1 business day**.

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

- INV/FBSS Worker will transport the child or youth to an alternative location coordinated between 2INgage and INV/FBSS Worker.
- For a child or youth's initial placement (brand new removal), when a placement has **not** been identified, INV/FBSS Worker will remain medical consenter until a placement is identified.
- 2INgage will physically transport the child or youth to the placement.
- 2INgage will complete the placement and provide and review the following placement documents with the caregiver: The 2085 FC and 2085 B can be generated in IMPACT if placement information and medical consenter has been entered.
  - Placement Authorization (form 2085fc) to be made out to placement
  - Designation of Medical Consenter (form 2085-B) to be signed by consenter and returned to DFPS electronically
  - Designation of Education Decision-Maker (form 2085-E) to be signed by decision maker and returned to DFPS electronically
  - DFPS Placement Summary Form 2279
  - Child Sexual History Attachment A from IMPACT
  - Discuss the Rights of Children and Youth in Foster Care (Form 2530) with child or youth
- Obtain signature from child or youth
- Provide copy to child or youth
- 2INgage will upload the signed DFPS Placement Summary Form 2279 with Child Sexual History Attachment A and Rights of Children and Youth in Foster Care Form 2530 into OneCase.
- 2INgage will provide scanned copies of the placement documents to INV/FBSS within 1 business day.

See Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

Documentation

IMPACT Documentation

INV/FBSS worker will, within 4 hours of referral to 2INgage:

- Update Person Information in IMPACT

2INgage will, within 12 hours of referral:

- Complete the placement entry in the placement information page of IMPACT.
- Create the Medical Consenter entry in IMPACT.
- Save/submit the placement entry in IMPACT to 2INgage supervisor.

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

- Review the placement and medical consenter documentation in IMPACT.
  - If the placement entry is not documented in IMPACT from 2INgage within 12 hours of the referral, INV/FBSS Worker will email CMD@2INgage.org and request placement be documented.
  - If placement information is not documented in IMPACT within 1 hour of contact with 2INgage, INV/FBSS Worker will notify their supervisor.
  - The INV/FBSS Supervisor will contact the 2INgage Care Management Supervisor for immediate resolution and will notify CBC Administrator.

Additional Documentation

By 5:00pm the next business day, INV/FBSS worker will provide 2INgage/complete any remaining placement documentation including:

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

Any external forms and written placement information not available in IMPACT should be emailed to 2INgage (CMD@2INgage.org) with Subject Line; “CPS Emergency Placement- Last Name of Oldest Child,”
Within 3 Days of Placement

2INgage will:

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

Kinship Placement Referral

The Kinship placement process is used when INV/FBSS makes a referral to 2INgage for a child or youth when an approved non-verified kinship placement has been secured by the INV/FBSS worker. Follow current policy regarding 4114.1 Preference for Relatives and Other Connections. If INV/FBSS does not have an approved kinship home at the time of referral, then follow the Paid Placement Needed process. INV/FBSS must notify 2INgage if an approved kinship placement is secured, or a potential kinship placement is being considered, after a referral for paid placement has been made.

Notification & Referral

INV/FBSS Worker will contact 2INgage Care Management via phone at (877) 254-6135 and follow-up by email at CMD@2INgage.org; Subject line “Kinship Placement Referral – Last name of oldest child being referred” and will:

- Provide their contact information.
- Provide a worker back-up contact information (i.e. supervisor).
- Request name of 2INgage Care Management Department Placement Specialist to be assigned as primary on the FSU and SUB stage in IMPACT
- Provide 2INgage initial information (can be verbal).
- Open the FSU and SUB stages in IMPACT.
- Create 2INgage Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning 2INgage Permanency Case Manager identified as primary on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
- Based on the child's needs, notify relevant regional CPS Subject Matter Experts (e.g. Nurse, Developmental Disability Specialist, Well-Being Specialist, Education Specialist, etc.). For additional guidance, see Placing Children Who Have Intellectual and Developmental Disabilities or Primary Medical Needs.

Placement of Child/Youth

INV/FBSS will complete the placement of the child in the kinship placement. This includes providing the caregiver with: The 2085 KO and 2085B can be generated in IMPACT if the placement information and medical consenters have been entered.
• Placement Authorization: Kinship or Other Non-Foster Caregiver to be made out to placement
• Designation of Medical Consenter (form 2085-B) to be signed by consenter and returned to DFPS electronically
• Designation of Education Decision-Maker (form 2085-E) to be signed by decision maker and returned to DFPS electronically
• DFPS Placement Summary Form 2279
• Child Sexual History Attachment A from IMPACT
• Discuss the Rights of Children and Youth in Foster Care Form 2530 with child or youth
  o Obtain signature from child or youth
  ▪ Provide copy to child or youth
• In addition to other required placement forms, at the time of placement into a kinship home, the caseworker must provide the kinship caregiver with the Kinship Manual and get the kinship caregiver’s signature on Form 0695 Kinship Caregiver Agreement.

INV/FBSS Worker will:

• upload the signed DFPS Placement Summary Form 2279 with Child Sexual History Attachment A and Rights of Children and Youth in Foster Care into OneCase; and
• provide scanned copies of the placement documents to 2INgage within 1 business day.

See Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

IMPACT Documentation

INV/FBSS worker will:

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

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

If Kinship placement is made, DFPS will complete a Kinship Home Assessment Request to 2INgage by submitting the following documents to CMD@2ingage.org within 48 hours of placement (CPS Handbook 6623.):

• Kinship Home Assessment for Services (Form 6581)
• Criminal History checks for all household members 14 years of age and older
• IMPACT CPS History checks for all household members 14 years of age and older
• Removal Affidavit
• Preliminary Study form 6587 (IF APPLICABLE)

*2INgage is responsible for ensuring completion of home assessment*
Within 3 Days of Placement

2INgage will:

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

Request for Placement into a CBC Catchment Area

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

This process does not include:

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

Requesting CPI/CPS Region

- INV/FBSS workers will complete each section of Form 1508 and staff with their supervisor.
- The completed form will be emailed to receive approval from their chain of command: Supervisor/Program Director/Program Administrator/Regional Director.

For Placement into a CBC Catchment (CBC Stage II)

- If the requesting Regional Director approves the child’s placement located in the CBC catchment area, the Regional Director will email the completed Form 1508 to Linda Garcia Senior Vice President of 2INgage and cc the Community-Based Care Administrator (CBCA) for that catchment area.
- If the Senior Vice President of 2INgage agrees with the placement, she will notify the requesting Regional Director via email, and cc the CBCA and assigned SSCC staff to provide courtesy supervision.
- If there is a disagreement about the child’s placement into the CBC catchment area, 2INgage Leadership or requesting Regional Director can email the Community-Based Care Administrator requesting a staffing on the case. The CBCA will set up a resolution staffing with the following in attendance:
  - 2INgage – Texas Family Initiative CEO
  - 2INgage Senior Vice President
  - Requesting Regional Director
  - Catchment Area Regional Director
  - Director of Field Placement
For all contact information on CBCA’s and SSCC Leadership please visit the Contact CBC section on the Community-Based Care DFPS site.

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

This process is used when INV/FBSS takes conservatorship of a child or youth, but due to the unique circumstances, a placement is not being sought at the time of referral. An example would be when a child or youth is hospitalized. 2INgage will begin providing case management services upon referral.

**Notification & Referral**

INV/FBSS worker will contact 2INgage Care Management via phone at (877) 254-6135 and follow-up by email at CMD@2INgage.org with Subject Line: “TMC Obtained, Placement Not Needed- Last Name of Oldest Child” and will:

- Provide INV/FBSS worker contact information.
- Provide INV/FBSS worker back-up contact information (i.e. supervisor).
- Request name of 2INgage Care Management Department Placement Specialist to be assigned as primary on the FSU and SUB stage in IMPACT. Provide 2INgage initial referral information (can be verbal).
- Open the FSU and SUB stages in IMPACT.
- Create 2INgage Child Referral (SUB Stage) and Family Services Referral in IMPACT, assigning 2INgage Permanency Case Manager identified as primary on the FSU and SUB stage in IMPACT and INV/FBSS secondary on stages in IMPACT.
- Complete child’s placement information in IMPACT by creating either:
  - Application for Placement of Children in Residential Care in IMPACT
  - Alternative Application for Placement of Children in Residential Care
  - DFPS Placement Summary Form 2279
  - Child Sexual History Attachment A.

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

When the child or youth is ready for placement, follow the Paid Placement or Kinship Referral process as appropriate.

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

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

When a Child Specific Contract for a Home and Community-Based Services (HCS) Placement is needed by 2INgage, refer to Appendix Child Specific Contract Placement is needed by 2INgage.
When DFPS Must Remove a Child with PMN

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

Emergency Situation
When DFPS staff must remove a child with PMN in an emergency situation, and there is no time for the PMN meeting before the removal, the caseworker follows the processes below to access special support services. If the caseworker is unable to safely transport the child, the caseworker may contact an ambulance to transport the child.

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

- during the required PMN Meeting;
- through the regional Well-Being Specialist (if the move occurs before the PMN Meeting); or
- Primary Medical Needs Resource Guide January 2018
- after hours, on holidays or weekends by contacting STAR Health at 1-866-912-6283.

During regular business hours, contact the Well-Being Specialist for assistance.

For PMN children already in DFPS custody who experience a change in placement after hours, the CPS Caseworker can contact STAR Health Member Services' Nurse Wise medical advice line at 1-866-912-6283, option 7 (available 24/7, after hours, holidays and weekends).

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

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

Contact the Well-Being Specialists for additional guidance.

Emergency Placement Process
INV/FBSS workers should follow the process outlined in Emergency Paid Placement process when requesting an emergency paid foster care placement from 2INgage for a child with Intellectual or Developmental Disabilities (IDD), Primary Medical Needs (PMN) or Complex Medical Needs.

- In addition to the emergency placement process, the INV/FBSS worker will upon placement referral or prior to the removal, when possible, coordinate a telephone staffing with the INV/FBSS supervisor and Program Director, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and 2INgage Intake Placement Specialist to discuss:
  - The specific needs of the child or youth. Example: if a child needs a hospital sitter, INV/FBSS will request and pay for this service and share coordination with 2INgage.
  - The ability of available placement options to meet the child or youth's specific needs.
- After a placement for a child with PMN has been recommended by 2INgage:
- 2INgage Placement Specialist or Permanency Case Manager will contact the Well Being Specialist to request a PMN Staffing to develop a plan to address the medical services, equipment and other needs during the transition to the new caregivers.
- The WBS will coordinate, facilitate, and document the PMN staffing.
  - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
  - The PMN staffing must occur prior to placement if possible. If not possible, a staffing should occur and must be requested within 24 hours following the emergency placement.
  - When there is no time for a PMN Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.
  - If the placement is occurring outside of regular business hours or on a holiday, prior to placement, an immediate staffing will take place between DFPS and 2INgage, involving the Director level or above. This staffing is to ensure all of the child’s medical needs will be met until a PMN staffing can take place with the Well Being Specialist. This staffing will not replace the required PMN staffing with the Well Being Specialist.
  - For additional information and resources available in emergency, after hours situations, please see Primary Medical Needs Resource Guide.
  - Please refer to policy 4117 Specific Placement Considerations for Children or Youth Who Have Primary Medical Needs and the subsections.

- After a placement for a child with significant medical issues, but not PMN has been recommended by 2INgage:
  - 2INgage Placement Specialist or Permanency Case Manager may contact the Well Being Specialist to request a Medical Staffing.
  - The WBS will coordinate, facilitate, and document the Medical Staffing.
    - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
    - The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the emergency placement.
    - When there is no time for a Medical Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.

- After a placement for a child IDD has been recommended by 2INgage:
  - INV/FBSS Removal Worker will coordinate with 2INgage Placement Specialist or Permanency Case Manager for a staffing.
    - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
    - The staffing must occur prior to placement if possible.

The DFPS Education Specialist should be included in the staffing as appropriate. If possible, the staffing should occur prior to the child or youth arriving in his or her new placement, but no later than two business days after the child or youth's placement.
Non-Emergency Placement and Placement Change Process

2INgage Permanency Case Managers will request a non-emergency paid foster care placement or placement change from their placement team for a child with Intellectual or Developmental Disabilities (IDD) or Primary Medical Needs when needed.

As a part of the placement request process, the 2INgage Permanency Case Manager will:

- Within 24 hours of the placement referral, coordinate a telephone staffing with the 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and 2INgage Intake Placement Specialist and Director of Permanency to discuss:
  - The specific needs of the child or youth.
  - Available times for a pre-placement staffing.
- Work with 2INgage Intake Placement Specialist to coordinate the pre-placement staffing, including relevant regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), CASA, GAL, 2INgage Intake Placement Specialist, and current caregivers.
- After a placement for a child with PMN has been recommended:
  - 2INgage Placement Specialist or Permanency Case Manager will contact the Well Being Specialist to request a PMN Staffing to develop a plan to address the medical services, equipment and other needs during the transition to the new caregivers.
  - The WBS will coordinate, facilitate, and document the PMN staffing.
  - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
  - The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the placement.
  - When there is no time for a PMN Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.
  - For additional information please see Primary Medical Needs Resource Guide.
- After a placement for a child with significant medical issues, but not PMN has been recommended:
  - 2INgage Placement Specialist or Permanency Case Manager may contact the Well Being Specialist to request a Medical Staffing.
  - The WBS will coordinate, facilitate, and document the Medical Staffing.
  - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
  - The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the placement.
  - When there is no time for a Medical Staffing prior to placement, contact the Well Being Specialist and/or Nurse Consultant to plan for a safe transfer of the child.
- After a placement for a child IDD has been recommended:
  - 2INgage Placement Specialist or Permanency Case Manager will coordinate staffing.
  - The staffing will include 2INgage Placement Specialist, chosen caregivers, their provider, medical staff if applicable, 2INgage Permanency Case Manager, 2INgage Permanency Supervisor and Director of Permanency, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health and previous caregivers (when appropriate).
The staffing must occur prior to placement if possible. If not possible, a staffing should occur immediately following the placement.

**Placing Children in Certain Institutions**

2INgage will work with the regional Developmental Disability Specialist and DFPS Placement team in State Office when considering and requesting placement of a child or youth in one of the following settings (non-DFPS placement):

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

Placing a child or youth in one of the listed types of institutions should only take place when no other less restrictive placement is available that can meet the child or youth's needs.

Placement in one of the listed types of institutions requires careful consideration, assessment, and justification. 2INgage Intake Specialist will coordinate with the regional Developmental Disability Specialist to carefully assess the child or youth's specific needs and exhaust all least restrictive placement options before recommending a child or youth's placement in a certain institution.

Depending on the type of institutional placement requested for the child or youth, 2INgage will need to follow current CPS processes outlined in The Foster and Licensed Facility Placements Process Resource Guide. Also see CPS Policy 4118 Additional Actions for Placing Children with Intellectual or Development Disabilities.

**Placement into a Sub-Acute Program**

Before placing a youth in a Sub-Acute Program, the program must be approved by DFPS. The SSCC will electronically submit a request for approval of the Sub-Acute Program to the CPS Director of Placement or designee. The SSCC will submit a copy of the subcontract with the Sub-Acute Program that includes:

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

**If the Sub-Acute Program is Approved**

1. The SSCC will forward the approved email to the Contract Administrator Manager (CAM) and the Community-Based Care Administrator (CBCA).
2. The CAM will create a resource in IMPACT add the Sub-Acute Program under the SSCC’s provider network in IMPACT and reply to the email once completed.
Appeal Process If the Sub-Acute Program is not Approved

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

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

Requesting Exceptional Foster Care

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

Foster Care Assistance

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

DFPS Rules, 40 TAC §700.315

Applying for Foster Care Assistance

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

Determining Eligibility

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

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

Annual Review of Eligibility

DFPS must review the child’s eligibility for IV-E or Medicaid at least once every 12 months while the child is in foster care. The 2INgage Permanency Case Manager will receive an IMPACT Task To-Do when a foster care review is due for the child. To complete the review, the 2INgage Permanency Case Manager must:

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

DFPS must annually review continued eligibility for older youth, 18 or older, who are in extended foster care. The 2INgage Permanency Case Manager will receive an IMACT Task To-Do when the review is due. The 2INgage Permanency Case Manager must:
  • Confirm that the young adult is meeting one or more of the education and work related criteria
  • Provide verification to the eligibility specialist.
  • Please see CPS Policy 10421 Eligibility for Extended Foster Care

If the annual eligibility review is not completed in response to the IMPACT “To Do” the regional eligibility specialist will receive a monthly data warehouse report and send a notice to the primary worker and supervisor listing the children who have an annual review that is due. If there continues to be no response, the regional eligibility specialist will then send the report of pending reviews to the Director of Permanency.

See CPS policy 1514 Annual Review of Eligibility.

**Obtaining Certified Birth Certificates and Screen-Printing Birth Records**

A 2INgage Permanency Case Manager always attempts to obtain a birth certificate from the child’s parents, relatives, or guardian instead of requesting a copy of the birth certificate through the Birth Verification System (BVS) system. If a 2INgage Permanency Case Manager obtains a copy of the birth certificate, he or she submits it to the eligibility specialist to serve as documentation of a child’s birth and citizenship or alien status when submitting the documentation for the Foster Care Assistance Application.

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

The Foster Care Eligibility Specialist is the subject matter expert that can assist in getting birth certificates. Please refer to CPS Policy 1521 Requesting Certified Birth Certificates. The DFPS points of contact for Region 2 birth certificates Cheryl Hutchinson and Kristen Baldwin.

Beginning in June 2019, the request for birth certificates for youth who turn age 15 are handled at CPS State Office. The certified copy (or original) birth certificate, photocopy of the birth certificate, and a cover memo with instructions will be mailed to the 2INgage Point of Contact. The 2INgage Permanency Case Manager will deliver the birth certificate to the youth in person and have them sign Form 2527 Personal Documents Checklist - 15 or Form 2528 – Personal Documents Checklist - 18. In addition, the worker will check the new indicator box on the Child’s Plan of Service in IMPACT.

Any birth certificate requests that do not meet CPS Policy 1520 Obtaining Certified Birth Certificates and Screen Printing Birth Records guidance prior to the child turning 15 will require 2INgage completing the request for the certificate and providing any funds needed.

The 2INgage Point of Contact for birth certificate related issues is: Stacy Lee, Permanency Support Director.
Initial Coordination Meeting

The Initial Coordination Meeting (ICM) is an internal, collaborative process between INV/FBSS and 2INgage that focuses on the unique, individualized needs of the child and outlines services to address those needs. The ICM process seeks to share all relevant information about a child in DFPS conservatorship who require placement or case management services from 2INgage. This includes children placed in both kinship and paid placement. Relevant information includes assessments, evaluations, medical reports, recommended services, and all other information that pertains to the child’s individual needs.

The ICM takes the place of the traditional removal staffing.

Timeframes

Within 24-48 hours of removal, INV/FBSS will host, coordinate and participate in the Initial Coordination Meeting (ICM).

The ICM may be extended up to 3 days if an emergency placement occurs on a holiday or weekend day (Friday, Saturday, or Sunday) or inclement weather prevents the ICM from occurring as scheduled. All other extensions to an ICM must be approved by the INV Program Director.

