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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

THE ACH MISSION

Protecting Children. Preserving Families.

The ACH Values

CHILDHOOD We believe all children deserve a childhood which provides safety, love, nurturing, fun, and opportunities to learn skills needed to reach their maximum potential.

FAMILIES We understand that a child’s needs are best met in a family environment. We strive to partner with families and support their efforts to provide environments for children to thrive. We work to secure a family setting when one is unavailable to children.

EFFECTIVE SERVICES We will provide services which are built upon clearly defined intervention models, research and best practices. Effective programs respond to an identified need and impact it positively.

STEWARDSHIP We will use our financial and human resources to address the needs of those we serve using cost effective and transparent practices.

SPIRITUALITY We build upon our Christian foundation in our belief that unconditional love and hope are essential for healing. We recognize and respect the individualized spiritual backgrounds of those we serve and support family efforts to continue in their faith traditions.

ADVOCACY In addition to helping children and families through our programs, ACH will strive to leverage our skills and knowledge to shape public policy, opinion, and response to children and families in need.

LEARNING We strive to learn from our work through thoughtful analysis of our results and methods. We aim to develop knowledge that is helpful to children and families and to share this knowledge with others.

The ACH Value Themes
Kids Can’t Wait.
Relationships Get Results.
Start with “YES”.
The Community Is Counting On Us To Get It Right.

Note: Some links in this document will only work for DFPS and OCOK staff with access to the DFPS intranet.
COMMUNITY-BASED CARE

This operations manual gives CPI, CPS and Our Community Our Kids (OCOK) staff a more in-depth look at the protocols for case actions in conservatorship cases that include placement and case management services provided thru Community-Based Care in Region 3b.

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.
On December 16, 2013, DFPS awarded the first metropolitan Foster Care Redesign Single Source Continuum Contract (SSCC) to ACH Child and Family Services of Fort Worth. ACH Child and Family Services is a Texas-based nonprofit with extensive community involvement in the Fort Worth area since 1915 and is accredited by the Council on Accreditation. ACH will serve Region 3b (Erath, Hood, Johnson, Tarrant, Palo Pinto, Somervell and Parker counties).

Our Community Our Kids (OCOK), a division of ACH Child and Family Services, will operate a model through the SSCC contract that includes:

- Work to increase the capacity of existing providers and identify more community-based supports and services.
- Conduct a comprehensive assessment of community needs and an analysis to find gaps between the need for services and their availability.
- Do comprehensive safety and risk assessments to evaluate family strengths and needs.
- Provide service coordination based on the ten principles of Wraparound. For children and youth with complex behavioral health needs, ACH will use what is known as evidence-informed models.
- Use a trauma-informed and trauma-based care service approach. (Learn about trauma-informed care).
- Use a comprehensive continuous quality improvement (CQI) process to assess, inform, and guide how services are provided, and the system improved.
- Have a centralized training department that provides evidence-based training to all providers and stakeholders in ACH’s System of Care, based on CQI data and stakeholder feedback.

OPERATING POLICIES AND RULES

The protocols detailed in this operations manual are for children from Region 3b (legal county is within Region 3b) placed with and/or receiving services through Our Community Our Kids (OCOK) as the Single Source Continuum Contractor.

CPS Policy, Resource Guides and other supportive material linked in this operating manual may reference CPS 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 CPS staff. See Legal Basis for CPS 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 3b.

If you have any questions about any information in this manual, please contact your supervisor or Caressa Cherry, Region 3b Community-Based Care Administrator at 817-307-0512 carressa.cherry@dfps.texas.gov.

For more information about Community-Based Care, visit the DFPS website: DFPS: Community-Based Care.
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

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), 8a (San Antonio/Bexar county), and 8b (Region 8 counties surrounding Bexar county). The latest version of the statewide Implementation Plan can be found here.

Authority

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

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

Under Texas statute, an SSCC in a contract with DFPS will, at a minimum:
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.
3. Be afforded protection of communication that may occur between the SSCC’s employee, agent or representative when considered a client’s representative of DFPS for purposes of attorney-client privilege.

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 SSCC and DFPS.

In summary, the SSCCs, under contract with DFPS, assume the statutory duties of DFPS in connection with the delivery of child welfare conservatorship, kinship and reunification services in a defined catchment area. This does not include Intake, Investigation and Family Based Safety Services. Vendors and other organizations should treat the SSCCs as an agent of DFPS as it relates to the child welfare services being delivered by the SSCCs.
PLACEMENT AND FAMILY SERVICES REFERRALS

Region 3b INV/FBSS staff will work directly with Our Community Our Kids (OCOK) 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.

**General Requirements for all SSCC Placements:**

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](#)

OCOK 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.

**Evaluating a Possible Placement**

The safety of the child or youth is the paramount consideration in any placement selection. When evaluating potential placements, the OCOK Intake Team 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 OCOK Intake Team Specialist must complete a Residential Child Care Investigations (RCCI) investigation history check of all potential placements using CLASS to consider compliance history. The OCOK Intake Specialist also checks IMPACT for any pertinent abuse or neglect history.

The OCOK Intake Team 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, OCOK 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.

OCOK 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.

OCOK 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 OCOK Intake Team 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. In Stage II, the OCOK Intake team must review and confer with the caseworker or supervisor if the variance checks return results that may impact the placement’s ability to meet the child’s individual needs. When the OCOK Intake team and caseworker or supervisor disagree, regional staff must escalate to the regional director, or designee, for a placement decision. The regional director, or designee, consults with the director of Care Management.

Heightened Monitoring (HM)

If a general residential operation (GRO) or a child placing agency (CPA) is on heightened monitoring, then the Regional Director for the child’s legal county must provide approval. OCOK must submit the placement request to the DFPS HM Placement Mailbox. Here are the steps to the process:

1. OCOK completes due diligence as required by policy and fills out Heightened Monitoring Request Template
2. OCOK sends request, with completed template and all attachments, including updated placement packet, that should be considered for review to the HM mailbox
3. State Office HM Safety Analysts will track request, review, and add overall summary of trends and patterns for the 5-year history
4. HM SA will send to RDs for approval if request is complete (HM SA will send back and call regional staff if request is incomplete for additional information). HM SA will ensure all persons on initial placement request from OCOK to the HM mailbox are copied.
5. HM SA will text Regional Director of the child’s legal region about pending approval
6. If 2 hours pass with no approval, HM SA call RD’s
7. Regional Directors will review HM placement request
8. Regional Directors will reply to all on email to inform of approval or denial of HM request
9. Regional Directors will document the approval in IMPACT placement comment box once it is submitted to him or her as secondary approver.
10. HM SA will log approval in HM tracking log
The OCOK Intake Specialist must document the Regional Director’s approval or denial in IMPACT in the child’s placement detail under the Appropriateness of Placement question in the placement Narrative.

Child Sexual Aggression Designation Related to Removals and Placement

If the designation is determined at the time of removal

- As soon as the INV/FBSS Removal Worker is made aware of possible sexual aggression, they will alert their chain of command. The INV/FBSS Removal Program Director will email OCOK Senior Director of Permanency, Joy Waldrop, to set up a child sexual aggression staffing. OCOK Senior Director of Permanency, Joy Waldrop, will schedule the staffing within 48 hours of notification. The INV/FBSS Removal Worker, Supervisor, and Program Director; OCOK Permanency Specialist, Supervisor, and Permanency Director will be invited to attend. The INV/FBSS Removal Worker, Supervisor, and OCOK Senior Director of Permanency are required participants. The INV/FBSS Removal Worker will be prepared to share all known information required for the staffing.
- If the child or youth has not been placed, the INV/FBSS Removal Worker updates the Abbreviated version of the application for placement (form 2087ex) before submission to the SSCC 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 INV/FBSS Removal Worker IMMEDIATELY notifies the Permanency Specialist 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, OCOK 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 OCOK Permanency Specialist 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, the OCOK Senior Director of Permanency will send an email to the OCOK Permanency Director asking that they confirm that the Permanency Specialist has updated the application for placement, updated the Child Plan of Service, and notified the placement and Provider Child Case Manager.

The OCOK Permanency Director will have 24 hours to respond to the Senior Director of Permanency confirming the above activities required of the Permanency Specialist have been completed.

**Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification**

DFPS/OCOK 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/OCOK 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/OCOK 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/OCOK has 3 business days to review the information and obtain signatures of the missing individuals.</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>Other Facilities. This includes Juvenile Detention Settings, Psychiatric Hospitals, State Supported Living Center, and Medical Hospitals</td>
<td>Individual responsible for admissions</td>
<td>Caseworkers must review the information with the staff who is admitting the child and make efforts to have them sign the documents. If they refuse to sign, document who the information was provided to, their title, date, and indicate their refusal to sign. 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.

**Initial Placements:**

See New Placement and Case Management Referrals for information about how notification is accomplished for new removals.

**Subsequent Placements:**

- OCOK will update all information under the person detail page tabs prior to the placement change including the Child Victimization and Trafficking information.
- OCOK will update the Placement Summary form (2279) and the Child Sexual History Attachment A form in IMPACT.
- OCOK, or their designee, will be responsible for discussing information in the Placement Summary for (2279) and the Child Sexual History Attachment A with the caregiver at the time of placement.
- Obtain signatures for all required caregivers on the Placement Summary form (2279) and the Child Sexual History Attachment A
- Upload signed and scanned copies of the forms into ONE CASE in IMPACT.

For additional information regarding Child Sexual Aggression please refer to CPS Policy 6241.11 6241.11 Working with Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Aggression and Child Sexual Aggression Resource Guide.
New Placement and Case Management Referrals

Regardless of the type of placement, INV/FBSS Workers must staff the child’s case with their Supervisor and Program Director and obtain approval prior to requesting substitute care placement and case management services from Our Community Our Kids (OCOK).

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

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.

Paid Placement Referral

The paid placement process is used when INV/FBSS makes a referral to OCOK 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 OCOK. This process, therefore, will be used for all emergency and non-emergency removals.

Notification & Referral

INV/FBSS Worker will contact OCOK Intake Department via phone 1-844-777-OCOK (6265) and email intake@oc-ok.org and will:

- Provide INV/FBSS Worker contact information.
- Provide INV/FBSS Worker back-up contact information (i.e. Supervisor).
- Identify OCOK Specialist to be assigned as secondary in IMPACT.
- Provide OCOK Initial Referral Information (can be verbal).
- Open the FSU and SUB stages in IMPACT.
- Create child referral and family services referral in IMPACT.
- Complete the question under the sexual victimization tab in IMPACT and enter any episodes if marked yes.
- If sexual aggressive behavior is identified, follow the child sexual aggression designation process above.
- If applicable, complete the trafficking information in IMPACT prior to printing the Placement Summary form 2279 and the Child Sexual History Attachment A form.
- Complete and provide the child’s placement information:
  - Application for Placement of Children in Residential Care in IMPACT or Alternative Application for Placement of Children in Residential Care) and
  - Placement Summary Form 2279 in IMPACT and
  - Child Sexual History Attachment A
- 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 SSCC placement referral must be followed up by documented SSCC referral in IMPACT
within 1 hour and email notification to OCOK once the SSCC referral is complete in IMPACT.

*Form 2087ex must be reviewed by the INV/FBSS Supervisor and then emailed to OCOK (intake@oc-ok.org) within 1 hour of referral; email subject title, “DFPS Emergency Placement- Child Placement Information.”

*OCOK will not begin to search for placement without a thorough, descriptive and approved Alternate Application For Placement (2087 ex) specific to the child’s needs.

*If a referral is made by the night response INV unit and then transferred to the day INV unit to complete the investigation, the day INV worker assigned will notify OCOK of the INV Worker and INV Supervisor responsible for the case.

Placement of Child/Youth

**OCOK Placement Option**

No later than **7 hours** after receiving notice of the need for emergency placement, OCOK 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 OCOK has not established a placement for a child within 7 hours of initial notification, OCOK Intake 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.

**INV/FBSS Placement Approval**

- INV/FBSS Worker will evaluate and approve OCOK’s recommended placement option and medical consenter within 1 hour of receipt of notification from OCOK by telephone (844-777-OCOK (6265)) or email.
- Approval of the placement will be assumed if denial is not received within 1 hour.
- If there are concerns about the placement recommendation:
  - INV/FBSS Worker must obtain Supervisor, Program Director and Program Administrator approval to deny placement recommendation.
  - Denial justification must be included and provided to OCOK by responding to referral email.
  - The INV/FBSS Program Director will contact OCOK Director of Intake with the decision.
  - In the rare instances that placement is rejected, OCOK will have an additional 4 hours to search for new options.
  - The CBC Administrator must also be notified.