Coordination

The INV/FBSS worker will schedule an ICM with their supervisor and 2INgage Permanency Case Manager and their supervisor.

Participants

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

- 2INgage Intake Placement Specialist
- Removal worker and supervisor
- 2INgage Permanency Case Manager and Permanency Supervisor
- Other CPS staff or subject matter experts as needed (e.g. Developmental Disabilities Specialist, Nurse, Education Specialist, Well Being Specialist)

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

During the ICM:

- INV/FBSS staff will share details about the reason for removal and pertinent information 2INgage will need related to ongoing services.
- INV/FBSS and 2INgage will exchange copies (with each other) of all external documentation gathered thus far related to the child’s needs, including but not limited to removal affidavit, diligent search results for relatives and/or parents, immunization records, birth records, birth certificates, social security cards, medical/dental reports or records, school records, progress notes, assessments, evaluations, and so on.

Documentation

After the ICM, the INV/FBSS worker (or designee) will:

- Record the ICM as a contact in the FSU stage, Contact Detail page in IMPACT.
- Ensure the notes from the meeting are recorded in the Contact Detail Narrative.
Case Transfer

- INV/FBSS is responsible for ensuring the case’s final disposition(s) is communicated to the 2INgage Permanency Case Manager.
- See case transfer process under Case Documentation section for physical transfer of cases and electronic assignment.

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

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

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

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

2INgage will continue to follow the policy and practice identified in CPS Policy [6419 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Abuse](#).

Staff members of 2INgage providing case management services will follow procedures in the Child Sexual Aggression Resource Guide when working with the following:

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

If DFPS staff have a child/youth entering DFPS conservatorship from a Region 2 county who needs to be assessed for sexually aggressive behavior, DFPS must:

- Contact one of the 2INgage Vice Presidents of Permanency, Randy Neff, Rneff@2INgage.org, (940) 765-1164, or Kaycee Robles, krobes@2ingage.org 325-721-9804. The Vice President of Permanency is responsible for the CSA designation in IMPACT for any child or youth legally from Region 2.
- As soon as the INV/FBSS worker is made aware of possible sexual aggression they will alert their chain of command and the removal Program Director will email 2INgage Vice President of Permanency to set up a child sexual aggression staffing.
- 2INgage Vice President of Permanency will schedule the staffing within 48 hours of notification. Participants include:
  - INV/FBSS removal Worker (required)
  - INV/FBSS Supervisor (required)
  - INV/FBSS Program Director
  - 2INgage Permanency Case Manager
  - 2INgage Permanency Supervisor
  - 2INgage Director of Permanency (required)
Subject Matter Expert Support in Providing Services To Children and Families

For DFPS state office subject matter expert contact information, visit Region 12: Stage Office Resources.

For Region 2 subject matter experts and contacts visit Region 2 Resources.

Developmental Disabilities Specialist (DDS)

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

When to contact the DDS?

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

Why contact the DDS?

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

DDS can:

- Provide training and support to staff about working with infants, children and youth with IDD.
- Serve as liaisons between DFPS and Health and Human Services for community-based services through the youth's Local Intellectual and Developmental Disability Authority (LIDDA). This includes:
  - Making referrals to the Medicaid waiver interest list for long-term services and supports.
  - Making referrals to HHSC Office of Guardianship, if appropriate.
  - Making referrals for Home and Community Services (HCS) for youth and facilitating referrals for Determination of Intellectual Disabilities (DIDs).
  - Referring to and participating in Community Resource Coordination Groups (CRCG's).
- Address the unique challenges of young adults transitioning out of care into the community and help address resources needed for future support.
- Serve as consultants to DFPS/2INgage staff regarding cases and participate in transition planning meetings, case reviews, circles of support, and permanency conferences.
- Assist in locating and facilitating the placement process for youth needing specialized placements. These specialized placements can include:
  - Intermediate Care Facilities (ICF-IDD)
  - State Supported Living Centers (SSLC)
  - Nursing Facilities
  - Home and Community Based Services (HCS)
  - General Residential Operations (GRO)
  - Mission Road Developmental Center

For additional information see;
• DFPS Safety Net page for Intellectual and Developmental Disabilities
• 6411.3 Contact with Children in IDD GRO, SSLC and ICF Facilities
• 6411.31 Responsibilities of Developmental Disability Specialist
• 6411.32 Responsibilities of the Primary Conservatorship Caseworker When a Child Has an Intellectual or Developmental Disability

Education Specialists

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

DFPS Regional Education Specialists can also be a resource as needed to assist 2INgage with access to, or communication with, Region 2 catchment area school districts and campuses.

For additional information see:
  o Education for Children Resource Guide
  o CPS Policy 15000 Education for Children
  o Safety Net Education Page

Faith Based Specialists

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

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

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

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

For more information see Texas Faith-Based Model.

Fatherhood Initiative

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

For more information see Fathers Matter: The Responsible Fathering Initiative

The DFPS Fatherhood Specialist compiles a report of the children’s cases that do not list a father and will provide that report to 2INgage.
Immigration Specialist

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

See DFPS Safety Net: Immigration Specialist for more information.

FINDRS Search

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

Nurse Consultant

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

Forensic Assessment Center Network (FACN)

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

When and When Not to Use the FACN

- In most instances, staff consult the FACN about an original incident of abuse that was investigated or assessed.
- For instance, if FBSS/CVS staff is working on a case, identifies additional information about the original incident, and needs clarification from the FACN, it would be appropriate for FBSS/CVS staff to consult the FACN.
- If any staff needs court testimony, staff may consult the FACN to see if the FACN can provide appropriate support.
- It is also appropriate to consult the FACN when staff has general ongoing medical questions pertaining to specific cases.
- Staff may not use the FACN for direct examinations of children or for medication services to children in DFPS conservatorship.

See CPS Handbook policy: 2232 Making a Referral to the Forensic Assessment Center Network

Advocacy for Children's Healthcare Needs

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

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

**How to Request Assistance from Your DFPS Nurse Consultant**

The 2INgage Permanency Case Manager may request assistance from the DFPS Nurse Consultant in person, or by phone, email, or using a referral form. Regional staff should consult with the DFPS Nurse Consultant covering their region regarding the best way to make a referral. For the most current list, visit the [DFPS Nurse Consultants](#). More information on the DFPS Nurse Consultant role can be found in the [Medical Services Resource Guide](#).

**Psychiatric Hospital Workers**

Psychiatric Hospital Workers serve as advocates, liaisons, and expert coordinators between local psychiatric care centers and DFPS/2INgage staff in providing the best acute psychiatric treatment outcomes for children in DFPS conservatorship.

These staff are solely dedicated to ensuring continuity of care and services for a youth experiencing an acute psychiatric hospital stay, with the aim of reducing the length of the hospital stays and positively impacting the permanency and well-being outcomes for every child. Psychiatric Hospital caseworkers are available to provide consultation and/or liaison support for 2INgage Permanency Staff who have a child or youth admitted for an acute psychiatric hospital stay.

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

**Statewide Parent Collaboration Group and Local Parent Support Group**

**Statewide Parent Collaboration Group (PCG)**

The statewide Parent Collaboration Group (PCG) is a partnership between the Texas Department of Family and Protective Services (DFPS) and parents who have been recipients of DFPS services. The PCG is a venue for gathering and incorporating parental feedback to enhance DFPS policy and practice. 2INgage will identify a representative to participate in this group to represent their catchment. 2INgage will also aid in recruiting parents to be a part of this group as needed.

The PCG provides:

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

**Local Parent Support Group**

The local Parent Support Groups (PSGs) are informational support groups for parents receiving family-based safety services (FBSS) or conservatorship (CVS) services. These groups are led by a parent who has successfully navigated the DFPS system, INV/FBSS, and 2INgage Director of Community Engagement.

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

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

**Referrals to Parent Support Groups**

It is the 2INgage Permanency Case Manager’s responsibility to ensure that parents being served by DFPS/2INgage are aware of the local PSGs in their area. Regional fliers and information are available from regional DFPS liaisons.

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

**SSI Coordinators**

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

See SSI Coordinators Safety Net Page

**State Office Divisions Collaboration**

Divisions within CPS State Office will add representatives from 2INgage to existing workgroups and communications. Example, 2INgage Senior Permanency Director will be invited to participate in Conservatorship Program Administrator calls and meetings. 2INgage will also be added to communication d-lists as needed to ensure they are receiving information related to service families and children.

Additionally, program specialists and subject matter experts from CPS divisions in State Office will be available to provide support and technical assistance to 2INgage just as they provide support and technical assistance to regional conservatorship programs.

**Substance Use Specialist**

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

See Substance Use Specialist Safety Net Page.

**Volunteer and Community Engagement**

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

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

For contacts, see Volunteer and Community Engagement Coordinators.
**Access to Resource Rooms**

Resource Rooms (RRs) are stocked with donated items. 2INgage Permanency Case Managers can access to meet the needs of children and families served by DFPS at the time of removal or initial placement. Independent volunteer groups generously coordinate the many aspects of the rooms. 2INgage will have access to these rooms during regular DFPS business hours. DFPS staff who assist with managing access to the rooms will assist 2INgage with access as needed. The Community Resource Coordinators can provide additional guidance on the use of the Resource Rooms.

DFPS Point of Contact: Taylor County Bluebonnet Resource Room – Amber Finck/Community Resource Coordinator, [Amber_Finck@dfps.texas.gov](mailto:Amber_Finck@dfps.texas.gov); All other Resource Rooms – Evelyn Hernandez/Community Resource Coordinator, [Evelyn.Hernandez2@dfps.texas.gov](mailto:Evelyn.Hernandez2@dfps.texas.gov); Community Engagement and Back Up to Resource Rooms - Kathy Rios, Region 2 Community Initiative Specialist, [Kathleen.Rios@dfps.texas.gov](mailto:Kathleen.Rios@dfps.texas.gov), (940) 249-0260

**Access to Conference/Visitation Rooms**

2INgage will have access to DFPS conference or visitation rooms during DFPS business hours. When 2INgage needs to utilize DFPS visitation rooms, the following applies:

- 2INgage will schedule all visitations in advance and can only be scheduled through the Designated Visitation Contact for each office. DVC list is maintained/updated by the Regional DFPS Point of Contact.
- 2INgage employees must present their badge and sign in and out at the front desk. 2INgage employees will only have access to the visitation room and designated restrooms in buildings.
- Visits can only be scheduled during normal business hours.
- DFPS staff will need to be on site for a visit to occur.
- The DFPS Visitation Contact per office will be responsible for entering the visit into Outlook and ensuring a DFPS staff person is present in the office during the scheduled visit.

Regional DFPS Point of Contract for concerns/updates related to scheduling: [Brandi Vance](mailto:Brandi.Vance@dfps.texas.gov), Regional Director Assistant

2INgage Point of Contact for concerns related to scheduling: Vice President of Permanency, [Randy Neff](mailto:Randy.Neff@dfps.texas.gov)

**Well-Being Specialist (WBS)**

Well-Being Specialists are subject matter experts who assist DFPS/2INgage staff, caregivers, and STAR Health in addressing basic and specialized behavioral and physical healthcare needs for children in all stages of service, including dental, vision, and pharmacy services. Their primary duties include troubleshooting for complex cases related to physical and behavioral health needs, serving as the DFPS Liaison to Superior for STAR Health services and facilitating primary medical needs staffings.

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

- Troubleshooting for Complex Cases related to Physical and Behavioral Health Needs.
- Participate in placement staffings to assist placement staff with resolving barriers to placement, particularly in cases where children have special physical or behavioral health needs.
- Assist staff and caregivers in resolving medical billing issues.
- Respond to psychotropic medication concerns through education and coordination.
- Ensure there is no interruption or delay in services for the child by coordinating communication between medical providers, STAR Health, and staff.
- Assist workers in obtaining prescription medications for children and young adults.
• Identify medical barriers to placement and request recommendations for on-going treatment through consultation with medical staff.
• Work closely with caseworkers and eligibility staff around Medicaid eligibility issues.
• Assist staff with out of state access to healthcare services for children placed through the Interstate Compact on the Placement of Children (ICPC) process.
• Assist DFPS/2INgage staff and caregivers in addressing any denial of services by STAR Health.

CPS Liaison to Superior/Cenpatico

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

Child Specific Staffings

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

For additional information see Medical Services Resource Guide.

Daycare Services

Foster Child Daycare

When foster daycare services are needed for a child, who is legally from Region 2 and placed within 2INgage's provider network, 2INgage staff will:

• Collect employment verification and send it to the Regional Daycare Placement Specialist. Acceptable verification includes: Copies of the caregivers last 3 paystubs
• Provide statement from the employer attesting to being employed full-time or working 40 hours a week. The letter must be dated, state the hours worked every week, include a work schedule, and be signed by HR/supervisor.
• In the case of self-employment, provide a completed Form 1806 Caregiver Statement of Self-Employment Income for the past three months and include the tax ID#/business license # if applicable.
• Provide the Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) to each foster parent household each time application for initial daycare services are requested. Note: Foster parent e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with foster parent approval in return email).
• Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child’s SUB stage.

• Send an email to the DISTRICT1DC@dfps.state.tx.us mailbox:
  o Subject line: Children’s Name, Caregiver’s Name, Case ID, CPS Unit #, Region #, County Name, #1 of number of children related to this referral
  o The body of the email must include the following:
    ▪ 2INgage Permanency Supervisor’s approval. The request cannot be processed if supervisor approval is not included in the email.
    ▪ A statement that employment verification has been provided and verified
    ▪ Number of hours each caregiver works
    ▪ Indicate if the caregiver is a teacher or works for a school district
    ▪ Gender of each child
  o Attach the following:
    ▪ Pre-qualification letter from CCS, (not applicable for CPS Referrals)
    ▪ Completed Daycare Request in IMPACT,
    ▪ Completed Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) unless an exception is met as described below:

**Exception:**

For the initial daycare authorization, the requirement for the foster parent to complete the form may be waived if it is determined the verification would prevent an emergency placement in the child’s best interest. Such an emergency placement would be one where the placement cannot be sustained or is unlikely to be sustained if the person requesting daycare were required to verify the unavailability of community resources. The waiver of the requirement must be approved by 2INgage Program Director and should only be utilized where the foster parent has exercised reasonable diligence but has been unable to verify community resource unavailability. If such a waiver is approved, the foster parent will be required to verify the unavailability of community resources at the time of the first daycare renewal.

The 2INgage Daycare Placement Specialist will complete the Daycare Request in IMPACT. After receiving the daycare request email and the daycare request in IMPACT the CPS Regional Daycare Coordinator will:

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

**Kinship Child Daycare**

2INgage may request Kinship Child Daycare for a child in DFPS conservatorship who is placed with kinship caregivers if:

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

Please see CPS Policy 8235.5 Kinship Child Daycare for additional eligibility criteria.
To request kinship daycare 2INgage will provide to the DFPS Regional Daycare Coordinator:

- **Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809)** to each kinship caregiver household each time an application for daycare services are requested. Note this form is required for both initial requests and renewals. **Note:** Kinship caregiver e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with kinship caregiver approval in return email).

- Verification of caregiver employment. Acceptable verification includes:
  - copies of the caregivers last 3 paystubs.
  - statement from the employer attesting to being employed full-time for 40 hours a week. The letter must be dated, state the hours worked every week, include a work schedule, and be signed by HR/supervisor.
  - in the case of self-employment, a completed Form 1806 Caregiver Statement of Self-Employment Income for the past 3 months.

- Send an email to the DISTRICT1DC@dfps.state.tx.us mailbox with: Subject line: Region, Caregiver's Name, Child's Name, Case ID, CPS/SSCC Unit #, County Name
  - If only 1 child’s name is entered in the subject line, but there are multiple children that requests were completed for, all their names must be provided in the body of the email.
  - The body of the email must have the 2INgage Permanency Supervisor’s approval in the body of the email. If supervisor approval is not included in the body of the email, the IMPACT daycare requests will not be provided.
    - A statement regarding the verification that has been provided for the employment verification and the number of hours each caregiver works (note employment verification must also be provided for renewals).
    - Indicate if the caregiver is a teach or works for a school district
    - Gender of each child
    - Attach the following: Completed Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) unless an exception is met as described below:

- 2INgage will complete the Daycare Request in IMPACT.

**Exception:**

For the initial daycare authorization, the requirement for the caregiver to complete the form may be waived if it is determined the verification would prevent an emergency placement in the child’s best interest. Such an emergency placement would be one where the placement cannot be sustained or is unlikely to be sustained if the person requesting daycare were required to verify the unavailability of community resources. The waiver of the requirement must be approved by the 2INgage Director of Permanency and should only be utilized where the foster parent has exercised reasonable diligence but has been unable to verify community resources unavailability. If such a waiver is approved, the foster parent will be required to verify the unavailability of community resources at the time of the first daycare renewal.

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

- Create the service authorization in IMPACT and send to CCMS.
- Upon receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See 8235.4 Foster Child Day Care
Waiving the Eligibility Criteria for Good Cause

The associate commissioner for DFPS has the authority to waive the eligibility provisions for good cause. The 2INgage Director of Permanency or designee may request a waiver for good cause on a case-by-case basis if there is a critical need or a safety concern. Waiver requests should be submitted to DISTRICT1DC@dfps.state.tx.us.

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

General Protective Child Daycare

General Protective daycare can be used for a Kinship placement of a child in DFPS conservatorship where the caregivers do not have an approved home study or have not signed the caregiver agreement when:
- The child does not turn 6 by September 1 (there is no before or after school daycare),
- Where all caregivers are employed and work at least 40 hours per week (daycare is available for children up to age 13 for school summer breaks), and
- Caregivers must complete and sign Form 1809 Foster/Relative & Other Designated Caregiver Daycare Verification

When general protective daycare services are needed for a child, who is legally from Region 2 and placed within 2INgage’s provider network, 2INgage staff will:
- Collect employment verification. Acceptable verification includes: Copies of the caregivers last 3 paystubs
- Obtain statement from the employer attesting to being employed full-time for 40 hours a week. The letter must be dated, on employer letter head, state the hours worked every week, include a work schedule and be signed by HR/supervisor and include their title.
- In the case of self-employment, provide a completed Form 1806 Caregiver Statement of Self-Employment Income for the past three months and include the tax ID#/business license # if applicable.
- Provide the Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) to each foster parent household each time an application for initial daycare services are requested. Note: Foster parent e-signatures are acceptable (completed/signed/scanned copy of the 1809 or on-line completion of the 1809 with foster parent approval in the return email).
- Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child’s SUB stage.
- Send an email to the DISTRICT1DC@dfps.state.tx.us mailbox:
  o Subject line: Region, County, Caregiver’s Name, Child’s Name, Case ID, daycare request date, #1 of (number of children related to this referral),
  o The body of the email must include the following:
    - 2INgage Permanency Supervisor’s approval. The request cannot be processed if supervisor approval is not included in the email.
    - A statement that employment verification has been provided and verified
    - Number of hours each caregiver works
    - If the caregiver is a teacher or works for a school district
    - The gender of each child
Family Reunification Cases

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

2INgage staff will:

- Complete a daycare request in IMPACT for each child needing daycare. If the children are in the same placement, they will be included in one request and the request is completed in the youngest child’s SUB stage.
- Send an email to the DISTRICT1DC@dfps.state.tx.us mailbox with: Subject line: Children’s Name, Caregiver’s Name, Case ID, Unit #, Region #, County name
  - If only 1 child’s name is entered in the subject line, but there are multiple children that requests were completed for, all their names must be provided in the body of the email.
  - The body of the email must have the 2INgage Permanency Supervisor’s approval in the body of the email. If supervisor approval is not in the body of the email, the IMPACT daycare requests cannot be processed.
  - The email must state the gender of each child.

Case Documentation

Documentation and Communication

When a child is placed in substitute care, 2INgage staff must document in IMPACT the:

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

2INgage will be recording contacts in IMPACT in the contact detail page and will follow guidelines seven days to complete documentation.

Maintaining Current Photograph of a Child

Upon assignment, the 2INgage Permanency Case Manager must review the case record. If there has been no clearly visible photograph of the child’s face taken within the last 60 days and uploaded into IMPACT, the 2INgage Permanency Case Manager must ensure one is taken and uploaded into IMPACT by the 60th day following the child’s removal. Thereafter, the 2INgage Permanency Case Manager must ensure there is at least one updated photograph for every child in DFPS legal custody taken every six months and uploaded into IMPACT.

Photographs may be taken by the 2INgage Permanency Case Manager or other individual, but must fit the criteria outlined below:

- The date the photo was taken must be known and should be from within the past six months.
- The photo must be an individual photo of the child in whose stage it is being uploaded.
- The child’s face must be clearly visible and not at a distance.

See CPS Policy 6133.73 Maintaining Current Photo of Child.
External Documentation

Primary Case Assignment
Between the Child and Family Referral and the 14th day, 2INgage Permanency Case Manager and the removal worker must cooperate in completing and filing all required legal forms and documents, attending court hearings, and ensuring that all required visits take place. If the adversary hearing is delayed, a staffing may be requested by either 2INgage or INV/FBSS at 14 days to discuss outstanding removal checklist tasks and responsibilities. The removal worker can request that the 2INgage Permanency Case Manager make them secondary on the FSU and SUB stages if needed.

External Case File Transfer
The removal worker will provide the external CPS file to the 2INgage Permanency Case Manager no later than the 14th day after removal.

External Case Documentation
The following documents must be included in the paper case record. This list is not all-inclusive. Region 2 may have additional requirements for documents that must be included in the case file. The INV/FBSS worker and 2INgage Permanency Specialist must ensure that as they are obtained, the documents are included in the case record, either in IMPACT or the paper file.

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

INV/FBSS worker will provide the Educational portfolio to the caregiver at the time of placement, with any documents available at that time. The INV/FBSS worker will continue to provide any additional documents to either the placement or 2INgage Permanency Case Manager as they are received.

See CPS Handbook policy 6134 External Documentation

Ensuring Safety

Abuse and Neglect Investigations on Child/ren in Conservatorship
When a report of abuse or neglect is received on child/ren in conservatorship, SCCC staff will need to follow all steps outlined in specific policies.
See policy [4221.1 RCCI Notifying CPS of Alleged Abuse or Neglect in Foster Homes](#) for RCCI’s steps and responsibilities in notifying the SSCC of abuse and neglect in foster homes and the SSCC’s responsibilities when an intake is Priority None (PN) and a Home History review is completed.

Notification Process

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

If a report involves alleged child-on-child victimization, the SSCC permanency specialist must follow the protocols in Appendix 4623: Protocol for RCCI Investigations Involving Child-on-Child Victimization in Foster Care.

If the report alleges child sexual aggression, the SSCC permanency specialist must follow the protocols in the [Child Sexual Aggression Resource Guide](#).

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

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

RCCI Investigations

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

CPI Investigations

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

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

CPS Risk Managers

CPS Risk Managers will facilitate staffings when a new intake/investigation is opened on an ongoing CPS case.

- Prior to the Risk Manager’s review, all documentation must be updated with contacts made and history with the family.
- Even if Investigations does not find a Danger Indicator, if the Risk Manager identifies current risk/safety concerns, then the Risk Manager will schedule a staffing.
- Before the staffing:
  - At least one person from each stage of service should have read the history prior to the staffing.
  - Contact with the family should have been made by each stage of service; though there could be times when this has not occurred due to a lack of cooperation by the family.
- Timeframes for staffing
- Family Reunification or Kinship – 14 days
  - Day 1 is the day notice is given to Risk Manager.

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

- The staffing must be documented by the Risk Manager in the Investigation, FSU, and Kinship stages, and include the following information
  - Participants
  - Patterns of behaviors and concerns/What are we worried about?
  - Identified safety threats along with intervention/services requested
  - What is working well?
  - Next steps identified/What needs to happen next?

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

- Exceptions:
  - If the Department has Temporary or Permanent Managing Conservatorship of the child; the investigation must be regarding the home of the Kinship caregiver or the child’s own home when they have been returned to their parents (Family Reunification). If the child is in a foster home (whether it is an unrelated or relative/fictive kin licensed home), the Risk Manager will not complete the staffing and will let the Permanency Director know so they can determine their own staffings.
  - If a child is in a licensed foster home, and the intake is regarding his/her sibling(s) who the Department does not have custody of, and the sibling(s) have remained in the parent(s) or legal guardian(s) home; a Risk Manager will complete a staffing; unless:
    - the Department has already completed an emergency removal or has a hearing scheduled to request removal of sibling(s). In this situation, the Risk Manager will not complete a staffing.
  - If the child was returned to parent(s) or legal guardian’s home (Family Reunification) but have already been removed from the home of the parent(s) or legal guardian(s) and the case has been staffed with the Permanency Director for directives, the Risk Manager will not hold a staffing and will let the Permanency Director know so they can determine their own staffings.
  - If the intake report is PN’ed or Administratively Closed, the Risk Manager will not review the report.
  - If the case does not meet criteria or it is unclear if the situation calls for a Risk Manager to complete a staffing, but CPI or CPS staff would like a staffing to occur, contact the Risk Manager and their supervisor to discuss.

- Follow up:
  - During the staffing if timeframes are determined, the Risk Manager will review contacts within the timeframes to determine if recommendations have been completed.
  - Once the new Investigation is closed, the Risk Manager will review contacts in the Investigation and Conservatorship stages to determine if the recommendations were followed. If recommendations were not followed and there is not information documented that states reasons why or if there are questions as to why the recommendations were not followed, an email will be sent to the SSCC Permanency Directors and Vice President of Permanency.

- Trends & Patterns
o The Risk Manager will send an email to the Permanency Director and Vice President of Permanency if there are some concerning issues with the history. The Risk Manager will cc their Lead.

o The Risk Manager can participate in unit and regional meetings to share trends and patterns that they see.

o Risk Managers will develop training as it relates to trends, patterns, and concerning issues to provide to field staff.

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

**When a Mother in an Open CVS Case is Pregnant**

See CPS Policy 6370 *When a Mother in an Open CVS Case is Pregnant*

The 2INgage Permanency Case Manager will coordinate a staffing during the 7th month of the pregnancy to discuss any safety concerns. Participants will include:

- 2INgage Permanency Case Manager
- 2INgage Permanency Supervisor
- 2INgage Permanency Director
- INV/FBSS Removal Supervisor (supervisor during the removal of the other children that are in CVS)
- INV/FBSS Removal Program Director

The 2INgage Permanency Case Manager will document the following information prior to the staffing for discussion:

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

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

**When Children Not in DFPS Conservatorship Are in Immediate Danger**

2INgage staff can take immediate action to have a child removed from a dangerous situation when the child is in DFPS Conservatorship due to the authority provided in the TFC authorizing Community-Based Care. See Legal Basis for Single Source Continuum Contractor to Act on Behalf of CPS.
There will be situations when 2INgage is working with a family where some of the children in the family are not in DFPS conservatorship. Should the 2INgage Permanency Case Manager feel the child(ren) are in immediate danger, the following actions can be taken depending on the severity of situation:

- Staff with 2INgage Supervisor for direction
- If at risk of immediate physical harm call 911
- Stay on site and call the local CPS office for assistance from the on duty INV worker
- If it is after hours, refer to the On-Call calendar for INV located in IMPACT.
- Call in a report to Statewide Intake (SWI) and inform that immediate response is needed if have not reached INV/on call
- Submit an intake to SWI for all new safety concerns

**Parental Child Safety Placements in CVS Cases**

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

For PCSPs where there are no children in the family for which DFPS obtains conservatorship, a referral to 2INgage is not needed.

If a PCSP is considered during a DFPS case to an open CVS case, both the INV/FBSS Program Director and the 2INgage Director of Permanency must approve the PCSP before it is implemented. 2INgage Permanency Case Manager will update the existing family referral in IMPACT.

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

For PCSP’s where at least one child in the family enters conservatorship and 2INgage will be providing services to the family, they will also provide services to the child(ren) in the PCSP and the caregiver (as needed) as a part of the family referral.

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

For additional information see:

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

**When a Child or Youth is Missing from DFPS Conservatorship**

If a child in DFPS’s managing conservatorship runs away, is discovered to be missing, or is suspected to have been abducted from a substitute care placement, and the child’s whereabouts are unknown, the 2INgage Permanency Case Manager must notify the:

- 2INgage Permanency Supervisor and the 2INgage Missing Children Email Box missingchildren@2INgage.org
- Appropriate law enforcement officials in the jurisdiction where the child went missing
- National Center for Missing and Exploited Children (NCMEC) at the web portal for child welfare reports or the 24-hour call center: 1-800-THE LOST (1-800-843-5678)
- 2INgage Vice President of Permanency and the Special Investigation Department via SIRrequestRegion02@dfps.texas.gov, after the 2INgage Permanency Case Manager files a missing
person or runaway report with NCMEC and with the law enforcement agency (LE) with jurisdiction for the location from which the child went missing

- 2INgage staff will input any needed information into IMPACT to generate a runaway/missing child event.
- All other persons described in 6151.3 Notification Requirements and Schedule

The 2INgage Permanency Case Manager must provide these notifications immediately and no later than 8 hours after learning the child is missing.

If a child in DFPS’s managing conservatorship returns to substitute care after being reported to law enforcement as a runaway or missing person, the child’s Permanency Case Manager must provide notice as described in 6151.3 Notification Requirements and Schedule.

The 2INgage Permanency Case Manager and/or the DFPS Special Investigator (SI), whoever made first contact with the child, must interview the child to do the following:

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

If the interview identifies the child as a victim of crime, including trafficking, the 2INgage Permanency Case Manager must immediately, but no later than 12 hours after the interview, report the situation to local law enforcement and the SI mailbox.

If the child is identified as a victim of abuse or neglect or familial trafficking, the 2INgage Permanency Case Manager must also notify Statewide Intake to make a report.

If the 2INgage Permanency Case Manager completes the interview, the PCM must share the information with the SI, and if the SI completes the interview, the SI must share the information with the PCM.

If the reasons the child ran away or was absent from care are revealed during the interview, the 2INgage Permanency Case Manager must, to the extent possible, address those factors in the child’s current and future placements.

When a missing child is recovered, the Permanency Case Manager follows the regional practices for conducting a Youth Recovery Roundtable, also called a wraparound meeting with the child. This allows the child an opportunity to discuss the reasons for running away and to develop alternatives to running away in the future.

2INgage’s Vice President of Permanency serves as the 2INgage point of contact for missing children. The point of contact:

- Oversees and coordinates missing children issues for the region.
- Helps to ensure assignment of the Special Investigator.
- Maintains an Excel tracking spreadsheet listing children and youth from the catchment who are missing.
- Liaisons with DFPS State Office staff on tracking, data reconciliation, policies and protocols, and other needs.

2INgage Point of contact: Randy Neff, Vice-President of Permanency, Rneff@2INgage.org and Kaycee Robles, Vice Presidency of Permanency, krobles@2INgage.org.
Placement For Children From Other Regions That Are Recovered In An SSCC Catchment Area And SSCC Youth Recovered In Legacy Regions

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

Possible scenarios include, but are not limited to:
- SCC youth recovered in a legacy region
- Legacy youth recovered in a CBC catchment area
- SCC youth recovered in other CBC catchment areas will be covered in an agreement between the SSCC’s.

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

Circumstances that may require a temporary placement for the youth may include, but are not limited to:
- Recovery at a late hour and a distance from Legal Region/Catchment that would not support safe return at the immediate time of recovery
- Weather conditions in either recovery or legal region/catchment that do not support a safe return to the Legal Region/Catchment at the immediate time of recovery

Those involved in planning may include:
- Legal Region/Catchment DFPS/SSCC Program Director depending on Stage I or II
- Recovery Region/Catchment DFPS/SSCC Program Director depending on Stage I or II
- SCC Intake Director
• Community-Based Care Administrator

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

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

- Legal Region SSCC secures in-network placement in the recovery region if they have an available contract with an opening.
- Legal Region SSCC seeks assistance from Recovery Region’s CPU for temporary placement.
- If this is the plan, Recovery Region Program Director facilitates the referral to CPU for assistance.
  - Legal Region CPU requests assistance from Recovery Catchment SSCC for temporary placement.
  - Region 1 – Saint Francis Ministries Intake
    - 806-381-3573
    - TXreq1placement@st-francis.org
  - Region 2 – 2Ingage Care Management
    - 877-254-6135
    - cmd@2ingage.org
  - Region 3b – Our Community Our Kids (OCOK) Intake
    - 844-777-OCOK (6265)
    - Intake@oc-ok.org

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

**IMPACT documentation for the temporary placement**

<table>
<thead>
<tr>
<th>Youth Legal Region is SSCC Catchment</th>
<th>The placement has a DFPS contract only</th>
<th>The placement has both SSCC and DFPS contract</th>
<th>The placement has an SSCC contract only</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBCA should be contacted and will aid in placement documentation. Payment will be directly paid to the provider and not through the SSCC. *See documentation steps below.</td>
<td>Placement documented under SSCC network and paid via 3-tiered placement under SSCC contract</td>
<td>Placement documented under SSCC network and paid via 3-tiered placement.</td>
<td></td>
</tr>
</tbody>
</table>

| Youth’s legal region is a legacy region | Placement documented under DFPS contract and paid via 2-tiered placement | Placement documented under DFPS contract and paid via 2-tiered placement | CBCA should be contacted and will aid in placement documentation. Have the SSCC provide you |
The placement has a DFPS contract only | The placement has both SSCC and DFPS contract | The placement has an SSCC contract only
---|---|---
with the specific RID for the organization that only has an SSCC contract. Payment will then need to be requested for the organization via 4116 will be made to the provider for the emergency shelter rate.

**IMPACT will not generate payment if placements are started and ended on same date.**
- If this occurs, the SSCC or DFPS will notify the CBCA that a temporary placement for placement services across catchment boundaries that started and ended on the same date.
- The CBCA will verify the circumstances and contact the CAM to request that payment be requested via 4116 at the Emergency Shelter rate.
- All placements that meet this criteria of having a start date and end date on the same date payment via 4116 should be directed to the provider.

**DFPS Policy Regarding Recovery of a Runaway Child/Youth:**
- 6460 When a Child or Youth is Missing from CPS Conservatorship
- Locating Missing Children in DFPS Conservatorship - Resource Guide
- 4280 Temporary Absence from Paid Placement
- Runaway/Missing Youth And Victims of Human Trafficking Resource Guide
- Human Trafficking Resource Guides

**DFPS Protocol for Care Coordination**

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

The Protocol for Care Coordination addresses how DFPS collaborates with other anti-trafficking partners in identification and recovery of victims and subsequent service provision using the following:
- Care Coordination Teams
- Advocate Agencies for Human Trafficking and Commercially Sexually Exploited Youth

The DFPS Protocol for Care Coordination excludes: Bexar, Dallas, Harris, Travis and Tarrant counties who are operating under the DFPS Human Trafficking Response Protocol.
See Human Trafficking Safety Net for resources available to children who are placed in other regions and/or counties.

6462 Confirmed or Suspected Victims of Human Trafficking
Responsibility for Contact and Services across Regional Lines

When a child or youth resides outside of the region that has legal jurisdiction, DFPS/2INgage can request to maintain contact, provide services, and monitor the child’s or youth’s safety:

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

**Courtesy Supervision**

When a CPS/2INgage unit provides courtesy supervision, the unit providing the supervision must:

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

CPS/CPI units outside Region 2 area may make request for supervision assistance from 2INgage and likewise, 2INgage may make request for supervision assistance from CPS units outside of the Region 2 area.  

[6314.1 Coordination Between Primary Caseworker and Courtesy Supervision Caseworker](#) and all of its sub items.

[6320 Conducting Visits with the Family](#)

CPS/2INgage can request courtesy supervision when a parent is residing outside of the region and/or when a child or youth in conservatorship is placed outside of the region that has legal jurisdiction and is residing with a parent. See [6314 Services to Children and Parents across Regional Lines](#).

See CPS Handbook policies:

**Local Permanency Supervision**

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

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

**Kinship Home Assessment Requests**

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

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

Either 2INgage staff or a contractor may complete the written home assessment and risk assessment.

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

**Requesting Services Across Regional lines from 2INgage**

*Request for Kinship, Conservatorship and Adoption Services (aka Universal Referral Form)* Form 2077 is used to request Kinship, Conservatorship and Adoption services. The 2INgage mailbox identified to request all case assignments is CMD@2INgage.org. 2INgage will assign the case within 2 business days and notify the caseworker from the sending region of the caseworker assigned.

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

**2INgage Requesting Services from Another SSCC Catchment or DFPS Region**

2INgage will also use the *Request for Kinship, Conservatorship and Adoption Services (aka Universal Referral Form)* Form 2077 to request services from other catchments or DFPS Regions. Please follow the instructions on the *Form 2077 Instructions* for additional information regarding completing and submitting the form to the region services are requested from.