**Placement of the Child**
• INV/FBSS Worker will physically transport the child or youth to the placement.
• INV/FBSS Worker will complete the placement documents below and will review the
  information with the caregiver, obtain the caregiver’s signature on the documents
  and provide copies of the documents to the caregiver:
    o CBC Placement Authorization (form 2085FC)
    o CBC Designation of Medical Consenter (form 2085B)
    o CBC Designation of Education Decision-Maker (form 2085E)
    o Placement Summary (form 2279) from IMPACT
    o Child Sexual History Attachment A form from IMPACT
• INV/FBSS Worker will ensure the Placement Summary form 2279 and the Child
  Sexual History Attachment A have been signed by all required caregivers per this chart
  and upload in ONE CASE.

If placement is identified outside the 4 hours of documented emergency referral and OCOK
receipt of a thorough, descriptive and approved Alternate Application For Placement (2087ex)
specific to the child's needs:
• INV/FBSS Worker will transport the child or youth to an alternative location
  coordinated between OCOK 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.
• INV/FBSS Worker will provide contact information for the person that should be
  contacted by OCOK if assistance is needed after the 4 hours.
• INV/FBSS Worker will provide verbal approval of the placement and medical
  consenter when placement is secured by OCOK.
• INV/FBSS Worker must follow-up with written approval of the placement via email.
• OCOK will physically transport the child or youth to the placement.
• OCOK, or their designee, will review the placement information with the caregiver,
  obtain the caregiver’s signature on the documents and provide copies of the documents
  to the caregiver:
    o CBC Placement Authorization (form 2085FC)
    o CBC Designation of Medical Consenter (form 2085B)
    o CBC Designation of Education Decision-Maker (form 2085E)
    o Placement Summary (form 2279) from IMPACT
    o Child Sexual History Attachment A form from IMPACT
• OCOK will ensure the Placement Summary form 2279 and the Child Sexual History
  Attachment A have been signed by all required caregivers per this chart and upload
  in ONE CASE.

See Child Sexual Aggression, Sexual Victimization, Sexual Behavior Notification

Documentation

IMPACT Documentation

INV/FBSS Worker will within 4 hours of referral to OCOK:
• Update Person Information in the INV stage in IMPACT.

OCOK will, within 12 hours of referral:
• Create the placement entry in the placement information page of IMPACT.
• Create the Medical Consenter entry in IMPACT.
• If INV/FBSS Worker completed the placement with the caregiver, the INV/FBSS Worker will review the placement entry initiated by OCOK, complete any portion specific to discussions at the time of placement, and save and submit to their Supervisor.

• If OCOK completed the placement with the caregiver, OCOK will complete the IMPACT placement entry and save and submit to their OCOK Supervisor.

• If the placement entry is not documented in IMPACT from OCOK within 12 hours of the referral INV/FBSS Worker will call the OCOK Permanency Specialist and request placement be documented.

• If placement information is not documented in IMPACT within 1 hour of contact with OCOK Permanency Specialist, INV/FBSS Worker will notify their Supervisor.

• The INV/FBSS Supervisor will contact the OCOK Permanency Supervisor for immediate resolution and will notify CBC Administrator.

Depending on who made the placement, the INV/FBSS or OCOK Supervisor will, by 5:00 pm the next business day:

• Review and approve the placement and medical consenter documentation in IMPACT.

Additional Documentation

By 5:00pm the next business day, INV/FBSS Worker will provide/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 OCOK (intake@oc-ok.org) with subject line, “CPS Emergency Placement.”

Within 3 Days of Placement

OCOK will:

• Ensure the caregiver or residential provider complies with the required 3-day medical screening (3 business days) for all children and youth.
• Ensure the caregiver schedules CANS appointment to occur between days 21-30 in care.
• 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.

INV/FBSS Worker will:
Follow up on the completion of the 3 day medical exam to ensure it occurs
INV/FBSS Worker will enter the 3 day medical exam into IMPACT

**Kinship Placement Referral**

The Kinship placement process is used when INV/FBSS makes a referral to OCOK for a child or youth when an approved non-verified kinship placement has been made by the INV/FBSS Worker. Follow current policy regarding [4114.12 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 process. INV/FBSS Worker must notify OCOK if an approved kinship placement is secured after a referral for paid placement has been made.

**Notification & Referral**

INV/FBSS worker will contact OCOK Intake Department via phone 1-844-777-OCOK 6265) and email (intake@oc-ok.org and will:

- Provide INV/FBSS Worker contact information.
- Provide INV/FBSS Worker back-up contact information (i.e. Supervisor).
- Provide OCOK Initial Referral Information about the kinship caregiver (can be verbal).
- Identify OCOK Worker to be assigned as secondary in IMPACT.
- Open the FSU and SUB stages in IMPACT.
- Create child referral and family services referral 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](#).

*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.

**Placement of Child/Youth**

INV/FBSS Worker will complete the placement of the child in the kinship placement. This includes providing the caregiver with:

- [CBC Placement Authorization: Kinship or Other Non-Foster Caregiver](#) (2085KO)
- [CBC Designation of Medical Consenter (form 2085-B)](#)
- [CBC Designation of Education Decision-Maker (form 2085-E)](#)
- [Placement Summary Form (2279)](#)
- Child Sexual History Attachment A form from IMPACT

**IMPACT Documentation**

INV/FBSS worker will:

- Complete the placement entry in IMPACT.
- Update person characteristics in IMPACT.
- Update education log in IMPACT (with as much information as available).
- Update medical/dental page in IMPACT.
- Upload the Placement Summary form 2279 and the Child Sexual History Attachment A in ONE CASE.

*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](#).*
Request for Placement into a CBC Catchment Area

This process outlines the steps CPI/CPS Workers must take to request a paid foster care placements or adoptions for a child(ren)/youth(s), 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

CPI/CPS Workers will complete each section of Form 1508 and staff with his/her supervisor. The completed form will be emailed to receive approval from his/her chain of command; Supervisor/Program Director/Program Administrator the Regional Director (RD).

For Placement into a CBC Catchment (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 Kris Naylor, Chief Operating Officer of OCOK or her designee and cc, Carressa Cherry, Community-Based Care Administrator (CBCA) for the catchment area.

If SSCC Leadership 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.

The agreed upon Case Dispute Resolution Process will be utilized if there is a disagreement about the child’s placement into the CBC catchment area.

For all contact information on CBCA’s and SSCC Leadership please visit the Community-Based Care 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. OCOK will begin providing case management services upon referral.

Notification & Referral

INV/FBSS Worker will contact OCOK Intake Department by phone and via email (intake@oc-ok.org) will:
- Provide INV/FBSS Worker contact information.
- Provide INV/FBSS Worker back-up contact information (i.e. supervisor).
- Identify OCOK Specialist to be assigned as secondary in IMPACT.
- Provide OCOK Initial Referral Information (can be verbal).
- Open the FSU and SUB stages in IMPACT.
- Create child referral and family services referral in IMPACT.
- Complete child’s placement information in IMPACT by creating either:
  o Application for Placement of Children in Residential Care in IMPACT or
  o Alternative Application for Placement of Children in Residential Care and
  o Placement Summary Form 2279
  o Provide the Child Sexual History Attachment A.
*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 in order 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.

Emergency Placement Process

INV/FBSS Workers should follow the process outlined in paid placement process when requesting a paid foster care placement from Our Community Our Kids (OCOK) for a child with Intellectual or Developmental Disabilities (IDD), Primary Medical Needs (PMN) or Complex Medical Needs.

In addition to the paid 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 OCOK Intake Specialist to discuss:
  - The specific needs of the child or youth.
  - The ability of available placement options to meet the child or youth's specific needs.

- After a placement has been recommended by OCOK and approved by INV/FBSS, work with the OCOK Intake Specialist to coordinate a telephone staffing with the chosen caregivers, their provider, medical staff (if applicable), OCOK Care Coordinator, OCOK Permanency Supervisor and Program Director, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health staff to:
  - Discuss the specific needs of the child or youth.
  - Discuss the expectations of placement.
  - Develop a plan to move the child or youth and establish services in the new placement.

The CPS Education Specialist should be included in the staffing as appropriate. If possible, the staffing should occur prior to the child or youth arriving in his or her new placement, but no later than two business days after the child or youth’s placement.

Placement Change Process

OCOK Permanency Specialist will request a placement change from their placement team for a child with Intellectual or Developmental Disabilities (IDD) or Primary Medical Needs when needed following the process as outlined in the OCOK Case Management Manual.

As a part of the placement request process, the OCOK Permanency Specialist will:

- Within 24 hours of the placement referral, coordinate a telephone staffing with the OCOK Permanency Supervisor and Program Director, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and OCOK Intake Specialist and Director to discuss:
  - The specific needs of the child or youth.
Available times for a pre-placement staffing.

- Work with OCOK Intake Specialist to coordinate the pre-placement staffing, including relevant regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), CASA, GAL, OCOK Care Coordinator, and current caregivers.
- After a placement has been recommended by OCOK and approved by OCOK Permanency Specialist, work with the OCOK Intake Specialist to coordinate a telephone staffing with the chosen caregivers, their provider, medical staff (if applicable), OCOK Permanency Supervisor and Program Director, regional CPS Subject Matter Experts (Nurse, Developmental Disability Specialist, Well-Being Specialist), and STAR Health staff, to:
  - discuss the specific needs of the child or youth.
  - discuss the expectations of placement.
  - develop a plan to move the child or youth and establish services in the new placement.

The CPS Education Specialist should be included in the staffing as appropriate.

**Placing Children in Certain Institutions**

Our Community Our Kids (OCOK) will work with CPS Placement team in State Office when considering and requesting placement of a child or youth in one of the following settings:

- 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. OCOK 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, OCOK 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 Developmental Disabilities.](#)
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 OCOK Permanency Specialist will receive an IMPACT Task To-Do when a foster care review is due for the child.
To complete the review, the OCOK Permanency Specialist 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.

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

See CPS policy 1514 Annual Review of Eligibility.

Obtaining Certified Birth Certificates and Screen-Printing Birth Records

The OCOK Permanency Specialist 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 BVS system. If the Permanency Specialist 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. Additionally for those circumstances that do not meet the specific case management circumstances for a certified birth certificate, the Foster Care Eligibility Specialist can assist by providing a screen print of birth records from the Bureau of Vital Statistics.

The Foster Care Eligibility Specialist is the subject matter expert that can assist in getting birth certificates. The mailboxes for those requests for children from 3b are:
- Adoption birth certificates mailbox: R03WESTFOSCARELI@DFPS.STATE.TX.US
- Out of State birth certificates mailbox: REG03OOSBIRTHCERTTAR@dfps.state.tx.us
- All other birth certificates mailbox: R03WESTFOSCARELI@DFPS.STATE.TX.US

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 OCOK Permanency worker. The worker or local Permanency Specialist 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 OCOK completing the request for the certificate and providing any funds needed.

The OCOK Point of Contact for birth certificate related issues is: Jeannette Jarvis, Care Management Director Assistant, birthcertificates@oc-ok.org.
INITIAL COORDINATION MEETING

The Initial Coordination Meeting (ICM) is an internal, collaborative process between INV/FBSS and Our Community Our Kids (OCOK) 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 OCOK. 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 7 days of a new child and family referral to Our Community Our Kids (OCOK), 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

Region 3b has identified a standard schedule for ICM’s in the area.

- **Monday, Wednesday, Friday**
  - **Time:** 1pm
  - **Region:** 3b
  - **Counties Covered:** Tarrant County
  - **Scan Call Line:** 877/336-1831, Code: 8320665
  - **Contact Email:** dfpsregion03icmtarrant@dfps.state.tx.us
- **Monday, Thursday**
  - **Time:** 1pm
  - **Region:** 3b
  - **Counties Covered:** Erath, Hood, Palo Pinto, Parker, Johnson, & Somervell
  - **Scan Call Line:** 877/411-9748, Code: 1933252
  - **Contact Email:** dfpsregion03w3bremovals@dfps.state.tx.us
  - **Time:** 10am
  - **Region:** 3b
  - **Counties Covered:** Erath, Hood, Palo Pinto, Parker, Johnson, & Somervell
  - **Scan Call Line:** 877/848-7030, Code: 1041375
  - **Contact Email:** dfpsregion03w3bremovals@dfps.state.tx.us

The INV Program Director or designee will coordinate all meeting logistics, including:
- Schedules with participants a meeting date and time.
- Reserves a conference room and scan call line.
- Ensures all relevant participants are invited to the meeting.
- Provides notice (2 business days) of the ICM to all participants.
To begin the coordination process, INV/FBSS staff will send an email to the ICM Coordinator containing all placement referrals.