**Payment for Purchased Client Services/Home Assessments**

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

### Payment for Purchased Client Services

<table>
<thead>
<tr>
<th>If...</th>
<th>Then...</th>
</tr>
</thead>
<tbody>
<tr>
<td>2INgage primary case manager requests purchased client services (i.e. counseling) for a parent or caregiver who resides in another DFPS Region</td>
<td>The 2INgage primary case manager will manage the payment for services through 2INgage’s billing system. CPI, CPS courtesy, LPS, and KDW staff will NOT initiate a Service Authorization (form 2054) for any purchased client services for family members served by 2INgage.</td>
</tr>
<tr>
<td>Another DFPS Region requests purchased client services for a parent or caregiver who resides in an SSCC catchment area</td>
<td>The primary CPS/CPI case manager will issue payment for services by submitting a Service Authorization (Form 2054) in IMPACT with the legacy provider’s service code.</td>
</tr>
</tbody>
</table>

### Payment for Kinship Home Assessments

<table>
<thead>
<tr>
<th>If...</th>
<th>Then...</th>
</tr>
</thead>
<tbody>
<tr>
<td>2INgage primary case manager requests a kinship home assessment on a caregiver that resides in another DFPS Region</td>
<td>The 2INgage primary case manager will manage the payment for services through the 2INgage’s billing system. CPI, CPS courtesy, LPS, and KDW staff will NOT initiate a Service Authorization (form 2054) for any purchased client services for family members served by 2INgage.</td>
</tr>
<tr>
<td>Another DFPS Region requests a kinship home assessment on a caregiver who resides in an SSCC catchment area</td>
<td>The primary CPS/CPI case manager will issue payment for services by submitting a Service Authorization (Form 2054) in IMPACT with the legacy provider’s service code (68A) and selecting the SSCC as the provider.</td>
</tr>
</tbody>
</table>
Payment for Purchased Client Services When No Family Referral is Present

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

Process For Transferring A Legal Case Between 2INgage and DFPS

<table>
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<tr>
<th>If...</th>
<th>Then...</th>
</tr>
</thead>
</table>
| A Court/Judge orders a case to transfer from an SSCC region to a DFPS region | 1. The SSCC Primary case manager notifies their chain of command up to the Vice President of Permanency.  
2. The Vice President of Permanency notifies the receiving region’s DFPS Program Administrator of case transfer by email within 2 business days. |
| A Court/Judge orders a case to transfer from a DFPS region to an SCC region | 1. The DFPS primary caseworker notifies their chain of command up to the DFPS Program Administrator.  
2. The DFPS Program Administrator notifies the receiving region’s Vice President of Permanency of case transfer by email within 2 business days. |

The sending region’s Vice President of Permanency /DFPS Program Administrator or designee must set up a case staffing/transfer between the sending and receiving region within 5 business days of notification. Attendees should include Permanency/Program Directors, Supervisors, and case manager/caseworkers.
- Legal representation for both the sending and receiving counties (county attorney or ADA) should be notified and invited to staffing.
- Staffing should result in a plan with identified tasks, timeframes, needs of children, youth and family members, and who will be responsible for them.
- To ensure that no deadlines are missed, the plan should include when and who will schedule the next required court date in the sending county until the case is legally accepted in receiving county.
- All participants will receive a copy of the agreed upon plan developed from the staffing (the sending region should be responsible for taking notes) and a copy of the transfer order if available.

The Permanency Director/DFPS Program Director for the receiving region maintains communication with the attorney representing DFPS for the receiving region to ensure the case is received and no required timeframes for hearings are missed. Once the case is received by the court, the receiving Permanency Director /DFPS Program Director will notify the Vice President of Permanency and DFPS Program Administrator that the case has transferred courts.
A case is not officially transferred from one region to another until:
  o A judge signs an order to transfer and the court file is received by the receiving county and docketed for a court hearing.
  o The Permanency Director/DFPS Program Director for the receiving region must regularly follow up with the attorney to determine if the case has been received.
  o The case is reviewed by the sending and receiving supervisors to ensure that all agreed-upon tasks have been completed. Once the supervisors agree that tasks are complete the case is reassigned to the receiving region in IMPACT. The paper case file must be sent to receiving region within 1 business day after the case is assigned to the receiving region in IMPACT.
  ▪ When the case transfers the receiving region will need to update the following in IMPACT:
    • Update the Legal Status to reflect the County, Court and Cause Number the case transferred to;
    • Enter a Legal Action for the Transfer of Jurisdiction.
  ▪ If the case is transferring from 2INgage to a CPS/SSCC region, then 2INgage staff will need to end the SSCC child and family referrals as well as the SSCC Service Authorizations in IMPACT before assigning the case to the receiving CPS/SSCC staff.

Legal Services

2INgage will assume responsibility of court-related duties regarding the child, including but not limited to:

  • Providing required notifications or consultations.
  • Preparing court reports.
  • Attending judicial and permanency hearings, trials, and mediations.
  • Complying with applicable court orders.
  • Ensuring the child is progressing toward the goal of permanency within state and federally mandated guidelines. Please refer to CPS Policy 5000 regarding Legal Services.

See appendix for Subpoena Protocol for SSCC.

Paying for Court-Related Services

Resources to cover legal expenses varies by Individual County in the Region 2 area. Examples of legal services which may incur a fee from the service provider include, but are not limited to:

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

For any legal services that are required by the court and not covered through Purchased Client Services funding, STAR Health, or county funds, 2INgage will decide, in coordination with the Contract Administration Manager (CAM), on how the services will be paid.
If the decision is that DFPS will pay the provider, 2INgage will submit the following items as soon as possible to the CAM:

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

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

**Court Orders for Healthcare Related Treatment and Services**

When a court orders a healthcare service, treatment or testing for a child in DFPS conservatorship, or enters an order that declines to follow the recommendation of a health care professional who has been consulted regarding a health care service, procedure, or treatment for a child in DFPS conservatorship, 2INgage Permanency Case Manager will take the following steps immediately:

- Notify the 2INgage Permanency Supervisor about the order. The 2INgage Permanency Case Manager and supervisor will notify the attorney representing DFPS/2INgage if there is a concern that the order needs to be appealed in any way.
- Notify the regional Well-Being Specialist and provide a copy of the written order when it is received.

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

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

If the judge orders a child to undergo a specific type of medical service, treatment, or testing that may not be covered by Medicaid, 2INgage will take the following steps:

- Immediately inform the attorney representing DFPS/2INgage (within 3 days of the court's rendering of the order) that 2INgage cannot guarantee a doctor will agree to order the specific service, treatment, or test. This allows the attorney to take immediate action in court to inform the judge or pursue legal remedies, such as asking the judge to reconsider the order.
- If and when the court order is issued, inform the child's Medical Consenter (if it is someone other than the 2INgage Permanency Case Manager) about the order, and direct him or her to:
  - Ask the doctor to order the service, treatment, or test at the child's next visit with a STAR Health general practitioner.
  - Make sure the doctor knows that DFPS/2INgage has been told that Medicaid does not generally cover the service, treatment, or test.
  - Encourage the doctor to request prior authorization and confirm medically necessary coverage before ordering the service, treatment, or test.

**Doctor Refuses to Order Medical Services, Treatments, or Tests**

If the doctor refuses to order the service, treatment, or test, 2INgage Permanency Case Manager will immediately get the doctor to provide written documentation of the doctor's refusal.

2INgage Permanency Case Manager will provide the doctor's documentation to the attorney representing DFPS/2INgage. Ensure that the documents are filed with the court and provided to the parties in the case.

2INgage Permanency Case Manager will file the documentation in the case record.
Doctor Orders Medical Services, Treatments, or Tests

If the doctor orders the service, treatment, or test, 2INgage Permanency Case Manager will notify the supervisor and inform the attorney. At the next court hearing where medical care is discussed, 2INgage Permanency Case Manager will report back to the judge the results and any subsequent medical care the doctor prescribes.

When Medicaid Does Not Pay

When Medicaid will not pay for the service, treatment, or test, 2INgage will decide, in coordination with the CAM, how the provider will be paid. If the decision is that DFPS will pay the provider, the SSCC will submit the following items as soon as possible to the CAM:

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

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

When Medicaid Does Pay

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

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

Notice Requirements for Elevating Certain Court Orders

CPS regional management, legal representatives, and DFPS state office, must receive timely notification about court orders that may create problems for the CPS program or may require immediate legal action. 2INgage staff will ensure notices to Region 2 Managing Attorney and cc Regional Director.

See CPS Policy 5311 Notice Requirements for Elevating Certain Court Orders.

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

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


- Court orders directing a specific service level for a child.
- Standing orders specific to one jurisdiction.
- Court orders that direct an action that conflicts with DFPS policy or DFPS’ recommendation in the case.
- Court orders that may result in a threat to child safety.

**Services to Older Youth in Care**

**Birth Certificates for Youth**

See Obtaining Certified Birth Certificates.

2INgage PAL Email Box: PAL@2INgage.org

COS Email Box: COS@2INgage.org

2INgage contact: Stacy Lee, 2INgage Director of Permanency Support: Slee@2INgage.org

**Credit Checks for Youth**

Every youth in the conservatorship of DFPS age 14 up to age 18, receives a copy of their consumer credit report annually. In addition to ensuring that a youth’s credit is checked, and any discrepancies are found and disputed, the 2INgage Permanency Case Manager is also required to share the credit report with the youth, provide the youth with a copy, and explain the importance of maintaining good credit.

For additional information regarding the process see Credit Reports for Youth on the DFPS Safety Net.

**Transitional Living Services**

2INgage will work to prepare older youth in DFPS conservatorship who are transitioning from substitute care to adulthood. 2INgage, in general, will be responsible for all the provision of transitional living services for older youth.

For Additional information see:

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

**Transition Plan Development**

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

See CPS Handbook policy 6252 Permanency Planning Meetings for Youth 14 and Older

During the 90 days before the youth ages out of care, whether at 18 or a later age in extended foster care, 2INgage must provide the youth with assistance and support in developing a transition plan that:

- Is personalized at the direction of the youth
- Includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services
- Includes information about the importance of designating another individual to make health care treatment decisions on behalf of the youth, if the youth becomes unable to participate in such
decisions and the youth does not have, or does not want, a relative who would otherwise be authorized under state law to make such decisions

- provides the youth with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under state law
- Is as detailed as the youth may elect

Requests for assistance in transitional plan development for youth who are placed but not legally from the catchment area should be coordinated with the youths 2INgage Local Permanency Specialist if assigned. If 2INgage Local Permanency Specialist is not providing services to the youth, please follow the process for requesting services across regional lines from 2INgage. On the Form 2077 complete request for Local Permanency Services and indicate that the service requested is Transitional Plan Development assistance.

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

2INgage will ensure the development and delivery of PAL Life Skills Training for eligible youth:

- All youth placed in DFPS conservatorship within the catchment area paid and non-paid placements (including kinship) and
- All youth from Region 2 catchment placed in paid and non-paid placements (including kinship) outside the catchment.

For eligible youth, please see policies [10211.1 Targeted Priority Population](#) and [10211.2 Additional Eligible Population](#). As part of the delivery of PAL training, the SSCC will ensure the arrangement for the Casey Life Skills Assessments and its interpretation to be shared and discussed with the youth and caregiver. The SSCC will ensure that experiential and community-based learning is included in all PAL training and services.

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

Please refer to [PAL Life Skills Assessment and Training Flow Chart](#) for additional guidance. Please note that 2INgage is now responsible for actions previously identified as CVS or PAL responsibilities.

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

2INgage will identify young adults from Region 2 for either Extended Foster Care or Return to Foster Care programs.

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

**Extended Foster Care**

When a young adult from Region 2 is interested in staying in extended foster care, 2INgage will:

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

**Supervised Independent Living**

Supervised independent living (SIL) placement settings are living arrangements offered through the Extended Foster Care program that allow young adults to reside in a less restrictive, non-traditional foster care setting while continuing to receive casework and support services to become independent and self-sufficient.
To be eligible for SIL, young adults must be able to live independently in a setting with minimal to no supervision. Through conversations with the young adult and the initial assessment, the young adult will be placed in the setting which best meets his or her needs. In order to maintain placement in the SIL program, young adults must comply with the Voluntary Extended Foster Care Agreement (form 2540). Young adults can move through the settings offered based on behaviors, enhancement of skills, or overall progress made in the young adult’s current setting. The SIL case managers will maintain documentation of the young adult’s progress in case notes, as well as in the subsequent service planning meetings, which will be filed in the young adult’s case record.

2INgage will continue to follow established protocol regarding SIL placements for Youth Adults being served that are from a legal county within the Region 2 catchment area and those that are from another legal county that desire SIL placement in the Region 2 area.

Please refer to Supervised Independent Living (SIL) Flow Chart for additional guidance. Please note that 2INgage is now responsible for actions previously identified as CVS or PAL responsibilities.

Return to Foster Care

A young adult who was in DFPS conservatorship when turning 18 and leaves foster care may return to Foster Care at any time prior to the month before the young adult’s 21st birthday, provided the young adult meets the requirements in 10420 Qualifying for Extended Foster Care, or at any time prior to the month before the young adult’s 22nd birthday if they are regularly attending high school or in a program leading to a high school diploma or General Education Diploma (GED). Return to Foster Care does not include young adults who are in Trial Independence (see 10510 Trial Independence).

Referrals for a young adult who wants to return for Extended Foster Care may include young adults whose legal case was outside the Region 2 catchment area, but the young adult now lives in the Region 2 catchment area. Young adults residing in Region 2 who not from the Region 2 area that indicate to their PAL Coordinator a desire to Return to Care in Region 2 will be prescreened for their sincerity and eligibility for returning to care and then referred to the 2INgage Independent Living Specialist.

If placement is found:

2INgage Permanency Case Manager will:
- Ensure the young adult with completes the Voluntary Extended Foster Care Agreement (form 2540)
- Provide completed Voluntary Extended Foster Care Agreement (form 2540) to the CPS Foster Care Eligibility Specialist.

2INgage will create, maintain and share an accurate log for auditing purposes of young adults discharged with the regional CBC Administrator.

National Youth in Transition Database (NYTD)

NYTD Outcomes Survey

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

2INgage Independent Living Specialist must track survey completion, assist youth with taking the survey and enter survey responses in IMPACT according the federal survey reporting requirements.

- The NYTD Information Page in IMPACT alerts 2INgage about youth from their catchment area who have been identified to take the survey, status of the survey, and due date of the survey during each survey period (A or B).
• 2INgage will check the NYTD Information Page in IMPACT to determine which of their assigned youth needs to take the survey.
• 2INgage will take the lead in notifying the identified youth or youth adult their survey is due, obtain survey responses and enter their survey responses in IMPACT.
• CPS State Office will monitor 2INgage’s NYTD survey completion progress and will send out periodic information about the status of 2INgage’s survey completion rate.
• When requested, 2INgage will update CPS State Office on progress and plans to get surveys completed by period data entry due dates.
• 2INgage will maintain current contact information in IMPACT for youth placed within their provider network.

NYTD Data and Information Errors

• 2INgage must check the NYTD Information Page in IMPACT for DATA and INFORMATION errors in IMPACT and make corrections and updates.
• DATA and INFORMATION errors correspond to surveys and services provided during the reporting period.
• When requested, 2INgage will update CPS State Office on progress and plans to get DATA and INFORMATION errors completed by period data entry due dates.
• Details on correcting data and information errors can be found in the NYTD Manual in SMILEY.

NYTD Services

• 2INgage will enter services provided to successfully transition youth to adulthood in the Preparation for Adult Living (PAL) stage in IMPACT.
• Services entered in IMPACT must be either paid for or provided by 2INgage.
• When requested, 2INgage will update CPS State Office on progress and plans to get services entered by period data entry due dates.
• Details on entering services in IMPACT can be found in the NYTD Manual in SMILEY and in the PAL Staff Manual.

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

PAL Aftercare Services

PAL Aftercare services and programs are available for young adults from Region 2 and the resources for these services will be shared between 2INgage and DFPS. Please see 10200 Preparation for Adult Living (PAL) for additional information regarding these services and their eligibility requirements.

To access, 2INgage Independent Living Specialist will complete a Service Authorization (2054) to the contractor providing the service and the contractor will bill DFPS directly.

Permanency Care Assistance

When a Region 2 child/youth’s permanency plan calls for a change to permanent managing conservatorship by a relative or fictive kin (regardless of the relative/fictive kin's location) with intent to pursue permanency care assistance, 2INgage staff must follow current CPS Handbook policy 6680 Permanency Care Assistance.
When a prospective kinship permanent managing conservator is nearing completion of the required six consecutive months as a verified foster parent, the child’s 2INgage Permanency Case Manager must begin working with the caregiver to apply for assistance.

The 2INgage Permanency Case Manager must follow current 6685 Applying for Permanency Care Assistance.

2INgage Permanency Case Manager will, at least 90 days prior to PMC transfer date:

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

Steps for Permanency Care Assistance Packets

Eligibility requirements for PCA

- The caregiver must enter into a permanency care assistance agreement with DFPS on behalf of the child prior to becoming the child's permanent kinship conservator.
- The child is eligible to be the subject of a permanency care assistance agreement if all the following eligibility criteria apply to that child:
  - The child's prospective permanent kinship conservator:
    - is related to the child by consanguinity or affinity or has had a longstanding and significant relationship to the child prior to 2INgage placing the child in the home of that person and must have been eligible for the receipt of foster care reimbursements on behalf of the child who is the subject of the permanency care assistance agreement for at least six consecutive months prior to the effective date of the permanency care assistance agreement.
  - The child has demonstrated a strong attachment to the prospective kinship permanent conservator and that person has a strong commitment to caring permanently for the child.

2INgage Tasks to Complete Before Transferring PMC

- At the time the permanency care assistance agreement is signed, 2INgage has determined that neither adoption nor reunification are appropriate permanency options.
- If the child will be at least 14 years of age at the time the permanency care assistance agreement is signed, 2INgage has consulted with the child about the prospective permanent kinship conservator's commitment to assume permanent managing conservatorship of the child.
When the child is nearing the completion of being in the foster home for 6 consecutive months, 2INgage will prepare a complete PCA packet for each child using the Permanency Care Assistance Checklist/Guide-Form 2124.

The checklist requires a 2INgage Supervisor’s original signature and date for each child.

Original signatures & dates are required on the family’s forms (PCA Request/Form 2115, PCA Worksheet/Form 2116, and Kinship Family Resources/Form 2118, found on Smiley Forms webpage/CPS/Permanency Care Assistance).

If a sibling group, a complete set of forms is required for each child. Scans or faxes are not accepted.

2INgage will gather source documentation needed for each child’s packet (reference PCA Checklist/Guide).

The PCA/AA negotiator will receive the required information from the eligibility specialist to create the FAD stage and will also request a Vendor ID Number. The PCA/AA negotiator will assign the FAD stage to the 2Ingage Permanency Support Supervisor Beverly Hutchins once the FAD stage is created. In the Sub stage, PCA tab, complete a PCA application for each child in IMPACT and submit to the assigned Eligibility Specialist. Cases are assigned to the Eligibility Specialist by county. Refer to Foster Care Eligibility Coverage Map. The PCA application must be completed at the time the PCA packet(s) are emailed to the 2INgage Adoption Mailbox.

2INgage will ensure the Authorized Level of Care (ALOC) listed in IMPACT is correct and accurate for child.

2INgage will mail complete packet(s) to adoption@2Ingage.org for final review at least 30 days prior to the transfer of PMC. Once reviewed, the 2INgage final reviewer will email the complete packet(s) to the Eligibility Specialist assigned to that county. Refer to the Foster Care Eligibility Coverage Map. The complete packet(s) will also be mailed to the assigned Eligibility Specialist.

2INgage will mail complete packet(s) to adoption@2Ingage.org for final review at least 30 days prior to the transfer of PMC. Once reviewed, the 2INgage final reviewer will email the complete packet(s) to the Eligibility Specialist assigned to that county. Refer to the Foster Care Eligibility Coverage Map. The complete packet(s) will also be mailed to the assigned Eligibility Specialist.

It is preferred to NOT have a court date scheduled to transfer PMC. This is to allow sufficient time for the negotiator to schedule a time to meet with the family.