- Tarrant County - dfpsregion03icmtarrant@dfps.state.tx.us
- All other counties - dfpsregion03w3bremovals@dfps.state.tx.us

The ICM Coordinator will compile the list of placement referrals and send an email to all appropriate INV/FBSS and OCOK staff as notification of the upcoming ICM.

**Participants**

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

- OCOK Care Coordinator.
- Removal Worker and Supervisor.
- OCOK Permanency Worker and Supervisor.
- OCOK Kinship Specialist and Supervisor, as appropriate.
- Provider Case Manager (invited by OCOK).
- Devonna.Stephens@dfps.state.tx.us, CPS Nurse
- Other CPS staff or subject matter experts as needed (e.g. Developmental Disabilities Specialist, Education Specialist, Well Being Specialist).
- CASA representative.

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

**Documentation**

**Before the ICM**

Before the ICM, the Removal Worker will complete:

- As much of the Removal Staffing Checklist as possible, which has been updated per Community-Based Care protocols.
- Page 1 of the ICM form.

The Removal Worker will email a copy of the removal checklist and ICM form to all participants prior to the meeting.

**During the ICM**

During the ICM, the Removal Worker or their designee will:

- Record notes from the meeting discussion on the ICM form, including but not limited to the primary and concurrent permanency goals for the child.
- OCOK and INV/FBSS staff will share and 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.

**After the ICM**

After the ICM, the Removal Worker or their 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.
WORKING WITH CHILDREN WHO ARE SEXUALLY AGGRESSIVE, HAVE SEXUAL BEHAVIOR PROBLEMS, OR ARE VICTIMS OF SEXUAL AGGRESSION

CPS 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.

OCOK will continue to follow the policy and practice identified in CPS Policy 6241.11 Working With Children Who Are Sexually Aggressive, Have Sexual Behavior Problems, or Are Victims of Sexual Aggression.

Staff members of OCOK providing case management services 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.

The resource guide also contains more information about practices, requirements, and definitions of terms.

SUBJECT MATTER EXPERT SUPPORT IN PROVIDING SERVICES TO CHILDREN AND FAMILIES

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

For Region 3 subject matter experts and contacts, see Region 3 Resources page.

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 CPS/SSCC staff or other 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/OCOK 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

**Education Specialists**

CPS Regional Education Specialists serve as advocates, liaisons, and expert educational resources between local school districts and CPS staff in providing the best educational outcomes for children in DFPS conservatorship. CPS Regional Education Specialists can also be a resource as needed to assist OCOK with access to, or communication with, Region 3b catchment area school districts and campuses.

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

**Faith Based Specialists**

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

The Texas Faith-Based Model is a joint effort between DFPS and faith-based communities of all denominations and religious affiliations. The goals are to:
• Change the way DFPS collaborates with the faith community to promote positive outcomes for children and families.
• Enhance the well-being of children by shortening their stay in the foster care system.
• Decrease the time for children to achieve permanency.
• Improve community relations.

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

For more information see Texas Faith-Based Model.

**Fatherhood Initiative**

The goal of the Texas Fatherhood Initiative is to build greater capacity within CPS 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 OCOK.

**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.

**Nurse Consultant**

Nurse Consultants consult with and educate CPS/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).

**Advocacy for Children's Healthcare Needs**

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

The OCOK Permanency Specialist may request assistance from the CPS Nurse Consultant in person, or by phone, email, or using a referral form. Regional staff should consult with the CPS
Nurse Consultant covering their region regarding the best way to make a referral. The current list of CPS nurse consultants may be found on the Nurse Consultants page:

For additional information see Medical Services Resource Guide.

**Psychiatric Hospital Workers**

Psychiatric Hospital Workers serve as advocates, liaisons, and expert coordinators between local psychiatric care centers and CPS/SSCC 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. To achieve this mission, Psychiatric Hospital caseworkers visit and work with every child and youth through every single stay at an acute psychiatric hospital.

The process for requesting and working with the Psychiatric Hospital Liaison is outlined in the Psychiatric Hospital Contact Protocol. See Psychiatric Hospital Contact Protocol and Psychiatric Hospital Workers Safety Net page for additional information.

**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 CPS services. The PCG is a venue for gathering and incorporating parental feedback to enhance CPS policy and practice. OCOK will identify a representative to participate in this group to represent their catchment. OCOK 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 CPS 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 CPS system an, a CPS staff person and OCOK Liaison.

Local PSG meetings are held at least once a month in communities around the state, and provide:
- Information about the CPS system
- Hope and support
- 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 OCOK Permanency Specialist’s responsibility to ensure that parents being served by CPS/OCOK are aware of the local PSGs in their area. Regional fliers and information are available from regional CPS 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 OCOK to existing workgroups and communications. Example, OCOK Senior Permanency Director will be invited to participate in Conservatorship Program Administrator calls and meetings. OCOK 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 OCOK just as they provide support and technical assistance to regional conservatorship programs.

Substance Use Specialist
Substance abuse specialists support CPS and CPI 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 OCOK Permanency Specialists can access to meet the needs of children and families served by DFPS. Independent volunteer groups generously coordinate the many aspects of the rooms. OCOK will have access to these rooms during regular DFPS business hours. DFPS staff who assist with managing access to the rooms will assist OCOK with access as needed.

For more information and contacts, see Region 3 Rainbow Rooms.

Access to Conference/Visitation Rooms

OCOK will have access to DFPS conference or visitation rooms during DFPS business hours. Since these rooms are shared with CPS and CPI programs, rooms must be reserved through the local office coordinator.

Well-Being Specialist (WBS)

Well-Being Specialists are subject matter experts who assist CPS/SSCC 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 CPS 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 CPS/SSCC 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.

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, Family Group Conferences, 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

For eligibility requirements please see CPS policy 8235.41 Determining Eligibility for Foster Day Care.

When foster daycare services are needed for a child, who is legally from Region 3b and placed within Our Community Our Kids' (OCOK) provider network, the OCOK Daycare Coordinator will:

- Refer the foster parent to the local Child Care Services (CCS) office in order to be pre-qualified for foster daycare services as needed.
- 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.

Send an email to the DISTRICT3DC@dfps.state.tx.us mailbox:

1. Subject line: Region, County, Caregiver’s Name, Child’s Name, Case ID, daycare request date, #1 of (number of children related to this referral), and
2. Attach the following:
   - Pre-qualification letter from CCS,
   - 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 the OCOK Director of Permanency 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.

After receiving the daycare request email and the daycare request in IMPACT the CPS daycare coordinator will:

- Create the service authorization in IMPACT and send to CCMS.
- Within 10 business days of receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See 8235.4 Foster Child Daycare.
- Please note: Daycare services will not be authorized for payment until:
  - Regional Daycare Coordinator approves the service authorization (form 2054) and
  - it is received by the contracted child care services agency and entered it into their system and
  - the child care services agency notifies the chosen daycare.

Kinship Child Daycare

OCOK 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 outside the home and work at least 40 hours per week.
• Like foster parents, kinship families may be referred to the local Child Care Services (CCS) office in order to be pre-qualified for foster daycare services as needed.

Please see CPS Policy 8235.5 Kinship Child Daycare for additional eligibility criteria.

If eligibility requirements for Kinship Child Day Care are not met, the child may be eligible to receive General Protective Day Care.
To be eligible for Kinship-General Protective Day Care the caregiver must:
• be related to the child or have a longstanding and significant relationship with the child or family in the case of an infant;
• not be a licensed or verified foster home or foster group home;
• be residents of Texas; and
• be employed outside the home and work at least 40 hours per week.
The use of General Protective Day Care for a child in a Kinship placement must be approved by the OCOK Senior Director of Permanency.

To request kinship daycare OCOK will provide to the CPS regional daycare coordinator:
• Foster/Relative & Other Designated Caregiver Daycare Verification (form 1809) to each kinship caregiver household each time 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).
• OCOK will need to verify caregiver employment. Acceptable verification includes:
  o copies of the caregivers last 3 paystubs.
  o statement from the employer attesting to being employed full-time for 40 hours a week.
  o in the case of self-employment, a completed Form 1806 Caregiver Statement of Self-Employment Income.
Send an email to the DISTRICT3DC@dfps.state.tx.us mailbox.
• Subject line: Region, Caregiver's Name, Child's Name, Case ID, CPS/SSCC Unit #
  o If only 1 child’s name is entered in the subject line, but there are multiple children that requests were completed for, all of their names must be provided in the body of the email.
  o The body of the email must have the OCOK permanency supervisor’s approval in the body of the email. If we do not have supervisor approval in the body of the email, we cannot process the IMPACT daycare requests.
    ▪ 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).
  o Attach the following:
    ▪ Completed Foster/Relative & Other Designated Caregiver Daycare Verification(form 1809) unless an exception is met as described below:
• OCOK 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 OCOK Program Director (PD) 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 daycare coordinator will:

- Create the service authorization in IMPACT and send to CCMS.
- Within 10 business days of receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See

**Please note:** Daycare services will not be authorized for payment until

- Regional Daycare Coordinator approves the service authorization (form 2054) and
- it is received by the contracted child care services agency and entered it into their system and
- the child care services agency notifies the chosen daycare.

**Waiving the Eligibility Criteria for Good Cause**
The associate commissioner for Child Protective Services (CPS) has the authority to waive the eligibility provisions for good cause. The OCOK Senior Director of Permanency or designee may request a waiver for good cause on a case-by-case basis. Waiver requests should be submitted to DISTRICT3DC@dfps.state.tx.us mailbox who will then route to the 3W CPS Regional Director and CPS State Office for approval.

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 Daycare**
OCOK may request General Protective Daycare for a child in DFPS conservatorship who has been reunited with their parent(s).

Send an email to the DISTRICT3DC@dfps.state.tx.us mailbox.

- Subject line: Region, Caregiver's Name, Child's Name, Case ID, CPS/SSCC Unit #
  - If only 1 child’s name is entered in the subject line, but there are multiple children that requests were completed for, all of their names must be provided in the body of the email.
  - The body of the email must have the OCOK permanency supervisor’s approval in the body of the email. If the supervisor approval is not in the body of the email, the Regional Daycare Coordinator cannot process the IMPACT daycare request.

- OCOK will complete the Daycare Request in IMPACT.

After receiving the daycare request email and the daycare request in IMPACT the daycare coordinator will:

- Create the service authorization in IMPACT and send to CCMS.
- Within 10 business days of receipt of the approved daycare request in IMPACT, the Regional Daycare Coordinator will process the daycare request. See
• **Please note:** Daycare services will not be authorized for payment until
   - Regional Daycare Coordinator approves the service authorization (form 2054) and
   - it is received by the contracted child care services agency and entered it into their system and
   - the child care services agency notifies the chosen daycare.

Any required approvals for extensions for daycare services should be directed to Marie Clark, OCOK Director of Care Management.
CASE DOCUMENTATION

Documentation and Communication

When a child is placed in substitute care, OCOK 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.

OCOK will be recording contacts in IMPACT in the contact detail page and must be entered no later than 7 days from the contact date.

Rights of Children and Youth in Foster Care

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

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

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

- Within 72 hours of the child or youth entering foster care (i.e. at initial placement following the child’s removal).
- Every time the Child’s Plan of Service (CPOS) is reviewed, including the first time the CPOS is developed. The Bill of Rights is included with the CPOS when the CPOS is generated from the Forms drop-down in IMPACT 2.0.

Again, at the time of initial placement but no later than 72 hours, children and youth in foster care must be provided with a copy of the CPS Rights of Children and Youth in Foster Care (Form 2530). The primary caseworker must review these Rights with the child or youth. Upon completion of the review, the primary caseworker must have the child or youth and caregiver sign on the appropriate signature lines, provide a copy to the child or youth, and upload a signed copy into OneCase in IMPACT in addition to a signed copying in the physical case file.

The primary caseworker must review the Bill of Rights orally and in the child’s primary language, if possible. There are no exceptions for age or disability. Caseworkers will need to provide accommodations where needed, such as translators or sign language interpreters. If a child cannot sign the Bill of Rights (such as infants, for example), this must be noted on the form by the caseworker. The review must still occur with the caregiver and a signed copy must still by uploaded into OneCase and included in the physical case file.