The Eligibility Specialist will review each packet for completeness. Once completed, the Eligibility Specialist will email a Preliminary Determination notification to 2INgage, 2INgage Supervisor and the Regional Negotiators.

The Negotiator will meet with the family either in person or by phone, negotiate subsidy benefits, and obtain caregivers’ signature on the permanency care assistance agreement. The Regional Negotiator will email 2INgage when signed PCA negotiations are completed and that PMC can be transferred to caregiver. The family will send the original signed PCA agreements to the Eligibility Specialist to be filed.

Do NOT proceed with transferring PMC until PCA benefits have been negotiated and the Negotiator has notified 2INgage the negotiation has been completed.

2INgage Tasks to Complete After Transferring PMC

- After the final court hearing, scan the order signed by the judge to the assigned Eligibility Specialist.
- In the SUB stage, update legal status with “PMC to REL/FK”
- End placement in the SUB stage with reason “Child placed in PCA.”
- Email foster care eligibility to end billing/FC benefits.
- Assign the PCA stage as primary to the eligibility specialist.
Adoption

2INgage will be responsible for the full array of adoption services in Region 2 as outlined in CPS Policy 6900 Adoption Preparation and Support Services. Out-of-state Interstate Compact on the Placement of Children (ICPC) adoption services requests will follow established ICPC protocols.

2INgage will work with the DFPS Adoption Subsidy Negotiator and Eligibility Specialist in securing adoption assistance for eligible families.

Steps for Adoption Assistance Packets

Child meets one of the special needs criteria below:

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

2INgage Tasks to Complete Prior to Adoptive Placement

- Request LOC review from Youth for Tomorrow (YFT).
- Prepare a complete subsidy packet for each child using the Adoption Assistance Checklist/Guide-Form 2368 (found on Smiley/CPS/Post-Adopt). The checklist requires the Permanency Case Manager’s original signature and date for each child.
- Original signatures & dates are required on the family’s forms (Adoption Assistance Request/Form 2250, Adoption Assistance Worksheet/Form 2253A, and Adoptive Family Resources/Form 2253B, found on Smiley/CPS/Post-Adopt). If sibling group, a complete set of forms is required for each child. Scans or faxes are not accepted.
- Gather source documentation needed for each child’s packet (reference Adoption Assistance Checklist/Guide).
- The PCA/AA Negotiator will receive the required information from the Eligibility Specialist to create the FAD stage and will also request a Vendor ID Number. The PCA/AA Negotiator will assign the FAD stage to the 2INgage Permanency Support Supervisor Beverly Hutchins once the FAD stage is created.
- Ensure the Authorized Level of Care (ALOC) listed on IMPACT is correct and accurate for child.
- 2INgage Supervisor will open an ADO stage.
- In the ADO stage, complete an adoption assistance application for each child on IMPACT and submit to assigned Eligibility Specialist assigned to that county. (Refer to Foster Care Eligibility Coverage Map).
- The adoption assistance application must be completed at the time the original packet(s) are submitted to the 2INgage adoption mailbox.
- Email the complete packet(s) to adoptions@2INgage or for final review at least 30 days prior to ADO placement.
- Once reviewed, the final reviewer will email the original packet(s) at least 30 days prior to ADO placement to the Eligibility Specialist assigned to that county (Refer to Foster Care Eligibility Coverage Map). The complete packet(s) will also be mailed to the assigned Eligibility Specialist. After the adoptive placement, end placement in the SUB stage, and enter new placement in the ADO stage with the RID received from the PCA/AA Negotiator.
Subsidy Tasks to Complete

- The DFPS Eligibility Specialist will review each packet for completeness. If complete, the Eligibility Specialist will email a Preliminary Determination notification to 2INgage, 2INgage Supervisor and the Regional Negotiators.

CPS Negotiator Tasks to Complete

- The Negotiator will contact the family and negotiate subsidy benefits and will fill out the adoption assistance agreement. Do NOT proceed with the adoption until subsidy benefits have been negotiated.
- The Regional Negotiator will email 2INgage the agreements for the family to sign at the adoptive placement. The Regional Negotiator will sign the agreements prior to mailing them to the adoptive family. The 2INgage worker will return the signed original agreements to the assigned foster care Eligibility Specialist to be filed.

2INgage Tasks after Adoption is Final

- Do not change the child’s name in IMPACT as the eligibility specialist will change the child’s name once the adoption is finalized.
- Scan the adoption decree to the eligibility specialist.
- In the ADO stage enter the legal status of “Adoption Consummated.”
- Once the eligibility specialist has entered the subsidy benefits in IMPACT, close the SUB and ADO stages. Make sure the ADO stage has the new adoptive names of the children in the person list and as stage name.
- A PAD stage will show up (if child is subsidy-eligible) once the ADO stage is closed. Assign the PAD stage as primary to the eligibility specialist.

Issues that cause a delay with presentation staffing/adoptive placement

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

For additional information see CPS Policy 1700 Adoption Assistance Program.

Authorization of Adoption Services

2INgage will:

- Complete the service authorization (form 2054) for the identified adoption service to 2INgage in IMPACT:
  - In the comments section of the 2054, add the following:
    - The licensing agency (CPA) name.
    - Whether the 2054 is for a sibling set; if so, how many siblings.
    - The type of adoption (e.g. Foster-to-adopt/kinship/matched).
    - The Youth for Tomorrow (YFT) Level of Care (LOC) Determination for the child.
Post Adoption Services

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

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

2INgage Regional Post-Adoption Liaison: Beverly Hutchins, 2INgage Adoption Supervisor, will facilitate referring the family to the local post-adoption service provider.

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

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

- Fielding calls from post adoption families who may be in crisis or in need of Post Adoption Services and referring them to the appropriate provider.
- Working as a facilitator between, CPI, post adoption provider and the family.
- Be a subject matter expert for Region 2 catchment and for CPI and other CPS staff to reach out to with questions.
- Review service plans completed by the post adoption provider as appropriate.
- Coordinate, facilitate, and attend staffings with post adoption families, post adoption providers, CPI (If applicable) to assist in identifying steps and roles if needed for Return to Care placement.
- Be a point of contact for their regional post adoption providers.
- Stay in communication with the 2INgage Adoption Specialist as well as attend quarterly providers meetings (conference lines will be available).
- If any child/youth has the potential to enter Post Adoption Substitute Care Services and DFPS is seeking Joint Managing Conservatorship, the CBCA, CPS Adoption Program Specialist, as well as, the 2INgage Adoption Specialist will need to be notified.
- The Post Adoption Liaison or their designee will process, which includes entering and approving 2054 service authorizations for the post adoption cases.

2INgage will notify the CBCA of any children/youth that are unable to be served by Post Adoption Services.

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

DFPS Eligibility Specialists and PCA Negotiation Point of Contacts:

- Kristen Baldwin, DFPS Eligibility Specialist, Kristen.Baldwin@dfps.texas.gov 1 (940) 235-1769
- Leighann Rodriguez, DFPS Eligibility Specialist, Leighann.rodriguez@dfps.texas.gov 1-940-235-1743

- Amy Elizondo, DFPS PCA Negotiator, Amy.Elizondo@dfps.texas.gov 1 (325) 691-8103

Interstate Compact on the Placement of Children

The following regional protocols have been developed to manage Interstate Compact on the Placement of Children (ICPC) specific situations in the Region 02 catchment area.

For more information on ICPC processes, see CPS Handbook policies 4500 Interstate Placements and 9000 Interstate Compact on the Placement of Children (ICPC).

Incoming Request for Foster or Adoptive Home Study and Placement for Children from Other States

DFPS will refer ICPC foster or adoption placement requests for children legally from another state into the Region 02 catchment area to SSCC to facilitate the verification or approval of the home through the SSCC provider network.

All timeframes outlined in this process enable Texas to meet the requirements of the Safe and Timely Interstate Placement of Foster Children Act and ensure timely permanency of children from other states.

Foster Home Study Requests

Initial Assessment Process

- The SSCC ICPC Coordinator will determine if the child requires standard or treatment (therapeutic) foster care services based on information from the sending state.

- If the child requires treatment (therapeutic) foster care services, SSCC will follow the If the child requires Treatment (Therapeutic) Foster Care Services process.

- If the child requires Therapeutic Foster Care Services, continue with the initial assessment process below.

- The SSCC ICPC Coordinator will complete background checks on all household members to identify if there are any obvious bars to verification. *Background checks must include FBI, DPS, FPS history, and central registry checks along with out-of-state child welfare checks for all household members age 14 years and older.

- SSCC will refer the request (including background check results) to a network provider to complete the initial assessment process. (or the SSCC can choose to complete the assessment themselves depending on their model)

- If there is delay in receiving the results of the background checks, the SSCC ICPC Coordinator will send the network provider the information they have at the time so they can begin the assessment process in time to meet the required due date.

- SSCC will ensure the initial assessment is completed and returned to State Office ICPC within 45 calendar days from receipt of the ICPC request. SSCC may use the DFPS ICPC Initial Assessment form, or develop its own template.

- Based on the outcome of the initial assessment, the SSCC ICPC Coordinator will prepare an ICPC Decision Memo (approved or denied) and upload to IMPACT with the completed initial assessment. IMPACT automatically sends an alert to state office.

- State Office ICPC will send the decision memo and completed initial assessment to the sending state.

If the initial assessment is denied:

- If the initial assessment is denied, or a bar is identified as a result of a background check, the
SSCC ICPC Coordinator will prepare a decision memo explaining the reasons for the denial and why the family is not appropriate.

- The SSCC ICPC Coordinator will upload the decision memo into IMPACT.
- State Office ICPC will forward the decision memo to the sending state.

**If the initial assessment is approved and the child requires Standard Foster Care Services:**

- The SSCC ICPC Coordinator will send the ICPC request packet to an appropriate provider in their network to complete the Foster Home Verification Process.
  - The referral email will include the following due dates:
    - The SCCC network provider must make contact with the family by phone/email or certified mail within 7 calendar days from receipt of the ICPC request packet.
    - SCCC must complete the process for verification of the home and return to State Office within 120 calendar days.

**If the ICPC request is for Standard Foster Care Services and the caregiver is already verified by a private agency for foster care:**

- SCCC must determine if the family is already verified by a provider within the SCCC network.
- If the caregiver is already verified through an SCCC network provider:
  - SCCC must return the completed home verification documents to State Office within 14 calendar days.
  - If the foster care verification needs to be updated to meet ICPC timeframe requirements, SCCC must update the verification of the home and return to State Office within 30 calendar days.
- If the caregiver is already verified through a provider that is not an SCCC network provider, SCCC must give the family the option to transfer to an SCCC network provider.
  - If the family chooses to transfer to an SCCC network provider, SCCC must assist the family in the transfer process, update the family’s verification, and return to State Office within 60 calendar days.
  - If the family chooses to remain with the out-of-network provider, the SSCC ICPC Coordinator will prepare a decision memo with contact information for the private agency and send to State Office ICPC.
    - State Office ICPC will notify the sending state.

**If the child requires Treatment (Therapeutic) Foster Care Services:**

- SCCC will prepare a decision memo outlining the basis for the child requiring treatment services, including the specific diagnoses of the child.
- SCCC will prepare a list of private residential providers in the area that the sending state can contract with for treatment foster care services.
- The SSCC ICPC Coordinator will upload the decision memo and list of private residential providers into IMPACT.
- State Office ICPC will forward the decision memo and list of private residential providers to the sending state with information on the need to contract for foster care verification directly with a private residential provider.
- When the sending state establishes a contract with a private residential provider, the sending state will submit a new ICPC request to State Office ICPC.
- State Office ICPC will approve the placement based on receipt of the completed ICPC request packet (packet will include a copy of a current and approved foster home study, foster verification certificate (license), and statement that a contract is in place).
- State Office ICPC will ensure the ICPC packet has been uploaded into IMPACT.
- If the child/sibling group is placed in a verified foster home located in Region 02 catchment area, the private residential provider will be solely responsible through direct contract and payment from the sending state for:
Conducting supervision of the child as established in the sending state’s contract with the private residential provider.
Monitoring the family for licensing purposes according to Minimum Standards for Child Placing Agencies.

If the ICPC request is for Treatment (Therapeutic) Foster Care Services and the caregiver is already verified by a private agency for foster care:

- If SSCC determines in the assessment that the caregiver is already verified by a private agency for foster care services, regardless of whether the provider is in the SSCC network, the SSCC ICPC Coordinator will prepare a decision memo with contact information for the private agency.
  - The SSCC ICPC Coordinator will complete the decision memo and upload the decision memo in IMPACT.
  - State Office ICPC will forward the decision memo to the sending state with information on:
    - Need to contract directly with the private residential provider the home is already verified under.
    - Provider contact information in order to be connected to the private residential provider.
  - When the sending state establishes a contract with the provider, the sending state will submit a new ICPC request to State Office ICPC.
- State Office ICPC will approve placement based on receipt of the completed ICPC request packet (packet will include a copy of the approved foster home study, foster verification certificate (license), and statement that a contract is in place).
- State Office ICPC will ensure the ICPC packet has been uploaded into IMPACT.
- If the child/sibling group is placed in the verified foster home located in Region 02, the provider will be solely responsible through direct contract and payment from the sending state for:
  - Conducting supervision of the child as established in the sending state’s contract with the provider.
  - Monitoring the family for licensing purposes according to Minimum Standards for Child Placing Agencies.

Foster Home Verification Process

- Occurs when the Initial Assessment Process is completed, and family is approved to move forward with verification.
- Once the SSCC network provider has completed the verification process, the SSCC ICPC Coordinator will obtain the:
  - Completed home study.
  - Foster verification certificate (license).
    - The foster home verification process must be completed and returned to State Office within 120 calendar days.
- The SSCC ICPC Coordinator will:
  - Upload into IMPACT the completed home study and verification certificate (license) to State Office ICPC.
  - Complete a home study service authorization (Form 2054) in the child’s SUB stage in IMPACT for payment for the home study. See Kinship Home Study Service Authorization Step by Step Guide For Caregivers in CBC Catchment Areas (Including ICPC Requests) for additional information.
- State Office ICPC will:
  - Review the completed foster home study and verification.
  - Approve or deny placement into Region 02 catchment area.
  - Notify the sending state and SSCC of the approval to proceed with placement.
• If the sending state places the child in the verified foster home located in the Region 02 catchment area:
  o SSCC staff will conduct supervision of the child.
  o SSCC’s network provider that verified the home will monitor the family for licensing purposes according to Minimum Standards for Child Placing Agencies.
  o Any associated foster care daily reimbursement provided by the sending state will be paid directly to the caregiver. *SSCC or network provider will not receive any payment other than for the home study for this service which is in accordance with the ICPC Agreement between states.

Adoption Home Study Requests

Initial Assessment Process

• The SSCC ICPC Coordinator will complete background checks on all household members to identify if there are any obvious bars to verification before referring for the initial home assessment. *Background checks must include FBI, DPS, FPS history, and central registry checks along with out-of-state child welfare checks for all household members age 14 years and older.
• SSCC will refer the request (including background check results) to a network provider to complete the initial assessment process. (or the SSCC may choose to complete the assessment)
• If there is delay in receiving the results of the background checks, the SSCC ICPC Coordinator will refer them to the family by phone/email or certified mail. IMPACT automatically sends an alert when the results are received.
• SSCC will ensure the initial assessment is completed and returned to State Office ICPC within 45 calendar days from receipt of the ICPC request. SSCC may use the DFPS ICPC Initial Assessment form, or develop its own template.
• Based on the outcome of the initial assessment, the SSCC ICPC Coordinator will prepare a decision memo (approved or denied) to be uploaded to IMPACT with the completed initial assessment. IMPACT automatically sends an alert when uploaded.
• State Office ICPC will send the decision memo and completed initial assessment to the sending state.

If the initial assessment is denied:

• If the initial assessment is denied and a bar is identified as a result of a background check, the SSCC ICPC Coordinator will prepare a decision memo explaining the reasons for the denial and why the family is not appropriate.
• The SSCC ICPC Coordinator will upload the decision memo in IMPACT.
• State Office ICPC will forward the decision memo to the sending state.

If the initial assessment is approved:

• If the initial assessment is approved and no bars are identified, the SSCC ICPC Coordinator will send the ICPC request packet to an appropriate provider in their network to complete the Adoptive Home Approval Process.
• The referral email will include the following due dates:
  o The SSCC provider must make contact with the family by phone/email or certified mail within 7 calendar days from receipt of the ICPC request packet.
  o SSCC must complete the home study/approval and submit to state office within 120 calendar days from receipt of the ICPC request.
• The SSCC ICPC Coordinator will prepare the decision memo indicating that the request has been approved to begin the approval process and upload to IMPACT.
• If the ICPC request is for a caregiver who is already approved to adopt by a private agency, follow the If the ICPC request is for Standard Foster Care Services and the caregiver is already verified by a private agency for foster care process above.
Adoptive Home Approval Process

- Occurs when the Initial Assessment Process is completed and family is approved to move forward with adoption approval process.
- Once the SSCC network provider has completed the adoption approval process, they will provide the SSCC ICPC Coordinator the:
  o Completed home study.
  o Adoption approval certificate (license).
  - The adoption approval process must be completed and submit to State Office within 120 calendar days.
  - If the adoption approval process is not completed by the 120th day, the SSCC ICPC Coordinator will submit a status report to the State Office ICPC outlining the reasons for the delay.
- The SSCC ICPC Coordinator will:
  o Upload the completed adoption home study and adoption approval certificate (license) to IMPACT.
  o Complete a home study service authorization (Form 2054) in the child’s SUB stage in IMPACT for payment for the home study. See Kinship Home Study Service Authorization Step by Step Guide For Caregivers in CBC Catchment Areas (Including ICPC Requests) for additional information.
- State Office ICPC will:
  o Review the completed adoption home study and approval.
  o Approve or deny placement into Region 02 catchment area.
  o Notify the sending state and SSCC of the approval to proceed with placement.
- If the sending state places the child in the approved adoptive home located in the Region 02 catchment area:
  o SSCC staff will conduct supervision of the child.
  o SSCC’s network provider that approved the home for adoption will monitor the family for licensing purposes.
  o Any adoption assistance provided by the sending state will be paid directly to the caregiver. *SSCC or network provider will not receive any payment other than for the home study for this service which is in accordance with the ICPC Agreement between states.

Texas Interstate Compact Office (TICO) Approved Foster or Adoptive Placement

After the Texas Interstate Compact Office (TICO) approves a request to place a child in Texas, the sending state agency communicates directly with the caregiver regarding a placement date.

Notification:
- After the child has been placed in Texas, the sending state’s compact office notifies State Office ICPC by forwarding a copy of a completed Compact Form ICPC 100B.
- State Office ICPC updates IMPACT with the information from the 100B.
- State Office ICPC remains primary on the case and assigns the case to the SSCC ICPC coordinator as the secondary staff.