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

13. “Participate in... unsupervised childhood and extracurricular activities.”
20. “Healthy foods in healthy portions for my age and activity level.”
27. “Be informed of emergency behavioral intervention policies in writing...”
45. “Make calls, reports, or complaints” to

- The HHSC Ombudsman for Children and Youth currently in Foster Care at 1-844-286-0769.
- The DFPS Office of Consumer Affairs at 1-800-720-7777.

The primary caseworker should check for understanding and explain anything the child or youth doesn’t 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).

**Maintaining Current Photograph of a Child**

Upon assignment, the OCOK Permanency Specialist 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 OCOK Permanency Specialist must ensure one is taken and uploaded into IMPACT by the 60th day following the child’s removal. Thereafter, the OCOK Permanency Specialist 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 OCOK Permanency Specialist 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.

When the case is closed, the OCOK Permanency Specialist must give the print and digital pictures to the family caring for the child, or to the child if he or she is a teenager.

See CPS Policy [6133.73 Maintaining Current Photo of Child](#)

**Primary Case Assignment, External Case File and External Documentation**

**Primary Case Assignment**

Between the Child and Family Referral and the 14th day, the OCOK Permanency Specialist 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. At the 14th day after removal, regardless if the adversarial hearing has taken place, the Removal Worker will make the OCOK Permanency Specialist primary on the FSU and SUB stages. If the adversary hearing is delayed, a staffing may be requested at 14 days to discuss outstanding removal checklist tasks and responsibilities. The Removal Worker can request that the OCOK Permanency Specialist 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 OCOK Permanency Specialist no later than the 14th day after removal.
External Case Documentation

Substitute care documentation requirements state the following forms must be included in the paper case record. This list is not all-inclusive. Region 3b may have additional requirements for documentation that must be included in the case file. The Removal Worker and OCOK Permanency Specialist will ensure that any of below that has been obtained, are in the case record, either in IMPACT or the paper file, with copies of certain documents filed in the child’s Education Portfolio.

- Birth/citizenship records
- Health records, including a copy of a recent medical exam
- 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 caretaker 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

Removal Worker will provide the Educational portfolio to the caregiver at the time of placement, with any documents available at that time. The removal worker will continue to provide any additional documents to either the Placement or Permanency Specialist as they are received.

See CPS Handbook policy:

6134 External Documentation
ENSURING SAFETY

CPI Investigation on an Open CVS Case

The following protocols outline the steps and procedures that CPS and CPI staff must take when there is an Investigation involving a child in an open SUB Care stage. For investigations involving CCI, refer to the Child Sexual Aggression Resource Guide.

Notifications When an Intake is Received

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

- CPS Risk Manager
- OCOK Permanency Specialist
- OCOK Permanency Supervisor
- OCOK Director of Permanency

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

- OCOK Kinship worker
- OCOK Kinship supervisor
- OCOK Director of Care Management

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

When There Are Risk and Safety Concerns or Danger Indicators

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

- CPI program director
- OCOK Permanency Specialist
- OCOK Permanency Supervisor
- OCOK Director of Permanency
- Kinship staff, if assigned

CPI and OCOK staff will coordinate together any need for a new placement. If a new placement is needed, staff must follow policy for notifying legal parties. The CPS Risk Manager will facilitate a staffing between CPI and CVS staff within 10 days.

Risk and Safety Concerns in a Kinship Home

If CPI determines there are safety or risk concerns, but there are no immediate child safety concerns, involving a kinship home, OCOK Permanency Staff and kinship staff will complete a developmental plan with the kinship caregivers to address the identified concerns.

Investigation Conclusion and Final Steps

Once CPI gathers all pertinent information, the CPI supervisor will contact the OCOK Permanency Supervisor to inform them of the information gathered during the
CPI will forward a copy of the notification letter to OCOK staff and the CPS Risk Manager once the case is closed.

The OCOK Director of Permanency and kinship management staff will review the documentation in the case within 10 days of receiving notification of case closure and document the review in IMPACT.

**Incidents of Sexual Abuse or Child Sexual Aggression**

If there is an incident that involves the child being a victim or perpetrator of sexual abuse (SXAB) or child sexual aggression (CSA), the CVS staff will document and designate the information in IMPACT. See the [Child Sexual Aggression Resource Guide](#) and the [Working with a Child who has Experienced Sexual Abuse Resource Guide](#).

**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 OCOK Permanency Specialist will coordinate a staffing during the 7th month of the pregnancy to discuss any safety concerns. Participants will include:

- OCOK Permanency Specialist
- OCOK Permanency Supervisor
- OCOK Permanency Director
- INV Removal Supervisor (supervisor during the removal of the other children that are in CVS)
- INV Removal Director

The OCOK Permanency Specialist 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:
- PD directives:

Additional decisions or directives will be discussed and added during the staffing. Notes from this staffing will be documented in a contact narrative, so they are available to the INV night response unit should an intake come in after hours.

Once the child is born and an intake generated (if needed), the intake will be routed to the INV unit that staffed the New Baby Protocol to complete the investigation. INV staff will keep the Permanency staff updated regarding the progress of the investigation.
When Children Not in DFPS Conservatorship Are in Immediate Danger

OCOK staff can take immediate action to remove a child 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 OCOK is working with a family where some of the children in the family are not in DFPS conservatorship. Should the OCOK Specialist feel the child(ren) are in immediate danger, the following actions can be taken depending on the severity of situation:

- Staff with OCOK 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 or inform Statewide Intake (SWI) that immediate response is needed.
- 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 CPS 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 OCOK is not needed.

In the event there is a new investigation related to an open CVS case, a joint staffing will be held between OCOK and INV prior to contact being made with the child or family. In emergency situations where that is not be feasible, the staffing should occur as soon as possible after contact is made with the child and/or family. If a PCSP is considered during an investigation related to an open CVS case, both the Investigations program director and the OCOK program director must approve the PCSP before it is implemented. In case of emergency, the INV program director will approve the PCSP and it will be staffed the next business day with OCOK permanency staff, including the OCOK program director.

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 OCOK 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 3200 Parental Child Safety Placements
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 OCOK Permanency Specialist must notify the:

- OCOK Permanency Supervisor.
- 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).
- Special Investigator Program Director and OCOK Administrative Assistant to the Senior Director of Permanency, after the OCOK Permanency Specialist 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.

The OCOK Permanency Specialist must provide these notifications immediately and no later than 24 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 Specialist must provide notice as described in 6151.3 Notification Requirements and Schedule.

The Administrative Assistant to the Senior Director of Permanency serves as the OCOK 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.

OCOK point of contact: Omalade Oshodi, Omalade.Oshodi@oc-ok.org

DFPS Points of Contact: CPS Field Program Specialist, Analytics and Evaluation Division Research Specialist.

See CPS Handbook policies:
6460 When a Child or Youth is Missing from CPS Conservatorship
Locating Missing Children in CPS Conservatorship Resource Guide

**Human Trafficking Response Protocol**

All staff are required to comply with human trafficking protocols outlined in the DFPS Human Trafficking Response Protocol (HT Protocol). Currently applicable to Bexar, Dallas, Harris, Tarrant and Travis Counties only, protocols are being added for other counties in the state to include Erath, Hood, and Somervell. The protocol addresses:

- Victim identification through the use of the Commercial Sexual Exploitation-Identification Tool (CSE-IT), a validated screening tool to aid in accurately detecting sexual exploitation.
- Service planning for youth at risk and identified victims of sex trafficking.
- How DFPS collaborates with other anti-trafficking partners in identification and recovery of victims and subsequent service provision.

The HT Protocol outlines the expected response in three critical areas:
• Human Trafficking Investigations - when the alleged perpetrator is traditionally responsible for a child’s care, custody, or welfare such as family member, or an adult living in the home of an alleged child victim.
• At Risk Youth - all children in DFPS conservatorship who are 12 years or older in age, with five or more placements.
• High Risk Youth - children 10 years and older, in DFPS conservatorship who are missing, or on runaway status.

See [HT Response Protocol](#) [DFPS Safety Net Page](#)

**Commercial Sexual Exploitation-Identification Tool (CSE-IT)**

West Coast Children’s Clinic developed the [Commercial Sexual Exploitation – Identification Tool](#) (CSE-IT – pronounced “see it”), a screening tool that aids in detecting risk of sexual exploitation.

The tool is designed to ensure early identification of sexual exploitation and protect youth from prolonged abuse and violence. It is not diagnostic but rather a tool which prompts additional information gathering and interventions if problems or concerns are identified.

OCOK Supervisors in Tarrant County will continue to use the CSE-IT tool and OCOK will support future expanded implementation.

See [HT Response Protocol](#) [DFPS Safety Net Page](#)

**Child Sex-Trafficking Care Coordination Teams (CCT)**

Care Coordination Teams (CCT) exist across the state to provide youth victims of sex trafficking with a continuum of care including planning and delivering services in the short and long term. The CCT is made up of professionals in the community who provide services for trafficking victims or who investigate and prosecute trafficking cases.

In an area where the Care Coordination Team exists, it is the default structure for referring youth identified as human trafficking victims.

See [Care Coordination Teams](#) [DFPS Safety Net Page](#)
RESPONSIBILITY FOR CONTACT AND SERVICES ACROSS REGIONAL LINES

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

- Courtesy supervision
- Local Permanency Supervision
- Kinship services including home assessments and addendums
- Kinship Adoption Studies
- Adoption Preparation Services
- Adoption Supervision services

**Courtesy Supervision**

When a CPS/OCOK 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 subitems.

CPS units outside the 3b area may make request for supervision assistance from OCOK and likewise, OCOK may make request for supervision assistance from CPS units outside the 3b area.

See CPS Handbook policies:

- 6314.1 Coordination Between Primary Caseworker and Courtesy Supervision Caseworker
- Courtesy Caseworker Responsibilities
- Primary Caseworker Responsibilities 6320

**Local Permanency Supervision**

Local Permanency Specialists 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 Specialist 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 Specialist also works to ensure that the child or youth achieves permanency.

See CPS Handbook policy:

- 6414 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 OCOK staff or a contractor may complete the written home assessment and risk assessment.

If an OCOK contractor is used to complete the assessment, OCOK will request the service from the contractor and provide the Universal Referral Information. The requesting region will submit a Service Authorization (2054) to OCOK for the services rendered using the legacy home assessment service code (not SSCC home assessment service code).

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 OCOK**

Request for Kinship, Conservatorship and Adoption Services (aka Universal Referral Form) Form 2077 is used to request Kinship, Conservatorship and Adoption services. The OCOK mailbox identified to request such services is SSCC3B_CVS_KIN_LPS_ADO@oc-ok.org. OCOK 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.

**OCOK Requesting Services from another SSCC Catchment or DFPS Region**

OCOK 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 at Form 2077 Instructions for additional information regarding completing and submitting the form to the region services are requested from.

**Payment for Purchased Client Services**

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.

If OCOK requests purchased client services for a parent or caregiver who resides in another DFPS Region, the OCOK Permanency Specialist will manage the payment for services through OCOK’s billing system.

If another DFPS Region requests purchased client services for a parent or caregiver who resides in Region 3b, the primary CPS case worker will issue payment for services by issuing a Service Authorization (form 2054) with the legacy provider’s service code.

Payments for requests for Kinship Home Assessments by other regions will use the SSCC home assessment service code on the 2054.
LEGAL SERVICES

OCOK 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.

Legal Liaison Support

The CPS Legal Liaison team supports permanency for children and will continue to provide support in collaboration with OCOK. Examples of supportive activities include:

- Assigning new conservatorship cases to Permanency units and attorneys for representation.
- Facilitating communication between OCOK Permanency staff and County Assistant District Attorney.
- Coordinating staffings for legal preparation.
- Preparing and filing legal documents.
- Assisting with discovery requests.

OCOK will include the Legal Liaisons in communication related to:

- Permanency staffings.
- Legal staffings.
- Decisions regarding young adults entering trial independence, entering extended foster care, or returning to foster care.

Point of Contact for Legal Liaison Support
Katrina Butler
Tarrant County Legal Unit
2700 Ben Ave
Fort Worth, Texas
76103 817-255-8730
Katrina.butler@dfps.state.tx.us

Point of Contact for Outlying Legal Liaison Support-
Rebecca Wittmis
535 South Loop 288 Ste 2001
Denton, TX 76205
940-384-6860
Rebecca.Wittmis@dfps.state.tx.us
Paying for Legal Services

Resources to cover legal expenses varies by Individual County in the 3b 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, OCOK will decide, in coordination with the Community-Based Care Administrator (CBCA) and Contract Administration Manager (CAM), on how the services will be paid.