Supervision:
- The SSCC ICPC Coordinator must assign the courtesy supervision caseworker within 2 days of receiving notification of placement in Texas. The SSCC ICPC Coordinator assigns the courtesy supervision caseworker as the secondary staff.
- The courtesy supervision caseworker must supervise the placement as described in 6417 Supervising a Child Placed in Texas From Another State.
Recording the ICPC Placement in IMPACT:

- Once the courtesy supervision caseworker is assigned to the placement, placement must be entered in IMPACT within 24 hours, or by 7PM the next business day.
- To record the new placement, the courtesy supervision caseworker must:
  - Review information on the Form 2261 Compact Report ICPC (100B).
  - Open the Placement page in the child's Substitute Care stage.
  - Select the resource identification number by choosing the correct resource or person from the directory.

Incoming Request for Placement in RTC for Children from Other States

Incoming requests to place into an RTC are handled by State Office ICPC and are not referred to SSCC.

Incoming Request for Parent or Relative Home Study and Placement of Children from Other States

Parent or Relative Home Study Process:

- SSCC ICPC Coordinator will complete background checks on all household members to identify if there are any obvious bars to approval before referring for the home study.
  - Required background checks must be completed in accordance with the kinship verification process.
- If no bars are identified, SSCC ICPC Coordinator will send the ICPC request packet to the appropriate provider in their network to complete the home study.
  - The referral email will include the following due dates:
    - The SSCC provider must make contact with the family by phone/email or certified mail within 7 calendar days from receipt of the ICPC request packet.
    - SSCC must complete the home study within 45 calendar days from receipt of the ICPC request.
  - If there is delay in receiving the results of the background checks, the SSCC ICPC Coordinator will send the network provider the information they have at the time so they can begin the home study process to meet the required due date.
- If a bar is identified, then a decision memo will be created by the SSCC ICPC coordinator and returned to SO ICPC to be returned to the requesting state explaining the home study denial.

Expedited Parent or Relative Home Study Process

- SSCC ICPC Coordinator will complete background checks on all household members to identify if there are any obvious bars to approval before referring for the home study.
  - Required background checks must be completed in accordance with the kinship verification process.
- If no bars are identified, SSCC ICPC Coordinator will send the ICPC request packet to the appropriate provider in their network to complete the home study.
  - The referral email will include the following due dates:
    - The SSCC provider must make contact with the family by phone/email or certified mail within 3 calendar days from receipt of the ICPC request packet.
    - SSCC must complete the home study within 20 calendar days from receipt of the ICPC request.
  - If there is delay in receiving the results of the background checks, send the network provider the information you do have at the time so they can begin the home study process.
• If a bar is identified, then a decision memo will be created by the SSCC ICPC coordinator and returned to SO ICPC to be returned to the requesting state explaining the home study denial.

Requests to Place with a Non-Offending Parent

Parent home study requests for non-offending parents are only processed on parents who have been found to be unfit. DFPS State Office ICPC will only process a parent home study request on a Non-Custodial/Non-Offending Parent if ordered by the Court. DFPS State Office ICPC will screen all parent home study requests prior to sending to SSCC for assignment.

Texas Interstate Compact Office (TICO) Approved Incoming Parent and Relative Placements

After the Texas Interstate Compact Office (TICO) approves a request to place a child in Texas, the sending state agency communicates directly with the caregiver regarding a placement date.

Notification:
• After the child has been placed in Texas, the sending state’s compact office notifies SO ICPC by forwarding a copy of a completed Compact Form ICPC 100B.
• SO ICPC updates IMPACT with the information from the 100B.
• SO ICPC remains primary on the case and assigns the case to the SSCC ICPC coordinator as the secondary staff.

Supervision:
• The SSCC ICPC Coordinator must assign the courtesy supervision caseworker within 2 days of receiving notification of placement in Texas. The SSCC ICPC coordinator assigns the courtesy supervision caseworker as the secondary staff.
• The courtesy supervision caseworker must supervise the placement as described in 6417 Supervising a Child Placed in Texas From Another State.

Recording the ICPC Placement in IMPACT:
• Once the courtesy supervision caseworker is assigned to the placement, placement must be entered in IMPACT within 24 hours, or by 7PM the next business day.
• To record the new placement, the courtesy supervision caseworker must:
  o Review information on the Form 2261 Compact Report ICPC (100B)
  o Open the Placement page in the child’s Substitute Care stage; and
  o Select the resource identification number by choosing the correct resource or person from the directory.

Medicaid Benefits for Children Placed in Texas From Other States

Verified Foster or Approved Adoptive Placements

• When a foster child who is eligible for Title IV-E is placed in Texas in a foster or adoptive placement from another state and the sending state continues to pay for the child's foster care with Title IV-E funds:
  o DFPS provides the child's Medicaid benefits.
  o the sending state provides DFPS with information about the child's eligibility to receive Medicaid benefits through Title IV-E.

• Children who are Title IV-E eligible: To authorize Medicaid benefits for the child, the courtesy supervision caseworker must send the following information to the regional foster care eligibility specialist within 2 days after placement is entered into IMPACT:
  o Complete Form ICPC 100-B, Interstate Compact Placement Status Report, which shows the date that the child was placed in Texas.
  o Complete Form ICPC 103, Interstate Compact Financial/Medical Plan, which verifies that
the child receives foster care funding through Title IV-E.

- The last date that the child had Medicaid coverage in the sending state.
- The name of any third-party resource the child may have for medical care; and
- The child’s Social Security number.
- The regional eligibility specialist will initiate Texas Traditional Medicaid and notify courtesy supervision caseworker when Medicaid is active with Texas Medicaid ID.

**Children who are NOT Title IV-E eligible:** For foster care children who are not Title IV-E eligible, the foster or adoptive parent is responsible for applying for Texas Medicaid on behalf of the child. Foster or adoptive parent’s income should not be included on Medicaid application, as the foster or adoptive parent does not have custody of child, but placement only.

Refer to CPS Policy [1538 Medicaid Benefits for Foster Care Children Placed in Texas From Other States](#) for additional information regarding roles and responsibilities.

**Unverified Relative and Parent Placements:**

For unverified parent and relative placements, the parent or relative is responsible for applying for Texas Medicaid on behalf of the child. Parent or relative’s income should not be included on Medicaid application, as the parent or relative does not have custody of the child, but placement only.

**Out-of-State Requests for Foster Care or Adoptive Home Placements for Children from Texas**

If an out-of-state placement is identified for a child who is legally from Region 02 SSCC will complete the following steps.

**Outgoing Foster Home or Adoption Study Requests:**

- SSCC will complete and submit the outgoing ICPC request, including all required documents, through IMPACT and follow current ICPC process.
- Placement will remain with SSCC during the ICPC process.
- When the ICPC process is completed by the receiving state, SO ICPC will upload the 100A with approval or denial recommendation into IMPACT.
- If placement is approved, SSCC will prepare the child for transition into approved out-of-state placement.
  - This will include notifying the Well-Being Specialist preferably 30 days before the child’s placement as they will assist in arranging for medical needs or assessing services for children before placement outside of Texas. See CPS policy [4515 Placing the Child in the Other State if the Placement is Approved]. SSCC Permanency Worker will be responsible for the out-of-state physical placement of the child.
- Before placement occurs the caseworker must follow the guidelines below that apply:
  - If a child is going to be placed with a caregiver that is licensed by a public state agency,
  - If receiving state requires caregiver to be verified by a private agency that provides treatment (therapeutic) services due to child’s needs,
  - If the child is placed with an out-of-state family who is verified through a private provider for foster care, OR
  - If the child is placed with an out-of-state family who is approved through a private provider for adoption.
- After the child is placed in the other state, the child’s SSCC Permanency Worker must:
  - Document the child’s placement in IMPACT within 24 hours, or by 7PM the next business day;
  - Complete a Form 2261 Compact Report ICPC (100B) in IMPACT, within seven business days of the child’s placement; and
• submit the 100B to the supervisor for approval.

If there is a placement disruption in the out-of-state placement, SSCC will secure possession of the child from the out-of-state caregivers and submit a new referral for paid placement to the SSCC Placement team.

If the caregiver is verified by a public state agency:

• SSCC will follow the Outgoing Foster Home and Adoption Study Request process above.
• SSCC Permanency Worker will notify the 2INgage Designee, Beverly Hutchins, to create a FAD stage BEFORE placement is made.
• The SSCC Permanency Worker will verify that the ICPC Foster Home has been set up in IMPACT before making placement.
• Placement entry will reflect direct placement with the caregiver and will not be under the SSCC network since they are verified by a public agency. Foster care payments will be directed to the caregiver from DFPS.
• The SSCC child placement and family referrals will remain active for case management services.

If receiving state requires caregiver to be verified by a private agency that provides treatment (therapeutic) services due to child’s needs:

• SSCC will follow the Outgoing Foster Home and Adoption Study Request process above.
• SSCC will locate and contract directly with the private out-of-state provider for placement services and supervision of the child.
• SSCC will notify and request the DFPS Contract Administration Manager create a CPA resource and set up the home as part of the SSCC network in IMPACT.
• The home will be added to the SSCC Network BEFORE placement is made.
• Texas CPS is not responsible for setting up a contract for supervision of the child in the out-of-state placement nor placement services.

If the child is placed with an out-of-state family who is verified through a private provider for foster care:

• SSCC will follow the Outgoing Foster Home and Adoption Study Request process above.
• SSCC will contract directly with the private out-of-state provider for placement services and supervision of the child.
• SSCC will notify and request the DFPS Contract Administration Manager create a CPA resource to set up the home as part of the SSCC network in IMPACT.
• The home will be added to the SSCC Network BEFORE placement is made.
• Texas CPS is not responsible for setting up a contract for supervision of the child in the out-of-state placement nor placement services.
• In some cases, the out-of-state family will have the option to transfer to the public child welfare agency in the receiving state. If the family chooses to transfer to the public child welfare agency, a contract is not needed.

If the child is placed with an out-of-state family who is approved through a private provider for adoption:

• SSCC will follow the Outgoing Foster Home and Adoption Study Request process above.
• SSCC will contract directly with the private out-of-state provider for placement services and supervision of the child.
• SSCC Permanency Worker will notify the 2Ingage Designee, Beverly Hutchins, to create a FAD stage BEFORE placement is made. Texas CPS is not responsible for setting up a contract for supervision of the child in the out-of-state placement nor placement services.
• SSCC will be paid for both adoption placement services (form 2054) and postplacement supervision (form 2054). SSCC Permanency Worker will need to create 2054’s for the service.
In some cases, the out-of-state family will have the option to transfer to the public child welfare agency in the receiving state. If the family chooses to transfer to the public child welfare agency, a contract is not needed.

**Out of State Request for Residential Treatment Center (RTC) Placements for Children from Texas**

SSCC may seek an out-of-state Residential Treatment Center (RTC) for placement of a child from Texas Region 02 catchment area.

- When an out-of-state RTC is located, SSCC will initiate and create a contract with the out-of-state Residential Treatment Center.
- The SSCC Permanency Worker will submit the ICPC Residential Treatment Center out-of-state placement request through IMPACT.
- State Office ICPC will process the outgoing RTC request to the receiving state.
- Once the ICPC request is completed, State Office ICPC will upload the decision 100A into IMPACT.
- If the placement is approved, SSCC, as part of case management, is responsible for setting up a contract for supervision of the child in the out of state placement.
- SSCC is responsible for monitoring the out-of-state placement for the timeframes specified within the sub-contract with the Residential Treatment Center.

**Out of State Request for Parent or Relative Home Study and Placement for Children from Texas**

**Outgoing Parent or Relative Home Study Requests and Placement**

- SSCC will complete and submit the outgoing ICPC request, including all required documents, through IMPACT and follow current ICPC process.
- Placement will remain with SSCC during the ICPC process.
- If the out-of-state placement is approved by the receiving state, State Office ICPC will notify the SSCC ICPC Coordinator via uploading the home study in IMPACT.
- SSCC will prepare the child for transition into approved out-of-state placement.
  - This will include notifying the Well-Being Specialist preferably 30 days before the child’s placement as they will assist in arranging for medical needs or assessing services for children before placement outside of Texas. See CPS policy 4515 Placing the Child in the Other State if the Placement is Approved
- SSCC Permanency Worker will be responsible for the out-of-state physical placement of the child.
- Once the child is in the out-of-state placement, the SSCC ICPC Coordinator will:
  - Submit the 100B in IMPACT within 3 business days to State Office ICPC indicating placement has been completed.
- The SSCC Permanency Worker will enter the new out-of-state placement in IMPACT.
- If there is a placement disruption in the out-of-state placement, SSCC will secure possession of the child from the out-of-state caregivers and return the child to Texas.
- If a non-licensed kinship placement decides to become a licensed foster placement, the SSCC will resubmit ICPC request in IMPACT and follow the Outgoing Foster Home and Adoption Study Request process.

**Request to Place with a Non-Offending Parent**

Non-offending parent home study requests are only processed on parents that have been found to be unfit. SO ICPC will only process a parent home study request on a Non-Offending Parent if ordered by the Court. SO ICPC will screen all parent home study requests prior to sending to receiving state.
If a Texas Caregiver Moves to Another State

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

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

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

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

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

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

ICPC Violations

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

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

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

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

Additional reference:

Hearings and Legal Proceedings Resource Guide.

CPS Policy 5314 Court Orders That Violate the Interstate Compact on the Placement of Children
Administrative Related

Title IV-E University Training Program

Refer to: DFPS Policy 3000 Introduction to the Title IV-E Program, 4000 Title IV-E Training Contracts With Universities

2INgage Title IV-E University Training Program for Current and Non-Employees

This section explains the:

- Process for applying to the Title IV-E University Training Program; and
- How the 2INgage training academy managed by the 2INgage training division support that effort.

Each year, DFPS awards federally funded training to eligible 2INgage employees and eligible state universities for students preparing for employment with the 2INgage. The number of awards is based on the number of Title IV-E-funded positions that the 2INgage anticipates each year.

The awards are made to eligible 2INgage employees who are interested in a Master of Social Work (MSW) and eligible students who are enrolled in academic programs that lead toward a Bachelor of Social Work (BSW) or Master of Social Work (MSW).

The 2INgage training academy provides basic skills development training to these trainees to prepare them for 2INgage employment.

Applying for Title IV-E Training with 2INgage for Prospective Employees

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

- The CPS Regional Operations Support Administrator (ROSA)
- 2INgage Director of Community Engagement
- The DFPS Title IV-E contract manager

The email must contain the applicant’s:

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

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

Each applicant submits the following to the university coordinators. The University will then provide the information to the ROSA and the 2INgage Director of Community Engagement. The ROSA will maintain all original documents for the Title IV-E stipend program.

- University acceptance letter
- Statement of interest
- Three professional letters of recommendation from professors or employers
- Copy of students most recent unofficial transcript from University
- Waivers as appropriate
- Certified copy of the applicant’s driving record
- Volunteer application, Form 0250
- Authorization for a background check, Form 0250b
To enable the applicant to take any required pre-employment test/assessments, the university’s coordinator directs the applicant to apply for a 2INgage specialist position in the appropriate 2INgage unit. Taking this step creates a profile in the 2INgage human resources system that allows the applicant to access any required tests/assessments.

Once the applicant has applied for a 2INgage specialist position, the 2INgage designee forwards copies of the following to the Centralized Background Check Unit (CBCU), so that appropriate checks can be performed:

- A certified copy of the applicant’s driving record
- A volunteer application, Form 0250

The CBCU forwards the results of the checks to:

- The ROSA
- 2INgage Director of Community Engagement
- The contract manager.

If the results are questionable, the ROSA or 2INgage Director of Community Engagement reviews them and determines whether the applicant is employable.

If the checks are acceptable, the ROSA sets up interviews which includes the ROSA, 2INgage Hiring Manager, and 2INgage personnel. If the interview is acceptable, the ROSA or 2INgage Director of Community Engagement notifies each University coordinator who will prepare a Stipend Student Information Form for each student. The university coordinator will then forward the information form to the contract manager who prepares an agreement for each student.

If the results of any of the above assessments are not satisfactory, the ROSA or 2INgage designee:

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

The ROSA sets up an orientation meeting to review and sign the stipend contract agreement. Participants include the ROSA, 2INgage Director of Community Engagement, the university coordinator and the students. These contracts are not executable until they are signed by 2INgage.

During the orientation meeting, the following topics are covered:

- The terms and conditions of the agreement, including any payback responsibilities. Repayment if eight calendar months of employment in an IV-Eligible position for each semester which the stipend was paid to the employee. Repayment of the stipend through full time employment begins the first day of employment. The commitment that students must make to accept any statewide employment with 2INgage on completion of their training.

The ROSA then forwards all signed agreements, along with a completed checklist for each contract, to the 2INgage Director of Community Engagement for final approval. Once signed, the ROSA will send the original signed agreement to the State Office Contract Manager for final processing.

After each agreement is approved:

- The State Office Contract Manager will send a signed copy of the agreement to the stipend student.
- The ROSA or 2INgage Director of Community Engagement completes a Move, Add, or Change form (known as an eMAC) to obtain a log-in ID for access to DFPS systems.
The interns are ready to attend training offered by the 2INgage. The 2INgage Director of Community Engagement will designate a unit supervisor for the intern to be placed under for training through the duration of the placement, communicate the information/location to the University liaison and intern. The 2INgage Director of Community Engagement will send training orientation invites to the 2INgage interns before the intern reports to the placement location.

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

Two months before university graduation, each student must submit an employment application to 2INgage for a Title IV-E eligible position.

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

The ROSA or 2INgage Director of Community Engagement notifies the Title IV-E contract manager that the intern has been placed in a Title IV-E position.

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

**Fall Semester:**
- May 15: All names submitted by University along with background forms, etc during this week
- June 1: All applicants must have taken any pre-test/assessments required by 2INgage.
- June 15: Set up interview during this week
- July 15: All contracts ready this week.
- Mid-August: Semester begins

**Spring Semester:**
- October 1: All names submitted by University along with background forms, etc during this week
- October 15: All applicants must have taken any pre-test/assessments required by 2INgage.
- November 1: Set up interview during this week
- December 1: All contracts ready this week.
- Mid-January: Semester begins

**Summer Semester:**
- February 15: All names submitted by University along with background forms, etc during this week
- March 1: All applicants must have taken any pre-test/assessments required by 2INgage.
- March 15: Set up interview during this week
- April 15: All contracts ready this week.
- Last week of May: Semester begins

**Inventory and Equipment Agreement**

Since Title IV-E interns do not receive Tablet PCs, they require a separate process through the SSCC to ensure accessibility to the required computer equipment. The 2INgage Director of Community Engagement will ensure the Title IV-E interns under 2INgage receive necessary computer equipment.

**Applying for Title IV-E Stipend for SSCC Employees**

A current 2INgage employee interested in obtaining their MSW through the stipend program must be in an 2INgage IV-E eligible position and completes the following steps:
• Submit an application to the Title IV-E School of Social Work program that has a stipend program in the region. Employee will need to follow the application deadlines set forth by the School of Social Work program they are applying for.
• Email the ROSA, the University Coordinator and the 2IEngage Director of Community Engagement of the intent to apply to a social work stipend program.
• Obtain approval from the supervisor to apply for the program and have the supervisor complete a Supervisor Checklist and submitted to the ROSA and 2IEngage Director of Community Engagement.
• Three months prior to the beginning of the first semester to which the employee is applying, submit a brief proposal to the ROSA and 2IEngage Director of Community Engagement with an explanation of how the employee will maintain currency of their workload and complete their schoolwork and any internships outside agency time.