If the decision is that DFPS will pay the provider, OCOK 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, OCOK Permanency Specialist will take the following steps immediately:

1. Notify the OCOK Permanency Supervisor about the order. The OCOK Permanency Specialist and and supervisor will notify the attorney representing DFPS/OCOK if there is a concern that the order needs to be appealed in any way.
2. 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, OCOK will take the following steps:

1. Immediately inform the attorney representing DFPS (within 3 days of the court's rendering of the order) that OCOK 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.

2. If and when the court order is issued, inform the child's Medical Consenter (if it is someone other than the OCOK Permanency Specialist) about the order, and direct him or her to:
   a. Ask the doctor to order the service, treatment, or test at the child's next visit with a STAR Health general practitioner.
   b. Make sure the doctor knows that DFPS/OCOK has been told that Medicaid does not generally cover the service, treatment, or test.
   c. 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, OCOK Permanency Specialist will immediately get the doctor to provide written documentation of the doctor's refusal.

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

OCOK Permanency Specialist will file the documentation in the case record.

**Doctor Orders Medical Services, Treatments, or Tests**

If the doctor orders the service, treatment, or test, OCOK Permanency Specialist will notify the supervisor and inform the attorney. At the next court hearing where medical care is discussed, OCOK Permanency Specialist 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, OCOK will staff the situation with the CBCA and CAM to determine how the provider will be paid. If the decision is that DFPS will pay the provider, OCOK will submit the following items as soon as possible to the CAM:
- Signed copy of court order directing that the child be provided the specific medical service, treatment, or test.
- Proof that Medicaid denied paying the claim (an email from the provider is sufficient).
- Copy of the invoice or bill from the laboratory or provider.

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

**When Medicaid Does Pay**

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

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

**Notice Requirements for Elevating Certain Court Orders**

CPS regional management, legal representatives, and DFPS state office must receive timely notification from OCOK about court orders that may create problems for the CPS program as a whole or may require immediate legal action. See CPS Policy 5311 Notice Requirements for...
Elevating Certain Court Orders. OCOK and DFPS Regional Attorney providing legal representation are both responsible for ensuring that leadership from DFPS and OCOK are informed of these type of orders.

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

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

OCOK contact: Jeannette Jarvis, Director of Care Management Assistant, [birthcertificates@oc-ok.org](mailto:birthcertificates@oc-ok.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 OCOK Permanency Specialist 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
Our Community Our Kids (OCOK) will work to prepare older youth in DFPS conservatorship who are transitioning from substitute care to adulthood. OCOK, 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](#)
[Trail 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, OCOK 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 transition plan development for youth who are placed in 3b but not legally from the catchment should be coordinated with the youths OCOK Local Permanency Specialist if assigned. If an OCOK Local Permanency Specialist is not providing services to the youth, please follow the process for Requesting Services Across Regional Lines from OCOK. On the Form 2077 complete request for Local Permanency Services and indicate that the service requested is Transition Plan Development assistance.

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

OCOK will identify young adults from Region 3b 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 3b is interested in staying in extended foster care, OCOK 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.

OCOK will continue to follow established protocol regarding SIL placements for Youth Adults being service that are from a legal county within the 3b catchment area and those that are from another legal county that desire SIL placement in the 3b area.

Please refer to [Supervised Independent Living (SIL) Flow Chart](#) for additional guidance. Please note that OCOK 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 youth whose legal case was outside the 3b catchment area, but the young adult now lives in the 3b catchment area. Young adults residing in 3b who not from the 3b area that indicate to their PAL Coordinator a desire to Return to Care in 3b will be prescreened for their sincerity and eligibility for returning to care and then referred to the OCOK PAL Coordinator.

If placement is found:

- OCOK Permanency Specialist 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.

OCOK 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. PAL staff must track survey completion, assist youth with taking the survey and enter survey responses in IMPACT according the federal survey reporting requirements.

CPS identifies and indicates the youth or young adults who should take the survey in the NYTD Information Page IMPACT. The NYTD Information Page in IMPACT alerts OCOK 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). OCOK will check the NYTD Information Page in IMPACT to determine which of their assigned youth needs to take the survey. OCOK 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 OCOK’s NYTD survey completion progress and will send out periodic information about the status of OCOK’s survey completion rate. When requested, OCOK will update CPS State Office on progress and plans to get surveys completed by period data entry due dates. OCOK will maintain current contact information in IMPACT for youth placed within their provider network.

NYTD Data and Information Errors

CPS identifies and indicates DATA and INFORMATION errors for youth and young adults in the NYTD Information Page in IMPACT. OCOK 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, OCOK 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**

OCOK 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 OCOK. When requested, OCOK 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 3b and the resources for these services will be shared between OCOK and DFPS. Please see Preparation for Adult Living CPS policy 10200 for additional information regarding these services and their eligibility requirements.

To access, OCOK PAL staff 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 3b 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, OCOK 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 OCOK Permanency Specialist must begin working with the caregiver to apply for assistance.

OCOK Permanency Specialist will:
- At least 90 days prior to PMC transfer date, request needed documentation to complete level of care including:
  - 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 YFT.
- Must 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 kinship permanent conservator.
- The child is eligible to be the subject of a permanency care assistance agreement if all of 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 OCOK placing the child in the home of that person.
  - The child's prospective kinship permanent conservator 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.
  - At the time the permanency care assistance agreement is signed, OCOK has determined that neither adoption nor reunification are appropriate permanency options.
• When the child has been in the foster home for 6 months, OCOK Permanency Specialist prepare a complete PCA packet for each child using the Permanency Care Assistance Checklist/Guide-Form 2124.

• The checklist requires the OCOK Permanency 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 sibling group, a complete set of forms is required for each child. Scans or faxes are not accepted.

• OCOK Permanency Specialist will gather source documentation needed for each child’s packet (reference PCA Checklist/Guide).

• For caregivers with a Private Agency:
  o Request a VID by completing and sending the AP-152 – Texas Application for Payee Identification Number to DFPS Vendor ID Numbers - vendor@dfps.state.tx.us. In response the VID will be emailed back to the requesting Permanency Specialist.
  o Request FAD stage by filling out form 2189 (found on Smiley/CPS/Foster and Adoptive Homes/Other) and sending the 2189, home study, and VID number along with screenshot from VID mailbox to their OCOK Permanency Director or designee in order to access and enter the non-FPS FAD stage

• OCOK Permanency Specialist will, in the Sub stage, PCA tab, complete a PCA application for each child on IMPACT and submit to assigned subsidy worker. Cases are assigned by caregiver’s last name.

• OCOK Permanency Specialist will ensure the Authorized Level of Care (ALOC) listed on IMPACT is correct and accurate for child.

• OCOK Permanency Specialist will scan complete packet(s) to both regional negotiators, Peggy Hill peggy.hill@dfps.state.tx.us and Barb Gaddis barbara.gaddis@dfps.state.tx.us.

• OCOK Permanency Specialist will submit packet(s) at least 30 days prior to PMC being transferred. OCOK Permanency Specialist will hand deliver the packet(s) to the Westmoreland office. Packets are signed in at the front desk.

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 subsidy staff will review each packet for completeness. If complete the subsidy worker will email a Preliminary Determination letter to you, your supervisor and the regional negotiators.

The negotiator will meet with the family, negotiate subsidy benefits, and obtain caregivers signature on the permanency care assistance agreement. The regional negotiator will email you when signed PCA agreements are on file with the agency and that PMC can be transferred to caregiver.

Do NOT proceed with transferring PMC until PCA benefits have been negotiated.

**OCOK Permanency Specialist’s Tasks to Complete After Transferring PMC**

• After the final court hearing, scan the order signed by the judge to the negotiator.
• In the SUB stage, update legal status with “FPS Responsibility Terminated”.
• End placement in the SUB stage with reason “Child placed in PCA”.

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• Email foster care eligibility to end billing/FC benefits.
• Assign the PCA stage as primary to the subsidy worker.

**Issues that cause a delay with transferring PMC:**
• Packet does not have original signatures from family or your supervisor.
• PCA checklist not fully completed.
• Source documentation missing.
• FAD stage not created and linked to the private agency home.
• The foster care placement is not checked Relative or Fictive Kin under Placement Information section.
• Online PCA application not submitted.
• ALOC issues where family is disputing Basic ALOC for child at negotiation.
ADOPTION

Our Community Our Kids (OCOK) will be responsible for the full array of adoption services in Region 3b 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.

OCOK will work with the DFPS Adoption Subsidy Negotiator 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 minority 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.

OCOK Permanency Specialist’s Tasks to Complete Prior to Adoptive Placement

- 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 your supervisor’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).
- Request a VID by completing and sending the AP-152 – Texas Application for Payee Identification Number to DFPS Vendor ID Numbers - vendor@dfps.state.tx.us. In response the VID will be emailed back to the requesting Permanency Specialist.
- Request FAD stage by filling out form 2189 (found on Smiley/CPS/Foster and Adoptive Homes/Other) and sending the 2189, home study, and VID number along with the black box screen print from VID to the OCOK Permanency Director or their designee to access and enter the non-FPS FAD stage.
- Ensure the Authorized Level of Care (ALOC) listed on IMPACT is correct and accurate for child.
- Have your supervisor open an ADO stage. In the ADO stage, complete an adoption assistance application for each child on IMPACT and submit to assigned subsidy worker. Cases are assigned by adoptive family’s last name.
- Scan complete packet(s) to both regional negotiators, Peggy Hill and Barb Gaddis.
- Submit packet(s) at least 30 days prior to ADO placement. Hand deliver the packet(s) to the Westmoreland office. Packets are signed in at the front desk.

Subsidy Tasks to Complete

- The subsidy staff will review each packet for completeness. If complete the subsidy
worker will email a Preliminary Determination letter to you, your 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 the adoptive family the agreements for the family to sign at the adoptive placement.
- After the adoptive placement, end placement in the SUB stage, and enter new placement in the ADO stage with the RID you received from your FAD liaison.
- Email the DFPS Foster Care and Adoption Eligibility Specialist to end billing/FC benefits.
- After adoptive placement is done, send the 3 original adoption assistance agreement forms and a copy of the adoptive placement agreement (keep copies in your file) to the negotiator so they can sign as the department representative.
- The negotiator will forward the forms on to the DFPS Foster Care and Adoption Eligibility Specialist and will also mail an original form to the adoptive family.

**OCOK Permanency Specialist’s Tasks after Adoption is Final**

- Do not change the child’s name in IMPACT until the adoption is finalized.
- Scan the adoption decree to the subsidy worker.
- In the ADO stage enter the legal status of “Adoption Consummated”.
- Once the subsidy worker has entered the subsidy benefits in IMPACT, you can 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 subsidy worker.

**Issues that cause a delay with presentation staffing/adoptive placement**

- Packet does not have original signatures from family or your supervisor.
- AA checklist not fully completed.
- 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.

**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.

OCOK Regional Post Adoption Liaison: Lusheka Christmas White, Adoption Supervisor/PD
Lusheka.christmas-white@oc-ok.org
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 thru 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 the 3b 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.
- If any child/youth has the potential to enter Post Adoption Substitute Care Services and DFPS is seeking Joint Managing Conservatorship, the CBCA, as well as, the OCOK 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.