The ROSA reviews the Supervisor Checklist and verifies the following:

• Employee has been employed by 2IEngage or DFPS for at least one continuous year by the start date of the proposed first university semester.
• Employee is currently in an IV-E eligible position.
• Employee meets all performance criteria.

The ROSA schedules an interview which includes the ROSA and 2IEngage. The interview panel reviews all documentation and based on the interview, approves or disapproves the stipend. If approved, the ROSA notifies the appropriate university coordinator who will prepare a Stipend Student Information Form for the employee. The university coordinator will then forward the information form to the contract manager who prepares an agreement for each student.

The ROSA sets up a contract signing meeting to review and sign the stipend contract agreement. The participants include the ROSA, 2IEngage Director of Community Engagement, the university coordinator and the employee. These contracts are not executable until they are signed by the 2IEngage.

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

• The terms and conditions of the agreement, including any payback responsibilities.
• The employee must sign a contract with 2IEngage to repay the stipend received, through full time employment with 2IEngage. Repayment is four calendar months of employment in an IV-E eligible position for each semester which the stipend was paid to the employee. Repayment of the stipend through full time employment begins the first working day after the date of graduation.

The ROSA then forwards all signed agreements, along with a completed checklist for each contract, to 2IEngage for final approval. Once signed, the ROSA will send the original signed agreements to the State Office Contract Manager for final processing. The State Office Contract Manager will send a signed copy of the contract to the stipend employee.

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

Calendar dates for submitting and processing employee stipend students must be followed as below:
**Fall Semester:**
- May 15: All names submitted by University along with background forms, etc. during this week
- June 1: All applicants must have taken any pre-test/assessments required by 2INgage.
- June 15: Set up interview during this week
- July 15: All contracts ready this week.
- Mid-August: Semester begins

**Spring Semester:**
- October 1: All names submitted by University along with background forms, etc. during this week
- October 15: All applicants must have taken any pre-test/assessments required by 2INgage.
- November 1: Set up interview during this week
- December 1: All contracts ready this week.
- Mid-January: Semester begins

**Summer Semester:**
- February 15: All names submitted by University along with background forms, etc during this week
- March 1: All applicants must have taken any pre-test/assessments required by 2INgage.
- March 15: Set up interview during this week
- April 15: All contracts ready this week.
- Last week of May: Semester begins

**Records Management**

DFPS Records Management Group will support 2INgage with the same services it provides to DFPS. For more information about services see [Records Management Group](#) Safety net page.

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

1. Records provided in response to a subpoena or court order that has been properly served on DFPS.
2. Records provided in response to discovery in a lawsuit to which DFPS is a party.
3. Records provided to a prospective adoptive family before an adoption may be consummated.
4. Records provided to a party or the administrative law judge in an Employee Misconduct Registry administrative hearing.
5. Records provided to a party or the administrative law judge in a hearing conducted by the State Office of Administrative Hearings.
6. Records provided to a duly authorized person documenting the results of a school investigation as required by Texas Family Code §261.406
7. Records provided to a party in an administrative review of investigative findings that is conducted by DFPS.
8. Records provided to an adult who was previously in the conservatorship of DFPS, if the request is for a copy of the adult's own case record as defined by Texas Family Code §264.0145
9. Records provided to all other requesters entitled to receive the requested records, which are fulfilled in the order they are received.

2INgage Administrative Support Supervisor will have access to RMG Case Track system.
2INgage Permanency Case Manager On-Call

2INgage will be expected to have a Permanency Case Manager On-Call Schedule. To reach the on-call staff member, please contact the 2INgage Care Management division at (877) 254-6135.

The CPS Liaison, Kelly Woodard, Kelly.Woodard@dfps.texas.gov, will ensure the on-call schedule on the Safety Net is updated with the 2INgage contact information.

Reporting Threats or Incidents

Physical attacks on employees are rare. However, because employees must often interview people who are angry, fearful, and occasionally hostile or aggressive, it is wise to take precautions and ensure that information about threats or incidents are reported and information is shared with both 2INgage and DFPS. DFPS Worker Safety Support staff will disseminate and track threats or incidents and will ensure that information is shared with 2INgage and DFPS.

Reportable threats or incidents include but are not limited to:

- Physical assault or threats in or out of the office.
- Threatening phone calls, emails, or web posts.
- Outbursts in the office requiring a law enforcement response.
- Theft or vandalism.
- Bomb threats.

To report a threat or incident, 2INgage staff should go to the DFPS Worker Safety Support page and complete the form to report an incident or threat. This will send a notice to the Worker Safety Support team.

The DFPS Worker Safety Support team will document and track the incident as well as send notification to points of contact with DFPS and 2INgage.

Additionally, 2INgage staff are encouraged to document worker safety information in the IMPACT case record. This can be documented in the Case Summary page, under the Special Handling drop down section by checking the box next to Worker Safety and adding details regarding the safety concern in the comment box.

2INgage staff should also follow any internal procedures for incident reporting that may be outlined in the 2INgage Operations manual.
Child and Family Services Review

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

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

The Child and Family Services Review (CFSR) Team will be randomly selecting cases that are served by 2INgage as part of their review. 

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

Office of Consumer Relations (OCR) Assignments

2INgage will develop their internal protocol to address OCR/FCO/Legislative Inquiries to adhere to time frames required by the division requesting the response.

- OCR/FCO/Legislative Inquiries will be sent directly to 2INgage via the following email box concernline@tfifamily.org, Nadine Terry-Washington, 877-942-2239. The Regional Director and Regional Director Assistance will be cc:ed on requests.
- 2INgage will respond to OCR/FCO and any legislative inquiries within required timeframes as directed by divisions requesting response.
- If a substantiation results from the inquiries, 2INgage will create a corrective action plan with staff involved to address policy violations.
- If 2INgage believes the substantiation is not valid, they can ask for a review of findings.
- If the substantiation is upheld, they will continue with their corrective action plan.
- The 2INgage corrective action plan will be emailed to the RDA.
- The RDA will input the information into the State Office OCR/FCO SharePoint.

For more information see: Office of Consumer Relations webpage

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

Same process as above.

For more information see HHS Ombudsman Foster Care Help Page

Legislative Inquiry Process

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

There may be times when INV/FBSS and 2INgage (and network providers) may not agree on a case decision or what should happen with a child and/or family.

The following section outlines the protocol to resolve any type of case disputes between INV/FBSS and 2INgage

Case Dispute Resolution Process:

Step 1

- CPI/CPS workers and supervisors, 2INgage and/or a provider (who are closest to the issue in dispute) will work together to resolve case specific issues informally. This will be done through an objective, solution-driven discussion or meeting.

- If a mutually agreeable solution is not achieved in 3 business days, the individual will notify the other individual with whom they have a concern that they plan to involve their chain of command.

- The disputed issue will be elevated to the Program Director and/or Program Administrator level in CPI/CPS and the Director level in 2INgage for attempted resolution.

- The disputed issues will be elevated in writing.

Step 2

- Disputes proceeding to Step 2 will be elevated to a knowledgeable, neutral CPS staff member (Community-Based Care Administrator) who understands the philosophy and goals of community-based care and is not a direct supervisor of the individual involved in the appeal.

- 2INgage must ensure continuity of services, as defined by CPI/CPS, to the child or family affected while seeking to resolve case-specific disputes.

Escalation

- The escalating party will send an email with supporting documentation to the Community Based Care Administrator and 2INgage Senior Vice President with the subject line of “Dispute Resolution.”

Resolution

- Once a dispute is escalated (appeal), the Community Based Care Administrator will provide a written decision to the appeal within 5 business days.

- The written decision will be emailed to the 2INgage Senior Vice President with the subject line of “Dispute Resolution Appeal Decision.”

- If the 2INgage Senior Vice President chooses, they will have 3 business days from receipt of the notification from the CBC Administrator to appeal the decision to the CPS Regional Director.

- The CPS Regional Director will have 5 business days to make a decision on the 2INgage Senior Vice President’s appeal.

- If the 2INgage Senior Vice President chooses not to appeal, they will notify the CBC Administrator.
Situations Requiring Immediate Notification between SSCC and DFPS

Situations that require immediate notification between 2INgage and DFPS include:

- When a child, who is referred or placed with 2INgage, is in a life-threatening situation and/or
- Any time the media is involved with a child placed with 2INgage.

Specific examples include, but are not limited to:

- Child Fatality
  - If a child fatality occurs in an open conservatorship case and meets the qualifications for an OCR Child Fatality Review, please follow the process outlined in the appendix OCR Child Fatality Review
  - See Child Fatality Protocol Handbook for additional information
  - 2INgage will be included in QRT team as appropriate
- Confirmed Abuse or Neglect situations that may attract media attention
- Child abductions
- Investigation or serious incident in kinship placement
- Staff acting inappropriately that may attract media attention or has been posted on social media
- If contacted directly for legislative inquiry
  - See Government Relations Handbook Policy 3000
- Natural disasters where children are displaced

Notification:

- Send notifications to Region 2 RD and CBC Director, Ellen Letts
- Include high level summary of incident or situation
- Include timeline of events

Following notification:

- Regional Director will contact and inform the Regional Media Specialist and Community-Based Care Administrator of the situation.
- Regional Media Specialist will:
  - Contact and inform the Media Relationship Manager of the situation; and
  - Contact and coordinate media message with 2INgage prior to releasing any information or comments to the media about the situation.

Single Source Continuum Contractor (SSCC) Abuse or Neglect Investigations

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

- A DFPS employee or SSCC employee is alleged to have abused or neglected a child in his or her own family.
- A DFPS employee, contracted staff, volunteer, or intern or an SSCC employee is alleged to have abused or neglected a child in DFPS conservatorship, and the child is in an unlicensed setting.
Special investigators are assigned to conduct employee investigations meeting the above criteria. If a special investigator is the alleged perpetrator in an employee investigation, CPI conducts the investigation.

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

For additional information see policies:

2120 CPS Authority for Investigating Reports of Abuse or Neglect

1260 Administrative Review of Investigation Findings (ARIF)
Appendix A: CBC Forms

Region 2 Removal Staffing Checklist

Please use this link for the Region 2 Removal Staffing Checklist. It is also available on the Smiley Forms webpage.

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

ICPC Decision Memo

MEMORANDUM

☐ Community Based Care / SSCC Name

Foster Care/Adoption

To: Sending State
From: Texas Interstate Compact Office/Region
Date: 
Re: Child (ren)

Thank you for your cooperation in the home study process. After careful review, it was determined this home study is:

☐ Approved: Caregiver’s Name:

☐ Denied: Caregiver’s Name:
  ☐ Withdrew:
  ☐ Criminal History:
  ☐ CPS History:
  ☐ Unable to Meet Child(ren)’s Needs:
  ☐ Finances/Budget:
  ☐ Medical/Mental Health Concerns:
  ☐ Other:

☐ Deferred: Child needs Treatment Services
  Child’s Name:
  ☐ Medical Diagnosis:
  ☐ Mental Health Diagnosis:
  ☐ Other:

For Additional Help in Licensing/Contracting Process Contact:

Sincerely,

Texas ICPC Coordinator          Date
ICPC Initial Assessment

This form is in development and will be posted to the DFPS intranet. 2INgage is not required to use the form but must address the elements of the form.

Note: Address each category specifically as it relates to the safety/permanency/well-being of the child(ren) being considered for placement with the placement resource(s). The initial assessment must be completed within 30 days of assignment.

GENERAL INFORMATION

- Name household members, date of birth, gender, citizenship, and relationship to child.
- Address, including county.
- Name children to be placed.

SAFETY

- History of alcohol and drug use. Discuss rehabilitative activities, if any.
- Abuse/Neglect and criminal history checks. Document the results of both abuse/neglect and criminal history checks of each person 14 years of age and older in the home, including any history of domestic violence. Explain any criminal history and subsequent rehabilitative activities. Consult charts: Effect of Criminal History on Kinship Placements and Offenses From the Texas Penal Code in 6322.33 Conduct and Evaluate Criminal History Checks on Potential Kinship Caregivers.
- Ability to protect the child.

Walk through of the home. FAD worker should complete a walk-through of the home and identify any obvious safety issues that would prevent verification or approval of the home.

PERMANENCY

- Discuss the placement resource(s) willingness and ability to:
  - Cooperate with parental visitation.
  - Maintain sibling contact if needed.
  - Support the permanency plan.
- Meet the short-term and long-term needs of each child.
WELL-BEING

Address the specific needs of each child including medical/dental, therapeutic, social and academic. Explain how the kinship caregiver plans to meet these needs through supports he/she has available through other family members as well as community support services.

Address the specific medical or mental health needs of each caregiver if applicable. Explain how the caregiver is addressing these needs and what impact if any there may be regarding the care of the child/ren.

SUMMARY OF STRENGTHS AND CONCERNS

Summarize the relative’s strengths and protective capacities.

Summarize any concerns.

X

FAD Staff Signature Date

Supervisor’s Recommendations:

☐ Favorable ☐ Unfavorable

X

Supervisor Signature Date
SSCC Process on Funeral/Burial Procedures and Invoicing

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

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

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

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

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

Involve Biological Parents

The 2INgage Permanency Case Manager should involve the child’s biological parents in the funeral arrangements to the maximum extent possible, even if parental rights have been terminated, if the case manager determines doing so is appropriate. For example, parental involvement:

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

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

- The 2INgage Permanency Case Manager must document in the child’s case record the:
  - date the case manager spoke with the parents;
  - content of the discussions;
  - outcome; and
  - date the parents responded.

Involve Foster Parents and Other Significant Individuals

The 2INgage Permanency Case Manager should also invite foster parents and other individuals significant to the child’s life to participate in planning the child’s funeral arrangements. The 2INgage Permanency Case Manager does not solicit contributions from foster parents and other significant individuals. However, if they voluntarily indicate that they wish to contribute to some of the funeral expenses, they may do so by paying the funeral home or other vendor directly.

Involve Community Partners

The external community is often a key partner in securing funeral arrangements for a child who died while in CPS conservatorship. When a community partner expresses a desire to assist with funeral arrangements, CPS coordinates with those partners. CPS is legally authorized to accept donations, gifts, or in-kind contributions to cover funeral expenses.
Access CPS Funding

If resources are not available to fully fund the cost of a funeral for a child who died while in conservatorship, the caseworker may authorize up to $4,500 per child for reasonable and necessary burial or cremation expenses. The 2INgage Permanency Case Manager must contact the regional burial liaison, CBC Region 2 Contract Administration Manager (CAM), to make the request for funds. If the 2INgage Permanency Case Manager determines funding in addition to the $4,500 is needed for the child’s funeral, the CPS region must seek approval for additional funding from the CPS Assistant Commissioner. Additional funds may be expended to cover the funeral costs as described in CPS policy Funeral and Burial Services for Children in DFPS Conservatorship.

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

Prior to SSCC staff signing any agreement you must send to the CBC Region 2 CAM to review for allowable/unallowable items. Itemized contract/agreement from the Funeral Home. The contract must be signed by SSCC designated staff and the authorized funeral home staff.

The allowable expenses for funeral services are limited to:

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

Unallowable expenses

Burial funds may not be used for:

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

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

- A complete Form 4116 Purchase Voucher. This form must be signed by funeral home representative and SSCC designated staff. Funeral home can contact the CBC Region 2 CAM, Reid Miller for help in filling out this form (325) 691-8267.
- A complete Form AP-152 Application for Texas Identification Number and 74-176 Direct Deposit Authorization.

Important Notes:

- Only include the items that DFPS is paying for on the Form 4116 in box #20 Description of Good and Services.
- Funeral home representative signature authority will need to sign next to the X (above box #24), including phone number. Print name and phone number in #24
- SSCC authorized staff must sign the first line in box #26 include phone number and date.
- Email all completed documents to the CBC Region 2 Contract Administration Manager: Reid.Miller@dfps.texas.gov
Appendix B: CBC Flow Charts

CBC Adoption Placement & Service Authorization

CBC Adoption Placement & Service Authorization Process
(Children From the SSCC Catchment Area)

1. Is the child in a foster-to-adopt placement (relatives & non-relatives) who is ready to adopt the child? *Includes homes with CPA who is not licensed for adoption.
   - YES
   - NO

2. Is the child in an approved kinship-to-adopt placement who is ready to adopt the child?
   - YES
   - NO

3. Is the child in a foster placement & ready to be placed in a new adoptive placement?
   - YES
   - NO

*Post-Placement Supervision
2054 pays for costs associated with seeing the family through consummation.

SUB stage should remain OPEN in IMPACT

Once the adoption placement is completed, the CPS worker ends the placement in the child’s SUB stage and enters the child’s placement in the ADO stage in IMPACT. Both placement actions occur on the same day.

SUB stage should remain OPEN in IMPACT

Once the child is physically placed in the new adoptive home, CPS worker ends the placement in the child’s SUB stage and enters child’s new placement in the ADO stage in IMPACT. Both placement actions occur on the same day.

SUB stage should remain OPEN in IMPACT

Includes homes with CPA who is not licensed for adoption.
## Adoption Services Descriptions

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<td>Court Related Services:</td>
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<td>• Court Related Assistance (assist adoptive family &amp; their attorney to complete consummation process)</td>
</tr>
<tr>
<td>Adoption Preparation of the Child</td>
<td>Adoption Service Plan</td>
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### Court Related Services:

- Testimony (judicial hearings, court depositions & admin reviews)
- Court Related Assistance (assist adoptive family & their attorney to complete consummation process)
PAL Life Skills Assessment and Training Pilot for Eligible Youth Served by 2INGage

2INGage, the Single Source Continuum Contractor (SSCC) in Stage II for Region 2, will ensure the development and delivery of PAL Assessments and Life Skills Training for eligible youth:
- All youth placed in DFPS conservatorship within the catchment area in paid and non-paid placements (including kinship) and
- All youth from Region 2 catchment placed in paid and non-paid placements (including kinship) outside the catchment.

For eligible youth, please see policies 10211.1 Targeted Priority Population and 10211.2 Additional Eligible Population.

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

Note 1: For youth in paid placement from the catchment area will follow existing PAL process in CBC Region 2 Stage II Operations Manual. This chart outlines the additional responsibilities and populations for FY2021 in Region 2.

Note 2: Information about PAL Life Skills Assessment and Training For Eligible Youth for CBC Catchments 3b and 8a can be found in their respective Joint Operations Manuals CPS Community-Based Care Handbooks.
Supervised Independent Living (SIL) is a type of voluntary Extended Foster Care placement where young adults can live on their own, while still getting caseworker and support services to help them become independent and self-sufficient. The SIL program allows young adults to live independently under a supervised living arrangement provided by a contracted provider. A young adult in SIL is not supervised 24-hours a day by an adult and has increased responsibilities.

Young Adult Aging Out/Return to Care

Trial Independence (TI) permits a young adult age 18 or older to voluntarily leave Extended Foster Care for up to 6 months (or up to 12 months with a court order) and live independently without losing foster care eligibility.