OCOK 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 Amber Hart, CPS Adoption Program Specialist

See CPS Handbook policy:
8400 Post Adoption Services
Adoptions Support Programs Safety Net Page
INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN (ICPC)

The following regional protocols have been developed to manage Interstate Compact on the Placement of Children (ICPC) specific situations in the Region 3b 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 3b catchment area to OCOK to facilitate the verification or approval of the home through the OCOK 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 OCOK 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, OCOK will follow the If the child requires Treatment (Therapeutic) Foster Care Services process.
- If the child requires Standard Foster Care Services, OCOK will continue with the initial assessment process below.
- The OCOK 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.
- OCOK will refer the request (including background check results) to a network provider to complete the initial assessment process.
- If there is delay in receiving the results of the background checks, the OCOK 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.
- OCOK will ensure the initial assessment is completed and returned to State Office ICPC within 45 calendar days from receipt of the ICPC request. OCOK may use the DFPS ICPC Initial Assessment form, or develop its own template.
- Based on the outcome of the initial assessment, the OCOK 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 OCOK ICPC Coordinator will prepare a decision memo explaining the reasons for the denial and why the family is not appropriate.
- The OCOK 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 OCOK ICPC Coordinator will send the ICPC request packet to an appropriate provider in their network to complete the Foster Home Verification Process.
  - The referral e-mail will include the following due dates:
    - The OCOK 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.
    - OCOK 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:
- OCOK must determine if the family is already verified by a provider within the OCOK network.
- If the caregiver is already verified through an OCOK network provider:
  - OCOK 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, OCOK 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 OCOK network provider, OCOK must give the family the option to transfer to an OCOK network provider.
  - If the family chooses to transfer to an OCOK network provider, OCOK 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 OCOK 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:
- OCOK will prepare a decision memo outlining the basis for the child requiring treatment services, including the specific diagnoses of the child.
- OCOK will prepare a list of private residential providers in the area that the sending state can contract with for treatment foster care services.
- The OCOK 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 3b, the private residential provider will be solely responsible through direct contract and payment from the sending state for:
  o Conducting supervision of the child as established in the sending state’s contract with the private residential provider.
  o 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 OCOK 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 OCOK network, the OCOK ICPC Coordinator will prepare a decision memo with contact information for the private agency.
  o The OCOK ICPC Coordinator will complete the decision memo and upload the decision memo in IMPACT.
  o State Office ICPC will forward the decision memo to the sending state with information on the:
    • 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 3b, the provider will be solely responsible through direct contract and payment from the sending state for:
  o Conducting supervision of the child as established in the sending state’s contract with the provider.
  o 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 OCOK network provider has completed the verification process, the OCOK ICPC Coordinator will obtain the:
  o Completed home study.
  o Foster verification certificate (license).
    • The foster home verification process must be completed and returned to State Office within 120 calendar days.
• The OCOK ICPC Coordinator will:
Upload into IMPACT the completed home study and verification certificate (license) to State Office ICPC.

- State Office ICPC will:
  - Review the completed foster home study and verification.
  - Approve or deny placement into Region 3b catchment area.
  - Notify the sending state and OCOK of the approval to proceed with placement.

- If the sending state places the child in the verified foster home located in the Region 3b catchment:
  - OCOK staff will conduct supervision of the child.
  - OCOK’s network provider that verified the home will monitor the family for licensing purposes according to Minimum Standards for Child Placing Agencies.
  - Any associated foster care daily reimbursement provided by the sending state will be paid directly to the caregiver. *OCOK 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 OCOK 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.
- OCOK will refer the request (including background check results) to a network provider to complete the initial assessment process.
- If there is delay in receiving the results of the background checks, the OCOK 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.
- OCOK will ensure the initial assessment is completed and returned to State Office ICPC within **45 calendar days** from receipt of the ICPC request. OCOK may use the DFPS ICPC Initial Assessment form, or develop its own template.
- Based on the outcome of the initial assessment, the OCOK 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 OCOK ICPC Coordinator will prepare a decision memo explaining the reasons for the denial and why the family is not appropriate.
- The OCOK 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 OCOK ICPC Coordinator will send the ICPC request packet to an appropriate provider in their network to complete the Adoptive Home Approval Process.
  - The referral e mail will include the following due dates:
• The OCOK provider must make contact with the family by phone/email or certified mail within 7 calendar days from receipt of the ICPC request packet.
• OCOK must complete the home study/approval and submit to state office within 120 calendar days from receipt of the ICPC request.
• The OCOK 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 OCOK network provider has completed the adoption approval process, they will provide the OCOK 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.
• The OCOK ICPC Coordinator will:
  o Upload the completed adoption home study and adoption approval certificate (license) to IMPACT.
• State Office ICPC will:
  o Review the completed adoption home study and approval.
  o Approve or deny placement into Region 3b catchment area.
  o Notify the sending state and OCOK of the approval to proceed with placement.
• If the sending state places the child in the approved adoptive home located in the Region 3b catchment:
  o OCOK staff will conduct supervision of the child.
  o OCOK’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. *OCOK 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 OCOK ICPC coordinator as the secondary staff.

• The OCOK ICPC Coordinator must assign the courtesy supervision caseworker within 2 days of receiving notification of placement in Texas. The OCOK ICPC Coordinator assigns the courtesy supervision caseworker as the secondary staff.
• 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.
  o Select the resource identification number by choosing the correct resource or person from the directory.

• The courtesy supervision caseworker must supervise the placement as described in 6417 Supervising a Child Placed in Texas From Another State.

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 OCOK.

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

Parent or Relative Home Study Process:

• OCOK 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, OCOK ICPC Coordinator will send the ICPC request packet to the appropriate provider in their network to complete the home study.
  o The referral email will include the following due dates:
    • The OCOK provider must make contact with the family by phone/email or certified mail within 7 calendar days from receipt of the ICPC request packet.
    • OCOK must complete the home study within 45 calendar days from receipt of the ICPC request.
  o If there is delay in receiving the results of the background checks, the OCOK 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 OCOK 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

• OCOK 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, OCOK ICPC Coordinator will send the ICPC request packet to the appropriate provider in their network to complete the home study.
  o The referral email will include the following due dates:
The OCOK provider must make contact with the family by phone/email or certified mail within **3 calendar days** from receipt of the ICPC request packet.

OCOK 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 OCOK 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 OCOK 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 OCOK ICPC coordinator as the secondary staff.

- **The OCOK ICPC Coordinator** must assign the courtesy supervision caseworker within **2 days** of receiving notification of placement in Texas. The OCOK ICPC coordinator assigns the courtesy supervision caseworker as the secondary staff.

- **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; and
  - Select the resource identification number by choosing the correct resource or person from the directory.

- **The courtesy supervision caseworker** must supervise the placement as described in 6417 Supervising a Child Placed in Texas From Another State.

### 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:
  - DFPS provides the child’s Medicaid benefits.
  - 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.
  o The last date that the child had Medicaid coverage in the sending state.
  o The name of any third-party resource the child may have for medical care; and
  o The child’s Social Security number.
  o 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 3b OCOK will complete the following steps.

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

- OCOK will complete and submit the outgoing ICPC request, including all required documents, through IMPACT and follow current ICPC process.
- Placement will remain with OCOK 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, OCOK will prepare the child for transition into approved out-of-state placement.
- OCOK Permanency worker will be responsible for the out-of-state physical placement of the child.
- Once child is in the out-of-state placement, the OCOK ICPC Coordinator will:
  o Submit the 100B in IMPACT within 3 business days to State Office ICPC indicating placement has been completed.
- The OCOK Permanency worker will enter the new out-of-state placement in IMPACT.
- If there is a placement disruption in the out-of-state placement, OCOK will secure possession of the child from the out-of-state caregivers and submit a new referral for paid placement to the OCOK Placement team.

*If the caregiver is verified by a public state agency:*
• OCOK will follow the Outgoing Foster Home and Adoption Study Request process above.
• 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:**

• OCOK will follow the Outgoing Foster Home and Adoption Study Request process above.
• OCOK will locate and contract directly with the private out-of-state provider for placement services and supervision of the child.
• 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:**

• OCOK will follow the Outgoing Foster Home and Adoption Study Request process above.
• OCOK will contract directly with the private out-of-state provider for placement services and supervision of the child.
• 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:**

• OCOK will follow the Outgoing Foster Home and Adoption Study Request process above.
• OCOK will contract directly with the private out-of-state provider for placement services and supervision of the child.
• Texas CPS is not responsible for setting up a contract for supervision of the child in the out-of-state placement nor placement services.
• OCOK will be paid for both adoption placement services (form 2054) and post-placement supervision (form 2054). OCOK 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**

OCOK may seek an out-of-state Residential Treatment Center (RTC) for placement of a child from Texas Region 3b catchment area.

• When an out-of-state RTC is located, OCOK will initiate and create a contract with the out-of-state Residential Treatment Center.
• The OCOK 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
• If the placement is approved, OCOK, as part of case management, is responsible for setting up a contract for supervision of the child in the out of state placement.
• OCOK 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**

• OCOK will complete and submit the outgoing ICPC request, including all required documents, through IMPACT and follow current ICPC process.
• Placement will remain with OCOK during the ICPC process.
• If the out-of-state placement is approved by the receiving state, State Office ICPC will notify the OCOK ICPC Coordinator via uploading the home study in IMPACT.
• OCOK will prepare the child for transition into approved out-of-state placement.
• OCOK 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 OCOK ICPC Coordinator will:
  • Submit the 100B in IMPACT within **3 business days** to State Office ICPC indicating placement has been completed.
• The OCOK Permanency worker will enter the new out-of-state placement in IMPACT.
• If there is a placement disruption in the out-of-state placement, OCOK will secure possession of the child from the out-of-state caregivers and return the child to Texas.

**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.

**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
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

CPS/SSCC Title IV-E University Training Program for New Hires

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

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

The awards are made to eligible students who are enrolled in academic programs that lead toward:
- A Bachelor of Social Work (BSW)
- A Master of Social Work (MSW).

The CPS and SSCC training academies provide basic skills development training to these trainees to prepare them for CPS or SSCC employment.

Applying for Title IV-E Training with the SSCC

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)
- SSCC designee
- 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 SSCC designee. The ROSA will maintain all original documents for the Title IV-E stipend program.
- University acceptance letter
- Statement of interest or from STARK
- Three professional letters of recommendation from professors or employers
- Copy of students most recent unofficial transcript from University
• STARK Test results and waivers as appropriate
• Certified copy of the applicant's driving record
• Volunteer application, Form 0250
• Authorization for a background check, Form 0250b
• An HHS Acceptable Use Agreement, Form HHS-AUA
• Form 0261 Volunteer Program Work Rules, Standards of Behavior and Performance
• Volunteer Confidential Statement form 0251
• TB Test Results

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

Once the applicant has applied for a SSCC specialist position, the SSCC 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
• Authorization for a background check, Form 0250b

The CBCU forwards the results of the checks to:

• The ROSA and SSCC designee; and
• The contract manager.

If the results are questionable, the ROSA or SSCC designee reviews them and determines whether the applicant is employable.

If the checks are acceptable, the ROSA or designee sets up interviews which includes the ROSA, Hiring Manager, Academy Manager, University Coordinator and SSCC personnel. If the interview is acceptable, the ROSA or SSCC designee notifies each University Liaison 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 SSCC designee:

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

The ROSA or designee sets up an orientation meeting attended by all of the applicants to review and sign the agreement. These contracts are not executable until they are signed by the CPS Regional Director.

During the orientation meeting, the following topics are covered:

• The terms and conditions of the agreement, including any payback responsibilities.
• The commitment that students must make to accept any statewide employment with CPS or SSCC on completion of their training.

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

After each agreement is approved:
- The State Office Contract Manger will send a signed copy of the agreement to the stipend student.
- The ROSA or SSCC designee 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 SSCC.
- The SSCC designee 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 SSCC designee will send training orientation invites to the SSCC 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 the SSCC 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 SSCC designee 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 stipend students must be followed as below:

**Fall Semester:**
- **May 15th:** All names submitted by University along with background forms, etc. during this week.
- **June 1st:** All applicants must have taken the STARK test. (Hard date)
- **June 15th:** Setup interview during this week.
- **July 15th:** All contracts ready for CPS RD signature during this week.
- **Mid-August:** Semester begins.

**Spring Semester:**
- **October 1st:** All names submitted by University along with background forms, etc. during this week.
- **October 15th:** All applicants must have taken the STARK test. (Hard date)
- **November 1st:** Setup interviews during this week.
- **December 1st:** All contracts ready for CPS RD signature during this week.
- **Mid-January:** Semester begins.
**Summer Semester:**

- **February 15th**: All names submitted by University along with background forms, etc. during this week.
- **March 1st**: All applicants must have taken the STARK test. (Hard date)
- **March 15th**: Setup interviews during this week.
- **April 15th**: All contracts ready for CPS RD signature during 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 SSCC designee will ensure the Title IV-E interns under the SSCC receive necessary computer equipment.

**Records Management**

DFPS Records Management Group will support OCOK with the same services it provides to DFPS.

For more information about services see [Records Management Group](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 ranking 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.

Select OCOK staff will have access to RMG Case Track system. Names will be provided by 4-30-20

**OCOK Permanency Specialist On-Call Schedule**

OCOK will be expected to have a Permanency Specialist On-Call Schedule. OCOK will submit on call schedule to the CPS Liaison, Rebecca.Wittmis@dfps.state.tx.us and CBCA by the 15th of the month prior to the schedule date. The CPS liaison will upload the schedule to the Safety Net and include the CBCA in the notification. The CPS liaison will send a request to post the on-call schedule to the CBC intranet page.
**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 OCOK and DFPS. DFPS Worker Safety Support staff will disseminate and track threats or incidents and will ensure that information is shared with OCOK 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, OCOK 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 OCOK.

Additionally, OCOK 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.

SSCC staff should also follow any internal procedures for incident reporting that may be outlined in the OCOK 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 OCOK as part of their review.

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

Office of Consumer Relations (OCR) Assignments Region 3W Protocol

1. When an Office of Consumer Relations (OCR) complaint is assigned to Region 3 it is sent to the OCR Mailbox: REG03WESTOCA@dfps.state.tx.us. Two designated people are assigned to the mailbox: The Regional Director’s Admin Tech and Regional Director’s Assistant. They keep track and route OCR’s daily.

2. The Router will look up the CASE ID in IMPACT to identify who the case belongs to.

3. Then forwards the complaint to the Program Director (PD), Program Administrator (PA) and Program Administrator’s Assistant (PAA) over the case. If case management for the case is provided by OCOK, then the complaint will be forwarded to the OCOK Consumer Affairs Specialist and the OCOK Director of Community Relations.

4. The subject line reads as follows when routed: FW: Region 3W--OCR Complaint—John DOE--A11042019.0090003- Case ID 48888888 Due 1/27/20 by Noon.

5. In the body of the email complaint the following information will be added:

   Example:
   CASE ID: 488888
   Case Name: John Doe
   CW:
   SUP:
   PD:
   Please respond to Amelia Hinton and CC: REG03WESTOCA by 1/27/19 by noon.

6. A Flag is also included on the OCR e-mail with the date and time it is due. Please note if a response is not sent to the OCR by the due date and time a reminder e-mail will be sent ensure the response to the complaint is received.

7. Once the complaint notification email is sent, it is saved in a Pending OCR e-mail folder. There is also a folder for Responses when the PD answers the OCR. (see image below)
8. Once an OCR response is completed (received and reviewed) the Office of Consumer Relations will send Region 3 an email stating if the OCR was Substantiated or Unsubstantiated

9. If the OCR response is unsubstantiated, it is maintained in a folder for OCR Response Letters.

10. If the OCR response is substantiated, notice is sent by e-mail (using the e-mail template below) to the Program Director (PD), Program Administrator (PA) and Program Administrator Assistant (PAA) requesting a response within 7 days. If case management for the case is provided by OCOK, substantiated notice will be sent to the OCOK Consumer Affairs Specialist and Director of Community Relations, with cc to the CBC Administrator, requesting a response within 7 days.

11. Please note the subject line will contain one of three subject line labels: Child Safety, Critical Case Tasks or Administrative). The response may be to dispute the Substantiated OCR or indicate what Regional Action was taken to address the Substantiated policy violation. If the response includes a rebuttal it is forwarded to the Regional Director’s Assistant (RDA) who in turn will forward it back to OCR.

Example:

**Subject:** FW: John Doe Case 4888888 - OCR SUBSTANTIATED COMPLAINT - Heart A11072019.0090011 Critical Case Tasks Due 1/7/20

**Importance:** High

**Sensitivity:** Confidential

CVS/Region 3W
Case ID: 48888888
CW:
SUP:
PD:
Please see below for OCR request, response and substantiated finding. Please respond with your rebuttal or response and what action taken by **Tuesday January 7 at 12:00 p.m.** and cc: DFPS Reg 03 OCR mailbox and Laura Flores.

**Regional Actions:**

OCOK will provide a general response as to the actions they deem appropriate and will be taking, if deemed appropriate. These actions could include, but are not limited to, some of the

**Subject Line Labels:**
- Child Safety – Review immediately and take necessary action
- Critical Case tasks
- Administrative – Important

**Examples:**
- Child Safety – Background checks not completed prior to PCSP; Failure to report concerns of abuse or neglect to outline after a youth in care outcries; Failure to take child/youth to medical treatments; Failure to make initial contact timely.
- Critical Case tasks – Maintaining contacts with PRN in the case; not submitting HS request timely; referring to services timely...
- Administrative – Sending case closure letters; providing copies of paperwork; FPOS and CPOS not being done timely; not sending notice of hearings to parents/caregiver.

Foster Care OCR’s may be received in the same mailbox. They are handled similarly except the Regional Director’s Assistant is always included and they are kept in separate folders.

For more information see: [Office of Consumer Relations webpage](#)

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

1. Foster Care Ombudsman (FCO)’s representative sends a notification e-mail to the CPS Regional point of contact (Regional Director Assistant) and the Regional Director and the OCOK Consumer Affairs Specialist containing the details/summary of a foster youth’s complaint. The complaint e-mail will contain the foster youth’s name and Case ID and the subject of the complaint. There will be a list of questions and/or requests that the Foster Care Ombudsman would like answered in response to the foster youth’s complaint. The Foster Care Ombudsman (FCO) addresses the youth’s concerns in addition to providing a list of policies that will be reviewed for the case.

   **Example:**
   Please be advised the following policies are being reviewed for this case; additional policies may be added:
   - 4131 Gather the Child’s Personal Belongings and Important docs
   - 6143.1 Child and Youth Access to Caseworker and Unit Management
   - 6143.11 Responding to a Message from a Child or Youth
   - HR Policy Employee Conduct Work Rule # 12 Not Destroy, Falsify, or cause another to falsify, remove, steal, conceal or otherwise misuse state information (including documents and oral information) or property

2. The FCO will provide a response due date. The response time for an FCO is usually 10 calendar days.

3. The OCOK Consumer Affairs Specialist will review the complaint e-mail and respond to each concern identified, answer the list of questions and provide requested documentation by the identified due date.
4. The OCOK Consumer Affairs Specialist in turn will reach out to their staff (Supervisor and Worker) for assistance in responding to the FCO complaint. The Consumer Affairs Specialist will notify the OCOK Director of Community Relations of the complaint.

5. Once a complete and thorough response has been compiled the OCOK Consumer Affairs Specialist will send the e-mail response directly to the Foster Care Ombudsman and Cc: OCOK Director of Community Relations, CPS Regional Director Assistance and CBC Administrator.

6. The OCOK Consumer Affairs Specialist will receive a receipt confirmation e-mail from the FCO (i.e. thank you for the response)

7. After reviewing the FCO will send a follow up e-mail directly to the OCOK Consumer Affairs Specialist and Cc: OCOK Director of Community Relations, the Regional Director, and the CPS point of contact requesting clarification or additional information. If the FCO requests an additional response or has a list of additional questions, there will be another due date established.

8. The CPS point of contact will send a reminder (follow up) e-mail to the OCOK Consumer Affairs Specialist and Cc: the OCOK Director of Community Relations emphasizing the due date. If the FCO’s e-mail does not contain a due date the CPS point of contact will set the due date for 5 calendar days from the date of the e-mail.

9. Once a complete and thorough response for the additional questions has been compiled the OCOK Consumer Affairs Specialist will send the e-mail response directly to the Foster Care Ombudsman and Cc: the OCOK Director of Community Relations and the CPS point of contact. In the event the OCOK Consumer Affairs Specialist sends the response to the CPS point of contact and not to the FCO, the CPS point of contact will forward the e-mail to the FCO.

10. After review, the FCO will send a Preliminary Findings e-mail to the CPS point of contact and Cc: The Regional Director, the OCOK Director of Community Relations, and OCOK Consumer Affairs Specialist. The Preliminary Findings is to provide staff an opportunity to review the findings, based on the FCO’s review of the youth’s original complaint and DFPS policies and systems. It will contain a Summary of the Complaint, the policies that were reviewed and whether the complaint and/or policies reviewed are Substantiated and Unsubstantiated as well as the FCO’s Recommendations. The FCO will also request questions or response within 5 business days. If no response is received the FCO will send a Final Resolution to the State Office staff, the Regional Director and OCOK Director of Community Relations at the conclusion.

11. The CPS point of contact will forward the Preliminary Findings e-mail to the OCOK Consumer Affairs Specialist and Cc: the OCOK Director of Community Relations in the following template format including the 5 business days due date:

   Please find below a Preliminary Finding regarding foster youth Jane Doe. Please review and send a response to the DFPS Reg 03 mailbox and cc: the CPS point of contact. Please include any rebuttal or action taken by Monday 12/16/2019.

   FY: Jane Doe
   Case ID: 4******
   Caseworker: Courtney Caseworker
   Supervisor: Susan Supervisor
12. If there are questions or a response e-mail is received the CPS point of contact will forward it to the FCO and Cc: the OCOK Consumer Affairs Specialist and CC: OCOK Director of Community Relations. If there are no questions, or a response received the CPS point of contact will wait for the FCO’s Final Resolution e-mail containing the Substantiated FCO letter.

13. When the FCO’s Final Resolution e-mail containing the Substantiated FCO letter is received the CPS point of contact will forward the e-mail to the OCOK Consumer Affairs Specialist and Cc: The Director of Community Relations in the following template format including the 5 business days due date:

Please find attached the Substantiated FCO Findings regarding foster youth Jane Doe. Please review the attachment and send a response with a summary of the action(s) taken to the DFPS Reg 03 mailbox and cc: the CPS point of contact by Monday 12/16/2019.

**FY:** Jane Doe  
**Case ID:** 4********  
**Caseworker:** Courtney Caseworker  
**Supervisor:** Susan Supervisor  
Program Director: Darcy PD  
Program Administrator: Amy PA

14. When the summary of the actions taken response, e-mail is received the CPS point of contact will forward it to the FCO and Cc: the OCOK Director of Community Relations and OCOK Consumer Affairs Specialist to be included in the FCO’s records of the case and as part of the FCO’s statutory reporting.

**Legislative Inquiry Process**

1. A CPS Legislative Coordinator or an Office of Consumer Relations Associate sends a notification e-mail to the Regional Director, OCOK Consumer Affairs Specialist containing the details/summary of the legislative inquiry. The legislative inquiry will contain the subject of the inquiry/complaint, the Case ID and stage of service of the inquiry/complaint, and possibly the name of the Program Director, Supervisor and Caseworker connected to the inquiry/complaint. There most likely will be a list of questions and/or requests that the Coordinator or Associate would like answered.

2. The response time for legislative inquiries is typically, one to four days; however, it can be the same day depending on the urgency. It is imperative you send the requested response by the due date and time.

3. The OCOK Consumer Affairs Specialist review the inquiry e-mail and respond to each concern identified by answering the list of questions and providing what has been requested (e.g. documents).

4. The OCOK Consumer Affairs Specialist in turn will reach out to their staff (Supervisor and Worker) for assistance in responding to the legislative inquiry. The OCOK Consumer Affairs Specialist will notify the OCOK Leadership Team of the inquiry/complaint.

5. Once a complete and thorough response has been compiled, the OCOK Consumer Affairs Specialist will send the e-mail response directly to the CPS Legislative Coordinator or the
Office of Consumer Relations Associate and Cc: OCOK Director of Community Relations, CPS Regional Director CPS Regional Director Assistance and CBC Administrator.

Please Note:
The e-mail subject line may vary but will contain the words “legislative inquiry.”
CASE DISPUTE RESOLUTION

There may be times when INV/FBSS and Our Community Our Kids (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 Our Community Our Kids (OCOK):

Case Dispute Resolution Process:

Step 1

- INV/FBSS workers and supervisors, OCOK 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 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 INV/FBSS and the Program Director and/or Senior Director level in OCOK for possible 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.
- OCOK 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 OCOK Chief Operating Officer (COO) 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 OCOK COO with the subject line of “Dispute Resolution Appeal Decision.”
- If the OCOK COO 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 COO’s appeal.
- If the COO chooses not to appeal, they will notify the CBC Administrator. The CBC Administrator will distribute the decision to the appropriate staff and management.
- If the OCOK COO appeals the decision of the CBC Administrator to the CPS Regional Director, the CPS Regional Director will distribute their decision to the appropriate staff and management.
SITUATIONS REQUIRING IMMEDIATE NOTIFICATION BETWEEN SSCC AND DFPS

Situations that require immediate notification between Our Community Our Kids (OCOK) and DFPS include:

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

Specific examples include, but are not limited to:

- Child Fatality.
  - See Child Fatality Protocol Handbook for additional information
  - OCOK 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.
- Issues that may attract negative media attention.
- If contacted directly for legislative inquiry.
  - See Government Relations Handbook Policy 3000
- Natural disasters where children are displaced.