CPS Handbook §1050

Young Adult returns DURING a Trial Independence Time Period

The Legal Region is where DFPS was granted conservatorship.

CPS Handbook §10532

Legal County is within a LEGACY Region

DFPS CVS/PAL staff completes Forms 2605 and 2087ex on young adult and emails to State Office SIL Program Specialist for screening.

If approved, State Office SIL Program Specialist sends DFPS CVS/PAL staff a SIL Approval Letter (form 2529). Once this letter is received the young adult may select a SIL provider of choice.

Young Adult Chooses a SIL within:

Current or Other Legacy Region (Non-SSCC)

DFPS CVS/PAL staff sends forms 2605, 2087ex, and 2529 to SIL Coordinator of the young adult’s choice.

If accepted into the SIL program, DFPS CVS/PAL staff will:
- complete a change of county in Sub-Stage under Case Management tab (using county of SSCC SIL Placement) and
- Complete Referral to SSCC
  LEGAL COUNTY WILL REMAIN THE SAME.

If rejected from SIL, DFPS CVS/PAL staff sends Form 2529 back to SIL Coordinator, no further action is required.

Any subsequent placements will be reviewed by DFPS as outlined in CPS Handbook §10463.2

SSCC Catchment Area

DFPS CVS/PAL worker sends forms 2605, 2087ex, and 2529 to SSCC SIL Coordinator.

Placement will be entered under the SSCC SIL RID in IMPACT; SSCC will document SIL Name and Address in the Placement Discussion Comment Box of Actual Placement.

Prior to Approving Placement in IMPACT, DFPS CVS/PAL staff will go to Placement Information page and change address of Placement to correct address provided in the Comment Box.

Current DFPS worker will remain primary and all subsequent moves will be the responsibility of the DFPS worker in the Legacy Region. Regional policy will be followed on assigning a DFPS courtesy worker.
Legal County is within a: SSCC Catchment Area

DFPS CVS/PAL staff completes forms 2605 and 2087ex on young adult and emails to SSCC SIL Coordinator for screening.

If approved, SSCC SIL Coordinator sends DFPS CVS/PAL staff a SIL Approval Letter (form 2529). Once this letter is received the young adult may select a SIL provider of choice.

If denied, SSCC SIL Coordinator sends DFPS CVS/PAL staff an email notifying them of the denial and reasons for the denial.

Young Adult Chooses a SIL within:

A Legacy Region (Non-SSCC)

DFPS CVS/PAL staff sends forms 2605, 2087ex, and 2529 to the Legacy SIL Program of choice and cc SSCC SIL Coordinator.

If Young Adult meets criteria and is accepted into the Legacy SIL, DFPS CVS/PAL staff will send SSCC SIL Coordinator an email notifying them of the acceptance.

SSCC SIL Coordinator will notify DFPS CVS/PAL staff to proceed with:

Placement under SSCC SIL, if SSCC has secured contract with provider. Referral to remain opened.

Placement under Legacy contract, SSCC does/will not hold contract with SIL. SSCC Referral Discharged.

Placement will be entered under the SSCC SIL RID in IMPACT. SSCC will document SIL Name and Address in the Placement Discussion Comment Box of Actual Placement.

Prior to Approving Placement in IMPACT; DFPS CVS/PAL staff will go into Placement Information page and change address of Placement to correct address provided in the Comment Box.

Another SSCC Catchment Area

DFPS CVS/PAL staff will ensure there is an active referral to the Legal Region SSCC.

DFPS CVS/PAL staff will communicate to Legal Region SSCC the SIL Program of interest.

DFPS CVS/PAL staff will provide all needed paperwork and submit to the SSCC SIL Coordinator of interest.

Legal Region SSCC SIL Coordinator will notify DFPS CVS/PAL staff to proceed with:

Placement under Legal Region SSCC SIL, if Legal Region SSCC has secured contract with provider. Referral to Legal Region SSCC remains opened.

Placement will be entered under the Legal Region SSCC SIL RID in IMPACT. SSCC will document SIL Name and Address in the Placement Discussion Comment Box of Actual Placement.

If the desired SIL provider will not contract with Legal Region SSCC, SSCC would need reach out to the CBC State Office Contract Director for a resolution.

Prior to Approving Placement in IMPACT; DFPS CVS/PAL staff will go into Placement Information page and change address of Placement to correct address provided in the Comment Box.

Own SSCC Catchment Area

DFPS CVS/PAL staff will ensure there is an active referral to the Legal Region SSCC in catchment area.

DFPS CVS/PAL staff will provide all needed paperwork and submit to the SSCC SIL Coordinator.

If Young Adult meets criteria, SSCC will provide DFPS CVS/PAL staff the name of SIL Contact to conduct an Interview.

If accepted into the SSCC’s SIL program, Placement will be entered under the SSCC SIL RID in IMPACT. SSCC will document SIL Name and Address in the Placement Discussion Comment Box of Actual Placement.

Prior to Approving Placement in IMPACT; DFPS CVS/PAL staff will go into Placement Information page and change address of Placement to correct address provided in the Comment Box.

DFPS case remains in SSCC Legal Catchment.

For all subsequent placements, please refer back to this process, as direction may change based on next placement.

Regional policy will be followed assigning a DFPS courtesy worker.
The Exceptional Care Rate is used to secure placement for children and youth in the designated catchment area with exceptional needs that cannot be met appropriately through the use of the blended foster care rate. The SSCC cannot charge DFPS for both the blended rate and the exceptional care rate for the same child on the same day or use the exceptional care rate for 56 Youth under any circumstances.

DFPS will authorize use of exceptional care days of care using a validation process in instances when:
1. there is a Court Order that dictates a child specific placement or payment that exceeds the contemplated rate structure of the blended rate,
2. the child has extraordinary service needs that far exceed the traditional residential child care settings (example: major eating disorders, severe medical/psychiatric needs); or
3. the SSCC has performed an exhaustive search and placement cannot be located without the use of a child-specific contract whose rate exceeds the contemplated rate structure of the blended rate.

To Request EC Rate, the SSCC must obtain five required documents:
1. Child’s Common Application (form 2087 or 2087ex)
2. Child’s Psychological Evaluation
3. SSCC Placement Search Log (Foster homes and RTC searches)
4. Timeframes for exceptional care days requested
   • Contracts with negotiated rates between $0-$999, must be for only a 6 month period.
   • Contracts with negotiated rates of $1000 and up*, must be for 3 months.
5. Rate negotiated with the Provider

Note: All EC contracts must be reviewed by the SSCC prior to contract term date to assess continued need for services and if contract needs to be extended — if contract is extended with EC rate, the EC rate request process must be used.

SSCC Enters Request Into IMPACT
Start date will be the approval effective date included in the email.

DFPS Approves in IMPACT
Please see CBC Exceptional Foster Care Rate Request Help Guide

SSCC Will Maintain up-to-date SSCC Placement Search Log (spreadsheet).
The SSCC Placement Search Log (spreadsheet) will contain the names of SSCC in-network and out-of-network providers; dates of contact, method of contacts, outcomes of contacts.

On a quarterly basis by month and fiscal year, the SSCC must provide DFPS with the number of children, days of care, and amounts the provider paid for children placed using the exceptional foster care rate.

*For requests of $1001/day or more: Two levels of approval will be required, from the Director of Placement Services and an additional review and required approval from the Director of Conservatorship Services. These request will require an extra day for review and approval.
Subpoena Protocol for SCC Caseworkers

Developed by DFPS Legal

To manage the subpoenas sent to caseworkers for their testimony and/or DFPS records, each region has been assigned a regional subpoena mailbox. These mailboxes are managed by one Regional Attorney and at least one Legal Assistant. As a caseworker is subpoenaed, the existing process calls for them to send their subpoena to the regional legal mailbox for Regional Attorney review. The mailboxes are as follows: Reg02subs@dfps.texas.gov.

Region 2: Subpoenas for DFPS Records in Open and Closed Cases:

When the subpoena is directed to the SCC caseworker regarding a pending CPS matter or concurrent criminal case, the caseworker continues with the policy in place for sending the subpoena through the regional legal mailbox for attorney review and RMG processing of any requested DFPS records. The matter is usually referred to the attorney representing DFPS for handling if it is an open CPS conservatorship case. These matters are highly time sensitive, so subpoenas must be sent to the regional legal mailbox within two (2) hours of receipt by the caseworker.

For closed cases, subpoenas received for DFPS records are handled by the regional attorney who will file any appropriate Motion to Quash. Again, these subpoenas must be submitted to the regional legal mailbox within two (2) hours of receipt.

Regions 2 Subpoenas for Contractor Records

SSCC Contractors have separate records not maintained by DFPS. For subpoenas received by a contractor for personnel records or records maintained by the contractor, DFPS may give guidance as to how DFPS legal handles such requests generally but will then refer the contractor to their in-house counsel for specific instructions and legal advice.

Below is a sample cover sheet for contractor use in the situation where DFPS also maintains separate records. The cover sheet informs the recipient of a contractor’s records that there may be separate records maintained by DFPS and/or HHSC which are responsive to the subpoena; however, they must be requested separately via a subpoena directed to DFPS and/or HHSC.

<DATE>

Greetings,

You recently submitted a request for records to ______________________________. Attached you will find a Business Records Affidavit with the records responsive to your request maintained by ______________________________. Please note that all or some of the records you requested are owned and maintained by the Texas Department of Family and Protective Services (DFPS) and, therefore, must be requested through them. Their procedures can be found at the following web address: https://www.dfps.state.tx.us/policies/Case_Records/default.asp

Additionally, Adult Protective Services Provider Investigations (APS-PI) and Non-Abuse Child Care Licensing Program became a part of HHS on September 1, 2017. If you would like to obtain records from these HHS programs, their procedures can be found at the following web address: https://hhs.texas.gov/about-hhs/communications-events/open-records-policy-procedures

Sincerely,
Utilizing Background Checks Unit & DFPS Special Investigators

What is CBCU?

CBCU stands for Criminal Background Checks Unit. DFPS staff members within the Background Checks unit process background checks for the following populations:

- CPS Emergency Placements (FBI Exigent Checks)
- DFPS New Hires and Volunteers
- External Volunteers
- Purchased Client Services contractors
- General Public

How does the SSCC contact CBCU?

The SSCC can send an email to their mailbox (ASKBC@dfps.texas.gov) for questions or information. The SSCC can also visit the DFPS Background Checks site.

On the site, there are links and access to FINDRS information, Handbook, Training, CPS Background Checks, Resources, and a direct link to contact information.

What are SIs?

SI stands for Special Investigator. A Special Investigator performs advanced consultative protective services work in Child Protective Investigations (CPI), with an emphasis on forensic investigations. Work involves investigating cases that are of a high profile or high-risk nature or require joint investigation with law enforcement due to alleged criminal acts. A Special Investigator provides consultation and assistance regarding complex cases and issues, forensic investigation techniques, and investigation skills. A Special Investigator accompanies workers on cases and provides information on criminal statutes and law enforcement procedures when circumstances warrant. Special Investigators can assist the SSCC partner in the following activities:

- With sufficient notice, Special Investigators can attend meetings to train on best practices and how to utilize tools (e.g. Accurint) available to the SSCC for locating families and missing children.
- On certain cases, Special Investigators can support in emergencies to help track families and locate missing youth from care. Special Investigators would assess the request and consult with the SSCC requestor on recommended actions per available resources.
- Special Investigators can provide consultation/assessment/assistance on Human Trafficking related concerns.

How does the SSCC contact the DFPS SIs? AND What to expect when requesting Special Investigator assistance?

All requests for SI assistance should go through the SI regional mailbox. The mailboxes are monitored and are the method for routing assignments to Special Investigators. Only for emergencies (e.g. abduction) should the SI Program Director be contacted directly.

As soon as the caseworker finds the need to involve a Special Investigator, their supervisor must be notified and follow any protocols determined for the situation. Requests should be made to the Region of the child's legal custody, not the region of placement. For a search request such as running online searches for records and reports on persons of interest (e.g. TEA, Accurint, Location databases, Data Broker), include an Information Request From-2005, detailing the need. Every region is different on an SI request, so consider creating an IMPACT 2.0 courtesy request. Courtesy requests for missing children also require the CPS Missing Child Preliminary Sheet with a copy of the orders granting custody, and an email subject line “Missing Child Request for Assistance". As soon as the caseworker receives

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1 http://intranet.dfps.txnet.state.tx.us/Operations/OSS/Background_Checks/resources.asp
2 http://intranet.dfps.txnet.state.tx.us/CPI/Missing_Children/default.asp
3 http://intranet/CPI/Courtesy_and_Transfer_List/default.asp
4 http://intranet.dfps.txnet.state.tx.us/Forms/CPS/Conservatorship/default.asp
notification, via email or phone, on who’s been assigned, the caseworker makes that Special Investigator secondary on the case (SUB stage). This flowchart for SSCC caseworker and special investigator steps when a child runs away or goes missing is an example of what the collaboration may look like.

Child Specific Contract Placement is needed by 2INgage

A Home and Community-Based Services (HCS) Child Specific Contract (CSC) should be considered a placement option of last resort. HCS CSC placements are not monitored by HHSC and don't provide the same services as a HCS placement. HCS CSC placements are meant to be short term placements while a placement option more in line with a youth’s permanency goal is found.

Prior to approval of a CSC, all other contracted placement options need to have been exhausted, and the SSCC should be able to justify why the CSC placement is needed and is in the best interest of the youth. The
expectation is the SSCC will continue to search for a permanent placement while the youth remains in the CSC. The CSCs are evaluated periodically to ensure the SSCC is working to move the youth from the CSC.

It is important to emphasize that a CSC for SSI entails that the requester, in this case the SSCC, complete all SSI paperwork (application for SSI benefits and supporting documentation) and submit to the regional SSI coordinator before submitting the CSC placement request, unless it is an emergency placement situation or a court ordered CSC. If the latter is the case, the SSI paperwork should be completed immediately upon request. Please review the attached process flowchart for guidance on CSC requests.
OCR Child Fatality Review

The Office of Consumer Relations conducts reviews on cases when a child fatality has occurred and the case involves the following criteria:

1. The cause of death is suspected to be caused by abuse and/or neglect
2. There is an open or closed (CPI, CVS, FBSS, Kinship) within the last year.

OCR will conduct a review of the open Investigation regarding the child fatality with the most up-to-date information as the Investigation may still be ongoing and review any open and closed family cases within the last two (2) years. This review will identify staff involved, child safety concerns, policies associated with the concerns, trends, and patterns.

Critical Case Report is sent to DFPS Executive Leadership Team, Governors Office and external parties.

OCR Child Fatality Review is sent to the CPI Director of Investigations, CPS Director of Field, CPS Regional Director, and SSCC.

The SSCC will review the cases OCR reviewed and other cases from the program area where the child fatality occurred. The SSCC will identify and list the steps and efforts to address issues noted in the OCR Child Fatality Review and their review of other cases on the Region Response to OCR Case Review Form.

The SSCC will review their findings with the CPS Regional Director and submit the Region Response to OCR Case Review Form to the CPS Director of Field and OCR within 30 days of the child fatality.

There will be times when OCR may identify cases for a Critical Case Meeting (CCM). The SSCC will receive a notification for when the CCM will occur. In lieu of providing the Regional Response for Cases Reviewed, the SSCC shall prepare to discuss any similar issues and policies affecting child safety as those listed in the OCR Child Fatality Review. SSCCs should be ready to provide updates on surviving children, who may be in care, or information relevant to SSCC oversight.
1. For Region, you enter the region where the caregiver resides.

2. Enter the county where the caregiver resides.

3. For Category select “Other”.

4. Enter effective start date.
5. For Service select “68A Reltv/Othr Caregvr-HM Assmnt”.

6. Select the Resource for the SSCC that correlates with the region the caregiver resides in.

   **Do not be alarmed it says “ADOPTION”**
   For this example, we will select “SSCC 2ingage R2 (adoption).

7. Example of final criteria once all information has been entered.
<table>
<thead>
<tr>
<th>Version (Published Date)</th>
<th>Section Topics Affected</th>
<th>Change Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2021</td>
<td>Heightened Monitoring</td>
<td>Section updated with reference to current policy.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Transferring a Legal Case Between 2INgage/DFPS</td>
<td>Added protocol on legally transferring a case.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Runaway and Recovery Protocol</td>
<td>Added the process to the manual.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Subject Matter Experts</td>
<td>Added section on the availability of FACN through the Nurse Consultant. Added section on FINDRS resource and added hyperlinks to the resource guides to utilize FINDRS. Added policy references to Disability Specialists</td>
</tr>
<tr>
<td>September 2021</td>
<td>Investigation on open case</td>
<td>Section updated to align with new policy related to I/R notifications, home history reviews or new investigations received on open CVS cases.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Services Across Regional Lines</td>
<td>Updated process and added a table to assist with payment process.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Placement Entry IMPACT Documentation</td>
<td>Updated who to contact, to match 2INgage process, if placements are not entered timely.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Situations Requiring Immediate Notification</td>
<td>Added the OCR review process and added process flow chart in appendix.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Ensuring Safety</td>
<td>Entered protocol regarding staffing with risk manager when a new intake is received on an open case.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Payments for Purchased Client Services when No Family Referral is Present</td>
<td>Added the process to use when the Department has PMC of a child and there is no longer an FSU or FRE stage open.</td>
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<tr>
<td>September 2021</td>
<td>Kinship Placement Referral</td>
<td>Added tasks for DFPS to complete after making placement in a kinship home.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Evaluation a Possible Placement</td>
<td>Added process for Requesting Exceptional Care and added process flow chart to appendix.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Throughout the manual</td>
<td>Updated links, mailboxes, and made phone number and contact corrections</td>
</tr>
<tr>
<td>September 2021</td>
<td>Appendix</td>
<td>Added Exceptional Care flow chart, added ICPC Decision Memo, Added ICPC Initial Assessment, added the second page to the SIL flow chart</td>
</tr>
<tr>
<td>September 2021</td>
<td>New Placements and Case Management Referrals</td>
<td>Updated referral process to match IMPACT Enhancements; 2087 ex in IMPACT, 2085 series forms in IMPACT, family/child referral process in IMPACT</td>
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<tr>
<td>Version (Published Date)</td>
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<tr>
<td>-------------------------</td>
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<tr>
<td>September 2021</td>
<td>When an Operation is issued a placement hold</td>
<td>Updated to add reference policy and procedure.</td>
</tr>
<tr>
<td>September 2021</td>
<td>Placement of children when CVS is not obtained.</td>
<td>Updated to list process when a child is needing placement, but CVS will not be obtained.</td>
</tr>
<tr>
<td>September 2021</td>
<td>SSCC Abuse/Neglect Investigation</td>
<td>Updates to include policy related to abuse/neglect investigations on employees of the SSCC</td>
</tr>
<tr>
<td>September 2021</td>
<td>Exceptional Care</td>
<td>Added protocol and process to request exceptional care</td>
</tr>
<tr>
<td>September 2021</td>
<td>Children/Youth under SSCC Supervision</td>
<td>Added protocol</td>
</tr>
<tr>
<td>September 2021</td>
<td>Placement Into a Sub-Acute Program</td>
<td>Added protocol</td>
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