Notification:

- Send notifications to Region 3W CPS RD, George Cannatta, 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 OCOK prior to releasing any information or comments to the media about the situation.
    - Regional Media Specialist will:
    - Contact and inform the Media Relations Manager of the situation.
    - Contact and coordinate media message with OCOK prior to releasing any information or comments to the media about the situation.
## Our Community Our Kids (OCOK) Initial Referral Information

This is an example of the Our Community Our Kids (OCOK) Initial Referral Information Form.

### OCOK Initial Referral Form

<table>
<thead>
<tr>
<th>Date/Time Referral Was Initiated:</th>
<th>Completed By:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Initial Referral Form Was Completed:</td>
<td></td>
</tr>
<tr>
<td>Primary CPS Staff:</td>
<td></td>
</tr>
<tr>
<td>Secondary CPS Staff:</td>
<td></td>
</tr>
<tr>
<td>Unit for CPS Referral:</td>
<td></td>
</tr>
</tbody>
</table>

### Client Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>DOB:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PID:</td>
<td>Race and Ethnicity:</td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
</tr>
</tbody>
</table>

### Placement Search Information

| Date Placement Needed By: | |
| Approximate Length of Stay: | |
| Location Needed/Preferred: | |
| Reason for Placement/Move: | |

- Cannot Be Placed With:
  - [ ] Younger Males
  - [ ] Younger Females
  - [ ] Older Males
  - [ ] Older Females
  - [ ] Siblings

### Physical/Mental Health Information

<table>
<thead>
<tr>
<th>Height:</th>
<th>Weight:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergies:</td>
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<tr>
<td>Doctor:</td>
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<td>Medical Diagnosis:</td>
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<td>Dentist:</td>
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<td>Therapist:</td>
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<td>Psychiatrist:</td>
<td></td>
</tr>
<tr>
<td>Mental Health Diagnosis:</td>
<td></td>
</tr>
<tr>
<td>Mental Health Appointment Times:</td>
<td></td>
</tr>
</tbody>
</table>

### Medications (if any or known)

### Runaway Status

Does the child/youth have any documented running behavior? If yes, check all that apply.

- [ ] The running behavior occurred in the last 60 days.
- [ ] The child is a chronic runner (3 or more occurrences in the last 90 days).
OCOK Initial Referral Form

Mental Health Placement Status
Is the child/youth dangerous to self? If yes, check all that apply.
- The child/youth engages in self-mutilation or self-abusive behavior.
- The child/youth makes threats of suicide with no specific plan of action.
- The child/youth makes threats of suicide with specific plan of action.

Was the child/youth screened for acute or residential placement, but was diverted from inpatient placement in the last 30 days or is stepping down from acute care?
- Yes
- No

Is the child/youth currently seeing a therapist or psychiatrist?
- Yes
- No

Is the child/youth taking prescribed psychotropic/behavior medication?
- Yes
- No

Has the child/youth been diagnosed with ADHD?
- Yes
- No

Chemical Dependency Status
Does the child/youth have any substance abuse concerns documented? If yes, check all that apply.
- The child/youth is currently incapacitated or having black-outs.
- The child/youth was screened for inpatient but diverted in the last 24 hours.
- The child/youth is stepping down from a chemical dependency inpatient setting.
- The child/youth is receiving out-patient treatment.
- The child/youth is refusing services.
- The child/youth has participated in recreational use since last assessment.

Educational/Independent Living Status
Has the child/youth been out of school for suspension or expulsion in last 30 days?
- Yes
- No

Is the youth refusing to complete GED/ job training?
- Yes
- No

Does the child/youth have school attendance concerns? If yes, check all that apply.
- The child/youth is refusing to attend school.
- The child/youth has sporadic attendance/truancy issues.
- The child/youth displays chronic truancy.
OCOK Initial Referral Form

Does the child/youth receive homebound or alternative schooling?
☐ Yes  ☐ No

Is the child not of school age and requires specialized day care?
☐ Yes  ☐ No

Is the child/youth receiving specialized education services?  If yes, check all that apply.
☐ The child/youth currently has an IEP.
☐ The child/youth currently has a 504 plan.

Physical Health Status

Does the child/youth have any of the following physical conditions/needs present? Check all that apply.
☐ Developmental Delays
☐ Developmental Disabilities (blindness, deafness, etc.)
☐ Diabetes
☐ Physical illness (asthma, etc.) requiring medication and/or on-going check-ups by healthcare professionals at least every 90 days
☐ Medically fragile
☐ Non-ambulatory
☐ Pregnant or parenting
☐ Enuresis/encopresis
☐ Eating disorder
☐ AIDS
☐ STDs

Aggression Toward Others

Does the child/youth display verbal aggression?  If yes, check all that apply.
☐ Toward adults  ☐ Toward peers

Does the child/youth have a history of chronic lying?
☐ Yes  ☐ No

Is the child/youth involved with gangs?
☐ Yes  ☐ No
OCOK Initial Referral Form

Does the child/youth have a history of documented physically aggressive/assaultive behaviors toward others in the last 90 days? If yes, check all that apply.

☐ Adults  ☐ Siblings  ☐ Peers  ☐ Animals

☐ The child/youth has charges pending for physically aggressive/assaultive behaviors.

☐ The child/youth has made homicidal threats.

Sexually Abused/Acting Out

Does the child/youth have LEO/state sexual misconduct investigation/charges pending?

☐ Yes  ☐ No

Has the child/youth been substantiated as a sexual perpetrator?

☐ Yes  ☐ No

Does the child/youth have documented sexually acting out behavior within the last 90 days that is inconsistent with the child’s/youth’s development?

☐ Yes  ☐ No

☐ With peers  ☐ With siblings  ☐ With animals

Does the child/youth engage in public masturbation?

☐ Yes  ☐ No

Has the child/youth been sexually abused?

☐ Yes  ☐ No

Destruction of Property and Theft

Does the child/youth have a history of fire starting behavior?

☐ Yes  ☐ No

Does the child/youth have documented fire starting behavior in the last 90 days? If yes, check all that apply.

☐ Yes  ☐ No

☐ The fire starting behavior put others in danger.

☐ The fire starting behavior is under investigation or charges are pending.
OCOK Initial Referral Form

Does the child/youth have documented destruction of property in last 90 days? If yes, check all that apply.

☐ Yes  ☐ No

☐ The destruction of property is in excess of $100.

Does the child/youth have a history of documented theft in the last 90 days? If yes, check all that apply.

☐ Yes  ☐ No

☐ The theft was in excess of $100.

Additional Information
Region 3b Removal Staffing Checklist

Please use this link for the Region 3b 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.
MEMORANDUM
Texas Department of Family and Protective Services Community-Based Care / SCC Name

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

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

☐ Approved: Caregiver’s Name:
   Caregivers will be referred to a network provider to begin the verification/approval process.

☐ Denied: Caregiver’s Name:
   ☐ Name: Withdrew:
   ☐ Criminal History: CPS
   ☐ History:
      ☐ Unable to Meet Child(ren)’s Needs:
      ☐ Finances/Budget:
      ☐ Medical/Mental Health Concerns:
      ☐ Other:
   The ICPC home study request will be closed.

☐ Deferred: Child needs Treatment Services
   ☐ Child’s Name:
   ☐ Medical Diagnosis
   ☐ Mental Health Diagnosis:
   ☐ Other:
   ☐ The home is already verified with a private residential provider
      • Please contact the private residential provider to initiate a private contract for placement and supervision of the child:
The ICPC home study request will be closed. Please resubmit the request when the contract is in place with the private residential provider.

For Additional Help in Licensing/Contracting Process Contact:

The ICPC home study request will be closed. Please submit a new request once a contract is in place with the Texas private agency.

Sincerely,

Texas ICPC Coordinator

Date
ICPC Initial Assessment

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

Texas Dept of Family and Protective Services
ICPC Initial Assessment
Form XXXX
March 2019

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
APPENDIX B: CBC PROCESSES AND FLOW CHARTS

CBC Adoption Placement & Service Authorization

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

- Is the child in a foster-to-adopt placement (relatives & non-relatives) who is ready to adopt the child?
  - YES: Prior to entering the child’s placement in the ADO stage, CPS supervisor will open the ADO stage in IMPACT in order to get subsidy paperwork ready.
  - NO: Post-Placement Supervision 2054 pays for costs associated with seeing the family through consummation.

- Is the child in an approved kinship-to-adopt placement who is ready to adopt the child?
  - YES: Prior to entering the child’s placement in the ADO stage, CPS supervisor will open the ADO stage in IMPACT in order to get subsidy paperwork ready.
  - NO: SUB stage should remain OPEN in IMPACT

- Is the child in a foster placement & ready to be placed in a new adoptive placement?
  - YES: Prior to the child’s physical placement in the new adoptive home, CPS supervisor opens the ADO stage in IMPACT in order to get subsidy paperwork ready.
  - NO: At the time of placement in the adoptive home, CPS worker completes a 2054 service authorization in the ADO stage for *
  *Adoptive placement services; and
  *Post-placement supervision.

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
<table>
<thead>
<tr>
<th>Pre-Consummation Services (2054 = Placement services): Foster-to-New Adopt Home</th>
<th>Pre-Consummation Services (2054 = Placement services): Kinship-to-Adopt</th>
<th>Post-Consummation Services (2054 = Post-placement supervision): All Adoptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Review</td>
<td>Home Screening</td>
<td>Supervision of the Adoptive Placement</td>
</tr>
<tr>
<td>Pre-Placement Visits (between the child &amp; prospective adoptive family)</td>
<td>Household Members Background Checks</td>
<td>Facilitate Sibling Contact</td>
</tr>
<tr>
<td>Adoption Placement Documentation</td>
<td>Supervision of the Adoptive Placement</td>
<td>Progression to Consummation (supervision of placement, written reports, legal &amp; policy requirements)</td>
</tr>
<tr>
<td>Home Screening</td>
<td>Progression to Consummation (supervision of placement, written reports, legal &amp; policy requirements)</td>
<td>Delays in Consummation (review of placement with CPS &amp; contractor and develop a revised Plan of Service)</td>
</tr>
<tr>
<td>Household Members Background Checks</td>
<td>Delays in Consummation (review of placement with CPS &amp; contractor and develop a revised Plan of Service)</td>
<td>Disrupted Placement</td>
</tr>
<tr>
<td>Training for Adoptive Homes</td>
<td>Court Related Services: Testimony (judicial hearings, court depositions &amp; admin reviews) Court Related Assistance (assist adoptive family &amp; their attorney to complete consummation process)</td>
<td>Court Related Services: Testimony (judicial hearings, court depositions &amp; admin reviews) 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>
<td>Adoption Service Plan</td>
</tr>
<tr>
<td>NA</td>
<td>Adoption Preparation of the Child</td>
<td>Adoption Preparation of the Child</td>
</tr>
</tbody>
</table>
Supervised Independent Living (SIL) Flow Chart

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 5105.0

**Young Adult returns DURING a Trial Independence Time Period**

The Legal Region is where DFPS was granted conservatorship.

CPS Handbook 5103.2

Courts retain jurisdiction while young adult remain in extended foster care. The caseworker must request a review hearing by the court every six months, as required by Texas Family Code §263.602.

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 25329). 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 2520 to SIL Coordinator of the young adult’s choice.

DFPS CVS/PAL staff should follow standard protocol.

Any subsequent placements will be reviewed by DFPS as outlined in CPS Handbook §436.3

SSC Catchment Area

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

If accepted into the SIL program, DFPS CVS/PAL staff will:
- complete a change of county in Sub-System under Case Management tab (using county of SSCC SIL Placement) and
- Complete Referral to SSCC

LEGAL COUNTY WILL REMAIN THE SAME.

Placement will be entered under the SSCC SIL NO in IMPACT.

SSCC will document SIL Name and Address in the Placement Discussions 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.

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.
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 SSCC caseworker 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 caseworker 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 caseworker 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 SSCC caseworker must document in the child’s case record the:
  - date the caseworker spoke with the parents;
  - content of the discussions;
  - outcome; and
  - date the parents responded.

**Involve Foster Parents and Other Significant Individuals**

The SSCC caseworker should also invite foster parents and other individuals significant to the child’s life to participate in planning the child’s funeral arrangements. The SSCC caseworker 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 SSCC caseworker must contact the regional burial liaison, CBC Contract Administration Manager (CAM), to make the request for funds. If the SSCC caseworker 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:

1. Prior to SSCC staff signing any agreement you must send to the DFPS 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.

2. 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 3b CAM, Larry Isbell for help in filling out this form (817) 360-0725.

3. 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 3b Contract Administration Manager: Larry.Isbell@DFPS.Texas.gov.